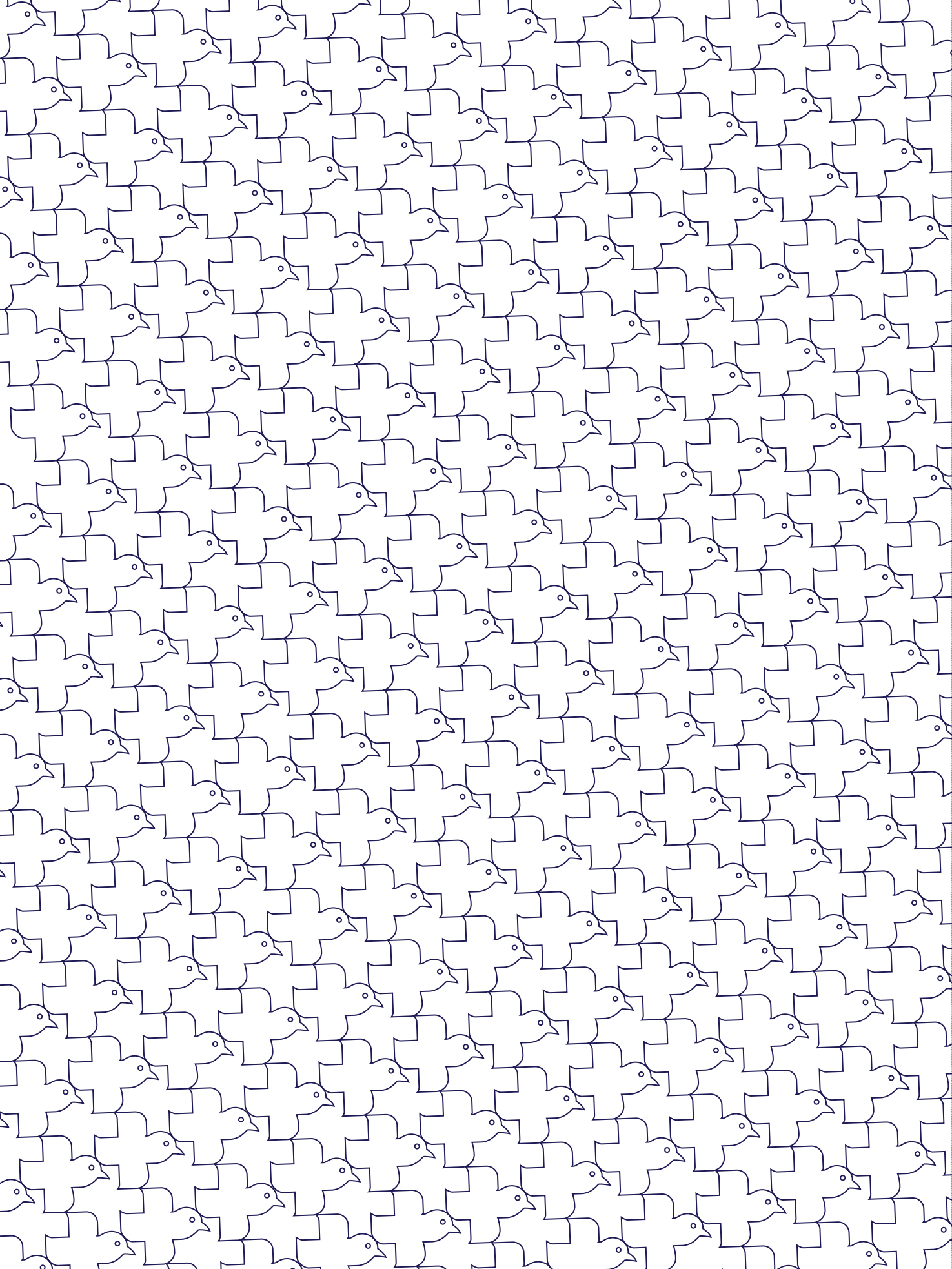




ANNUAL REPORT

2022





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In 2022, intensifying tensions around the world reminded us that we are in the midst of a global and lasting crisis.

In Africa, Asia and Europe, geopolitical balances are changing. Just as we began to emerge from the COVID-19 crisis, a war, the disastrous consequences of which extend beyond the continent of Europe, took hold in Ukraine.

In France, the public response to migration and vulnerability, driven by a restrictive and heavy-handed approach, fell far short of what was needed. In the United States, the Supreme Court's reversal of *Roe v. Wade* in June reminded us that the fundamental right to abortion cannot be considered safe anywhere and that it is always open to challenge. Elsewhere, droughts, mega-fires and Dantesque floods once again illustrated that climate change is under way.

The environment in which we operate is changing and we need to remain constantly vigilant if we are to understand the issues at stake. As an organisation, we are constantly adapting, absorbing instabilities, responding to the unexpected, and deciphering uncertainty.

Against this backdrop, Médecins du Monde has adopted an approach based on the right to health and access to care. More than ever, we are driven by the pressing need to consolidate our actions, strengthen our advocacy, and give greater meaning and resonance to solidarity.

HUMANITARIAN ACTION: A COURAGEOUS COMMITMENT BUT NOT WITHOUT RISK

Humanitarian work is not without risk. According to Insecurity Insight, 97 humanitarian workers were murdered in 2022. They include our colleague Alem Mulugeta Getahun, who was murdered on 17 November in Nigeria. A few weeks later in the Central African Republic, other colleagues narrowly escaped death. These attacks threaten the very existence of humanitarian action because they impede access to people in need of aid and prevent relief supplies from being delivered. Unfortunately, such risks can be found in many places. At Médecins du Monde, we are doing everything we can to limit these risks.

Security is fundamental if we are to maintain an independent humanitarian space and carry out local relief operations. It is vital for all humanitarian and health workers, nationals, expatriates and partners, who all face difficulties that hamper their day-to-day work. Their courageous commitment is to be applauded.



DR. FLORENCE RIGAL

A WORD FROM OUR PRESIDENT

A SOLID MODEL CONSTANTLY STRIVING FOR EFFICIENCY

Our democratic way of working, our expertise and the wide range of skills we have available guarantees our place in civil society and lends our position legitimacy. However, our organisation is not set in stone. We must constantly improve to ensure our governance and community life remain viable. The action plan put in place to prevent psychosocial risks, the review of the strategic plan, and the work we have undertaken on governance are all projects that we inherited in 2022 and that we continued.

For example, the work carried out by Médecins du Monde on its governance made it possible to clarify the organisation's decision-making bodies. The work will now be extended to consultative bodies and forums for dialogue and debate. In 2022, we were finally able to resume physical get-togethers at our Community Life Days, Mission Days and regional meetings. These interactions, which are crucial to consolidating trust, reinforce the closeness between the desk teams and the teams on the ground. The community life of our international operations also bears witness to our organisation's ability to evolve in order to better respond to input from the fields in which we operate and from our partners.

The humanitarian world is changing. The changes it is undergoing are part of a global movement which no organisation, body or collective can escape. Some developments are positive, such as taking gender into account, while others impose constraints, such as screening beneficiaries. Médecins du Monde is adapting to these changes while preserving its identity and values. As we stated in an opinion piece on abortion rights published in July, we do not hesitate to act outside established frameworks when people's rights and health are under threat.

In addition, the substantial support from public generosity, combined with the diversity of the donors who work with us, enables us to maintain a robust funding strategy and ensure our political independence. This independence allows us to address the dilemmas posed by different situations. Our Ethical Charter and the gradual adoption of an ethical approach at all levels of the organisation have helped us to manage value conflicts.

With the adoption of its first strategic plan, the Médecins du Monde international network continued to structure itself in order to better defend the right to health and access to healthcare.

BUILDING SOLIDARITY IN FRANCE TO OVERCOME BARRIERS TO HEALTHCARE

The results of the French presidential and legislative elections in 2022 led to increased measures to exclude and repress. Xenophobic rhetoric gained ground and mutual assistance was increasingly criminalised. Our regional offices have had to address these realities.

These challenges have led us to reaffirm our position of solidarity with greater conviction than ever before. We denounce policy choices that ignore people's vital needs, such as access to water and shelter, which are key determinants of health.

Serious human rights concerns are raised by health falling within the remit of the Ministry for the Interior. Our protests against the worsening situation of people who use drugs in north-east Paris, the result of short-sighted and repressive policies, have been met with indifference from the authorities. At a time when our health system is at breaking point, we constantly reiterated – both during election campaigns and when the report by the Observatoire de l'Accès aux Soins en France was published – the need for vulnerable and disadvantaged people to be fully and unrestrictedly integrated into a universal healthcare scheme.

The humanitarian world is changing. The changes it is undergoing are part of a global movement which no organisation, body or collective can escape

The collective definition of a strategy for France and its operational implementation will enable us to remain relevant, to innovate and to strengthen our advocacy work. New programmes have emerged, such as the "Alternative to incarceration through housing and intensive follow-up" (AILSI) project in Marseille. In Aquitaine, health/environmental issues have been explored for vulnerable seasonal workers in vineyards and digital delivery platforms.

RESTORING ACCESS TO HEALTHCARE AROUND THE WORLD

Internationally, we have remained committed wherever political choices, social upheavals, disasters and wars have prevented access to health.

Our ability to anticipate and prepare enables us to respond rapidly to emergency situations.

In 2022, we intervened in Madagascar when it was hit by cyclone Batsirai, and in Pakistan which was affected by devastating floods. In Ukraine, the Russian invasion drove over eight million people across the border and displaced over five million Ukrainians within the country. To help them, Médecins du Monde France has been active both in Ukraine and in neighbouring countries (Poland, Romania, Moldavia). We condemned the violations of humanitarian law, such as the repeated unacceptable attacks on health facilities and civilians.

In June, our report “No Peace of Mind”, published with the Association of International Development Agencies (AIDA), denounced the effects of the Israeli occupation on the mental health of Palestinians. After so many years of fighting, our colleagues and partners in the West Bank and Gaza are starting to question how effective advocacy can be in changing the situation.

There is a tough road ahead if we are to meet people's needs. By working more closely with our teams on the ground, building relationships of trust with local players and meeting members of civil society, we are able to develop innovative solutions, such as the hospital boat in Colombia.

Elsewhere, poverty, corruption, gangs and state failure have laid the foundations for enduring crises. However, we remain determined, as in the Central African Republic, where we consolidated our operations, and in the Democratic Republic of Congo, where we launched an environmental health programme to protect the health of market gardeners in Kinshasa who are exposed to pesticides. We resumed our activities in Afghanistan, faced with the collapse of the healthcare system and in collaboration with Médecins du Monde Spain, even though the major restrictions on women's rights by the Taliban led us to question the meaning of our actions. In Asia, our reflections led us to close the programme in Bangladesh and rethink our regional approach to supporting the Rohingya.

CONTINUING OUR ACTION, DEFENDING OUR COMMITMENT

Médecins du Monde is a civil society organisation committed to solidarity in France and internationally. Health is a political project that is part of our organisation's mission statement. Volunteers, employees and donors all contribute to implementing our

committed humanitarian action, where everyone has an essential role to play.

The impact we want to have requires us to maintain our skills and remain independent. We are also aware that we can't change things without others. Our links with users, civil society organisations and partners, as well as the causes we fight for, define who we are.

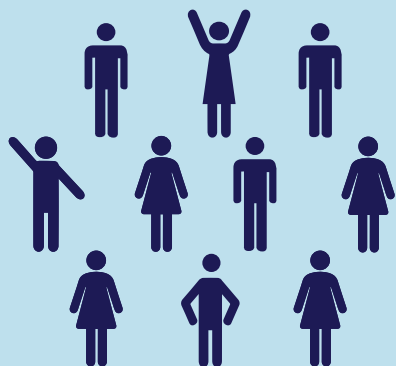
We are taking action and will continue to do so, because we are driven by the hope of change and progress in France and abroad.

BUDGET

**MDM FRANCE
BUDGET :**

€111.2M

HUMAN RESOURCES



3,370

**MÉDECINS DU
MONDE ACTORS**

1,550 PEOPLE ON OUR INTERNATIONAL PROGRAM

1,381 national employees in the field
2 international solidarity volunteers
110 employees on international assignments 57 employees at head office, including 6 mobile staff

1,450 PEOPLE ON OUR PROGRAMMES IN FRANCE

1,309 active volunteers (including volunteer Board delegates)
130 employees in the field and in regional offices
11 DOF employees at headquarters

370 PEOPLE IN OPERATIONAL SUPPORT

153 volunteer Board delegates
217 employees at headquarters

IN FIGURES

57
PROGRAMMES
IN
27
LOCATIONS

PROGRAMMES IN FRANCE

37
PERIPHERAL
PROGRAMMES

- 13 health and environment programmes
- 10 migration, rights and health programmes
- 5 harm reduction programmes
- 2 prison programmes
- 3 unaccompanied Minors programmes
- 1 programme for access to healthcare in rural and urban areas
- 2 urban PASS programmes, including 1 in Overseas France
- 1 sexual Health and Reproductive Rights programme

14
CASOS
AND
CAOAS

**1 CROSS-CUTTING HARM REDUCTION /
SEXUAL AND REPRODUCTIVE RIGHTS
PROGRAMME**

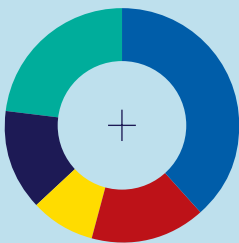
**4 PROGRAMMES IN FRENCH
OVERSEAS DEPARTMENTS**

(Incl. 1 specific emergency COVID programme)

INTERNATIONAL PROGRAMMES

3,000,000 BENEFICIARIES OF
OUR PROGRAMMES

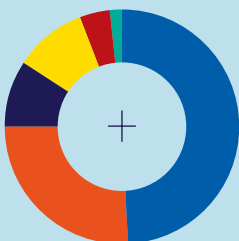
GEOGRAPHICAL DISTRIBUTION OF OUR PROGRAMMES



- **22 programmes in 10 countries** in Africa
- **9 programmes in 5 countries** in the Middle East
- **5 programmes in 5 countries** in Latin America
- **8 programmes dans 8 countries** in Europe
- **13 programmes in 7 countries** in Asia

57
PROGRAMMES
IN
35
COUNTRIES

GEOGRAPHICAL BREAKDOWN OF OPERATING EXPENDITURE



- 80 % International** of which:
- **49,2%** in Africa
 - **26%** in the Middle East
 - **9,2%** in Latin America
 - **10%** in Asia
 - **4%** in Europe
 - **1,6%** miscellaneous projects (Opération Sourire, cross-cutting projects and exploratory missions)
- 20% France**

MAIN THEMES

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR)

Médecins du Monde works in many countries, including France, to improve access to sexual and reproductive health and rights and services for everyone, especially women and girls. The organisation remains particularly committed, alongside its local and international partners, to defending the right to contraception and safe, legal abortion, to responding to sexual and reproductive health needs in humanitarian crises, and to preventing cervical cancer.

HARM REDUCTION

Médecins du Monde works with people who use drugs, sex workers, and sexual and gender minorities, and favours a harm reduction approach to facilitate their access to healthcare and recognition of their rights. This approach involves adopting a pragmatic stance to identifying needs and building solutions with the people concerned. In addition to its work on the ground, the organisation advocates for increasing their access to rights and breaks down the legal, normative and social barriers that marginalise them and distance them from healthcare services.

MIGRATION, EXILE, RIGHTS AND HEALTH

Reception conditions for migrants and exiles are still very poor in many destination and transit countries. The closure and control of borders, the criminalisation of people – with practices including detention, expulsion, deportation to countries of origin or transit that they lead to – generate health problems, difficulties in accessing healthcare, and violations of human rights. This is why Médecins du

Monde has made access to healthcare and rights for migrants and exiles a priority in the field and in its advocacy work.

EMERGENCIES AND CRISES

A humanitarian crisis occurs when an event affects vulnerable people who cannot cope on their own and when local actors and authorities are unable to respond. Armed conflict, epidemics, famine and natural disasters; any of these events can lead to a humanitarian crisis and a sudden breakdown in access to healthcare. Médecins du Monde works to restore people's access to healthcare and advocates for the protection and safeguarding of the humanitarian space and humanitarian action. (See page 12)

HEALTH AND ENVIRONMENT

Médecins du Monde works with communities to reduce people's exposure to environmental risks, whether in formal or informal workplaces, or in precarious, unhealthy or unstable living conditions. The strategy aims to combat inequalities in environmental health in order to improve the physical and mental health and well-being of the most vulnerable groups of people.

CROSS-CUTTING APPROACHES

EMPOWERMENT

Médecins du Monde relies on the knowledge, expertise and experience of the individuals and communities directly concerned by its projects in order to adapt its methods of intervention and to place their concerns at the heart of its actions. To encourage empowerment and the participation of the people and communities with whom the organisation works, MdM supports the use of peer workers and collective initiatives, prioritising relationships with local partners, while encouraging advocacy by community players.

PRIORITY AREAS

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Mental health, understood as an individual's ability to lead a fulfilling life, is an integral part of health. Médecins du Monde focuses on the determinants that influence mental health and targets situations of psychological vulnerability. The organisation works to build individual and collective capacity for action by involving those affected and their communities in the development of appropriate public health responses.

GENDER

Médecins du Monde integrates and promotes the gender approach to combatting inequalities and discrimination that affect people's health. To this end, the organisation has adopted a gender policy to ensure that its professional practices and operational activities respect the principle of gender equality. For example, MdM incorporates rapid gender analysis into its humanitarian responses and works on co-responsibility for health in the prevention of unwanted teenage pregnancies. (See page 14)

VULNERABLE CHILDHOODS

Médecins du Monde takes into account the specific needs of minors in its activities. Having spent many years as an accredited adoption body, the organisation continues to be involved in Opération Sourire, supporting minors living in exile or in substandard housing, preventing and treating unwanted teenage pregnancies, and supporting children who are victims of violence in crisis situations.



Since the creation of Mdm, we have witnessed the direct impact of crises on people's health. In Syria, Yemen, Palestine and Burkina Faso, armed violence, attacks on staff, insecurity and the destruction of medical facilities hamper timely access for local populations to high-quality healthcare. In 2022, more than 274 million people were in need of humanitarian aid according to the OCHA, and that figure is constantly rising. In the field, our teams bear witness to the intensification and intersection of health, economic and climate crises, as well as natural disasters and situations of armed violence. Crises, and the action we take in response to them, are long-term phenomena. However, at a time when more and more people are in need of help, the humanitarian space is shrinking all the time.

