



30
YEARS

EMERGENCY
MEDICINE, HUMAN RIGHTS AND EQUALITY

REPORT
1994-2023

EMERGENCY

IS AN INDEPENDENT NON-GOVERNMENTAL ORGANISATION. IT PROVIDES FREE, HIGH-QUALITY MEDICAL AND SURGICAL TREATMENT TO VICTIMS OF WAR, LANDMINES AND POVERTY. IT PROMOTES A CULTURE OF PEACE, SOLIDARITY AND RESPECT FOR HUMAN RIGHTS.

SINCE 1994, EMERGENCY HAS WORKED IN 20 COUNTRIES AROUND THE WORLD, PROVIDING FREE MEDICAL CARE IN ACCORDANCE WITH ITS CORE PRINCIPLES:

EQUALITY, QUALITY AND SOCIAL RESPONSIBILITY.

BETWEEN 1994 AND 2023

EMERGENCY PROVIDED FREE TREATMENT TO

**OVER
13 MILLION
PEOPLE.**

A RACE AGAINST TIME



by **ROSSELLA MICCIO,**
PRESIDENT OF EMERGENCY

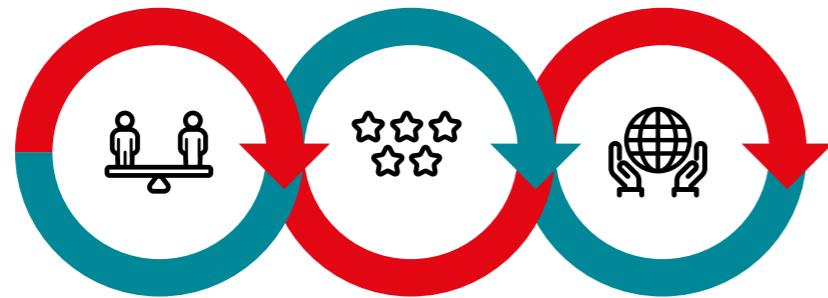
Wars and massacres, climate and humanitarian crises, borders where human beings and our humanity are wrecked, currents of new autocracies and old extremisms. The list could go on, and with a common denominator: the loss of meaning, of direction, of our foundations.

2023 began with a spotlight on the war in Ukraine and ended with the start of at least two more serious conflicts. In April, the eyes of the world briefly focused on Sudan, but soon turned away despite the spiralling humanitarian crisis, which includes the highest number of displaced people in the world: more than 10 million. The war also overwhelmed our activities in the country, but our colleagues, whom I thank profoundly for their humanity and professionalism, enabled us to provide continuity of care for our patients and even open new projects. We, who were present in the country to implement an innovative model of healthcare of excellence, found ourselves expanding the criteria for admission to war surgery, a field that has characterised our identity in other places. Like Afghanistan, where, despite the formal conclusion of hostilities, the consequences of 40 years of constant warfare mean our presence is still necessary to guarantee access to life-saving treatment and professional training, and also to protect the human rights of women and men crushed between international neglect and local obfuscation. Human rights that are increasingly being treated as privileges everywhere around the world.

In 2023, our search and rescue ship *Life Support* sailed to defend the right to life and denounce the institutional vacuum that has normalised death and inequality through the legalisation of inaction. This year has been a race against time and, in fact, a race 'inside' wartime. A time in which fundamental humanitarian principles are subverted, hospitals, schools, shelters are bombed with impunity, weapons drown out voices, like ours, calling for a "Ceasefire now." As I write this letter, we are preparing to celebrate the 30th anniversary of EMERGENCY's founding, at a time when it is more urgent than ever to give peace back its fullest meaning, freed from the polarisations of 'with me or against me,' because the only certainty of war is its victims, who - 9 times out of 10 - are civilians. We know this truth well, and that is why we do not resign ourselves to accepting it. In our hospitals, in our classrooms, in our squares, we demonstrate every day that it is possible to find time for peace, to find meaning, beyond our borders, in unity and equality.

Thanks to all those who continue to make EMERGENCY more than an anonymous collective, but a proactive community of people who tread an ethical and practical path of caring for others. ○

OUR PRINCIPLES



Equality

Every human being has the right to treatment, regardless of their social background, economic situation, gender, ethnicity, language, religion or opinions. The new and better treatments made possible by progress and advances in medical science must be available to all patients, on an equal basis and without discrimination.

Quality

High-quality healthcare systems must be based on every individual's needs and follow new advances in medical science. They cannot be steered, organised or defined by those with financial interests in the healthcare industry.

Social Responsibility

Governments must make the health and wellbeing of their citizens a priority. They must set aside the human and economic resources necessary to this end. **The healthcare services that governments and humanitarian organisations provide must be free and available to all.**

FROM THE 'MANIFESTO FOR A HUMAN RIGHTS-BASED MEDICINE'.
SAN SERVOLO, VENICE, 2008.

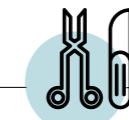
OUR WORK

MEDICINE



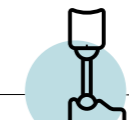
- ✓ OUTPATIENT CLINICS
- ✓ CARDIOLOGY
- ✓ PRIMARY MEDICINE
- ✓ GENERAL MEDICINE
- ✓ NEONATOLOGY
- ✓ OBSTETRICS AND GYNAECOLOGY
- ✓ PAEDIATRICS
- ✓ DENTISTRY
- ✓ PSYCHOLOGICAL SUPPORT

SURGERY



- ✓ CARDIAC SURGERY
- ✓ PAEDIATRIC CARDIAC SURGERY
- ✓ WAR SURGERY
- ✓ EMERGENCY AND TRAUMA SURGERY
- ✓ GENERAL SURGERY
- ✓ ORTHOPAEDIC SURGERY
- ✓ GYNAECOLOGICAL SURGERY
- ✓ PAEDIATRIC SURGERY

REHABILITATION AND SOCIAL REINTEGRATION



- ✓ PHYSIOTHERAPY
- ✓ PRODUCTION OF PROSTHESES AND ORTHOSES

SOCIO-MEDICAL SUPPORT



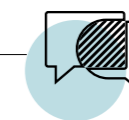
- ✓ MEDICAL EDUCATION
- ✓ HEALTH PROMOTION
- ✓ CULTURAL MEDIATION
- ✓ SUPPORT AND GUIDANCE WITH HEALTHCARE RIGHTS

SEARCH AND RESCUE IN THE MEDITERRANEAN SEA



- ✓ SAVING LIVES AT SEA
- ✓ WELCOMING AND TREATING RESCUED PEOPLE ON BOARD

PROMOTING A CULTURE OF PEACE



- ✓ PUBLICATIONS AND MULTIMEDIA PROJECTS
- ✓ EVENTS AND PUBLIC INITIATIVES

HOW WE WORK



OUR WORK OFTEN BEGINS IN EMERGENCIES, BUT IT IS ALWAYS CARRIED OUT WITH A VIEW TO SUSTAINABILITY IN THE LONG TERM.