A CONCEPT UNDER THREAT WITH VERY REAL CONSEQUENCES

The concept of the humanitarian space symbolises the environment in which non-governmental humanitarian organisations, such as Médecins du Monde, can operate. It is a space governed by international humanitarian law and the principles of humanity, impartiality, neutrality and independence. A number of trends are now severely restricting this space.

Firstly, as well as having an impact on populations, violations of international humanitarian law and international human rights law limit the ability of Médecins du Monde to provide quality care to populations when they need it. This is the case in Syria, Ukraine and Yemen.

Secondly, the intensification of state control over civil organisations compromises access to people in need. The increased politicisation of certain funding and the chronic under-funding of crisis responses also reduce the ability of humanitarian

actors to operate under the conditions laid down by international humanitarian law and to help people in need.

COMMITTED IN THE FIELD AND STRONG ADVOCATES

Our teams continue to support vulnerable populations in the most difficult to access areas such as in Yemen, on both sides of the front lines, in north-east Nigeria and in northern Burkina Faso. They are dedicated to providing essential and often neglected healthcare, such as sexual and reproductive health and mental health.

At the same time, we denounce the criminalisation of humanitarian action by laws that can go so far as to equating these activities with illicit support for terrorism, thereby exposing NGO members and staff to the risk of prosecution. We are particularly concerned that these measures reduce the acceptability of and access to aid, which may be perceived as biased or lacking in neutrality.

We are also concerned about the sometimes fatal risks that criminalisation poses for our teams, who are highly committed to working in the most difficult contexts. This year, we mourn the loss of our colleague Alem, who was murdered in Nigeria. More than ever before, we must insist on the need to recognise and respect our impartiality, our neutrality and our independence.

Obligations to 'screen' our staff, partners and suppliers against international sanctions lists – as imposed by donors – can reinforce negative perceptions by equating humanitarian activities with policies to counter the financing of terrorism. A dangerous conflation that could endanger our staff. In addition, requests to screen beneficiaries are contrary to our principles of intervention, according to which need alone should guide our action. Consequently, we refuse and will always refuse to agree to them.

HUMANITARIAN SPACES

In light of these obligations, which represent a transfer of risk from governments to NGOs, we call for this risk, which we have been analysing and taking into account for years, to be shared.

The adoption by the United Nations Security Council in December 2022 of Resolution 2664 establishing a general humanitarian exemption to its sanctions regimes is a step in the right direction. But much still remains to be done to preserve the humanitarian space that is a common good of humanity.



People's health is influenced not only by biological factors but also by social factors. These factors, which can be individual (social class, gender, ethnicity, race, age, etc.) or community and environmental (discrimination, violence, pollution, food, health services, education, working conditions, social beliefs and norms, etc.) have a direct impact on the way in which people fall ill and the ways in which they can access treatment.

GENDER IS A KEY DETERMINANT OF HEALTH

A person's gender identity and sexual orientation conditions their access to care. Because gender norms affect lifestyle and diet, they have an impact, alongside inequalities on people's health profile. For example, social gender norms have an impact on people's life expectancy. Gender-based violence affects the physical and mental health of those who suffer it. Sexual orientation and gender identity, combined with biological sex, determine sexual and reproductive health needs. However, the lack of investment in medical research into the health of women and LGBTQIA+ people means that these issues continue to be underestimated and are rarely taken into account by the various health systems.

Aware of the importance of these issues, Médecins du Monde is committed to health equity by integrating a gender approach into its operations. In this way, the organisation aims to reduce inequalities in access to services and respond to peoples' specific needs.

DEFENDING RIGHTS AND INCLUSIVE HEALTH

In April 2020, the Médecins du Monde Board adopted a gender policy to promote gender equity in health, as well as the rights of women, sexual and

gender minorities, and sex workers. The organisation defends an intersectional and post-colonial feminism, individual bodily, sexual and mental autonomy, and sexual and reproductive health and rights for all. This policy represents a strong institutional and operational commitment to mainstreaming gender at all levels of the organisation and, thus, to fighting for greater social justice in healthcare.

As soon as it was adopted, this policy was translated into practical action. On the institutional level, the organisation adopted a policy on the prevention of sexual exploitation and abuse, which aims to raise awareness within the organisation of the issues surrounding gender-based and sexual violence. On an operational level, Médecins du Monde supports its partners, both in France and internationally, on gender issues.

In Toulouse, an assessment of the health needs of women living on the streets, carried out by the organisation, led to the adaptation of the services provided by the healthcare, advice and referral centre (CASO) in 2018–2019, including adjusted opening hours, the provision of menstrual hygiene products, and information on services dealing with gender-based violence.

In Burkina Faso, Médecins du Monde teams carried out a gender analysis as part of the emergency response to the population displacements caused by the war in the northern region of Kongoussi. As a result of this analysis, the organisation was able to identify gender beliefs and social norms related to sexual and reproductive health and gender-based violence. This information was used as the basis for work on the empowerment of women and girls and on the co-responsibility of men and boys in health, by also involving them in the fight against gender-based violence. (See page 26)

Finally, in Colombia, our work has focused on adapting health services to the needs of migrant women, in particular through the deployment of mobile clinics offering sexual and reproductive

THE GENDER POLICY

health consultations and enabling women who want to have an abortion to be able to do so in good conditions. (See page 36)

operational levels, in France and internationally, to a feminist approach to health. Overcoming the obstacles that hinder progress on equity is essential to ensure equal access to health for all.

DEFENDING A FEMINIST APPROACH TO HEALTH

In an international context where the rights of LGBTQIA + people and cisgender¹ and transgender women to have bodily autonomy are being called into question, Médecins du Monde is more committed than ever, at strategic, institutional and

¹ A person whose gender identity corresponds to the gender assigned to them at birth.



ADVOCACY

RETHINKING THE FRENCH APPROACH TO DRUGS

A real evolution in drug policy can be observed on the international scene. A number of countries, including Spain, the Netherlands and Portugal, have decriminalised the use of cannabis, and some have gone as far as introducing controlled legalisation. In contrast, for over 50 years, France has pursued a repressive policy with some of the harshest theoretical penalties in Europe. The criminal justice response has become tougher, targeting consumers in particular. In 2020, more than 80% of drug-related offences involved consumption, and only 9% involved trafficking.

The call for a new drugs policy

More and more elected representatives are denouncing the failure of the current drug policy. Few take the logic to its logical conclusion, namely, to abolish penalties for use. And yet, the ineffectiveness of current policies is glaring: the inability to manage drug use in the public space, the difficulty in opening new harm reduction facilities – particularly low-risk consumption rooms – and the failure to implement a harm reduction policy in prisons, despite the existing legal framework.

Médecins du Monde continues to advocate for the health of people who use drugs. In addition to launching an initiative in the north-east of Paris aimed at disadvantaged people who use drugs in public places, Médecins du Monde is working with more than 20 partners to develop a new drugs policy.²

The group works to change the way the general public perceives drugs and people who use drugs, to improve understanding of the harm reduction policy, and to raise issues with decision-makers through the press, letters and bilateral meetings.

CAMPAIGN

#LASANTÉENCAMPAGNE: OPERATION DIVERSION

For two years, health dominated public debate, following the COVID-19 crisis.

However, the 2022 presidential election was notable for the surprising absence of health issues from the candidates' discourse. While the media was saturated with security issues and the fight against immigration, the crisis of a healthcare system on the brink of collapse – overburdened public hospitals, lack of funding for new treatments, overworked general practitioners, health democracy under threat – remained under the radar.

With #LaSantéEnCampagne, Médecins du Monde decided to put health back at the heart of the electoral debate. The organisation launched a billboard campaign in several cities to raise awareness among the general public. With a few carefully-chosen words, the candidates' campaign posters revealed the blind spots in the run-up to the elections. On the billboards of many of France's communes, the candidates' slogans became a reflection of their shortcomings. For example, Emmanuel Macron's poster, "Avec vous" (With you), was edited with the words "and for the profit of the pharmaceutical giants", while Valérie Pécresse's original slogan, "Le courage de faire" (The courage to do), was added to by the statement "discrimination in health".

Going beyond political communication

More than a publicity stunt, #LaSantéEnCampagne was the springboard for ten propositions to build a public health system that is fair, inclusive and free from commercial interests. With the manifesto "Health: an absolute emergency", Médecins du Monde confronted the candidates with the need for a strong commitment to a State that guarantees health for all, both in mainland France and overseas departments.

ADVOCACY AND CAMPAIGNS

² AGRRR, Aides, ASUD, Cannabis sans Frontières, CIRC, FAAAT, Fédération Addiction, GRECC, Ligue des Droits de l'Homme, Médecins du Monde, Norml-Fr, Police Contre la Prohibition, Principes Actifs, SAFE, SOS Addictions, Syndicat des Avocats de France, Syndicat de la Magistrature.

UN SYSTÈME DE SANTÉ RÉELLEMENT
UNIVERSSEL
UNIVERSSEL
EST POSSIBLE



LA
SANTÉ EN
CAMPAGNE



ADVOCACY

MARITIME SPACES, SENSITIVE MIGRATORY ZONES

Faced with a constantly changing world and tougher migration policies, Médecins du Monde works as closely as possible with people, at every stage of their migration journey. That's why, in 2022, the organisation decided to focus on different maritime areas. Interest in these areas goes back a long way. It is rooted in the organisation's founding value of solidarity with the "boat people" lost in the China Sea at the end of the 1970s. More recently, the partnership fostering the creation of SOS Méditerranée led the organisation to take part in the first Aquarius mission at sea.

Areas at the heart of tensions

Today, Médecins du Monde sees these areas as border zones, places of political tension and particularly deadly areas. In 2022, four analyses were carried out in these areas:

- between Mayotte and the Comoros, an area once again in the media spotlight, where new ways of removing people, far from mainland France were being experimented with;
- on the French-British border, where policies are being developed which mistreat exiles crammed into squalid camps;
- between the Canary Islands and Mauritania, a particularly deadly external border of the European Union, where Spain is forcing the Mauritanian authorities to monitor its coastline;
- and finally, in Bangladesh and Malaysia, to gain a better understanding of the issues surrounding the crossing of the Andaman Sea by Rohingya refugees.

At the same time, Médecins du Monde entered into a new partnership with SOS Méditerranée and Action Méditerranée against hunger. On a political level, an initial conference was organised on 7 October 2022 in the French Senate to consider maritime spaces as humanitarian and political spaces.

EVENT

ROUTE DU RHUM: PIN OUR COLOURS TO THE MAST!

In November 2022, skipper Morgane Ursault-Poupon was once again an ambassador for Médecins du Monde, crossing the Atlantic from Saint-Malo to Pointe-à-Pitre during the famous Route du Rhum. A year after our first collaboration on the Transat Jacques Vabre, the Breton yachtswoman decided once again to pin the colours of the organisation to her mast for this 12th edition. The symbolism of this tough, gruelling and engaging race matches the organisation's maritime history, which began over 40 years ago with "A Boat for Vietnam".

The navigator's Class40 yacht was decked out in the organisation's colours for the occasion.

Triggering a wave of solidarity

Morgane Ursault-Poupon's commitment was a reminder that, more than ever, the seas and oceans are places where humanitarian issues are at stake. In addition to this message, the presence of a boat flying the Médecins du Monde colours was an opportunity to convey messages of hope and solidarity and to launch a major fundraising campaign.

By taking part in this renowned race, Médecins du Monde increased visibility of the fundraising campaign on its website. A wave of solidarity was reflected in donations and the purchase of a work by Quibe, the talented cartoonist who generously lent his talent to the organisation by drawing the Médecins du Monde boat. Finishing 31st after 19 days of competition, Morgane Ursault-Poupon did the organisation proud.

I am proud to support this organisation and help raise the profile of initiatives in France and all over the world, led by passionate people who are fighting to bring Healthcare to those who do not have access to it.

Morgane Ursault-Poupon, skipper on the Route du Rhum



Clas 40
FRA
30

MEDECINS
DU MONDE

FNAIM

AIR POUR
L'EGEMENT

MAIFERT

BEV

In 2022, the war between Russia and Ukraine received huge media coverage and diverted attention from other serious crises, triggered or fuelled by conflicts, pandemics and the consequences of climate change. While the number of people in need of humanitarian aid continues to rise, humanitarian access is being reduced. Countries such as Burkina Faso, Yemen and the Palestinian Territories are seeing their security conditions deteriorate, while others are faced with political regimes that flout the most fundamental human rights. In Afghanistan, for example, drastic restrictions are imposed on women and young girls, including a ban on access to education, and, at the end of December 2022, a ban on working for NGOs.

ACTING AS CLOSE AS POSSIBLE TO NEEDS

In this international context, Médecins du Monde works in compliance with international humanitarian law and humanitarian principles, to provide aid to all populations in need, while ensuring the protection of humanitarian workers. The organisation continues to firmly condemn certain constraints imposed by certain donors on populations and beneficiaries, as well as the politicisation of access and humanitarian aid. In all the areas in which it operates, Médecins du Monde encourages partnerships with local actors – whether public sector actors or members of the organisation’s international network – to guarantee an effective and sustainable approach.

STRENGTHENING EMERGENCY RESPONSES

Médecins du Monde continues to respond to

emergency situations by providing high-quality primary healthcare. This was demonstrated in Ukraine and neighbouring countries. The organisation’s international network was able to intervene quickly to support refugees and displaced populations. This year, the organisation also demonstrated its responsiveness to climate events. The establishment of preventive measures through disaster risk reduction programmes, the emergency responses to the deadly floods in Pakistan and the cyclones in Madagascar helped to strengthen the resilience of the communities affected.

Projects focusing on migration issues are more topical than ever in Latin America, where Médecins du Monde is investing in places of influence to improve its impact. In Tapachula, MdM interacts with migrants stranded in the “prison” city of Mexican Chiapas, on the border with Guatemala. In the Pacific region of Colombia, the organisation supports a hospital ship that improves access to healthcare for isolated populations affected by the armed conflict.

SUPPORTING HEALTHCARE SYSTEMS OVER THE LONG TERM

2022 was also an important year for harm reduction. The CUTTS project in Armenia, Georgia and Tanzania, has a dual focus (the use of low dead space syringes and buprenorphine), which strengthens Médecins du Monde’s position as a key player in the community-based approach to HIV and hepatitis C infections among people who inject drugs. This project should therefore contribute towards global health policies supported by the WHO.

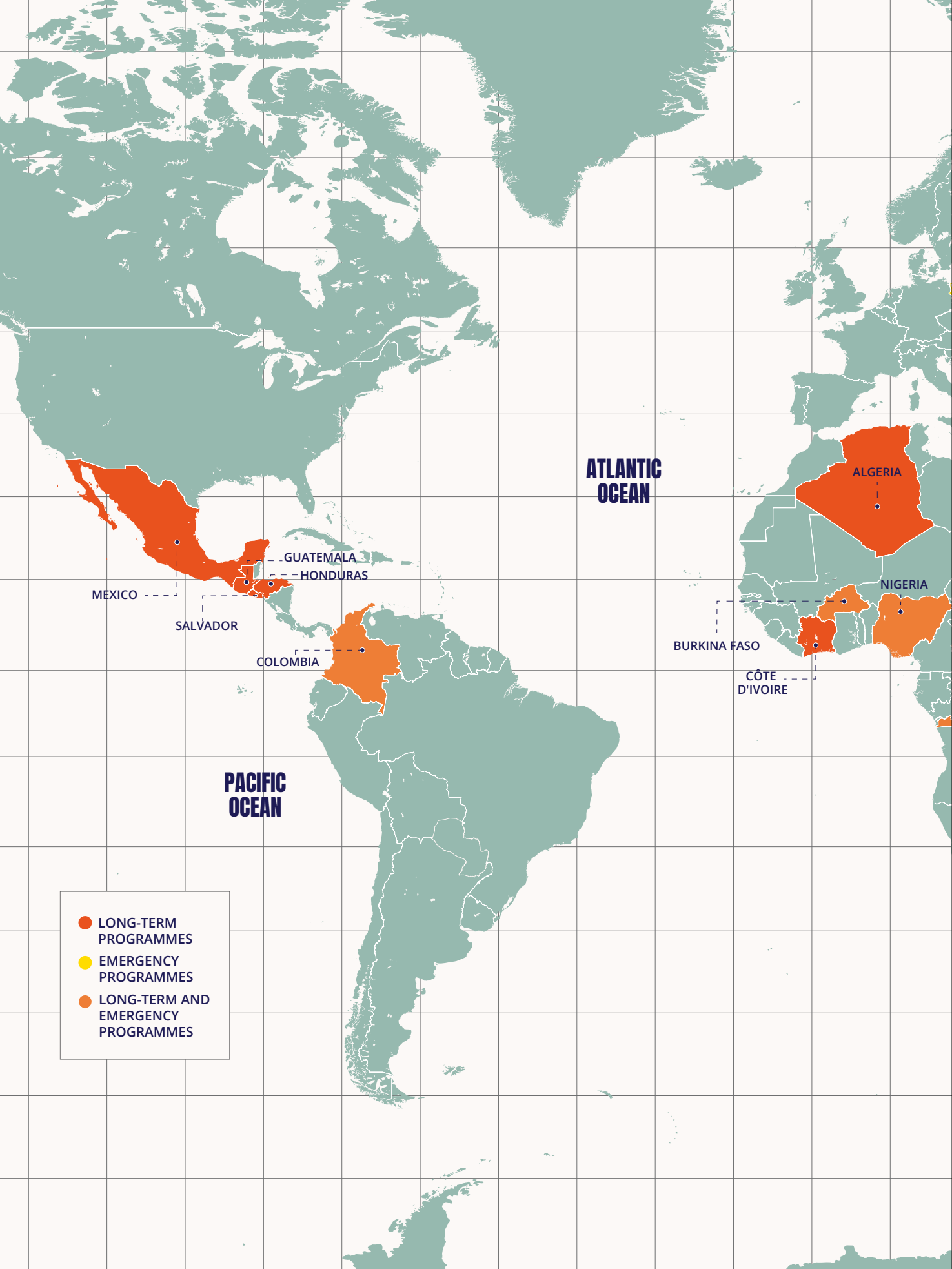
In Burkina Faso, Médecins du Monde is conducting an operational research project on cervical cancer and submitting recommendations to the health authorities to improve the national screening

INTERNATIONAL OPERATIONS

programme protocol. The year also saw the launch of a new environmental health programme on the outskirts of Kinshasa, the capital of the Democratic Republic of Congo, aimed at market gardeners who are exposed to pesticides. Médecins du Monde is developing actions around preventive health and access to health in the area, in conjunction with the national occupational health programme and the agricultural and university sectors.

Faced with such challenges, Médecins du Monde is more convinced than ever of the importance of having a presence on the ground in the years to come. Our missions of caring and bearing witness have never been so needed!





**ATLANTIC
OCEAN**

**PACIFIC
OCEAN**

MEXICO

SALVADOR

COLOMBIA

GUATEMALA

HONDURAS

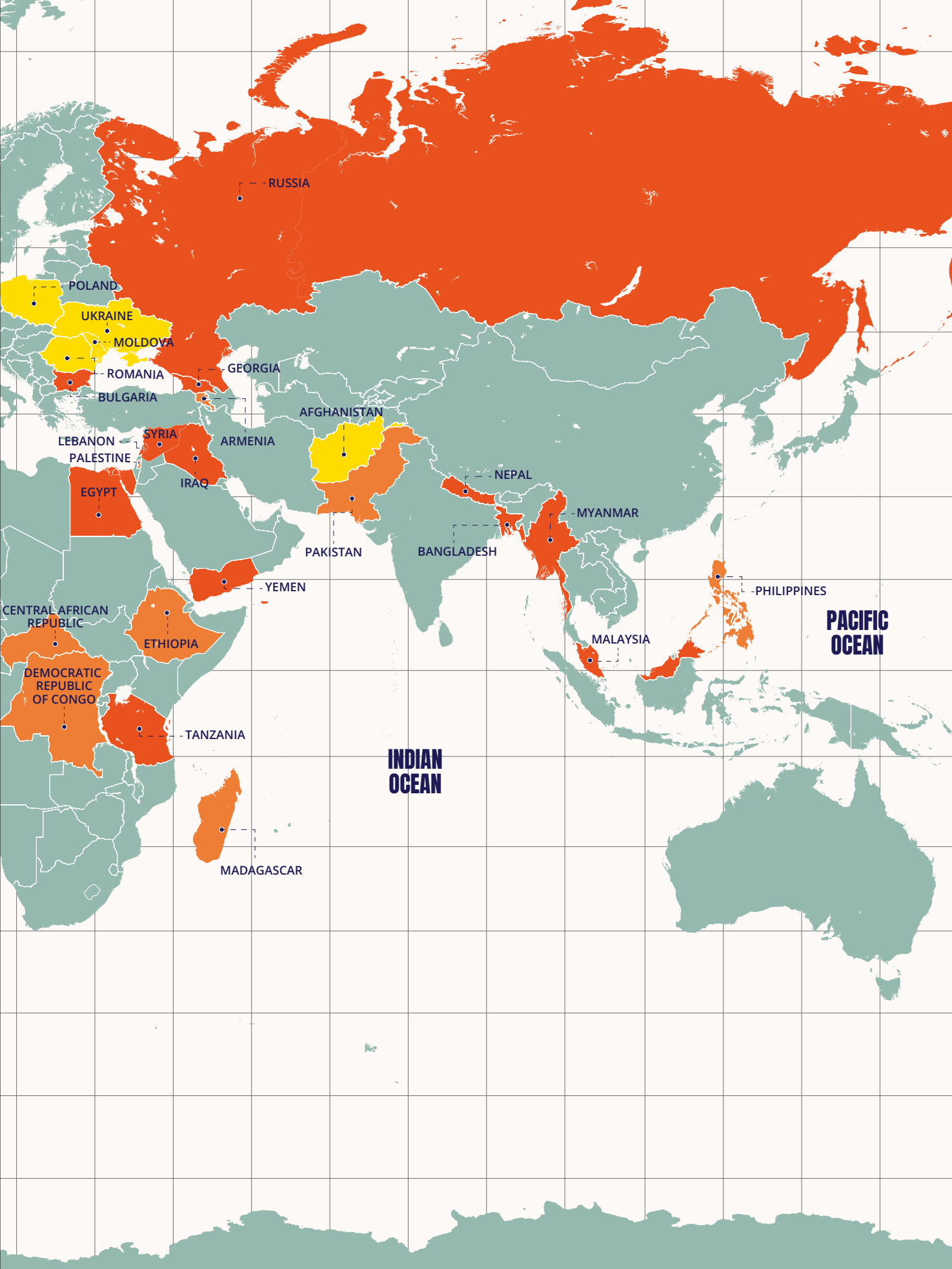
BURKINA FASO

CÔTE
D'IVOIRE

ALGERIA

NIGERIA

- LONG-TERM PROGRAMMES
- EMERGENCY PROGRAMMES
- LONG-TERM AND EMERGENCY PROGRAMMES



- RUSSIA

POLAND

UKRAINE

MOLDOVA

ROMANIA

BULGARIA

GEORGIA

AFGHANISTAN

ARMENIA

SYRIA

LEBANON

PALESTINE

IRAQ

EGYPT

NEPAL

MYANMAR

PAKISTAN

BANGLADESH

YEMEN

PHILIPPINES

PACIFIC OCEAN

CENTRAL AFRICAN
REPUBLIC

ETHIOPIA

DEMOCRATIC
REPUBLIC
OF CONGO

TANZANIA

INDIAN OCEAN

MADAGASCAR

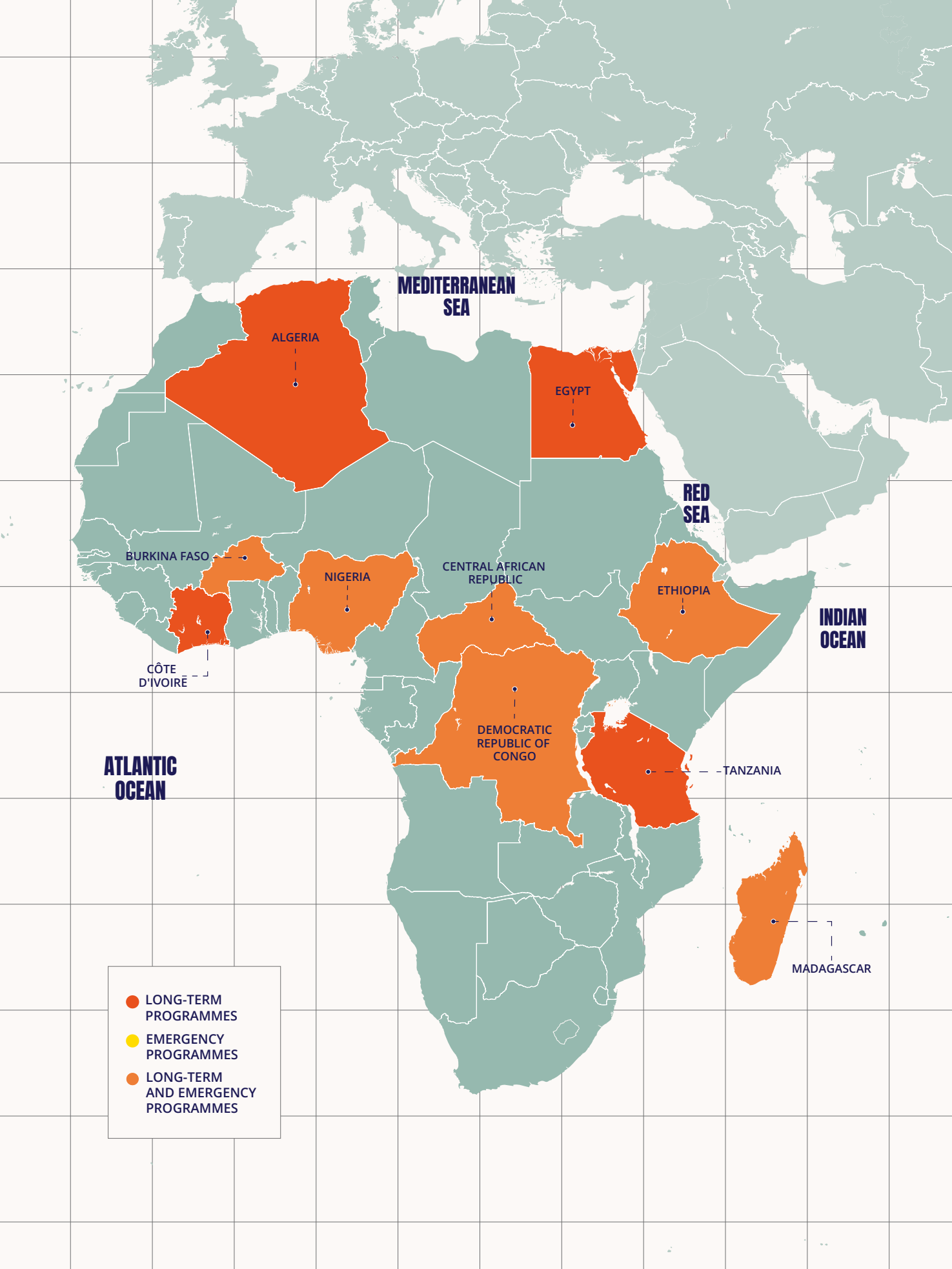
MALAYSIA

AFRICA

10 COUNTRIES 22 PROGRAMMES

| | |
|---|---------------------|
| ALGERIA | 1 PROGRAMME |
| BURKINA FASO | 3 PROGRAMMES |
| CÔTE D'IVOIRE | 3 PROGRAMMES |
| EGYPT | 1 PROGRAMME |
| ETHIOPIA | 3 PROGRAMMES |
| MADAGASCAR | 4 PROGRAMMES |
| NIGERIA | 1 PROGRAMME |
| CENTRAL AFRICANE REPUBLIC | 2 PROGRAMMES |
| DEMOCRATIC REPUBLIC OF THE CONGO | 3 PROGRAMMES |
| TANZANIA | 1 PROGRAMME |

Detailed information on the various programmes in Africa can be found at medecinsdumonde.org



- LONG-TERM PROGRAMMES
- EMERGENCY PROGRAMMES
- LONG-TERM AND EMERGENCY PROGRAMMES

MADAGASCAR

AN ISLAND DEVASTATED BY CYCLONES

In early 2022, two cyclones hit the south-east of Madagascar in quick succession, leaving a trail of material and human damage. Almost 9,000 traditional dwellings and more than 2,000 classrooms were destroyed, while a considerable number of crops and plantations were wiped out. The damage to the agricultural sector plunged tens of thousands of people into food insecurity. 874,000 Madagascans suffered from acute food insecurity in 2022. In addition, the storm destroyed 73 healthcare centres, seriously hampering the already fragile healthcare system's ability to respond effectively to the needs of the population.

ASSISTING THOSE AFFECTED

Following the Batsirai and Emnati storms in February 2022, the organisation launched an emergency response in the Mananjary district to support the affected populations. Three mobile clinics were deployed to support healthcare centres affected by cyclones and isolated communities. As a result, the most isolated populations have been able to access high-quality primary care services, completely free of charge, including treatment for malnutrition and sexual and reproductive health services.

In addition to this emergency response, in July Médecins du Monde, together with the Luxembourg Red Cross (AICRL) and the Malagasy Red Cross (CRM), launched a project to build the capacity of health workers in six priority healthcare centres through ongoing training.

551 beneficiaries of psychosocial support, including victims of gender-based violence.

These centres have also been equipped. In addition, to improve the management of medical resources, material support was provided to the district's wholesale pharmacy, resulting in the creation of a buffer stock for emergency situations. At the same time, extensive community work was carried out to prevent and deal with gender-based violence.

These centres have also been equipped. In addition, to improve the management of medical resources, material support was provided to the district's wholesale pharmacy, resulting in the creation of a buffer

BURKINA FASO

A COUNTRY SHAKEN BY VIOLENCE AND INSECURITY

Burkina Faso has been caught up in a spiral of violence since 2016. The security situation continued to deteriorate, with 4,119 incidents targeting civilians and state institutions recorded in 2022. Armed groups have no hesitation in directly targeting healthcare facilities. In 2022, almost half of these facilities were affected by insecurity, depriving 2.5 million Burkinabe of access to healthcare. The town of Kongoussi is particularly exposed to these security concerns. Since the coup d'état in September 2022, the new government has intensified its recapture operations in the Centre-Nord region. Acts of violence, ranging from summary executions to kidnappings, increased against civilians trapped in the clashes.

STRENGTHENING THE HEALTH SYSTEM IN KONGOUSSI

Following on from the emergency programme launched in Kongoussi in 2020, Médecins du Monde set up two new mobile clinics in 2022, doubling the number of these active medical units. Services include preventive health measures, the treatment of gender-based violence, the provision of psychosocial support and mental health care. These clinics offer free primary healthcare and a wide range of services to displaced populations where the needs are greatest.

At the same time, the organisation is continuing its efforts to support existing healthcare facilities, in particular by strengthening human resources and improving emergency care. It is also working to strengthen the global response to emergencies, forced displacements and epidemics.

In terms of advocacy, the Médecins du Monde team is an active member of the Forum des Organisations Non-Gouvernementales Internationales Humanitaires (FORUS). In 2022, it contributed to a report on the effectiveness of the implementation of free healthcare for pregnant women and children under the age of 5 in contexts of crisis.



**481,615
medical
consultations
performed
in 2022 in
Burkina Faso.**

DEMOCRATIC REPUBLIC OF THE CONGO

MARKET GARDENERS EXPOSED TO THE DANGERS OF PESTICIDES

In Kinshasa, market gardeners face major health problems as a result of their widespread use of chemical pesticides. These products are almost systematically used by workers without adequate protection, exposing them to major health risks and to the development of pathologies of varying degrees of severity, including back pain, skin and eye irritations, heart and respiratory infections, neurological disorders, and cancers. In addition, market gardeners are often unaware of the risks they face and have limited access to primary healthcare.

PROTECTING WORKERS' HEALTH

Faced with this worrying situation, Médecins du Monde set up a "health and environment" programme in August 2022,

which aims to improve health services, promote sustainable initiatives that are favourable to communities, promote the development of new technologies, and encourage dialogue between market gardeners and local authorities. First and foremost, this programme has improved the provision of care.

280 market gardeners supported by 28 staff from market gardeners' associations

Health centres close to market gardening sites have been rehabilitated, equipped and supplied with medicines, and health care staff have been trained to deal with occupational illnesses linked to market gardening.

Médecins du Monde then worked with Caritas-Développement Kinshasa to train market gardeners in agro-ecology. To reduce the use of polluting products, alternative, degradable and non-toxic solutions such as fertilisers and biopesticides were presented. Personal protective equipment and adapted farm machinery were also distributed to improve working conditions.

Lastly, the teams set up a health fund for workers, pooling resources to cover the cost of care. The programme's partner health centres undertake to offer reasonable rates to beneficiaries of the health fund.

TANZANIA

THE CHALLENGE OF HIGH-RISK PRACTICES AMONG PEOPLE WHO USE DRUGS

Tanzania is a hub for heroin trafficking from Central Asia to Africa. There are over 300,000 people who use drugs in the country, including 10% injecting people who use drugs. While more than one in three injecting people who use drugs is HIV positive, one in four is infected with hepatitis C. People who use drugs face major health risks, as well as safety and legal risks, exacerbated by the stigmatisation of users and the criminalisation of drug use.

BUILDING THE CAPACITY OF CIVIL SOCIETY

Faced with these challenges, Médecins du Monde provides technical assistance to civil society organisations and state authorities working to reduce risks. To reach more beneficiaries, the organisation supported the extension of existing risk reduction programmes to two new towns: Arusha and Tanga. The organisation also provides technical support to civil society advocating for reforms aimed at creating a favourable and sustainable legal and political environment for the development of harm reduction activities in Tanzania.

Recognised for its expertise in risk reduction in East Africa, the Médecins du Monde Tanzania mission also provided technical assistance to similar programmes carried out by local organisations in Burundi. This technical expertise helped local actors to be introduced to opiate substitution treatments. As a result of this work, the Tanzania mission reached more than 7,100 beneficiaries, among key populations in East Africa.

Tanzania mission also provided technical assistance to similar programmes run by local organisations in Burundi. In particular, this technical expertise helped local players to introduce opiate substitution treatments. As a result of these actions, the Tanzania mission reached more than 7,100 beneficiaries among key populations in East Africa.