HEALTH AS A HUMAN RIGHT

We believe that medical treatment is a fundamental human right and should be recognised as such for every individual. For treatment to be truly accessible, it must be completely free of charge; for it to be effective, it must be of high quality.



WORKING TOGETHER WITH LOCAL AUTHORITIES

We always make clear agreements with local authorities to define our task in the country, and our reciprocal roles and responsibilities. Our ultimate goal is to get local government to take over our facilities and give their citizens the right to treatment.



DESIGNING AND BUILDING HOSPITALS

We build the hospitals we work in, so that we can guarantee the highest level of treatment possible. Right from the planning stage, our aim is to create an environment that is efficient for our staff to work in and comfortable for our patients.



DIGNITY AND BEAUTY

Each of our hospitals has a garden, a children's play area and somewhere patients can mingle. Our hospitals are beautiful as well as functional, because beauty is a sign of respect and dignity.



ENVIRONMENTAL SUSTAINABILITY

We use alternative energy sources, and environmentally friendly solutions for rubbish disposal. We limit our running costs and respect the environment, whether we are in Kabul or Khartoum.



FOOD

We give our patients and their families three meals a day. We provide around 125,000 free meals a month in countries where, even in hospitals, food isn't free.



TRAINING

We support local staff with practical and theoretical training in all our projects. Our training work has been recognised by several ministries of health in the countries we work in. Training takes place with a view to sustainability in the long term: by supporting the independence of local staff, we can eventually hand over the hospital to local authorities and contribute to strengthening the health system.





On 15 April 2023, war broke out in Khartoum. That Saturday morning, armed clashes between the Sudanese government army and the paramilitary Rapid Support Forces (RSF) interrupted every possible attempt at a democratic transition initiated since the removal of Omar Al-Bashir. Beginning in the capital, house-to-house fighting and air strikes have intensified and reached other areas, like the provinces of Darfur and Kordofan.

Despite the catastrophic consequences for the Sudanese population, the conflict in Sudan stopped attracting international media attention within weeks. Between the outbreak of war and December 2023, the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) recorded 12,000 deaths and more than 7.2 million displaced people, about half of them children: a neglected crisis that has led to more than 24 million people in need of humanitarian assistance. The war has also taken a heavy toll on our work. Because of fighting in the area, we have been forced to indefinitely suspend activities at the Mayo Paediatric Centre, opened in 2005 on the outskirts of Khartoum: a painful decision considering that the Centre is the only free paediatric facility for the area's more than 300,000 inhabitants, over half of whom are under 14 years old.

In recent months, we have faced numerous obstacles to ensure continuity of care in our hospitals and health centres. From the start, we have managed shortages of blood and its components, a scarcity of medicines and fuel, and an inability to ensure the necessary staff turnover due to the difficulties of obtaining visas.

THE SALAM CENTRE FOR CARDIAC SURGERY IN KHARTOUM

When fighting began, many colleagues – both Sudanese and international – left the country, but many remained. Doctors, surgeons, nurses and residents continued to work to sustain activities at the *Salam* Centre and essential follow-up services for post-operative patients.

We have continued to guarantee an average of 167 cardiology examinations per month, without ever interrupting activities and conducting over 1,000 total throughout the year. Cardiac surgeries were performed on 165 patients, 19 of whom were treated under the Regional Programme – later suspended due to the inability to guarantee transportation for patients. These are significantly lower figures than the pre-war monthly averages, mainly because patients are unable to reach the hospital safely.

The Outpatient Clinic for anticoagulant therapy at the *Salam* Centre also remained open, ensuring the continued monitoring of post-operative patients' coagulation status, free provision of medications, and routine follow-up visits. Since the start of hostilities, we have managed to conduct around 8,400 outpatient consultations.

Through an extensive communication and screening network, the Outpatient Clinic at the *Salam* Centre also analysed the blood coagulation tests conducted in our Centres in Port Sudan and Nyala (Sudan), and Goderich (Sierra Leone), as well as those conducted in the Cardiology Outpatient Clinics in Wad Madani and Atbara (Sudan), which were opened after the conflict began. In 2023, more than 10,000 tests were analysed.



CARDIOLOGY OUTPATIENT CLINICS

In August 2023, we opened two Cardiology Outpatient Clinics to provide pre-operative examinations, follow-up visits and anticoagulant therapy for cardiology patients unable to reach the *Salam* Centre. The first Outpatient Clinic was opened in Wad Madani (Gezira State, south-east Sudan) and the second in Atbara (River Nile State, north-east Sudan).

Since August, thanks to rapid word-of-mouth information sharing, more than 400 patients have been supported in Atbara and more than 2,600 outpatient consultations conducted in Wad Madani. Together, the Clinics have monitored 2,100 anticoagulation therapy patients. In December, due to increased fighting in the Wad Madani area, the Clinic was closed and the staff evacuated.

CENTRE FOR EMERGENCY AND TRAUMA SURGERY

In response to increasing needs and the inoperability of 70% of the country's health facilities, we opened a Centre for Emergency and Trauma Surgery in two temporarily disused buildings within the *Salam* Centre complex. In the guest house, which we had used to provide accommodation for relatives of patients from abroad, we constructed an emergency room able to accommodate six patients, an eight-bed sub-intensive care unit, and two operating theatres. The cafeteria was converted into a 24-bed ward for inpatients.

Opened in August and closed in November due to operational constraints, the Centre treated urgent surgical and trauma cases with both war and civilian causes while giving priority to women and children, who make up some of the most fragile and vulnerable groups exposed to the conflict. During these months, we treated about 580 people.

NYALA PAEDIATRIC CENTRE

In South Darfur, our Centre was one of the few health facilities that remained open since the beginning of hostilities, providing paediatric care for children up to 14 years of age and guaranteeing cardiological monitoring and anti-coagulant therapies for patients operated on at the *Salam* Centre. Although it is a paediatric facility, early in the conflict it received war-wounded patients who were admitted and stabilised. Security conditions began to worsen by the end of the summer, plummeting on 25 October when some of our Sudanese colleagues were arrested by the RSF. Five days later they were released, but in the meantime the Paediatric Centre had been looted, medicines and equipment stolen, windows and doors smashed, and rooms vandalised. Unable to guarantee the security of both staff and patients, alongside the inadequate condition of the facility, we were forced to suspend clinical activities.


PORT SUDAN PAEDIATRIC CENTRE

In 2023, Port Sudan was largely spared from fighting and became the de facto capital of the country. This Paediatric Centre received 60% more patients than in 2022 due to the massive movement of the population out of areas affected by fighting and into Port Sudan. At least 270,000 displaced people seeking protection or waiting to cross the border have found refuge in the city. Our Centre has also become the arrival point for international supplies and personnel. From here, onward transport to Khartoum is via road - the only way to reach the capital.