**676 people
trained
in harm
reduction in
Tanzania.**



MIDDLE EAST

5 COUNTRIES 9 PROGRAMMES

IRAQ 1 PROGRAMME

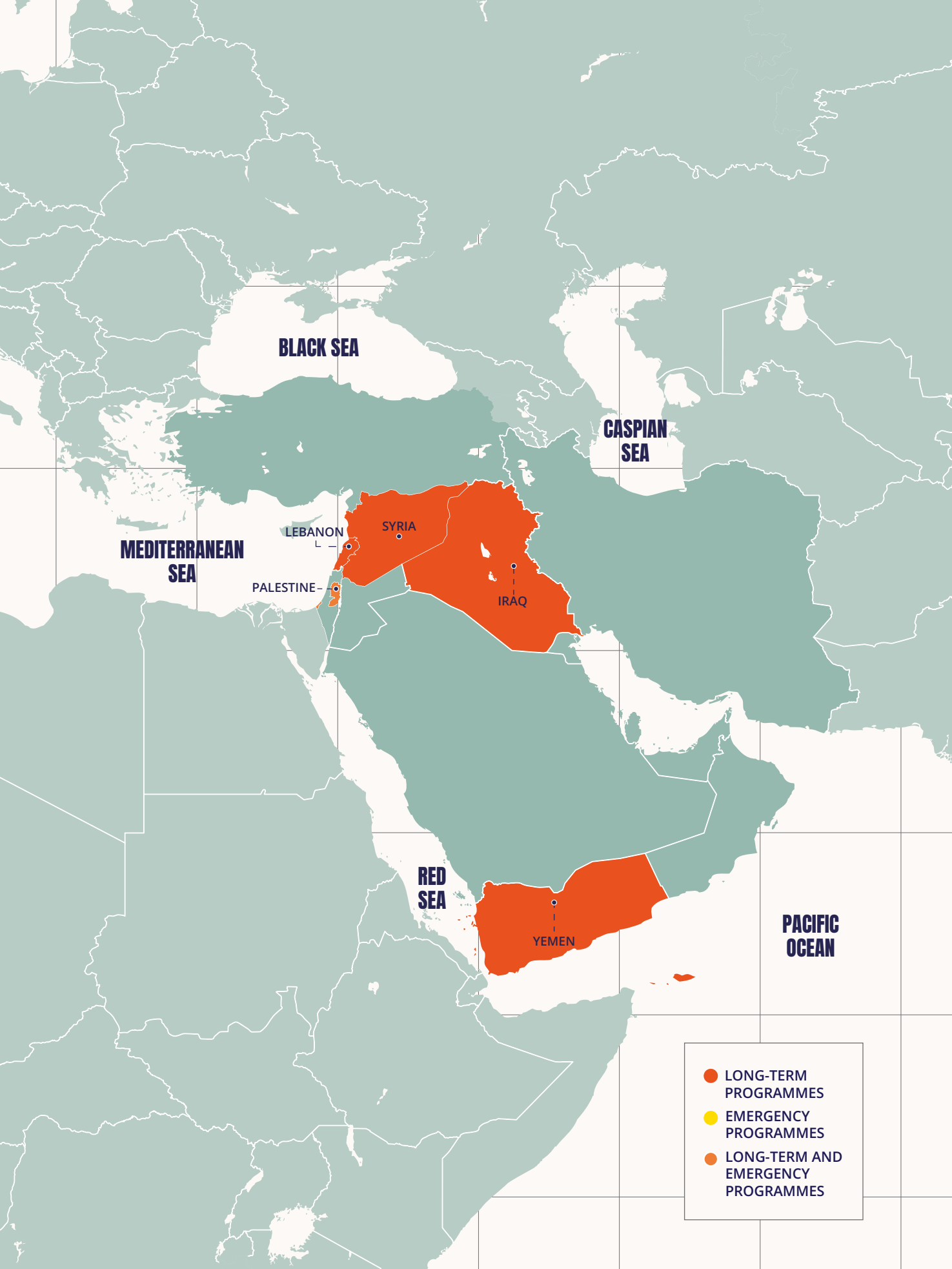
LIBANON 2 PROGRAMMES

PALESTINE 3 PROGRAMMES

SYRIA 1 PROGRAMME

YEMEN 2 PROGRAMMES

Detailed information on the various programmes in the Middle East can be found at medecinsdumonde.org



BLACK SEA

CASPIAN SEA

MEDITERRANEAN SEA

LEBANON

SYRIA

PALESTINE

IRAQ

RED SEA

YEMEN

PACIFIC OCEAN

- LONG-TERM PROGRAMMES
- EMERGENCY PROGRAMMES
- LONG-TERM AND EMERGENCY PROGRAMMES

YEMEN

THE CRITICAL HUMANITARIAN SITUATION ENDURES

In Yemen, a country at war since 2014, the humanitarian situation is critical. 21.6 million people need assistance, 4.5 million are displaced and 2.2 million children under the age of 5 are suffering from malnutrition. The last government stronghold of Marib, was the scene of a battle with particularly devastating consequences for the people. Thousands

425,762

**Consultations
organised
in primary care
centres**

of displaced Yemenis are crowded in, alongside the already large numbers of Ethiopian and Somali immigrants. Despite the signing of a national truce in April 2022, sporadic fighting continues to hamper

people's access to healthcare. The health facilities that have not closed are only partially operational, lacking staff, equipment and medicines. Others have been rendered inaccessible by the fighting.

RESTORING ACCESS TO CARE

In response to the breakdown in access to healthcare, Médecins du Monde has deployed a strategy focused on providing the populations affected by the crisis with a wide range of primary healthcare services, including vaccination, nutritional screening, sexual and reproductive health, treatment of childhood illnesses, mental health and psychosocial support. In this way, Médecins du Monde is helping to meet the needs generated by the displaced population.

Following an assessment of the condition of the remaining health facilities in 2021, the organisation opened a base in Marib in March 2022 to strengthen the district's health system. From there, Médecins du Monde teams support the region's primary healthcare structures. They are working to integrate mental health and psychosocial support services into the healthcare system, as well as to manage gender-based violence. The organisation has also set up an emergency obstetric and neonatal care unit in the largest displaced people's camp in the region, the Al-Jofinah camp.

PALESTINE

THE IMPACT OF OCCUPATION ON MENTAL HEALTH

2022 was the deadliest year for Palestinians in the West Bank for more than two decades. 155 Palestinians, including 36 children, were killed, and more than 10,500 were injured in clashes with Israeli settlers or security forces. Violence by Israeli settlers often goes unpunished, and their attacks have increased by 59% compared with 2021.

The deterioration in the security situation, the coercive environment and restrictions on movement by the Israeli army are all factors contributing to the deterioration in the psychosocial well-being of Palestinians, while healthcare facilities remain rare.

EMERGENCY PSYCHOSOCIAL SUPPORT

Faced with this escalation of violence, Médecins du Monde is providing an emergency response to the victims of traumatic incidents. The organisation has trained a team of psychosocial workers working in the West Bank. Its mental health and psychosocial support initiatives are based on methodologies that have been proven by mental health professionals to be effective in the field. Depending on the incident, these interventions take the form of either individual emergency support or group support. Some 6,687 victims of critical incidents received mental health care or psychosocial support in 2022. More than 2,000 victims were referred to basic and protective services, including 254 victims who were referred to legal aid services.

At the same time, Médecins du Monde, in partnership with the Association of International Development Agencies (AIDA), published the report "No Peace of Mind" on the mental health of Palestinians living under Israeli occupation. This analytical and prescriptive report highlights the mental wounds – which are invisible by nature, but no less real – resulting from the occupation.



6,687
psychosocial
support
consultations
organised in
Palestine.

LATIN AMERICA

5 COUNTRIES 5 PROGRAMMES

COLOMBIA 3 PROGRAMMES

MESOAMERICA 2 PROGRAMMES

Guatemala

Honduras

Mexico

El Salvador



MEXICO

GUATEMALA

HONDURAS

SALVADOR

COLOMBIA

ATLANTIC OCEAN

PACIFIC OCEAN

- LONG-TERM PROGRAMMES
- EMERGENCY PROGRAMMES
- LONG-TERM AND EMERGENCY PROGRAMMES

MEXICO

ACCESS TO HEALTHCARE IS DIFFICULT FOR MIGRANTS

Mexico is facing an unprecedented migration crisis, exacerbated by widespread violence and deplorable conditions of reception. Every year, almost 300,000 people travel across the country. These include families, women and children fleeing poverty and violence linked to gangs and the police. Since 2020, the tightening of policies has led to a sharp increase in the number of refugees and migrants in towns along the US border. With the end on 11 May 2023 of "Title 42", a system put in place by the Trump administration to facilitate the deportation of undocumented immigrants, the migration crisis is likely to reach a critical point.

10,000 people arrive in Ciudad Juárez every year. They all hope to cross the border. Migrants find refuge as best they can in temporary shelters, rented hotel rooms or flats. Many sleep rough. Existing health services are not always accessible to them. Obstacles are administrative, linguistic and financial in nature, and there are frequent shortages of medicines.

NEW PROJECT IN CIUDAD JUÁREZ

Faced with the migratory crisis, Médecins du Monde, which has been operating at the southern border since 2016, is preparing to extend its presence to the northern border.

2,611 migrants treated by Médecins du Monde in 2022

In 2022, the organisation carried out an exploratory mission to understand the needs of migrants, with a view to opening a base in Ciudad Juárez. It has also strengthened the capacity of local actors by providing dedicated first aid training.

With new funding from the European Commission's Humanitarian Office, the organisation will recruit an operational team to start work in 2023. From July, a five-strong team will provide primary healthcare in the town. The aim is to improve access to healthcare for migrant populations.

COLOMBIA

THE CHALLENGE OF ACCESS TO CARE

Despite the peace agreements signed in 2016, Colombia is still plagued by violent clashes between armed groups. This violence has had a major impact on rural populations, the majority of whom are indigenous and Afro-descendants, who have been displaced, forcibly recruited, abused or confined by armed groups. Living in remote areas, often abandoned by the state, these communities have limited access to healthcare. 8.5 million Colombians are currently in need, including three million in acute need due to the security situation and lack of access to essential services.

A HOSPITAL SHIP FOR ISOLATED POPULATIONS

Médecins du Monde works in partnership with the Italian-Colombian foundation Monte Tabor to provide primary healthcare to isolated populations in the departments of Antioquia, Chocó and Cauca. On the San Juan river, a hospital ship provides essential medical services to communities affected by the armed conflict. This project improves access to healthcare for people living in areas which are far from health centres, those are often the hardest hit by violence and poverty.

The fully equipped hospital ship can accommodate twelve people in consultation. On board, the medical teams provide primary healthcare, sexual and reproductive healthcare and mental healthcare. They also help to strengthen the links between these populations and urban health centres, by referring complex cases to appropriate health facilities.

In addition, Médecins du Monde supports building and renovating intercultural health centres in indigenous and Afro-descendant communities. The aim is to combine modern medicine with traditional medical practices and to train local community health workers to provide a link between these centres and urban health facilities.

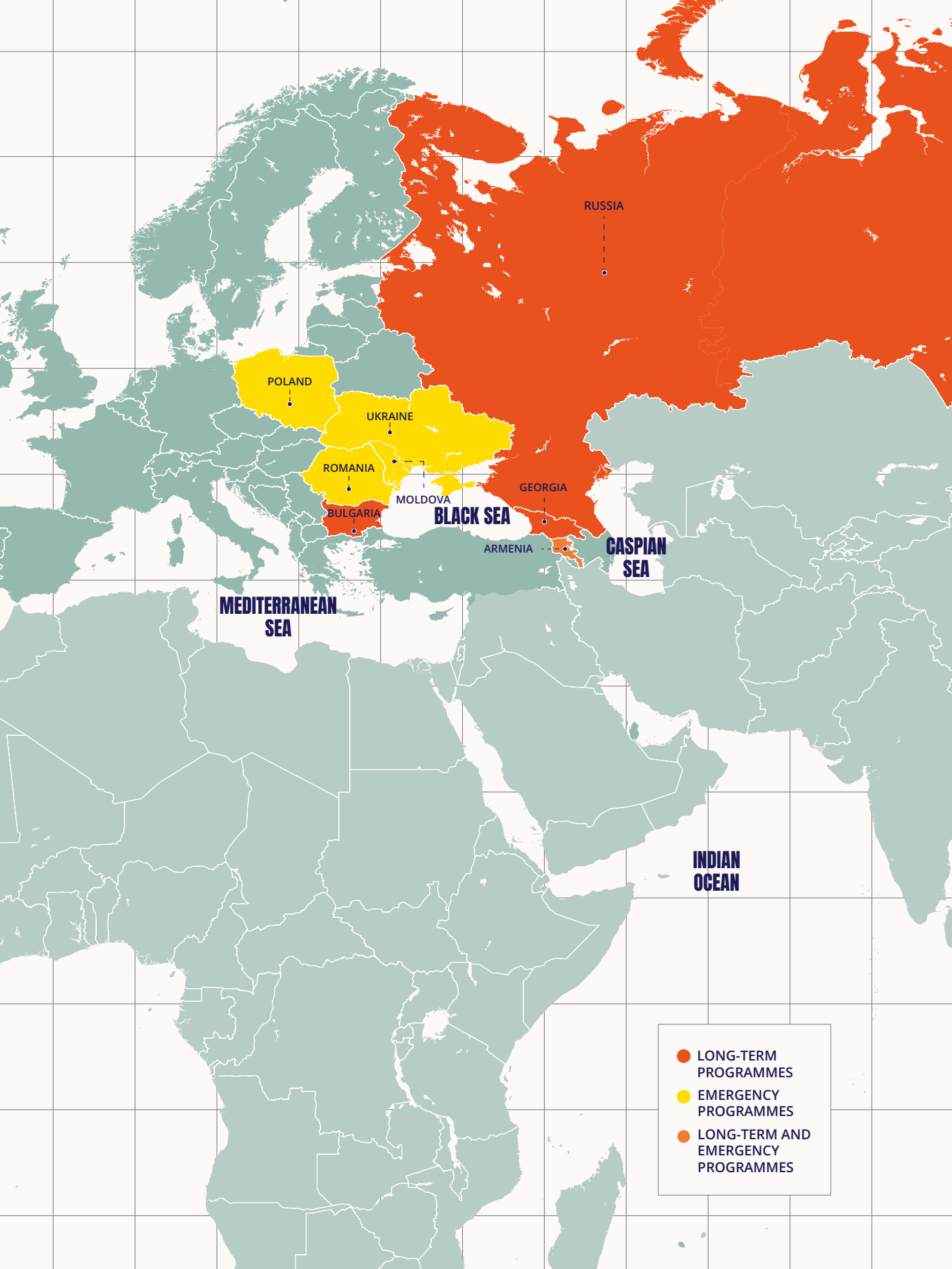


**3.2 million people
are in need of
humanitarian aid
in isolated rural
areas of Colombia.**

EUROPE

8 COUNTRIES 8 PROGRAMMES

| | |
|-----------------------|---------------------|
| BULGARIA | 1 PROGRAMME |
| MOLDAVIA | 1 PROGRAMME |
| POLAND | 1 PROGRAMME |
| ROMANIA | 1 PROGRAMME |
| RUSSIA | 1 PROGRAMME |
| SOUTH CAUCASUS | 2 PROGRAMMES |
| Armenia | |
| Georgia | |
| UKRAINE | 1 PROGRAMME |



- LONG-TERM PROGRAMMES
- EMERGENCY PROGRAMMES
- LONG-TERM AND EMERGENCY PROGRAMMES

ARMENIA AND GEORGIA

THE CHALLENGE OF PREVENTING INFECTIOUS DISEASES IN THE SOUTH CAUCASUS

Countries in the South Caucasus (Armenia, Azerbaijan, Georgia) face common health challenges in preventing infectious diseases among the most vulnerable populations. People who inject drugs and men who have sex with men are particularly exposed to HIV and hepatitis C. While the rate of HIV infection is relatively low in the region, the prevalence of hepatitis C is one of the highest in Eastern Europe and Central Asia.

ADVOCATING FOR HARM REDUCTION

In Georgia, Médecins du Monde continues to support Equality Movement and Mandala, two local partners involved in harm reduction activities targeting key populations, particularly men who have sex with men and young people who use drugs. In Armenia, Médecins du Monde continues its work with the Real World Real People NGO to improve HIV and hepatitis C screening for people who use drugs and facilitate their access to treatment. In 2022, Médecins du Monde obtained four years' funding from Unitaid to develop innovative tools that will simplify access to treatment and reduce the risks of transmission of hepatitis C in Armenia and Georgia.

In both countries, Médecins du Monde supports civil society organisations. It supports their advocacy for harm reduction. In Armenia, it was

More than 4,000 people screened for HIV and hepatitis C in Armenia

behind the creation of the National Coalition in 2021, a network of civil society organisations working on harm reduction. The Coalition has set up a plan to change the laws and harm reduction practices for people who use drugs. In 2022, a regional conference was organised in Tbilisi on the priority actions to be deployed to ensure sustainable access to essential HIV services.

UKRAINE NEIGHBOURING COUNTRIES

A HUMANITARIAN CRISIS AND PSYCHOLOGICAL DISTRESS

Russia's invasion of Ukraine in February 2022 considerably worsened a humanitarian situation that had already deteriorated as a result of eight years of conflict in the east of the country. The number of people in need of humanitarian aid has risen from 3 million to 18 million. For more than a year, Ukrainians have been living in a devastating, deadly situation that hampers their access to food and healthcare. Nearly 5.4 million of them have fled to other regions within the country. Millions more have been forced into exile. According to the WHO, 9.6 million Ukrainians are suffering from psychological disorders.

SUPPORTING THE MENTAL HEALTH OF UKRAINIANS

Faced with the psychological distress of the Ukrainian people, Médecins du Monde has placed mental health at the heart of its intervention strategy. The organisation has intervened in neighbouring countries that take in Ukrainian refugees.

In Poland, in the town of Przemysl near the Ukrainian border, the organisation has trained frontline workers – carers, volunteers and refugees – to provide psychological first aid to refugees in distress. In the Lower Silesia region, Médecins du Monde has set up appropriate spaces where refugees can receive mental healthcare and psychosocial support.

In Moldova, Médecins du Monde strengthened health professionals' and beneficiaries' psychological first aid skills. Finally, in Romania, local partners have been trained to provide coordinated multidisciplinary services including psychosocial support and sexual and reproductive health services.

The organisation also intervened in Ukraine to support our local partner in the deployment of mobile clinics in the Mykolaiv region. 744 mental health and psychosocial support consultations were provided in 2022.



10,000 people supported by Médecins du Monde in Ukraine and neighbouring countries.



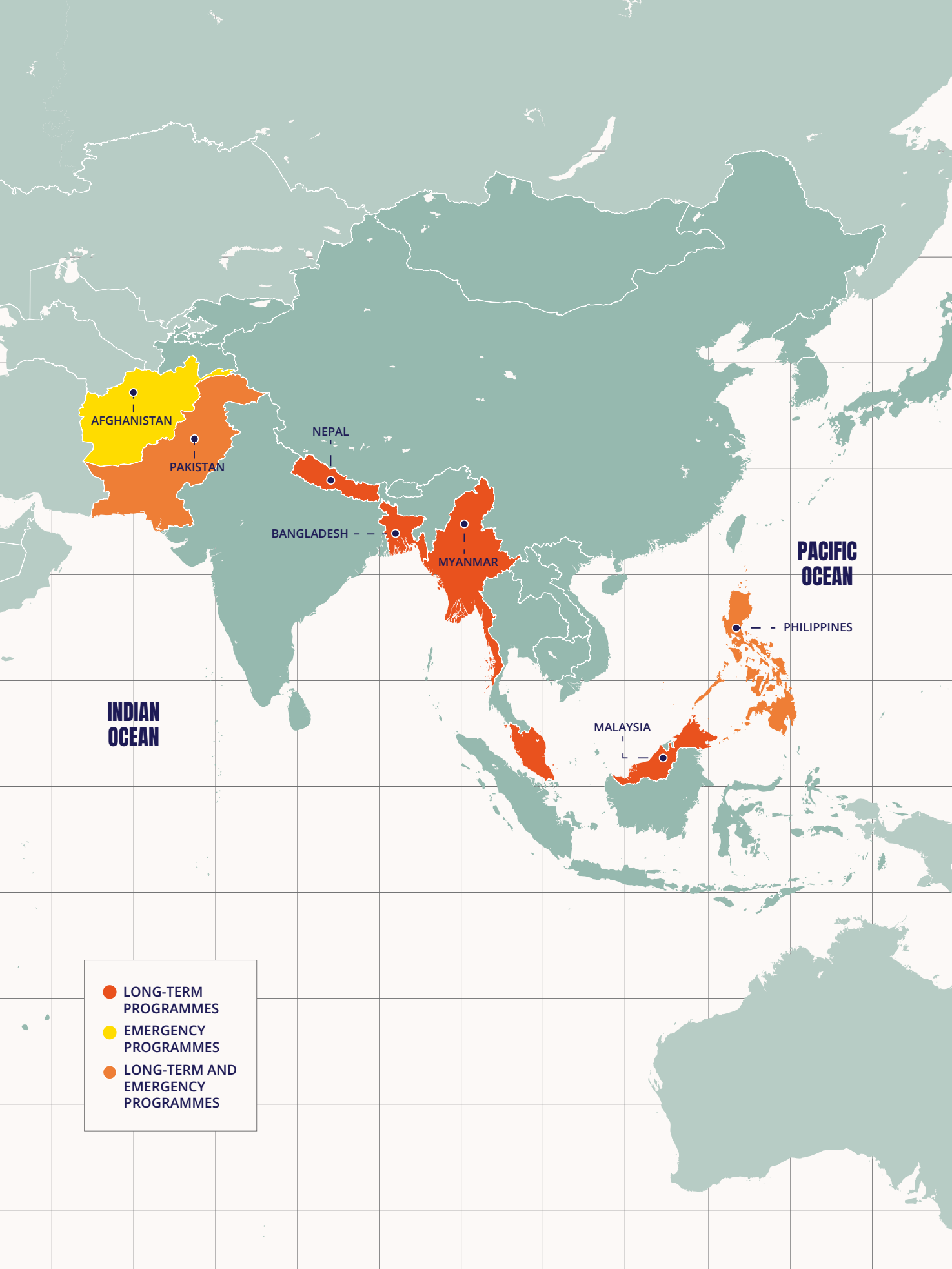


**Around 17.6 million
people
need emergency
humanitarian aid in
Ukraine.**

ASIA

7 COUNTRIES 13 PROGRAMMES

| | |
|--------------------|---------------------|
| AFGHANISTAN | 1 PROGRAMME |
| BANGLADESH | 1 PROGRAMME |
| MALAYSIA | 1 PROGRAMME |
| MYANMAR | 2 PROGRAMMES |
| NEPAL | 2 PROGRAMMES |
| PAKISTAN | 3 PROGRAMMES |
| PHILIPPINES | 3 PROGRAMMES |



AFGHANISTAN

PAKISTAN

NEPAL

BANGLADESH

MYANMAR

MALAYSIA

PACIFIC OCEAN

PHILIPPINES

INDIAN OCEAN

- LONG-TERM PROGRAMMES
- EMERGENCY PROGRAMMES
- LONG-TERM AND EMERGENCY PROGRAMMES

PAKISTAN

DEVASTATING FLOODS AND A HUMANITARIAN CRISIS

In 2022, Pakistan was hit by devastating floods that affected more than 80% of the country and 33 million people. They destroyed hundreds of thousands of homes, thousands of kilometres of roads, hundreds of bridges and the industrial infrastructure that is vital to the economy. The health system, already weakened by the influx of Afghan refugees fleeing the Taliban, is struggling to meet the needs of the affected populations. A significant number of the health centres have been damaged and require major renovation work, as well as the replacement of medical and non-medical equipment.

HELPING PEOPLE AFFECTED BY FLOODING

Médecins du Monde organised an emergency response in the worst affected areas of Pakistan, in the districts of Charsadda and Nowshera. Four mobile clinics were deployed to provide primary healthcare and sexual healthcare and reproductive health care services for adolescents and women. The medical teams paid particular attention to children's malnutrition and conducted awareness-raising and health education sessions. To meet the increased health needs in flooded areas, Médecins du Monde has also supplied damaged health centres with additional medical staff, medicines and medical equipment.

12,340 medical consultations carried out as part of the emergency response to floods

At the same time, in conjunction with Humanité & Inclusion, Médecins du Monde continues to support health centres in Afghan refugee camps. In 2022, 21,587 people benefited from the healthcare services offered by the two organisations.

AFGHANISTAN

THE COLLAPSE OF THE HEALTHCARE SYSTEM

When the Taliban seized power in August 2021, major political, social and economic upheavals were triggered, resulting in a massive deterioration in the humanitarian situation. In 2022, almost 26 million Afghans – half the population – needed humanitarian aid. Twenty million people suffer from food insecurity and six million from severe food insufficiency. Women and children are the first to be affected. Since the return of the Taliban, the public health system has been deprived of the international financial aid upon which it depended, and it is therefore unable to respond to the growing number of humanitarian problems.

IMPROVING ACCESS TO PRIMARY HEALTHCARE IN KABUL

Médecins du Monde was present in the country between 1982 and 2012, and in April 2022 it began supporting the existing healthcare system by backing a district hospital in Kabul. The aim is to improve patients' access to primary healthcare. Among them, women and children are over-represented. To enable care to be given to these vulnerable populations, who are particularly affected by the lack of access to healthcare, Médecins du Monde renovated the mother and baby department of the hospital and equipped the delivery rooms, while supplying the hospital with medicines.

In addition to supporting this hospital, Médecins du Monde plans to extend its work in Kabul to two additional health facilities and, in the rest of the country, in the medical "deserts", areas which are far from any health infrastructure. The teams are visiting several provinces in the country to identify ways of extending their operations to another region from 2023.

22,368 people benefited from medical services at the hospital supported by Médecins du Monde in Kabul.



In 1989, to address the social exclusion suffered by people with malformations, a Médecins du Monde team on a mission in Cambodia launched a bold project to offer free, high-quality reconstructive surgery. Opération Sourire (Operation Smile) was born. For thirty years, this programme, which is based on the commitment of international volunteers, has focused on reducing inequalities in access to surgery and providing comprehensive support for patients undergoing treatment.

RESUMPTION OF INTERNATIONAL ACTIVITIES

In 2022, Médecins du Monde France and Médecins du Monde Netherlands resumed their international surgical activities. In 2020 and 2021, the COVID-19 pandemic interrupted most operations. While this period highlighted the resilience of the teams, it also revealed the need to rethink our operational approach to better respond to the realities and achieve the objectives of the programme. Our activities are now multidimensional. They go beyond the simple act of surgery to include other essential actions. Médecins du Monde is therefore investing more in training and capacity building for surgeons, doctors and local staff, to better respond to the structural deficits in healthcare systems in low-income countries.

In 2022, 522 patients received surgical and psychosocial treatment during ten reconstructive surgery missions carried out in four countries – Cambodia, Madagascar, Sierra Leone and Tanzania – as a result of the commitment of volunteer medical and surgical teams and hospital and NGO partners. Most of the patients are children under the age of five, who suffer from congenital pathologies, malformations or acquired anomalies. In terms of vocational training, Opération Sourire 2022 made it possible to provide theoretical and practical training courses for 175 healthcare professionals during operating procedures.

BEYOND SURGERY, PSYCHOSOCIAL SUPPORT

Opération Sourire now adopts a holistic, beneficiary-centred and culturally sensitive approach that takes into account the psychological, developmental and social aspects of the patient and their family. This approach aims to ensure their full physical and social reintegration. Congenital malformations or acquired anomalies cause psycho-affective disorders in both carriers and those around them, leading to isolation and exclusion from communities. These consequences have a major impact on their health and mental well-being. To provide better support for patients and their families, Médecins du Monde has included a psychosocial component in its intervention strategy.

OPERATION SOURIRE IN THE SPOTLIGHT

To promote and explain Opération Sourire to the general public, the Médecins du Monde communication team travelled to Madagascar in October 2022. Accompanied by a film-maker, the team produced several videos to take viewers behind the scenes of the 45th Opération Sourire campaign in Antananarivo. The general public was able to see the volunteers from the medical and surgical teams, the local staff involved in the operations and the children being cared for. One of the videos tells the story of a family whose child had their second cleft lip and palate operation. A poignant account that reveals the lack of social progress resulting from these malformations and highlights the importance of the psychosocial support offered by Médecins du Monde. Buoyed by the success of this operation, the organisation wants to continue its efforts over the long term and devise a communication strategy dedicated to promoting Opération Sourire in the various areas where it works.

OPÉRATION SOURIRE

HEADS

Médecins du Monde: Dr Frédéric Lauwers,
Dr Luke Harper, Dr Frédérique Sauvat,
Dr Arnaud Depeyre and Florence Giroussens
Head office: Adem Bah

COUNTRIES OF INTERVENTION

Cambodia, Madagascar, Pakistan,
Sierra Leone, Tanzania

BUDGET

€266,000

PARTNERS

L'Oréal corporate foundation, Air France,
Kolmi Hopen Group

IN FIGURES



10 Surgical
missions carried out



522 patients operated upon
(Representing nearly
1 100 hours of operations)



More than 600
medical consultations



175 health
professionals trained



175 volunteers
mobilised in **5 countries**



While the COVID-19 pandemic subsided considerably by 2022, allowing a gradual return to normal and the lifting of restrictions, it continues to have a very significant impact on the French healthcare system.

The pandemic undermined an already weakened system, accelerating its deterioration and intensifying exhaustion among many healthcare staff.

2022 was also a year of electoral campaigning that resulted in the re-election of

President Macron and confirmed the rise of the extremes, a tendency

also observed among our European neighbours. In addition, the consequences of climate change have been increasingly visible, as witnessed by the devastating fires in the summer of 2022, which ravaged the Gironde region in particular.

THE CONSEQUENCES OF THE WAR

However, it was Russia's invasion of Ukraine, signalling the return of war to Europe, that most marked 2022. The conflict has caused massive destruction and population displacement on a scale not seen since the Second World War. Millions of refugees were received throughout Europe, including several tens of thousands in France. In response, the public authorities set up special reception facilities for people coming from Ukraine. The quality of these measures are far from those enjoyed by other categories of refugees, reminding us that the reception crisis remains a reality in France.

The Ukrainian conflict also led to an energy and economic crisis, resulting in unprecedented levels of inflation in Europe, particularly in relation to food, energy and transport. Affecting mainly the most modest households, this crisis contributed towards accentuating vulnerabilities and to widening inequalities, with a lack of a sufficient public policy response.

ACTING AS CLOSE AS POSSIBLE TO PEOPLE IN PRECARIOUS SITUATIONS

Throughout the year, Médecins du Monde worked with the most disadvantaged people to improve access to rights and healthcare throughout France. It worked on the borders with Italy and the United Kingdom – where violence against people in exile is increasing year on year – and in overseas territories such as French Guiana and Mayotte – often regarded as secondary by the government. But MdM also worked in mainland France, in rural and urban areas, where access to socio-medical services, and even just to a general practitioner, is becoming increasingly difficult in many areas.

ADVOCATING FOR HARM REDUCTION

Médecins du Monde remains very active on this issue. At the beginning of 2022, the organisation developed a specific initiative with people who use drugs, particularly crack cocaine, in public areas in the north-east Paris. In July 2022, Médecins du Monde also finalised the transfer of the XBT “drug analysis” project to partners specialising in harm reduction. This project, launched in 2000, aims to improve knowledge of the nature of psychoactive products used or likely to be used by people who use drugs, in order to limit and prevent health problems linked to the use of products and substances by people who use drugs and non-users.

Finally, 2022 was a year in which we explored new areas of intervention, with the diagnosis of the impact of working conditions on the health of precarious agricultural workers and those working on digital delivery platforms in urban areas.

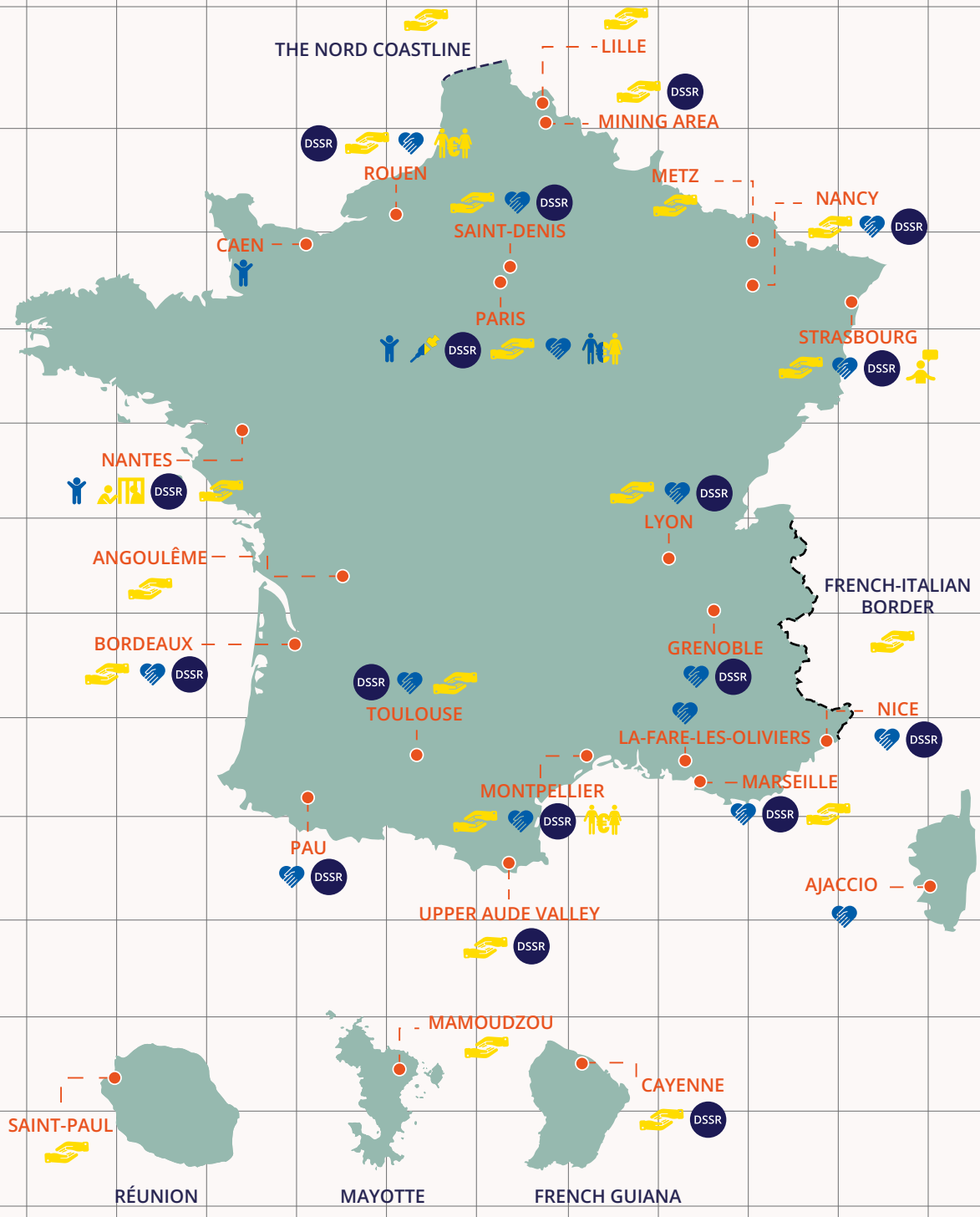
PROGRAMMES IN FRANCE

A CONSTANTLY RENEWED COMMITMENT

Médecins du Monde is innovative and committed. Our actions are built on the skills of our employees, volunteers and the people concerned, while we develop coalitions with a wide range of partners. Médecins du Monde continues to fight its battles, particularly with stigmatised and disadvantaged people, to promote access to rights and healthcare for all. This approach to health reflects Médecins du Monde's vision of society and

its desire to contribute towards the development of supportive, protective and inclusive policies for everyone living in France.





| | | | | | |
|---|--|---|---|---|--------------------------|
|  | Actions for unaccompanied minors |  | Healthcare, advice and referral centres |  | Mobiles actions |
|  | Initiatives in rural areas, on the streets, in shantytowns and with migrants |  | Action for sex workers |  | Actions in Mdm premises |
|  | Actions for people in detention |  | Action for people who use drugs |  | Cross-cutting programmes |
|  | Preventive health work in the field of sexual and reproductive health and rights |  | Advocacy with the European institutions | | |

UNIVERSAL HEALTH PROTECTION AND THE PUBLIC HEALTHCARE SYSTEM

THE HEALTHCARE SYSTEM

For many years, Médecins du Monde, which works to promote rights and access to healthcare for the most disadvantaged sections of the population, has observed a deterioration in the French healthcare system as a whole. This situation was highlighted and exacerbated by the COVID-19 pandemic.

In the field, teams are finding it increasingly difficult to refer people to social services and care facilities. This reality now affects a wider public, including even less disadvantaged populations, as evidenced by the growing number of medical “deserts” in both urban and rural areas.

In light of these observations, in 2022 Médecins du Monde intensified its reflection by bringing together the organisation's teams, both in the regions and at head office, and by drawing on external contributions. The aim was to define a shared vision of a desirable healthcare system that is inclusive, supportive and accessible to all people living in France, in order to make a full contribution to the social debate. This work will be completed in 2023, and will take the form of a strategic note defining Médecins du Monde's position on the French healthcare system.

PRISON PROJECT IN NANTES

The project was born out of the desire of Médecins du Monde and medical teams working in detention facilities to improve access to care for people living in detention. The aim is to set up healthcare initiatives which complement those already being provided through mainstream services. The prison administration welcomed the community approach, as did the partnerships established around healthcare issues.

The project has three objectives: to increase detainees' power to take action on their health, to encourage collaboration between medical

and detention facility staff on healthcare issues, and to promote access to healthcare which is equivalent to that found outside the facility. Activities take place individually or in groups in different parts of the prison, with the approval of the prison authorities.

The Médecins du Monde teams in Nantes also form part of the Health Directorate's working group on health promotion in detention facilities, and the Sidaction expert group which brings together those working in healthcare, detention facilities and NGOs.

FRENCH OBSERVATORY ON ACCESS TO HEALTHCARE

The French Observatory on Access to Healthcare was set up in 2000 to report on the difficulties encountered by people in the organisation's programmes in gaining access to mainstream services. This tool improves our knowledge of vulnerable populations, who are often overlooked by public statistics.

By producing objective data and expertise in the field, the Observatory enables Médecins du Monde to draw up proposals and call on political, institutional and health professionals to improve access to rights and healthcare for disadvantaged or excluded populations.

What we do

The Observatory supports all the programmes run in France by collecting objective data to back up the findings of those working in the field. Each year, the Observatory publishes a report, providing an opportunity to raise awareness and question all stakeholders and public authorities about the needs and shortcomings in access to rights and healthcare for vulnerable populations. It sheds documented light on the health problems faced by the people in our programmes, the difficulties they encounter in seeking treatment and the obstacles they face in exercising their rights effectively.

This report is based on data and testimonies gathered by the teams in the field on all the programmes, observations on existing access to care arrangements and difficulties, and monitoring of legislative and regulatory measures.