On the morning of 15 April 2023, armed clashes broke out in Khartoum between the Sudanese government army and the paramilitary Rapid Support Forces. EMERGENCY's activities in Sudan were immediately restructured. The Paediatric Centre in Mayo was closed.

April 2023
Salam Centre for Cardiac Surgery, Khartoum

"These are extremely difficult and tense days in Khartoum. We have decided to stay here for the patients being treated in our hospital, we cannot abandon them because their lives would be at risk. Many Sudanese colleagues are also not going home, they are staying overnight in the hospital for security reasons."




Franco Masini,
Medical Coordinator



Laura Ena,
Medical Coordinator

April 2023
Nyala Paediatric Centre

"With the outbreak of the conflict, we did our best to stabilise the most seriously wounded who came to us, despite the fact that our facility is for paediatrics and not a surgical centre. On the night of 15 April, we used the hospital basement to shelter all the staff, the children and their mothers. For an entire week, we slept and ate inside the facility. Despite the uncertainty caused by the conflict, our Sudanese colleagues always assured us of their presence and the ability to continue clinical activities."



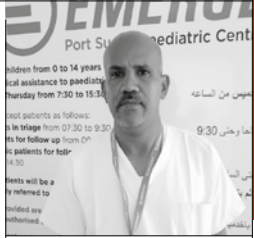
Elena Giovannella,
Anaesthetist

June 2023
Salam Centre for Cardiac Surgery, Khartoum

"When fighting broke out, blood and blood component reserves were among our first concerns. In a war setting, we feared that the difficulties and dangers in moving would discourage donors. Fortunately, many people came to donate. Colleagues, Soba residents, ordinary people who, despite the fighting and the scorching heat, came to the Salam Centre to donate blood."

July 2023
Port Sudan Paediatric Centre


"The war has drained all economic resources, the population is losing everything and more and more children are in need of primary care and vaccinations. Parents know that in our Centre, their children can receive these services free of charge. Most of the patients we visit suffer from sickle cell anaemia or respiratory diseases, made even more acute by the heat. Since the beginning of the conflict, staff have registered around 60 paediatric patients a day, on Sundays often even more than 100, a number of arrivals that has doubled since last year. This is because Port Sudan has become a hub for thousands of displaced people waiting to leave the country and reach Egypt or Saudi Arabia."



Motassim Bakrri
Siddig, Medical Coordinator


September 2023
Centre for Emergency and Trauma Surgery, Khartoum

"This war does not stop. Every day we see the wounded arriving, the burn victims, civilians in worse and worse condition, young patients on whom we have to perform amputations to save their lives, or with life-long neurological injuries. In the past few days, we received a former patient who was operated on years ago at the Salam Centre for Cardiac Surgery. He is a young man who periodically came to the Centre for cardiology examinations and anticoagulant therapy. We had to amputate his foot."



Gina Portella,
Medical Coordinator

© Davide Preti



Nassir Ahmed Ibrahim,
Deputy Country Director in Sudan

September 2023
Centre for Emergency and Trauma Surgery, Khartoum

"I am afraid for my country and my people. The international community cannot ignore what is happening, it must raise a cry of condemnation to stop this war that has led to the highest number of refugees and displaced people in the history of Sudan. My hope is that we start rebuilding what has been destroyed, starting with hospitals and schools."

October 2023
Nyala Paediatric Centre


Our colleagues who were arrested last week at the Paediatric Centre in Nyala, South Darfur, have all been released with apologies from the Rapid Support Forces. They are shaken, but all are well. The premises and equipment have been damaged, but above all the situation has risked the safety of our Sudanese colleagues, who have been running the hospital autonomously for the last two months in order to guarantee necessary care for children, mothers and cardiac patients in Nyala and neighbouring areas. Even in war, the right to care must be guaranteed.

EMERGENCY statement

December 2023
Wad Madani Cardiology Outpatient Clinic

EMERGENCY has been forced to evacuate non-resident staff at its Cardiology Outpatient Clinic in Wad Madani and suspend the facility's activities due to intensified fighting in the city, capital of Gezira state. Since the beginning of the war, it has become increasingly difficult to provide humanitarian assistance to the population because there is no guarantee of the safety of healthcare facilities and staff.

EMERGENCY statement




Manahel Bader,
Head Nurse

December 2023
Salam Centre for Cardiac Surgery, Khartoum

"The situation in Sudan is disastrous. The roads are dangerous. The majority of private and public health facilities have closed due to lack of supplies and personnel. Khartoum is practically isolated. Before, people used to die in so many ways, mainly from untreated diseases. Now people also die from armed clashes. We would just like to return to a normal life."

EMERGENCY, Milan Office
Field Operations Department

"It has been a very difficult year for Sudan and for the national and international colleagues who, with great determination, have remained. Without them, we would not have been able to continue doing what we have always done: bringing care to victims of conflict around the world."



Roberto Crestan,
ANME Area Director



The absence of a coordinated European search and rescue operation, and of legal and safe access routes for those seeking protection and a decent future, leads to thousands of deaths every year. According to UNHCR, 2023 was the deadliest year in the Mediterranean since 2017. At least 2,500 people lost their lives during the crossing, almost 1,000 more than in 2022.

Yet, Europe continues to enact policies to externalise its borders, outsourcing responsibility to countries with records of human rights violations, and to criminalise the efforts of NGOs involved in search and rescue at sea.

A Memorandum of Understanding (MoU) signed between the European Union (EU) and Tunisia in July outsources the management of migration flows to the latter despite deteriorating conditions for migrants. An MoU between Italy and Albania, signed in November, allows for migrants rescued by Italian authorities to be detained in Albania, which is not a member state of the EU and therefore not bound by its humanitarian principles or regulations. Ultimately, it works to prevent migrants from setting foot on Italian – and therefore European – soil, and thus limit asylum requests.

In 2023, Italy in particular has passed laws that restrict humanitarian space in the Mediterranean. The very first legislative act of the year, known as the Piantadosi Decree, regulates the conduct of NGOs at sea, including a requirement to immediately proceed to an assigned port of disembarkation after a rescue – effectively preventing the ships from performing multiple rescues during one mission. The Decree's requirements may result in violations of the collective obligation under international maritime law to intervene in distress cases, yet penalties include fines up to 50,000 euros and extended detentions.

At the same time, under the pretext of relieving Sicily from the burden of arrivals, Italian authorities have begun assigning distant ports of disembarkation to NGO ships, far from where rescue operations take place.

On 25 February 2023, more than 90 people died near Cutro, in southern Italy, in one of the deadliest shipwrecks off the Italian coast since the Lampedusa tragedy in 2013. Despite great public outcry and widespread media attention, neither the Italian government nor the European Union have taken any measures to prevent this kind of event from happening again.