HEALTHCARE, ADVICE AND REFERRAL CENTRES

In 2022, Médecins du Monde operated 14 healthcare, advice and referral centres, known as CASOs. These facilities encourage access to preventive health, rights and care for people living on the margins of society by offering them a free and unconditional medical and social service. Anyone who requests support from a CASO is offered a response, including referral to an appropriate service if they already have health cover. Holistic care is offered, which includes nursing care, medical consultations, preventive information and specific screening for certain diseases. Support is also provided by social workers when it comes to accessing rights, particularly with a view to obtaining health cover. Some centres also offer psychosocial and mental healthcare in response to the experience of exile and the problems associated with living conditions in France, which often lead to psychological suffering.

The reform of healthcare rights, which was voted on at the end of 2019, and the increasing digitalisation of public services have made it more complex for foreign nationals in precarious situations to obtain health cover. This has a direct impact on their ability to access healthcare, contributing to a worsening of their state of health. In 2022, 65.9% of people who delayed accessing general medical care were diagnosed with at least one chronic pathology, while 54% of people needed urgent or fairly urgent medical care. Lack of knowledge of rights and structures, administrative difficulties and language barriers are all obstacles to accessing healthcare and preventive health.

FOCUS

PREVENTIVE HEALTH AND HEALTH PROMOTION IN THE LENS / HÉNIN-BEAUMONT AREA

The team should encourage health promotion in the towns of Lens and Hénin-Beaumont in the Pas-de-Calais. Launched in 2021 for a three-year period, the first cycle of this project continued in 2022. This stage has enabled the team to consolidate partnerships, develop high-quality outreach work with a view to sustainably transforming several communes, and diversify the themes covered, including cardiovascular risk prevention, cancer prevention (cervical, colorectal and breast), emotional life, sexual and reproductive health, self-confidence, and more.

In 2022, the project reached 773 people through 683 awareness-raising events, 72 health education workshops and 18 community health groups. The diversity of themes and the approach adopted enabled a better understanding of the obstacles encountered by this group of people. The team was also able to offer high-quality discussions with a view to sustainably transforming behaviour. Building on information collected also helped to identify changes contributing towards sustainably reducing avoidable mortality and improving public health work.

Médecins du Monde advocates for the introduction of universal health insurance for everyone in France, – regardless of administrative status – and for the

development of care systems which are adapted for people at risk, such as health mediation and access to interpreters.

IN FIGURES

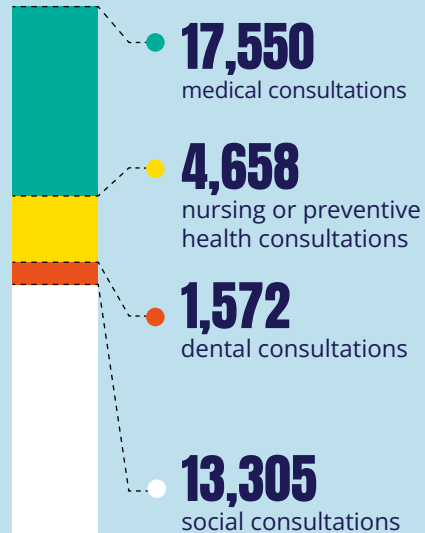
17,093 people were seen in **14** Healthcare, Advice and Referral centres or Reception, Referral and Support Centres

The average age of patients was 33.6

10%
of patients
are minors

97.5%
of people are of
foreign origin

96.8%
say they live
below the
poverty line



MIGRATION, EXILE, RIGHTS AND HEALTH

In terms of reception, 2022 was marked by the repercussions of Russia's invasion of Ukraine and the arrival of 50,000 Ukrainian refugees in France. As a result of the temporary protection scheme, they were able to be received with dignity. Very quickly, the public services were able to develop a reception framework which facilitated affiliation to health insurance, access to housing and education, etc. Médecins du Monde denounced this double standard and advocated that refugees, whatever their origin, should benefit from the same conditions of reception.

It represents a "double standard", because policies are still in place in France which have the effect of destabilising people living in exile. These policies verge on abuse when the public authorities have refused – and did so for several months – to install a simple water point in a squalid camp near Dunkirk. As a direct consequence, people's state of health is worsening. In response, Médecins du Monde took legal action before the administrative court to ensure that the structurally vacant places in the reception centres on the outskirts of Paris which were reserved for Ukrainian refugees were opened up to exiles living on the streets.

WHAT WE DO

In the majority of its programmes in mainland France and the French Overseas Territories, Médecins du Monde works with migrants. MdM sets up "outreach" initiatives aimed at the most disadvantaged people, those living in squats or camps. Our teams offer medical consultations, nursing care, preventive health initiatives and social support. They also take into account the physical and mental suffering resulting from both the experience of exile and the appalling living conditions these people face in France.

Between Italy and France

In the Hautes-Alpes, the passage between Italy and France is a major route for people wishing to continue their journey in Europe. In search of safety, freedom or a better future, people in exile are increasingly taking risks to cross the Alps and reach Briançon. Despite growing tensions with the border

police, Médecins du Monde's mobile shelter unit (UMMA) works in the mountains, in partnership with volunteers from the Tous Migrants NGO, to rescue and shelter exiles attempting to cross the border.

Working with unaccompanied minors

Although the law of 7 February 2022 on the protection of children represents a step forward for the rights of minors, many children – particularly the most vulnerable, such as unaccompanied minors – still have difficulty accessing rights and healthcare. These children are faced with persistent shortcomings in their access to child welfare, which has serious consequences for their health, particularly when they are excluded from child protection services.

Since 2015, Médecins du Monde has been developing specific projects for unaccompanied minors who are excluded from child protection services in Caen, Nantes and Toulouse. Day centres offer these young people someone to talk to, medical and social consultations, group psychosocial support and preventive health workshops, guidance, and support in accessing essential goods, rights and care. MdM also assists unaccompanied minors as part of its other programmes, throughout France, including in its Healthcare, Advice and Referral Centres (CASOs) and during outreach work with people living on the streets, in shanty towns or squats, in Marseille, Lyon, Bordeaux, Saint-Denis, on the French-Italian border, and on the Nord-Pas-de-Calais coast.

In light of the proliferation of exclusionary rhetoric, which all too often treats these minors as migrants rather than as children in need of protection, Médecins du Monde advocates for:

- **immediate and unconditional shelter** for unaccompanied minors in dignified and safe conditions and within child protection systems;
- **a period of respite prior to the assessment of minority and isolation**, allowing each minor to rest, gain confidence and receive information;
- **immediate access to health and medical, psychological and social care** through a systematic health check-up and entitlement to

- full universal health cover from the time of temporary emergency reception;
- **a multidisciplinary, benevolent and objective assessment** of all the factors of vulnerability and risk of danger to which they have been and still are exposed. Any forensic examination to determine the age of unaccompanied minors must be prohibited;
 - **that the children's judge should be central to the assessment and protection** of minors, and that these children should be protected and supported until the judge has given a final ruling on their request for protection.

More than 12% of the people seen by the CASO were asylum seekers, two out of five were homeless, and less than a third had access to accommodation under the national reception system, despite a doubling of the number of accommodation places for asylum seekers.

Violence during the migration journey but also living conditions in so-called "reception" countries has a significant impact on the health of these people.

KEY FIGURES

In 2022, 97% of people admitted to our 14 CASOs were of foreign nationality, a proportion that has remained stable over the years. More than half were in an irregular situation. Nearly one person in two suffers from delayed treatment on their first visit.

MAYOTTE

In 2022, the context in Mayotte was heavily marked by the fight against illegal immigration, which resulted in an ever-increasing number of arrests and deportations. In 2022, more than 25,000 people were deported. This repressive policy, combined with a series of derogatory provisions, has resulted in an increase in the number of people with no rights, thus being denied access to healthcare. Against this backdrop, the Médecins du Monde team launched a programme aimed at reaching out to people in certain shantytowns who have no access to healthcare, to bring them closer to the healthcare system and help to reduce the number of people who do not have access to healthcare, who do not seek it, or who seek it late.

GUYANE

In French Guiana, 2022 was marked by the continuing crisis in the reception of asylum seekers. In response, the Médecins du Monde team initiated new activities. In particular, it organised an inter-NGO outreach campaign to reach asylum seekers on the streets and to document situations for advocacy purposes. 2022 also saw the operational launch of the "Pass de ville en Guyane" scheme. This programme enables people in precarious situations who are living in vulnerable situations and who need chronic care to access mainstream services.

HARMFUL ENVIRONMENTS IN THE HOME AND WORKPLACE

Vulnerability, poor housing and life on the streets are common characteristics of the majority of people treated by Médecins du Monde. These living conditions seriously affect their health. This applies to people we meet during our outreach missions, in shanty towns, in squats, on the streets or in exile camps, but also to people we meet in our CASOs.

In 2022, 92.9% of patients seen in Médecins du Monde centres had no accommodation of their own. 27.1% of them were living in highly vulnerable conditions (on the streets, in emergency accommodation for 15 days or less, in squats or shanty towns). The persistent saturation of emergency accommodation and the repeated questioning around the principle of unconditional reception have a harsh impact on these people.

PROMOTING THE HEALTH OF ROUGH SLEEPERS

In 2022, Médecins du Monde continued to work with rough sleepers and those living in poor housing. Whereas in 2020 and 2021 there was an increase in the number of places available and a continuation of supply of these places due to the health crisis, in 2022 accommodation facilities were saturated to an unprecedented extent. Teams on the ground continue to observe the inadequacy and unsuitability of services for the needs and situations of people living rough, particularly a lack of medical and social support.

What we are doing

On the streets, in shelters and in day centres, our outreach teams carry out various types of actions:

- assistance with administrative procedures and claiming rights;
- health monitoring, medical consultations, psychosocial support and health mediation;
- information and awareness-raising for medical and social actors on the issue of housing and vulnerability.

Through these actions, Médecins du Monde bears witness to the difficulties encountered by homeless people in asserting their rights and accessing healthcare. In addition to its work in the field, and

in order to avoid becoming seen as a substitute for the State, MdM lobbies the authorities for suitable, permanent accommodation and mobile facilities to provide medical, psychological and social contact and effective access to care for the most excluded. Médecins du Monde has also contributed to inter-NGO campaigns to raise awareness and formulate proposals to combat homelessness.

IMPROVING ACCESS TO HEALTHCARE FOR PEOPLE LIVING IN SQUATS AND SHANTY TOWNS

The Médecins du Monde teams visit squats and shanty towns and see the harmful effects of extremely-poor housing and repeated evictions on people's health on a daily basis. Evictions without rehousing force the inhabitants of informal settlements into vagrancy, distance them further from the health system, break the continuity of care, and make it difficult to prevent and combat epidemics. In order to obtain health cover, these people face numerous obstacles to claiming their rights and are confronted with interminable delays.

The interministerial circular of 25 January 2018 to reduce the number of shantytowns is evidence of a positive shift in public action in favour of sustainable solutions. But this policy continued to lack effectiveness in 2022. According to the Observatoire des Expulsions de Lieux de Vie Informels, 2,078 evictions took place between 1 November 2021 and 31 October 2022, in over 95% of cases without any prior social diagnosis or referral.

What we are doing

Médecins du Monde intervenes in squats and shantytowns to offer access to healthcare and rights to the inhabitants or to refer them to health facilities – with a particular focus on the health of women and children.

Health mediation is particularly well-suited to these situations. Médecins du Monde's health mediators work with community and mainstream partners to improve care for people living in shantytowns and to increase their ability to access healthcare and rights independently.

Médecins du Monde is in favour of policy to eliminate shantytowns that takes into account the participation of the people concerned and stresses the importance of concerted solutions and proposals for suitable, permanent rehousing. In the absence of decent offers and while these

are being worked out with the inhabitants, we campaign for people's situations to be temporary stabilised and their health to be secured. Against this backdrop, in 2022, the organisation helped to advocate for changes to the legislative and regulatory framework for access to water.

NO HEALTH WITHOUT A ROOF

Since 1993, Médecins du Monde has been working in Paris with isolated people with health problems living on the streets. Although a number of schemes exist to meet some of their needs (outreach services, day centres, etc.), mainstream medical and social services are still inadequate and under-resourced, and coordination between medical and social players remains limited.

As a result, these people's care pathways are often chaotic and flawed, both before and after treatment. People who are not treated at the right time and do not benefit from adequate medical and social follow-up after a stay in a care facility find themselves back on the streets. As a result, many homeless people endure a vicious

cycle of returning to life on the street and, each time, their health deteriorates a little more and their confidence in the teams and services they receive erodes a little further.

In response to these findings, and in addition to its outreach and medical-social services, Médecins du Monde is working to set up an integrated pathway to help people move from living on the street into housing, in conjunction with stakeholders from different sectors (street, health, housing) and the people concerned. This scheme will be aimed at chronically homeless people suffering from a medical condition, and will offer them a suitable pathway out of the streets and into housing.

SEXUAL AND REPRODUCTIVE HEALTH

Enabling people to live freely with their sexuality, without danger or violence, without fear of non-intentional pregnancy or sexually transmitted infections (STIs), is a key health issue. However, Médecins du Monde notes that access to reliable and non-judgemental information, as well as to preventive health and care services to help people enjoy and understand their sexuality, remains a major challenge in France, especially for the most vulnerable.

A HOLISTIC INTERVENTION FRAMEWORK

Médecins du Monde works to promote universal access to comprehensive, high-quality sexual and reproductive health services. However, even where these services exist, they are not necessarily accessible to everyone. This is why Médecins du Monde has adopted a broader definition of “sexual and reproductive health and rights” (SRHR), which values the exercise of these rights as an essential prerequisite for sexual and reproductive health.

Médecins du Monde's actions are part of a complementary approach to public health, the promotion of human rights and the fight against gender inequalities, with the aim of removing barriers to access to sexual and reproductive health and responding as effectively as possible to people's needs. In 2022, Médecins du Monde continued to affirm its inclusive vision of gender, so that everyone – regardless of their sex, gender identity or sexual orientation – can make decisions about their own body, have an autonomous and satisfying sex life, and access quality services.

CONSIDERABLE UNMET NEEDS

In France, Médecins du Monde's teams mainly meet people who are in a vulnerable situation and whose sexual and reproductive rights have been

violated. Their access to preventive healthcare and sexual and reproductive healthcare is very limited. These people are faced with numerous factors of vulnerability and discrimination that distance them from the healthcare system and put them at risk of sexually transmitted infections, gender-based violence and unintended pregnancies.

In 2022, the people encountered by Médecins du Monde teams had significant unmet needs in terms of sexual and reproductive health and rights:

- **more than 80%** of women of childbearing age do not use any form of contraception;
- **1 in 3 pregnant women are late in seeking pregnancy care;**
- **over 70%** of people do not know their **HIV, HBV or HCV** status;
- **9 out of 10 women** do not know if they have ever had a **cervical cancer** screening³.

Our challenges

Médecins du Monde works to improve access to quality preventive healthcare and care in the field of sexual and reproductive health and rights (SRHR) for everyone, including disadvantaged groups. More specifically, our teams work in fixed locations and directly with disadvantaged people. Our teams aim to:

- improve access to preventive health services and quality SRSH care;
- increase people's ability to take action on their sexual and reproductive health and rights;
- contribute to local, regional and national public policies to integrate key SRHR issues for vulnerable and/or disadvantaged people.

³ Data from preventive health interviews and medical consultations carried out in 2022 in Médecins du Monde CASOs.

PROGRAMME TRANSVERSAL PRÉVENTION DSSR

In 2022, 30 Médecins du Monde projects in France – more than half of all projects – grouped together in a cross-cutting SRHR Preventive Health programme, implementing activities aimed at improving effective access to SRHR in mainland France and the French Overseas Territories. Depending on the region and the project, the following activities took place:

- individual preventive health interviews and group workshops on SRHR;
- screening services in partnership with public institutions and community laboratories;
- preventive health materials such as condoms, self-tests and contraceptive tools;
- referral and/or support for people to mainstream services, such as sexual health centres, maternal and child protection centres, etc.;

- involving people in their own care through mediation, interpreting and counselling techniques;
- documenting people's sexual and reproductive health status and dysfunctions in access to sexual and reproductive health services and rights;
- advocating public policy in this area.

In 2022, Médecins du Monde worked to maintain, strengthen and revitalise its preventive health activities, which were slowed down by the COVID-19 pandemic. MDM carried out major work to strengthen the capabilities of its teams and partners, and to structure its approach to the theme and related issues. The aim is to ensure that all our teams take ownership of it and thus improve the quality of our services.



HARM REDUCTION

RESTORING ACCESS TO CARE FOR PEOPLE WHO USE DRUGS

Faced with a worsening situation for people who use drugs in public spaces in north-east Paris since 2021, Médecins du Monde once again took action on the ground. The current context is marked by the widespread availability of crack cocaine and the diversification of the profiles of people who use psychoactive substances – alcohol, drugs, illicit products – particularly migrant workers from Senegal, Guinea, Ethiopia and Somalia, who were not previously identified as being users.

At the end of 2021, the public authorities concentrated these people and confined them to the Square de Forceval, on the outskirts of Paris, creating a situation which can only be described as a humanitarian crisis. The media coverage of the situation has only reinforced dogmatic political positions and fuelled a particularly hostile climate towards people who use drugs, undermining the work of harm reduction professionals.

- However, these people, whose state of health is often impaired, face a number of difficulties that hamper their access to appropriate care:
- there are few services tailored to women, to facilitate their care and access to dedicated rest areas or accommodation;
- the existing systems are often inadequate and rarely adapted to providing high-quality care, particularly for exiles;
- the players in the medical-social sector are exhausted by the lack of resources and the inability of politicians to provide a coherent solution.

What we are doing

Médecins du Monde has carried out a number of initiatives in the field: mobile clinics for women offering screening tests, clinics at the rest area run by

partner NGOs, discussion groups on the use of psychoactive substances, in the presence of interpreters, and outreach work, particularly in the Square de Forceval. MdM also organised training courses to enhance the skills of

those working with migrants. In addition to its actions on the ground, Médecins du Monde joined forces with professionals from the health and social care sectors to speak out about this health disaster orchestrated by the Prefecture of Police with the support of the government.

This inter-NGO coalition presented a public report, the Plan to Eradicate Drug-Taking in Public Areas⁴ which takes stock of the first crack plan and makes a series of recommendations. This report went unheeded, and the camp was evacuated once again, with people being dispersed and harassed by the police. However, no additional measures have been put in place, and projects for addiction treatment centres, the new term for low-risk consumption rooms, have stalled.

SUPPORTING SEX WORKERS

Together with other organisations, Médecins du Monde is working to ensure that health policies take into account the specific needs of sex workers, as part of a harm reduction approach. MdM campaigns against the criminalisation of sex work and for greater support for community health organisations, which are best placed to respond to needs. Médecins du Monde's programmes in Montpellier, Paris and Rouen promote access to health and rights for sex workers through outreach, reception and support. Médecins du Monde also runs a national programme to combat violence which women encounter in the course of their work.

Key figures

98 volunteers made over **10,264** contacts (street and internet) and provided support and guidance to **839** people.

Our challenges

Faced with the growing insecurity of sex workers and the increase in violence observed in the field, Médecins du Monde is calling for:

- guaranteed effective access to rights and healthcare and maintaining harm reduction facilities;
- improving systems to support and protect victims of violence;
- the involvement of sex workers in the

⁴ Available on line.

- development, implementation and evaluation of health policies that affect them;
- the repeal of the pathway out of prostitution defined by the Act of 13 April 2016 in favour of genuine schemes enabling people who so wish to find another income-generating activity;
- the repeal of the criminalisation of clients and the decriminalisation of sex work.

JASMINE PROGRAMME

Jasmine is a project aimed at combating violence against sex workers. It has a website available in 10 languages that enables sex workers to report violence they encounter, the names of the perpetrators, and alerts made by other sex workers. The site also contains tools provided by information sharing on health and medical-social facilities.

Through the Jasmine site and the tools on it, the following figures were reported:

FOCUS



1,600
people registered by
31 December 2022



151,361
visits in 2022



2,329
incidents of
violence



3,367
Instagram followers



2,216
Twitter followers

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In 2022, the entire international network was mobilised to provide an emergency response to more than 200 health facilities and temporary accommodation centres in Ukraine. 17 mobile units were deployed by members in Ukraine and neighbouring countries.

MOBILISATION FOR UKRAINE

Since 2015, Médecins du Monde has been working in Ukraine to provide comprehensive primary health-care, including sexual and reproductive health services, mental health and psychosocial support. This care is provided to people living along the front line, a conflict zone separating the territories controlled by the Ukrainian government and those under temporary Russian military control.

In response to the invasion launched by Russia on 24 February 2022, MdM mobilised its international network to step up its intervention. Médecins du Monde teams from Belgium, France, Germany, Greece and Spain operate in Ukraine and neighbouring countries, either through mobile clinics or in support of the public health system and civil society. At the same time, Médecins du Monde Portugal and the Netherlands, which do not have a presence in the country, are working to develop partnerships with local players.

The network is helping to meet the most urgent humanitarian needs of the affected population by delivering medical equipment and essential medicines to more than a hundred health facilities and temporary accommodation centres. Particular attention is paid to mental health care and psychosocial support. Over the months, the operation has been extended to new regions in the west and south of the country.

The Médecins du Monde network is also involved in the crisis caused by the displacement of the Ukrainian population into the neighbouring countries of Moldavia, Poland, Romania and Slovakia.

The aim is to improve the health and well-being of refugees by facilitating their access to primary healthcare services. In 2022, nearly 26 million euros were raised by all the members of the network to carry out these actions.

THREE PARTNERSHIPS BETWEEN NETWORK MEMBERS

A partnership with Médecins du Monde Spain to operate in Afghanistan

In 2022, Médecins du Monde Spain and France reopened the Afghanistan mission in a particularly tense context. A joint programme is being implemented in Kabul to support the health system. Médecins du Monde France is responsible for the overall management of the project, while the Spanish teams provide expertise in mental health and support in the recruitment of expatriate staff.

The international network steps up its support for public health structures in Haiti

Four members of the network are present in Haiti: Médecins du Monde Argentina, Canada, Spain and Switzerland. In the aftermath of the 2021 earthquake, specific actions were put in place: supply of materials, equipment and medicines, distribution of nutritional kits to the most affected families, psychosocial care. The instability and violence in the country make it difficult to intervene. Since the autumn of 2022 and the resurgence of the cholera epidemic, Médecins du Monde has also been working on cholera prevention and treatment.

Médecins du Monde France's Ventimiglia project transferred to Italy

Thanks to this project, more than 850 migrants and exiles in Ventimiglia have access to healthcare. Médecins du Monde Italy, the seventeenth and most recent member to join the network, is taking over the activities carried out at the border between Italy and France. Beneficiaries from the Provence-Alpes-Côte d'Azur delegation of Médecins du Monde France continue to take part.

INTERNATIONAL NETWORK

ADVOCACY

A victory for better access to medicines

The international Médecins du Monde network campaigns for the right to health for all. Access to medicines is an essential part of this fight. In November 2022, the European Patent Office (EPO) upheld part of its 2016 first instance decision, ruling in favour of Médecins du Monde in its opposition to one of the key patents filed by Gilead on sofosbuvir, an essential treatment for hepatitis C.

The chemical formula behind the drug is no longer protected by patent, despite the claims of the manufacturer. However, the combination remains protected. Due to a procedural delay, the EPO has yet to take a position and decide whether the patented combination possesses an inventive step. Médecins du Monde is pleased to have demonstrated that the patent was unfounded. This decision is a real step forward: it gives countries the option of using compulsory licences, enabling the production or import of less expensive generic versions of the drug, making the treatment accessible to all those who need it.

ADOPTION OF THE FIRST STRATEGIC PLAN

Consolidating the network's foundations, taking action and growing for greater impact

Drawn up collectively in the first half of 2022 and adopted in October of the same year, the strategic plan constitutes a roadmap for the 2023–2025 period. Médecins du Monde aims to strengthen operational coordination, pool resources in the areas where it operates, define common quality standards and improve its collective advocacy for the right to health.

MdM also aims to strengthen links and relationships between network members, promote diversity, equity and inclusion within the network, and define the future of the network by considering its expansion to include new and more diverse members.

KEY FIGURES

In total, the Médecins du Monde international network runs 452 programmes in 76 countries.

260 international programmes in 59 countries:



Africa
128 programmes
in **24** countries

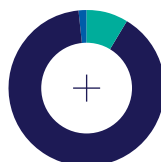
Americas
58 programmes
in **10** countries

Asia
16 programmes
in **9** countries

Middle East
29 programmes
dans **5** countries

Europe
29 programmes
in **11** countries

192 national programmes in 17 countries:



Americas
17 programmes
in **3** countries

Europe
172 programmes
in **12** countries

Asia
3 programmes
in **2** countries

NGOS

MÉDECINS DU MONDE GERMANY

www.aerztederwelt.org

President : **Dr Peter Schwick**

MÉDECINS DU MONDE ARGENTINA

www.mdm.org.ar

President : **Dr Damian Verzeñassi**

MÉDECINS DU MONDE BELGIUM

www.medecinsdumonde.be

President : **Dr Claire Bourgeois**

MÉDECINS DU MONDE CANADA

www.medecinsdumonde.ca

President : **Dr David-Martin Milot**

MÉDECINS DU MONDE SPAIN

www.medicosdelmundo.org

President : **Dr Jose Fernandez**

MÉDECINS DU MONDE UNITED STATES

www.doctorsoftheworld.org

President : **Dr Glenn Fennelly**

MÉDECINS DU MONDE FRANCE

www.medecinsdumonde.org

Presidente : **Dr Florence Rigal**

MÉDECINS DU MONDE GREECE

www.mdmgreece.gr

Presidente : **Dr Hara Tziouvara**

MÉDECINS DU MONDE ITALY

<https://medicidelfmondo.it/>

Presidente : **Mme Veronica Forin**

MÉDECINS DU MONDE JAPAN

www.mdm.or.jp

President : **M. Gaël Austin**

MÉDECINS DU MONDE LUXEMBOURG

www.medecinsdumonde.lu

President : **Dr Bernard Thill**

MÉDECINS DU MONDE PAYS-BAS

www.doktersvandewereld.org

President : **Dr Hendrik Verschuur**

MÉDECINS DU MONDE PORTUGAL

www.medicosdomundo.pt

President : **Dr Abílio Antunes**

MÉDECINS DU MONDE UNITED KINGDOM

www.doctorsoftheworld.org.uk

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MÉDECINS DU MONDE SWEDEN

www.lakareivarlden.org

President : **Dr Thomas Aven**

MÉDECINS DU MONDE SWITZERLAND

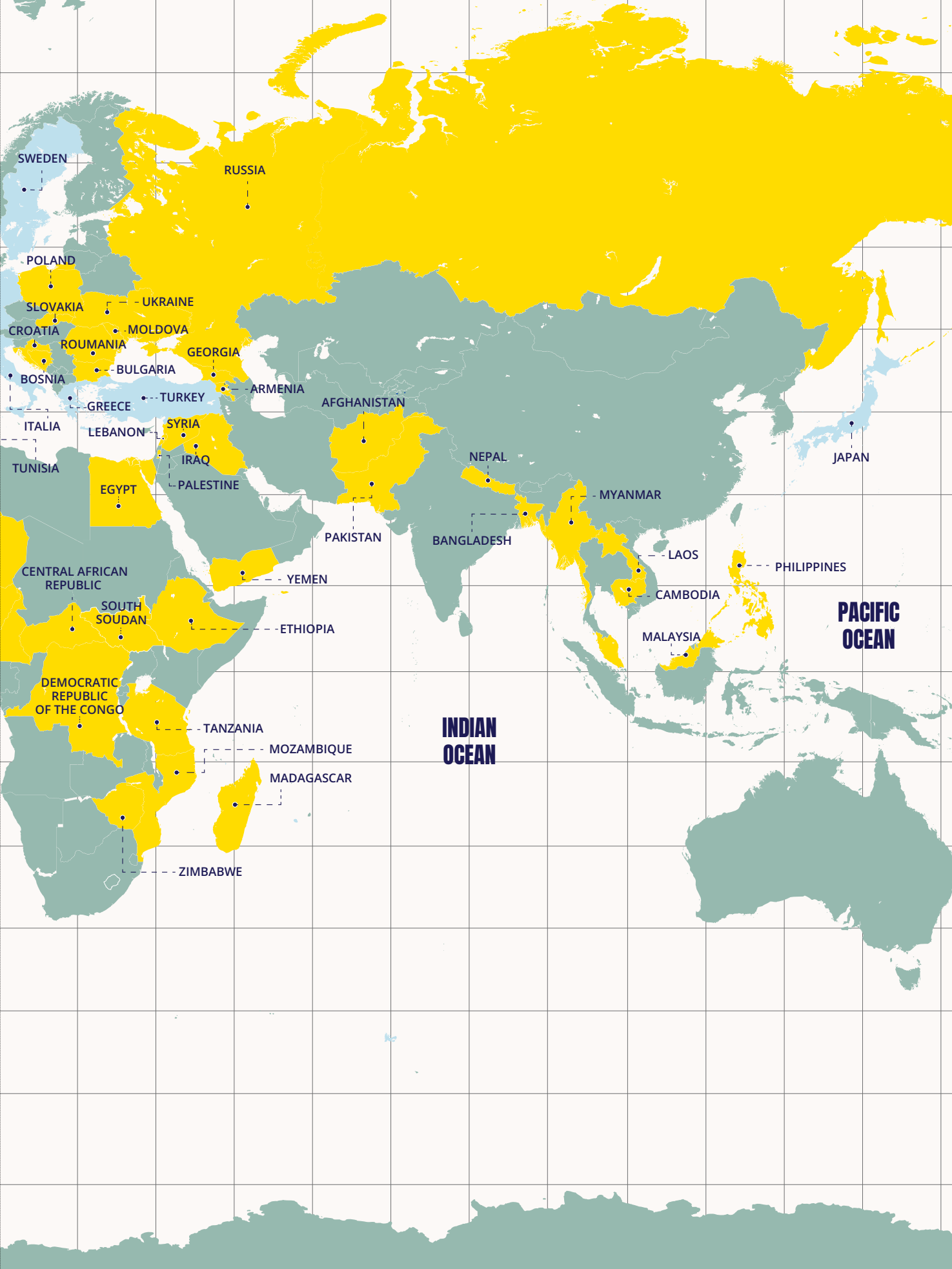
www.medecinsdumonde.ch

President : **Dr Dominik Schmid**

MÉDECINS DU MONDE TURKEY

www.dunyadoktorlari.org.tr

President : **M. Hakan Bilgin**



SWEDEN

RUSSIA

POLAND

SLOVAKIA

CROATIA

BOSNIA

ITALIA

TUNISIA

EGYPT

LEBANON

SYRIA

IRAQ

PALESTINE

GREECE

TURKEY

ARMENIA

AFGHANISTAN

PAKISTAN

NEPAL

BANGLADESH

MYANMAR

LAOS

CAMBODIA

MALAYSIA

PHILIPPINES

SOUTH SUDAN

ETHIOPIA

YEMEN

DEMOCRATIC REPUBLIC OF THE CONGO

TANZANIA

MOZAMBIQUE

MADAGASCAR

ZIMBABWE

JAPAN

INDIAN OCEAN

PACIFIC OCEAN

Médecins du Monde is committed to financial management principles.

RIGOROUS MANAGEMENT AND FINANCIAL TRANSPARENCY

Médecins du Monde is approved by the Comité de la Charte – Don en Confiance and is particularly committed to respecting the principles of this committee, including rigorous management and financial transparency.

CHECKS BY EXTERNAL BODIES

Médecins du Monde is audited by the Cour des Comptes and its accounts are certified by the statutory auditor (Mazars since 2020).

In-depth audits are carried out by public funding agencies in France (notably the Agence Française de Développement), Europe (DG Echo – the European Commission's humanitarian agency, for example) and internationally (such as the United Nations).

THE DONORS' COMMITTEE

Médecins du Monde relies on an independent donors' committee which regularly analyses and questions the organisation's work.

THE AUDIT COMMITTEE

To improve the efficiency of the organisation, an Audit Committee and an Audit Department were created in 2019. The committee is made up of members of the Board and two external experts, including its President. It facilitates decision-making by the Board and is responsible for giving its opinion on the quality of the organisation's financial information, risk management, internal control and internal audit.

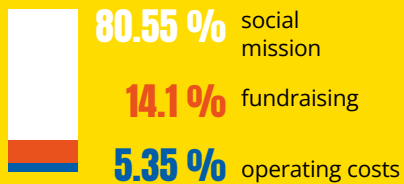
FINANCIAL SCOPE

The financial scope of Médecins du Monde France also includes financial flows with certain NGOs in Médecins du Monde's international network: MdM Germany, MdM Belgium, MdM Canada, MdM-Spain, MdM-United States, MdM-Italy, MdM-Japan, MdM-Netherlands, MdM-United Kingdom, MdM-Sweden and MdM-Turkey.

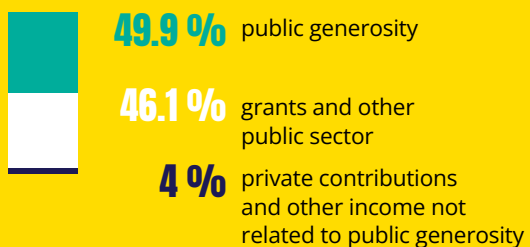
MdM's detailed financial report is available on the website: medecinsdumonde.org

EXPENDITURE/RESOURCES MÉDECINS DU MONDE FRANCE

Expenditure*



Resources *



* Excluding changes in provisions and dedicated funds

FUNDING



Links with international institutions are essential for NGOs working in the humanitarian field. These institutions are both major donors and leading political bodies. Médecins du Monde has developed partnerships with a number of institutions that enable it to influence international policy. The organisation also participates in various NGO groups that facilitate access to international decision-making bodies in order to develop advocacy on behalf of these NGOs.

EUROPEAN UNION

Among the various bodies of the European Union, the two main solidarity institutions of the European Commission are the Directorate-General for Civil Protection and Humanitarian Aid Operations (DG ECHO) and the Directorate-General for International Partnerships (DG INTPA).

- DG ECHO's mandate is to provide emergency assistance and relief to victims of natural disasters or conflicts outside the EU. DG ECHO works through almost 200 partners (European NGOs, Red Cross network, specialised UN agencies). In 2023, DG ECHO has an initial budget of €1.75 billion).
- DG INTPA's mission is to implement the external aid instruments of the European Commission, one of the main contributors to official development assistance.

Since its creation 30 years ago, the MdM network has been a major player in the VOICE collective (Voluntary Organisations in Cooperation in Emergencies), based in Brussels, the interface between European humanitarian NGOs and EU institutions (European Commission DG ECHO, European Parliament, Member States). VOICE brings together more than 80 European NGOs, including some of the largest and most influential. MdM France, on behalf of the MdM network is active in various VOICE working groups such as the Humanitarian Partnership Watch Group.

- MdM works with DG INTPA through CONCORD (European Confederation of Relief and Development NGOs.) via the French NGO collective Coordination SUD, which lobbies EU institutions and helps to develop common positions on European development policy and the major issues in North-South relations.

THE UNITED NATIONS

- The Economic and Social Council (ECOSOC) is the principal body for coordinating the economic and social activities of the United Nations and its specialised agencies and institutions. MdM's international network holds Level 1 consultative status, enabling it to carry out lobbying activities, in particular with the Commission on Human Rights. It has observer status on this subsidiary body of ECOSOC.
- MdM's international network is represented in the Office of the High Commissioner for Refugees (UNHCR), the World Health Organisation (WHO) and the United Nations Office for the Coordination of Humanitarian Affairs (OCHA).
- At the beginning of 2018, MdM was admitted as an official partner of the WHO, and we are active members of the civil society reference group working on the WHO's recommendations on viral hepatitis.
- MdM is a member of the International Council of Voluntary Agencies (ICVA), a Geneva-based network of NGOs focusing on humanitarian issues. ICVA brings together more than 150 international NGOs working in 160 countries. The network's mission is to promote and advocate more effective and ethical humanitarian action. It lobbies UN bodies on a range of issues, such as the relationship between humanitarian and military action, the protection of civilians in armed conflict, and the need to increase funding for international and national NGOs.

INSTITUTIONAL RELATIONS

THE GLOBAL FUND

The Global Fund to Fight AIDS, Tuberculosis and Malaria is a multilateral international financial institution set up in 2002 to provide grants to fight AIDS, tuberculosis and malaria. The Global Fund invested more than US\$5 billion in 2021. Overall, in countries where the Global Fund invests, the annual number of deaths from AIDS, tuberculosis and malaria has halved since the peak of the epidemics.

MdM also receives grants from l'Initiative (managed by Expertise France), additional support from France to the Global Fund.