Instead, in the aftermath of the shipwreck the Italian government introduced the “Cutro Decree,” which reduces special protections, extends the length of detention, and introduces new penalties for irregular migration – inevitably weakening legal conditions for foreigners and their right to claim asylum. In December, the Immigration-Security Decree asserted the right of authorities to order invasive examinations to verify the age of unaccompanied minors who have allegedly lied about their identity, and called for their deportation. In the event that accommodation facilities for minors are full, those over 16 may be transferred to adult facilities.

Against this backdrop, *Life Support* – our own search and rescue vessel – carried out 15 missions and rescued 1,219 people in 2023.

On each of its missions, *Life Support* sailed for about three days to reach the assigned port of disembarkation, covering an average of 630 nautical miles. Due to distant port assignments, the ship travelled around 22,600 extra kilometres in one year, resulting in additional navigation costs of almost one million euros and, more importantly,

delaying its return to the search and rescue (SAR) region. Fewer ships in SAR regions means a lower chance that people in distress will be rescued, and fewer witnesses to the frequent human rights violations in the Mediterranean, such as collective refoulements (prohibited by the European Convention on Human Rights) to Libya and Tunisia. In 2023, only about 8% of arrivals in Italy were disembarked by humanitarian ships, yet these restrictive measures and practices have contributed to misinformation, spread hostility among the public, and limited the political response to migration to the criminalisation of NGOs.

“Here at sea, we are witnessing the real migration emergency: pushbacks to Libya, shipwrecks, the absence of institutions on the world’s deadliest migration route... It is as if the Mediterranean were a war zone,” says Emanuele Nannini, *Life Support*'s Head of Mission.

The people we rescued during 2023 fled from wars, torture, poverty, and the effects of climate change, only to find themselves victims of the effects of European border externalisation policies. In the absence of safe routes, they are forced to rely on traffickers, travelling in precarious boats: we have intercepted vessels made of fibreglass, wood, and iron that burns skin under the scorching sun; make-shift boats that were taking on water by the time of rescue.

We are not always able to find the reported distress cases. On 24 May, Alarm Phone alerted us to a boat in distress in the Maltese SAR region with 500 people on board, including a baby born the night before. The boat had left from Cyrenaica, Libya, but was later intercepted and returned to Benghazi.

Since the first mission, our search and rescue operations have mostly taken place in the Maltese and Libyan SAR regions. In four out of eight rescues in the Libyan SAR region, we were approached by unidentified vessels that performed intimidating manoeuvres towards *Life Support*. We carried out 16 rescue operations off the coast of Malta, which never responded to our requests for rescue coordination under the relevant maritime conventions. We conducted 11 rescue operations in coordination with the Italian Maritime Rescue Coordination Centre (MRCC), some during the same mission.

The search phase is followed by coordination and communication of rescue intentions to the competent authorities. While the team on board constantly monitors the horizon with binoculars, two rigid-hulled inflatable boats (RHIBs) equipped for rescue are deployed to reach the coordinates of the distress case: during the approach, the RHIBs assess the vessel's condition and potential medical emergencies or panic. The cultural mediators have a crucial role to maintain calm among the survivors. They are the first point of contact between the people in distress and the rescue team and, by communicating with the survivors, must help to make the rescue process as safe as possible: first the announcements in English, French and Arabic to remain calm and be mindful of women, children and possible emergencies; then the distribution of life jackets, transfer to the RHIBs and boarding of *Life Support*.

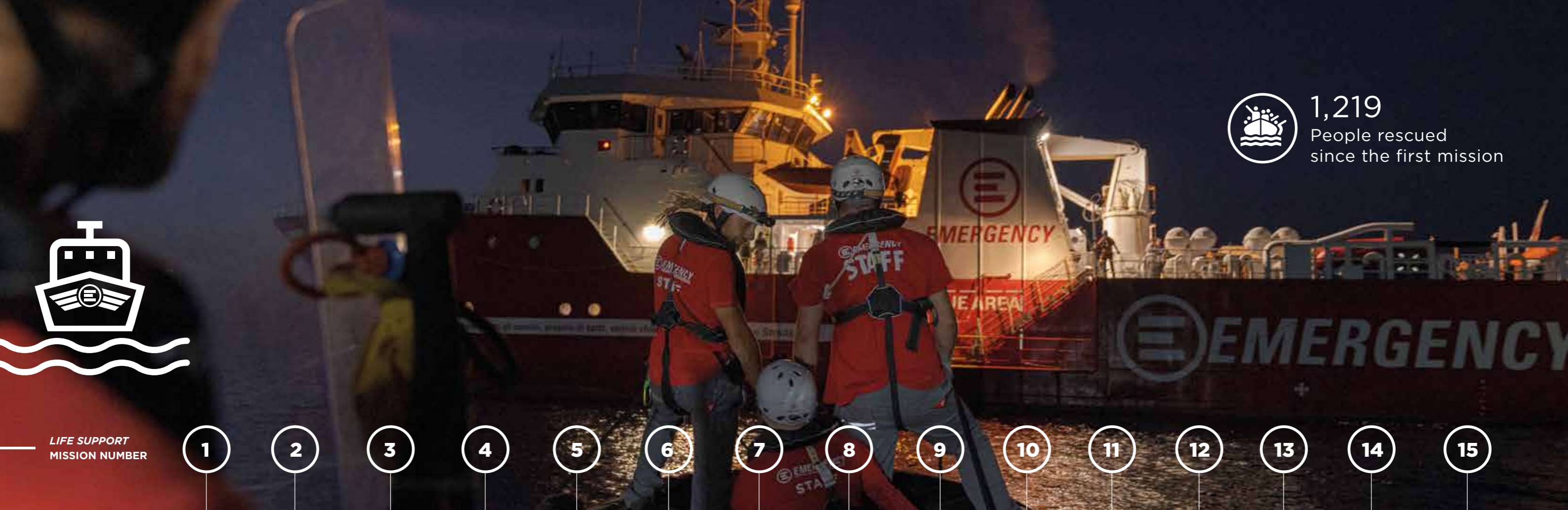
The team on board our ship awaits the survivors on the boat deck, where they are provided blankets, identification bracelets, and go through a triage process to identify healthcare needs. Once triage is complete, the rescued

people reach the main deck, a sheltered area that serves as a dormitory. Water and meals are distributed here: 12,000 in 2023.

The management of stress and identification of psychological and physical vulnerabilities continues on board *Life Support*.

Passengers are examined by our doctors and nurses in the on board outpatient clinic, equipped to provide basic care and advanced first aid with equipment such as syringe pumps, heaters and ventilators. In the first 15 missions, we examined 112 patients, including 32 women and 20 under the age of 18. The main reasons for treatment in the clinic were burns, physical trauma, infectious diseases, skin conditions, and gynaecological and obstetrical needs. Dehydration, malnutrition, post-traumatic stress and insomnia were also frequently seen.

41% of the people rescued by *Life Support* came from Bangladesh, Syria, Côte d'Ivoire and Egypt; 272 were minors, including 216 unaccompanied, and 101 were women, of whom seven were pregnant.



1,219
People rescued
since the first mission



LIFE SUPPORT
MISSION NUMBER

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Mission start date	13/12/22	09/02/23	28/02/23	22/03/23	13/04/23	28/04/23	07/05/23	22/05/23	18/07/23	08/08/23	18/08/23	19/09/23	05/10/23	07/11/23	16/11/23
Mission end date	22/12/22	19/02/23	10/03/23	28/03/23	19/04/23	03/05/23	13/05/23	05/06/23	24/07/23	14/08/23	23/08/23	25/09/23	10/10/23	11/11/23	23/11/23
Days at sea	9	10	10	6	6	5	7	14	6	6	5	6	5	4	7
Rescue operations	2	2	1	3	1	1	0	1	4	1	1	1	3	2	1
People rescued	142	156	105	161	55	35	0	29	184	76	40	28	69	118	21
Unaccompanied minors	26	28	24	52	3	1	0	0	47	16	2	1	11	4	1
Port	LIVORNO	CIVITAVECCHIA	BRINDISI	ORTONA	MARINA DI CARRARA	LIVORNO	AUGUSTA (Return due to bad weather)	MARINA DI CARRARA	TARANTO	NAPOLI	ORTONA	LIVORNO	RAVENNA	BRINDISI	MARINA DI CARRARA

OUR PROJECTS AROUND THE WORLD

ITALY

- SINCE 2010** – Clinic and social/psychological support, MARGHERA (VE)
- SINCE 2012** – Mobile Clinic and social/psychological support, ROSARNO (RC)
- SINCE 2014** – Socio-medical clinic, CASTEL VOLTURNO (CE)
- SINCE 2015** – Clinic and social/psychological support, NAPLES
- SINCE 2015** – Mobile Clinic and social/psychological support, MILAN
- SINCE 2016** – Clinic and socio-medical support and information point, SASSARI
- SINCE 2016** – Socio-medical support and information point, BRESCIA
- SINCE 2018** – Mobile Clinic and social/psychological support, MARINA DI ACATE, SANTA CROCE CAMERINA (RG)
- SINCE 2020** – “Nobody Left Behind” social project to help disadvantaged people, MILAN
- SINCE 2022** – Socio-medical support, VITTORIA (RG)
- SINCE 2023** – Social/psychological and administrative support to the flood-affected community, FAENZA (BO) (project ended December 2023)

IRAQ

SINCE 1998 – Rehabilitation and Social Reintegration Centre, SULAYMANIYAH

AFGHANISTAN

- SINCE 1999** – Surgical and Paediatric Centre, ANABAH
- SINCE 1999** – 42 First Aid Posts and Primary Healthcare Centres in 11 of the country’s provinces
- SINCE 2001** – Surgical Centre for War Victims, KABUL
- SINCE 2003** – Maternity Centre, ANABAH
- SINCE 2004** – Surgical Centre for War Victims, LASHKAR-GAH

SUDAN

- SINCE 2005** – Paediatric Centre, MAYO, KHARTOUM (activities discontinued April 2023)
- SINCE 2007** – *Salam* Centre for Cardiac Surgery, KHARTOUM
- SINCE 2011** – Paediatric Centre, PORT SUDAN, RED SEA STATE
- SINCE 2020** – Paediatric Centre, NYALA, SOUTH DARFUR STATE (activities discontinued October 2023)
- SINCE 2023** – Centre for Emergency and Trauma Surgery, KHARTOUM (activities discontinued November 2023)
- SINCE 2023** – Cardiology Outpatient Clinic, WAD MADANI, GEZIRA STATE (activities discontinued December 2023)
- SINCE 2023** – Cardiology Outpatient Clinic, ATBARA, RIVER NILE STATE

ERITREA

SINCE 2019 – Cardiology clinic at *Orotta Hospital*, ASMARA

UGANDA

SINCE 2021 – Children’s Surgical Hospital, ENTEBBE

SIERRA LEONE

SINCE 2001 – Surgical Centre, GODERICH

MEDITERRANEAN SEA

SINCE 2022 – Maritime search and rescue ship *Life Support*



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OTHER COUNTRIES WE HAVE WORKED IN

ALGERIA, ANGOLA, CENTRAL AFRICAN REPUBLIC, CAMBODIA, LIBYA, MOLDOVA, NEPAL, NICARAGUA, PALESTINE, RWANDA, SERBIA, SRI LANKA, YEMEN.

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PATIENTS TREATED AS PART OF OUR REGIONAL PROGRAMME FOR CARDIAC SURGERY HAVE COME FROM: AFGHANISTAN, BANGLADESH, BURKINA FASO, BURUNDI, CAMEROON, CENTRAL AFRICAN REPUBLIC, CHAD, DEMOCRATIC REPUBLIC OF THE CONGO, DJIBOUTI, ERITREA, ETHIOPIA, GAMBIA, GUINEA, IRAQ, ITALY (ITALIAN CITIZENS TEMPORARILY RESIDENT IN SUDAN), JORDAN, KENYA, LIBERIA, LIBYA, NIGERIA, PHILIPPINES, RWANDA, SENEGAL, SIERRA LEONE, SOMALIA, SOUTH SUDAN, SUDAN, TANZANIA, TOGO, UGANDA, YEMEN, ZAMBIA, ZIMBABWE.

7

PATIENTS TREATED AS PART OF OUR REGIONAL PROGRAMME FOR PAEDIATRIC SURGERY HAVE COME FROM: AFGHANISTAN, BURUNDI, ETHIOPIA, SIERRA LEONE, SOMALIA, SOUTH SUDAN, TANZANIA.

KABUL	SINCE 2001
	SURGICAL CENTRE FOR WAR VICTIMS
WAR SURGERY AND TRAUMATOLOGY	



Kabul is experiencing a major economic crisis that compounds the legacy of 40 years of war. In 2023, admissions due to violence and crime decreased compared to 2022, but continued to account for about 70% of the hospital's surgical activity. More than half of admitted patients had bullet, shrapnel, knife or landmine injuries. In 2023, one in three patients wounded by landmines was under the age of 14. Three mass casualties were managed, with a total of 66 people treated.

The training of local staff has always been a key focus of our projects: of the more than 410 Afghan colleagues, in 2023, eight continued their specialisations in surgery and traumatology and eight in anaesthesia. Five colleagues completed specialisations in surgery and traumatology.

Emergency room, clinic, 3 operating theatres, sterilisation, intensive care, sub-intensive care, wards, physiotherapy, ultrasound and CT scanner, digital radiology, laboratory and blood bank, pharmacy, classrooms, technical and cleaning services.