AGENCE FRANÇAISE DE DÉVELOPPEMENT

The Agence Française de Développement (AFD), a financial institution, is part of France's official aid system for poor countries. Its mission is to contribute financially to development projects. Since 2009, AFD has had the mandate to finance French NGOs through the NGO Partnership Division (DPA-OSC), which steers the partnership with NGOs and monitors the initiatives carried out by them. As a member of Coordination SUD, MdM takes part in the various discussions between French NGOs and AFD, both on AFD's strategy and on its funding methods.

In addition to the multiannual partnership agreement, see box below, in 2022 MdM received AFD funding in Lebanon for a consortium for which MdM is lead partner. MdM also participates in a consortium in Moldova financed by the AFD. Finally, MdM is part of the "Feminist Opportunities Now (FON)" project under the responsibility of IPPF Africa, selected by AFD in 2022 as part of the French feminist funding.

LE CENTRE DE CRISE ET DE SOUTIEN

Le Centre de crise et de soutien du ministère des Affaires étrangères et du Développement international gère les crédits publics français destinés aux actions humanitaires d'urgence (Fonds humanitaire d'urgence : FUH, Fonds de stabilisation). Il dispose d'un budget de près de 200 millions d'euros en 2023. En dehors des financements, MdM est en lien stratégique et institutionnel avec le CDCS au travers de la Commission Humanitaire de Coordination SUD.

BILATERAL COOPERATION

In addition to French public funding, Médecins du Monde receives support from bilateral aid agencies. Thanks to the active participation of its network, MdM is a partner of the German Ministry of Foreign Affairs (GFFO) and the Ministry of Cooperation - BMZ (via MdM Germany from Munich), the DGD (via MdM Belgium from Brussels), World Affairs Canada (via MdM Canada from Montreal) and USAID/BHA (via MdM USA from New York). MdM also receives regular support from the Swiss Agency for Development and Cooperation (SDC), as well as from the governments of the Netherlands in Algeria and Monaco in Madagascar.

THE MULTI-YEAR PARTNERSHIP AGREEMENT BETWEEN AFD AND MÉDECINS DU MONDE

AFD has supported MdM since 2010 through a funding tool called the "Convention Programme", which focuses on the priority themes of sexual and reproductive health, which was broken down into "unwanted pregnancies" in 2017, and harm reduction, which was broken down into "access to hepatitis C treatment" in 2016.

In 2018, MdM signed a multi-year partnership agreement with the Partnership Division (CSO initiatives) with NGOs, a new four-year instrument (2018–2021). This €3.8 million multi-annual partnership agreement will co-finance around ten projects over two two-year phases, while developing cross-cutting activities to build knowledge, advocacy and awareness of the selected themes.

A second phase of this agreement was approved in 2022 for the 2022–2025 period, for a planned amount of €9.3 million. Its main objective is to improve access to health services and rights for vulnerable populations, by promoting and disseminating pilot programmes and expertise in harm reduction (focus on "sex workers"), sexual and reproductive health and rights ("cervical cancer") and health and the environment. This funding will initially cover nine projects in Africa (Algeria, Burkina Faso, Côte d'Ivoire, Ethiopia and Madagascar) and Asia (Myanmar, Nepal and the Philippines). et en Asie (Myanmar, Népal, Philippines).

BOARD

The General Assembly elects the twelve members of the Board, plus three alternates, for a three-year term. The Board elects from among its members, for a one-year term, the President and the Bureau: the Vice-President, the Treasurer and the Secretary General. The Board, the executive body of the organisation, meets monthly and takes all policy decisions for the organisation.

At the close of the Annual General Meeting on 25 June 2022, MdM elected its Board:

President:

Docteur Florence Rigal, medical doctor

Vice-President

Docteur Françoise Sivignon, radiologist, member of the Economic, Social and Environmental Council

Secretary General

Anne Guilberteau, public health trainer

Treasurer

Mustapha Benslimane, director of a medical-social establishment

The following are members of the Board:

Sophie Alary, Director of Integration Programmes, *resigned*

Marie Bécue, consultant, gender and climate, *resigned*

Paul Bolo, general practitioner, *resigned*

Bertrand Brequeville, recruitment officer

Antoine Lazarus, , doctor, honorary professor of public health and social medicine

Marc Tyrant, general practitioner

Elsa Vidal, consultant in humanitarian action and programme evaluation, assessor at the Cour nationale du droit d'asile, *resigned*

Guillaume Fauvel, regional doctor

Betty Azocar, community health consultant with the Pudahuel Health Department, Chile

Jean-François Corty, doctor employed by the City of Paris

Guillaume Pegon, octor of sociology and anthropology, clinical psychologist, *resigned*

MANAGEMENT OF MÉDECINS DU MONDE

Director General: **Joel Weiler**

Director of International Operations:

Helena Ranchal

Director of Operations France: **Yannick Le Bihan**

Financial Director: **Jennie Saint-Sulpice** Director of Purchasing, Logistics and IT

Alice Tessier

Director of Human Resources:

Fanny Martin-Born

Director of Communication

and Development: **Jean-Baptiste Matray**

Director of Health and Advocacy: **Sandrine Simon**

ORGANISATION



အတ္တလတ်
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OUR PRIVATE PARTNERS

FOUNDATIONS AND COMPANIES

Aide et Action, Americares Foundation INC, Association Escale, Association Recherche et Développement, Groupe Apicil, Arkea Banque Privée, Asinitas, Association Ouest-France Solidarité, Axa Banque, BPE, Bulgarian Fund for Women Foundation, Care, CIC, CNP Assurances, Crédit Coopératif, Crédit Mutuel, Crédit Mutuel de Bretagne, Crédit Mutuel du Sud-Ouest, Église Valdese (Chiesa Valdese), Elton John AIDS Foundation, Epsa Foundation, Fondation Abbé Pierre, Fondation d'entreprise Air France, Fondation Christiane et Francis Labbe, Fondation du Crédit Agricole Solidarité et Développement, Fondation d'entreprise Macif, Fondation d'entreprise Optic 2000-Lissac-Audio 2000, Fondation d'entreprise L'Oréal, Fondation d'entreprise MNH, Fondation du Grand Orient de France, Fondation JM. Bruneau, Fondation Léa Nature, Fondation Sternstunden, Fondation Monoprix, Fondation Roc Eclerc, Fondation Roi Baudouin, Fonds Erié via Fondation du Roi Baudouin, Fonds Inkermann, Fortuneo, Groupe Raja, Immo and You, Ivoire-Vœux solidaires.com, Groupe Kolmi Hopen, La Mutuelle Mutami, Lilo, M Comme Mutuelle, McCall MacBain Foundation, Open Society Foundation, Phantasm, SCC, Singulart SMH, Société des sports d'hiver de Russey, Stanley Thomas Johnson Foundation, the David and Lucile Packard Foundation, The Tolkien Trust, UK Online Foundation. Mais aussi Bimpli, canB, Circle Sportswear, Éthi'kdo, Ivoire, Lydia, PayPal, Run for Planet and Wedoogift.

OUR PUBLIC PARTNERS

Multilateral organisations

European Union (DG Echo, DG International Partnership), United Nations agencies (F, UNHCR, UNICEF, OCHA, WFP, WHO, IOM), Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), Unitaïd, and the START Fund.

Bilateral organisations

- **In Europe:** German Foreign Office (GFFO), German Development Ministry (BMZ), German International Development Cooperation Agency (GIZ), Monegasque Cooperation (DCI), Swiss Cooperation (SDC), British Embassy, Wallonie-Bruxelles International.
- **In France:** Agence Française de Développement (AFD), Centre de Crise et de Soutien du Ministère des Affaires Etrangères (CDCS), French Embassies, Expertise France L'Initiative.
- **Other:** American Cooperation (USAID, BHA), Canadian Cooperation (GAC)/Canadian Embassy, Ministère des Relations internationales et de la Francophonie du gouvernement du Québec, Humanitarian Coalition of Canada.
- **French regional authorities:** Conseil régional Île-de-France, Région Rhône-Alpes, Safer de l'Île-de-France, Conseil général de la Réunion, Conseil général du Val-d'Oise, Conseil général de Haute-Garonne, Conseil régional d'Alsace, Conseil régional Paca, Conseil régional Nord-Pas-de-Calais, communautés d'agglomération du bassin d'Aurillac et du Grand Angoulême, Métropole Aix-Marseille-Provence, Métropole Grenoble Alpes, Métropole de Lyon, Métropole Nice Côte d'Azur.
- **French town halls:** Ville de Paris and Ajaccio, Angoulême, Aubiac, Cayenne, Bischoffsheim, Bordeaux, Bullecourt, Charny, Chartres-en-Bretagne, Compans, Génissieux, Grenoble, Haillan, Hénin-Carvin, Jarnac, Jurançon, Keskotel, La Celle-sur-Nièvre, Lens-Liévin, Lescar, Lespinasse, Lyon, Matoury, Marseille, Mondeville, Montpellier, Nantes, Neure, Nice, Pau, Rouen, Saint-George-de-Luzencon, Saint-Laurent-des-Vignes, Strasbourg, Toulouse, Val de Vervée, Villeurbanne.

Our missions in France

Regional health agencies (ARS), departmental councils, regional councils, town halls, Caisse nationale d'assurance maladie (CNAM), caisses d'allocation familiales (CAF), caisses maladie régionales (CMR), caisses primaires d'assurance maladie (CPAM), caisses régionales d'assurance maladie (CRAM), centres communaux d'action sociale (CCAS), Centres de lutte antituberculeuse (CLAT), Centres gratuits d'information, de dépistage et de diagnostic (CeGIDD), Agence nationale pour la cohésion sociale et l'égalité des chances (Acsé), General Directorate for Health (DGS), Regional Directorates for Young People and Social Cohesion (DRJCS), Departmental directorates for social cohesion (DDCS), Institut national de la santé

ACKNOWLEDGEMENTS

et de la recherche médicale (INSERM), Permanences d'accès aux soins de santé (Pass), Direction de l'action sociale, de l'enfance et de la santé (Dases), Mission interministérielle de lutte contre les drogues et les conduites addictives (Mildeca), unions régionales des caisses d'assurance maladie (Urcam), hospitals, Guyana's social security fund (CGSS), the Mutualité sociale agricole (MSA), the French Monitoring Centre for Drugs and Drug Addiction (OFDT), the Nantes prison and remand centre, Santé Publique France (SpF), the Interministerial Delegation for Housing and Access to Housing (DIHAL).

OUR NGO PARTNERS

Act up-Paris, Aides/Coalition Plus, Amnesty International, Association Nationale d'Assistance aux Frontières des Etrangers (ANAFE), APLEAT, Association d'autosupport et de réduction des risques des usagers de drogues (Asud), Association Guyanaise de réduction des risques, Aurore, Association Douarnez, ADDSEA, Collectif d'information et de recherche cannabique (CIRC), Daleth research - Drug policy AnaLysis, Sida Paroles, Gaïa Paris, ATD Quart-Monde, Bus 31/32, Cabiria, Centre Primo Levi, CARE, Comité de Lutte Contre l'Exclusion (CLE), Coordination Française pour le Droit d'Asile (CFDA), Collectif des Associations Unies pour une nouvelle politique de logement (CAU), Cimade, collectif Romeurope, collectif Migrants Outre-Mer (MOM), collectif Alerte, Collectif Santé Mondiale, Comede, Coordination Sud, Crisis Action, Droit au logement (DAL), Emmaüs, For Alternative Approaches to Addiction Think and do tank (FAAAT), Fédération Association Laique Éducation Permanente Ajaccio (FALEPA), Fondation Abbé Pierre (FAP), Fédération Addiction (FA), Fédération des Associations pour la Promotion et l'Insertion par le Logement (FAPIL), Fédération Internationale des ligues des Droits de l'Homme (FIDH), Fédération des Acteurs de la Solidarité (FAS), Fédération parapluie rouge, Générations Féministes, Global Health Advocates (GHA), Groupe d'Information et de Soutien des Immigrés (Gisti), Groupe de recherche et d'études cliniques sur les cannabinoïdes, Ithaque, Keep smiling, Korzeam, Médecins Sans Frontière France, Ordre de Malte, les Amis du bus des femmes, les Restos du cœur, Les Roses d'Acier, Association PALOMA, Ligue des Droits de l'Homme (LDH), Observatoire du Droit à la Santé des Etrangers (ODSE), Observatoire international des prisons (OIP), Oppelia, Pause Diabolo, Pathfinder international, IPAS, Association Penelope, Pharmacie humanitaire internationale (PHI), Plateforme contre la traite des êtres humains, Plateforme de Service aux Migrants (PSM), Police Contre la Prohibition, Principes Actifs,

Sauvegarde 71, Secours Catholique, Solidarité Sida, Sidaction, SOS Addictions, Groupe SOS, Syndicat de la Magistrature, Syndicat des Avocats de France, Syndicat du TRAVail Sexuel (Strass), Techno Plus, Transat, UNIOPSS, Acceptess-T, ARCAT, le Collectif des Femmes de Strasbourg Saint-Denis, Association SAFE, Center for Reproductive Rights, International Network of People who Use Drugs (INPUD), Harm Reduction International (HRI), International Drug Policy Consortium (IDPC), HIV/AIDS Sector of the United Nations Office on Drugs and Crime, Autres Regards, Griséliadis, Equipop, Mouvement français pour le planning familial, Tous Migrants, Refuge Solidaire, Utopia 56, Kesha Niya, as well as many regional and local partners in the countries where we work.

OUR EUROPEAN PARTNERS

World Health Organization (WHO), Platform for International Cooperation on Undocumented Migrants (PICUM), European Patient Forum (EPF), European Anti-Poverty Network (EAPN), European Federation of National Organisations working with the Homeless (FEANTSA), European AIDS Treatment Group (EATG), European Association for Human Rights (AEDH), European Network against Racism (ENAR), European Network of People Who Use Drugs (EuroNPUD), European Public Health Association (EUPHA), Confederation of Family Organisations in the European Union (COFACE), International Lesbian Gay Association (ILGA), European Policy Centre (EPC), Health Action International (HAI), Social Platform, Eurochild, EPIM/ NEF, Women Political Leaders (WPL) global forum and Migreurop.

ALL OUR OTHER PARTNERS AS WELL AS THOSE WHO HAVE SUPPORTED US BY MAKING A BEQUEST OR LIFE INSURANCE POLICY TO SUPPORT OUR ACTIONS IN FRANCE AND ABROAD IN 2022, NOT FORGETTING OUR INDIVIDUAL DONORS.

PROJECT COORDINATION

Thomas Flamerion

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Animal Pensant

DRAFTING SECRETARIAT

Pauline De Smet

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CommeQuoi?

PRODUCTION

Estimprim

Printed on 100% FSC-certified recycled paper

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Cover © **Gert Jochems** - Agence VU'

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MÉDECINS DU MONDE

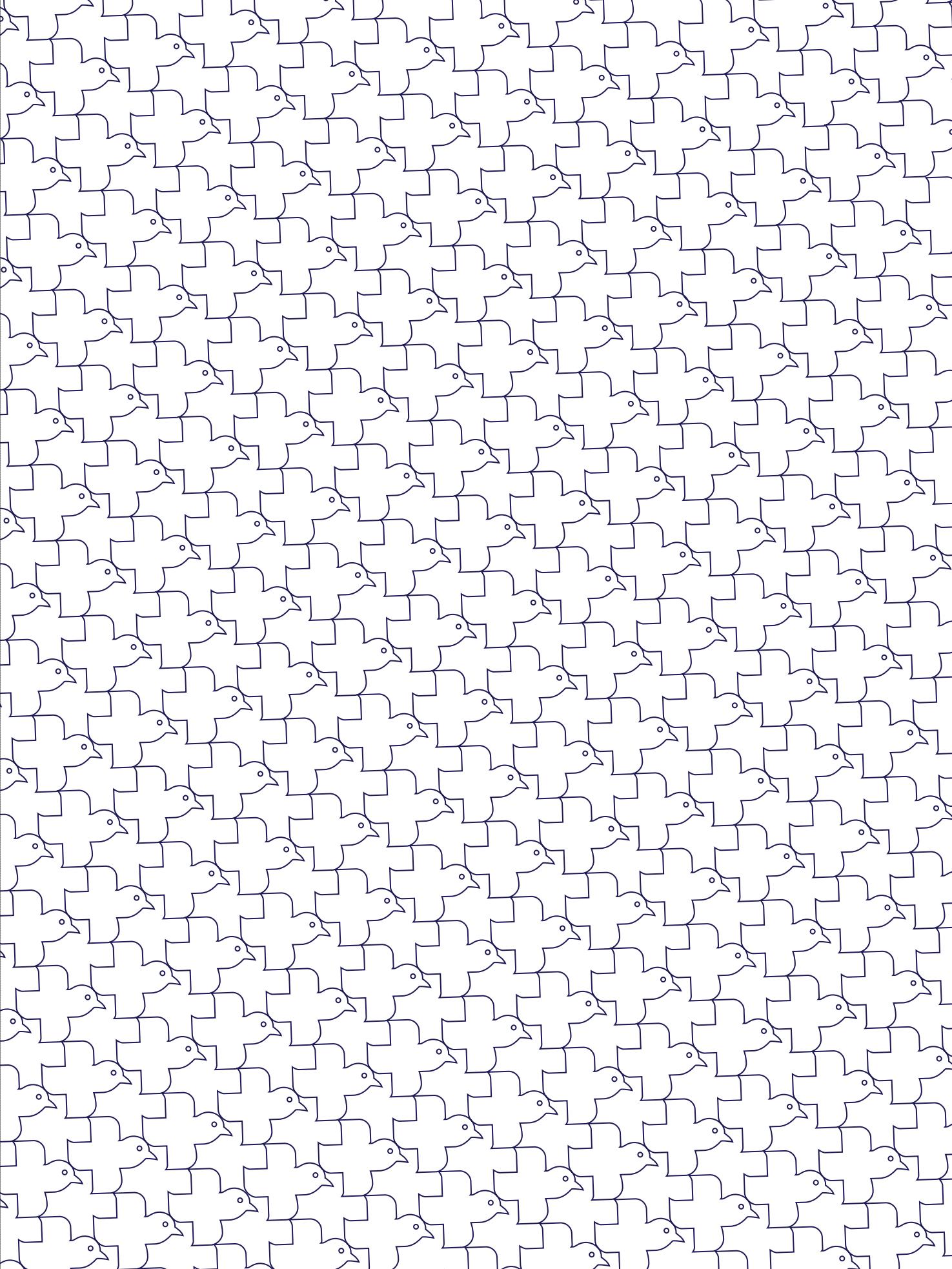
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 **MdM_France**





**ALSO CARING
FOR INJUSTICE**