100 BEDS

410 LOCAL STAFF

22 INTERNATIONAL STAFF

BETWEEN APRIL 2001 AND 31 DECEMBER 2023

Outpatient consultations: 185,745

Admissions: 68,622

Surgeries: 98,649

DATA FROM 2023

1 IN 5 HOSPITALISED PATIENTS UNDER 14 YEARS OLD

LASHKAR-GAH	SINCE 2004
	SURGICAL CENTRE FOR WAR VICTIMS
WAR SURGERY AND TRAUMATOLOGY	



For several years, Helmand province was one of the most dangerous in the country. After the events of August 2021, violence has drastically decreased. Out of more than 8,400 surgical interventions in 2023, 86% were related to civilian traumas such as road traffic or domestic accidents - now the main health needs to be addressed in the region. We continue to treat a large number of minors: children under the age of 14 made up of more than half of the year's 6,700 admitted patients.

In 2023, we provided more than 65,000 outpatient consultations, averaging 120 new patients per day and involving more than 1,000 blood donors. 11 colleagues continued their specialisations in surgery and traumatology.

Emergency room, outpatient department, 3 operating theatres, sterilisation, intensive care, sub-intensive care, wards, physiotherapy, digital radiology, ultrasound, laboratory and blood bank, pharmacy, classrooms, play room, technical and cleaning services.

93 BEDS

329 LOCAL STAFF

7 INTERNATIONAL STAFF

BETWEEN SEPTEMBER 2004 AND 31 DECEMBER 2023

Outpatient consultations: 324,762

Admissions: 69,809

Surgeries: 91,698

DATA FROM 2023

MORE THAN 8,400 SURGICAL INTERVENTIONS

ANABAH	SINCE 1999
	SURGICAL AND PAEDIATRIC CENTRE
WAR SURGERY, EMERGENCY SURGERY, GENERAL SURGERY, TRAUMATOLOGY, PAEDIATRICS	



The hospital in Anabah was EMERGENCY's first facility in Afghanistan. Converted from a barracks to treat war and landmine victims, the hospital was later transformed into a centre for general surgery, traumatology, internal medicine and paediatrics. In 2023, out of more than 1,900 surgeries performed, more than half involved elective surgery, mainly to treat problems related to the urogenital or hepatobiliary system. Women and children accounted for about 60% of admissions. In over 32,000 paediatric outpatient consultations, we identified mainly respiratory and gastrointestinal diseases. In 2023, the hospital also served as a training centre for three residents in surgery and traumatology, and nine in paediatrics. Three colleagues completed specialisations in paediatrics.

Emergency room, 2 operating theatres, sterilisation, intensive care, wards, paediatric isolation room, physiotherapy, digital radiology, laboratory and blood bank, pharmacy, classrooms, play room, technical and cleaning services.

78 BEDS

346 LOCAL STAFF

13 INTERNATIONAL STAFF

BETWEEN DECEMBER 1999 AND 31 DECEMBER 2023

Surgical department:

- Outpatient consultations: 372,078
- Admissions: 51,156
- Surgeries: 45,333

Paediatric department:

- Outpatient consultations: 291,897
- Admissions: 17,621

DATA FROM 2023

MORE THAN 3,500 ADMISSIONS, OF WHICH MORE THAN 500 INVOLVED CHILDREN UNDER 1 YEAR OLD

ANABAH	SINCE 2003
	MATERNITY CENTRE
OBSTETRICS, GYNAECOLOGY, NEONATOLOGY	



Afghanistan has some of the highest maternal and child (under 5) mortality rates in the world. With over 6,300 deliveries, more than 1,500 surgeries and over 22,000 outpatient consultations in 2023, the Maternity Centre promotes women's, maternal and neonatal health, and serves as a training hub for women in the Panjshir valley and surrounding areas.

In 2023, 150 Afghan women colleagues worked in the Anabah Maternity Centre, providing gynaecological, nursing and obstetric services: from family planning to gynaecological primary prevention, from ante-natal care to the vaccination of more than 5,000 newborns. In addition, two women residents completed their specialisations in gynaecology and obstetrics, and eight continued on the course.

Obstetric triage and first aid, clinics with ultrasound, 2 operating theatres, intensive care and post-natal ward, obstetrics and gynaecology ward, neonatology unit with neonatal intensive care unit, labour room, delivery rooms, technical and cleaning services shared with the Surgical and Paediatric Centre.

99 BEDS

192 LOCAL STAFF

4 INTERNATIONAL STAFF

BETWEEN JUNE 2003 AND 31 DECEMBER 2023

- Outpatient consultations for women: 511,885
- Outpatient consultations for babies: 12,039
- Women admitted: 106,138
- Babies admitted: 25,868
- Surgeries: 18,725
- Babies born: 82,940

DATA FROM 2023

OVER 6,400 BABIES BORN

11 PROVINCES	SINCE 1999
	FIRST AID POSTS AND PRIMARY HEALTHCARE CENTRES
PRIMARY HEALTHCARE	



Since 1999, we have operated a network of more than 40 First Aid Posts and Primary Healthcare Centres located in rural areas that are often difficult to reach and lack infrastructure. The aim is to offer basic care to patients and, when necessary, refer them to our hospitals in Kabul, Lashkar-Gah and Anabah using our 24-hour ambulance service. In 2023, the Anabah facilities carried out more than 200,000 consultations, of which 1 in 6 involved obstetrics or gynaecology. In the Helmand area, we have expanded the services at some First Aid Posts to treat chronic patients, provide basic medicine and administer vaccinations.

In the Anabah area: 7 Primary Healthcare Centres in Abdara, Anabah, Dashtak Prison, Hesarak, Koklami, Oraty, Sangi Khan; 5 Primary Healthcare Centres with first aid services in Anjuman, Dara, Khinch, Kapisa, Pul-e-Sayyad; 4 First Aid Posts in Paryan, Dasht-e-Rewat, Gulbahar, Said Khil;
In the Kabul area: 10 First Aid Posts in Andar, Barakibarak, Gardez, Ghazni, Gurband, Jalreez, Laghman, Pul-e-Alam, Sheikhabad, Tagab; 2 First Aid Posts with primary healthcare services in Chark, Mirbachakot; 7 First Aid Posts in Kabul in 2 orphanages (female and male) and 5 prisons;
In the Lashkar-Gah area: 4 First Aid Posts in Garmsir, Grishk, Marjia, Nad Ali; 3 First Aid Posts with primary healthcare services in Sangin, Musa Qala, Shoraki.

412 LOCAL STAFF

BETWEEN DECEMBER 1999 AND 31 DECEMBER 2023

Outpatient consultations: 5,945,214
 Transfers by ambulance: 153,756

DATA FROM 2023
**OVER 27,000 VACCINES ADMINISTERED
 IN HELMAND PROVINCE**

ASMARA	SINCE 2019
	CARDIOLOGY CLINIC AT OROTTA HOSPITAL
CARDIOLOGICAL SCREENING, ORAL ANTICOAGULANT THERAPY (OAT)	



Since 2019, we have offered support to the cardiology outpatient clinic at the country's leading public hospital, the Orotta Medical Surgical National Referral Hospital in Asmara, and carried out regular cardiological screening missions. Our team - a cardiologist, a haematologist and a nurse from the Salam Centre - identify new cardiac surgery patients, offer follow-up consultations to post-operative cardiac surgery patients, provide free medical treatment and update the local staff on the latest international standards of care. The project is part of the Regional Programme and also includes the launch of the first Oral Anticoagulant Therapy (OAT) Clinic dedicated to post-operative patients with mechanical valve prostheses, with the aim of monitoring their blood coagulation parameters. In 2023, an average of 495 patients were seen every month.

Cardiology clinic, oral anticoagulant therapy (OAT) clinic.

5 INTERNATIONAL STAFF FROM THE SALAM CENTRE

BETWEEN OCTOBER 2019 AND 31 DECEMBER 2023

Cardiological consultations: 20,578
 Screening missions: 7

DATA FROM 2023
MORE THAN 5,000 CARDIOLOGICAL EXAMINATIONS

SINCE 1998

SULAYMANIYAH

REHABILITATION AND SOCIAL REINTEGRATION CENTRE

PRODUCTION OF PROSTHESES AND ORTHOSES, PHYSICAL REHABILITATION



The Centre has been working for 25 years to provide care and rehabilitation to disabled patients and the victims of anti-personnel mines. In 2023, more than 500 patients were treated, totalling more than 3,600 consultations. We have provided walking mobility aids to more than 200 patients and built more than 600 prostheses, while we performed over 1,360 maintenance services on patients' existing orthoses and prostheses. Physiotherapy is an essential phase of rehabilitation: in 2023, we carried out more than 2,300 sessions, helping patients to regain mobility independence and facilitating reintegration with the community.

Physiotherapy, orthopaedic workshops, technical and cleaning services.

63 LOCAL STAFF

2 INTERNATIONAL STAFF

BETWEEN FEBRUARY 1998 AND 31 DECEMBER 2023

- Patients treated: 13,521
- Upper limb prostheses: 1,657
- Lower limb prostheses: 11,632
- Physiotherapy sessions: 65,702
- Orthoses: 1,464

DATA FROM 2023
MORE THAN 3,600 PATIENT VISITS

SINCE 2006

URBAN OUTSKIRTS

SOCIO-MEDICAL SUPPORT

GENERAL MEDICINE, NURSING CLINIC, PSYCHOLOGICAL SUPPORT, CULTURAL MEDIATION, SOCIO-MEDICAL SUPPORT, MEDICAL EDUCATION, DENTISTRY (IN MARGHERA ONLY)



In 2023, health activities and collaboration with other bodies and institutions continued, guaranteeing the right to health for people living in some of the most vulnerable situations in cities across Italy. Together with ASGI (*Associazione per gli Studi Giuridici sull'Immigrazione*), we were able to get the Court of Milan to recognise unemployed people's exemption from co-pay fees for public healthcare. In our Ponticelli (Naples) clinic, two general practitioners from the local health authority facilitated access to our social-medical services for their patients. In Castel Volturno, we closed the paediatric outpatient clinic for a positive reason: thanks to our pressure, the Campania Region recognised the right to a paediatrician for children of foreign citizens without residence permits. We have also started an accompaniment service in the hospitals of Naples, Caserta, Benevento and Avellino for the most vulnerable patients.

LOCATIONS:
Marghera (Venice) Milan
Sassari Naples
Castel Volturno Brescia
(Caserta)

40 STAFF

155 VOLUNTEERS

BETWEEN MAY 2010 AND 31 DECEMBER 2023

- MARGHERA (SINCE 2010): 107,714
- SASSARI (SINCE 2012): 28,071
- CASTEL VOLTURNO (SINCE 2015): 85,772
- NAPLES (SINCE 2015): 59,876
- MILAN (SINCE 2015): 65,170
- BRESCIA (SINCE 2016): 19,048

DATA FROM 2023
HALF OF PATIENTS ASSISTED IN SASSARI ARE ITALIAN

NOBODY LEFT BEHIND

SINCE 2020

SOCIAL PROJECT

SOCIAL SUPPORT, DELIVERY OF BASIC GOODS



Begun as a food support project for vulnerable groups during the Covid-19 pandemic, since January 2022 “Nobody Left Behind” has also offered assistance and guidance for social services in vulnerable neighbourhoods in the Milan area with a dedicated team of social workers, cultural mediators and volunteers. In 2023, we helped solve more than a thousand crucial issues for families involved in the project: 110 found employment, 220 solved a bureaucratic or administrative problem, 60 benefited from access to nursery and pre-schools for their children, 60 enrolled in Italian language courses. Since November 2023, the project has also been active in Naples, in our Clinic in Ponticelli.

LOCATIONS:

Milan
Naples

12 STAFF

250 VOLUNTEERS

BETWEEN MARCH 2020 AND 31 DECEMBER 2023

Packages delivered (of food and hygiene products): 182,783
People helped: 32,475
Households helped: 8,326

DATA FROM 2023

49% OF THE FAMILIES INVOLVED LIVE IN VULNERABLE HOUSING CONDITIONS

FAENZA

MAY TO DECEMBER 2023

ASSISTANCE TO FLOOD VICTIMS

LOGISTICAL, SOCIO-MEDICAL AND PSYCHOLOGICAL ASSISTANCE



Faenza was among the municipalities most affected by the floods that swept through the Emilia-Romagna region in May 2023. At the request of the Municipality, we intervened from the beginning, managing the storage and distribution of food and cleaning goods and coordinating over 10,000 volunteers who came to the city to clear debris and clean houses and gardens. In 18 weeks, we supported 2,000 households and coordinated 4,000 home interventions. After the end of the emergency phase, we started a collaboration with the Municipality and the District of Faenza to support the local health system, providing socio-medical and psychological support to the population. This collaboration ended at the end of 2023.

LOCATION:

Faenza (Bologna)

12 STAFF (PHASE I)

1,200 EMERGENCY VOLUNTEERS

2 STAFF (PHASE II)

BETWEEN MAY 2023 AND 31 DECEMBER 2023

Households helped: 2,000
Clearing and cleaning operations coordinated: 4,000
Volunteers coordinated: 10,000
Socio-psychological services: 318

DATA FROM 2023

OVER 2,000 HOUSEHOLDS SUPPORTED

SEASONAL WORKERS	SINCE 2013
	SOCIAL AND PSYCHOLOGICAL SUPPORT
GENERAL MEDICINE, NURSING CLINIC, SOCIO-MEDICAL SUPPORT, CULTURAL MEDIATION, PSYCHOLOGICAL SUPPORT, MEDICAL EDUCATION	



In the countryside of southern Italy, in the regions of Calabria and Sicily, we care for labourers working in exploitative conditions using our Polibus - a mobile unit equipped with clinics, spaces for mediation and reception rooms - and fixed outpatient clinics. Patients report musculoskeletal pain, dermatitis, gastrointestinal diseases and other complaints due to difficult living and working conditions. In Ragusa, psychological helpdesk activities increased, assisting minors and women affected by social marginalisation. In October, we reopened a permanent outpatient clinic in Polistena, inside a building confiscated from the 'Ndrangheta, a Calabrian Mafia group, to offer psychological support, nursing activities, healthcare booking centre (*Centro Unico di Prenotazione*) services, and socio-medical support.

LOCATIONS:
 Rosarno (Reggio Calabria)
 Polistena (Reggio Calabria)
 Vittoria (Ragusa)
 Marina di Acate (Ragusa)
 Santa Croce di Camerina (Ragusa)

13 LOCAL STAFF

1 VOLUNTEER

BETWEEN JULY 2013 AND 31 DECEMBER 2023

Services
REGGIO CALABRIA area: 51,653
RAGUSA area: 16,313

DATA FROM 2023
60% OF PATIENTS IN POLISTENA HAVE A REGULAR RESIDENCE PERMIT

MEDITERRANEAN SEA	SINCE 2022
	LIFE SUPPORT
SEARCH AND RESCUE AT SEA, MEDICAL AID, CULTURAL MEDIATION	



The central Mediterranean remains the world's deadliest migration route, with 2,571 confirmed deaths and an unknown number of missing persons in 2023 alone. In one year of activity, we rescued 101 women, 846 men, and 272 minors. We conducted most rescues while in the international waters of the Maltese search and rescue region, and received news of boats in distress mainly from *Alarm Phone* and the aircraft of other humanitarian organisations monitoring the Mediterranean. The vessels we rescued - made of wood, synthetic rubber, iron and fibreglass - were always overcrowded and in very poor condition. *Life Support* spent 105 days at sea, covering over 21,000 nautical miles.

Rescue area
 Area for boarding rescued people
Boat deck
 Area for rescued people on board
Main deck
 Clinic, showers, toilets

29 CREW MEMBERS

BETWEEN DECEMBER 2022 AND 31 DECEMBER 2023

Search and rescue missions: 15
People rescued: 1,219

DATA FROM 2023
OVER 200 UNACCOMPANIED MINORS RESCUED

GODERICH	SINCE 2001
	SURGICAL CENTRE
GENERAL AND EMERGENCY SURGERY, ORTHOPAEDIC AND RECONSTRUCTIVE SURGERY, TRAUMATOLOGY	



Opened in 2001 to respond to surgical needs during the civil war, over the years the Centre has expanded its admission criteria to include traumatology, emergency and elective surgery, and offers training courses to local staff. Today, it is the reference facility for traumatology for the entire country, with over 3,000 surgeries performed in the last year alone. The Centre specialises in the treatment of oesophageal and digestive burns caused by the accidental ingestion of caustic soda - a chemical compound used to make soap at home - due to which, in 2023, we admitted more than 160 patients and performed more than 700 operating theatre procedures: endoscopies, gastrostomies, tracheostomies, laparotomies and oesophageal dilations. In 2023, 73% of patients admitted for ingesting caustic soda were less than five years old.

Emergency room, clinics, 3 operating theatres, sterilisation unit, intensive care, wards, physiotherapy, digital radiology, laboratory and blood bank, pharmacy, classrooms, technical and cleaning services, guest house.

67 BEDS


372 LOCAL STAFF

20 INTERNATIONAL STAFF

BETWEEN NOVEMBER 2001 AND 31 DECEMBER 2023

Outpatient consultations: 447,112
Admissions: 48,689
Surgeries: 70,130

DATA FROM 2023
OVER 3,000 SURGERIES

KHARTOUM	SINCE 2007	
	SALAM CENTRE FOR CARDIAC SURGERY	
ADULT AND PAEDIATRIC CARDIAC SURGERY, CARDIOLOGY, INTERVENTIONAL CARDIAC SURGERY		



Opened in 2007 to provide free, high-quality cardiac surgical care to patients suffering from congenital and acquired heart diseases, the *Salam* Centre continued its clinical activities even after war broke out in April 2023. Throughout the year, we operated on 290 patients and conducted over 3,800 outpatient consultations. Almost all of the patients admitted were suffering from valvular heart disease. In 2023, 51 patients came from other countries, 19 of whom received operations after the conflict began. In August, we opened Cardiology Outpatient Clinics in Wad Madani (closed in December due to intensified fighting) and Atbara to provide life-saving care to cardiac patients - both those already operated on and those awaiting surgery - who could not reach Khartoum for security reasons. In these clinics, we carried out more than 3,000 consultations for anticoagulant therapy.

6 clinics, 3 operating theatres, sterilisation unit, intensive and sub-intensive care, wards, physiotherapy, digital radiology, laboratory and blood bank, pharmacy, classrooms, play room, technical and cleaning services, guest house.

63 BEDS

408 LOCAL STAFF
 20 INTERNATIONAL STAFF

7 LOCAL STAFF EMPLOYED IN OUTPATIENT CLINICS

BETWEEN APRIL 2007 AND 31 DECEMBER 2023

Specialist cardiological consultations: 95,390
Patients admitted: 11,753
Surgeries: 10,571
Diagnostic and interventional haemodynamic procedures: 1,482
Foreign patients: 2,082

DATA FROM 2023
MORE THAN 300 SURGERIES PERFORMED

AUGUST TO NOVEMBER 2023

KHARTOUM

CENTRE FOR EMERGENCY
AND TRAUMA SURGERY

EMERGENCY SURGERY AND TRAUMATOLOGY



In August 2023, we opened a Centre for Emergency and Trauma Surgery to provide care for those wounded in the conflict, adapting two of the temporarily disused buildings of the *Salam* Centre.

Between August and November, we performed 531 surgeries mainly for bullet and shrapnel wounds. We also treated civilian trauma patients, such as those injured in road traffic or domestic accidents, receiving over 230 patients and admitting 42 of them. In a city consumed by war, where most of the hospitals were bombed or occupied by militias, we also treated patients with chronic conditions, such as those with diabetes needing to be stabilised, and patients with septicaemia, occlusions and appendicitis. In November, we had to suspend activities at the Centre due to operational constraints.

1 emergency room, 2 operating theatres, sub-intensive care, ward, sterilisation, physiotherapy, digital radiology, laboratory and blood bank, pharmacy, classrooms, play room, technical and cleaning services shared with the *Salam* Centre for Cardiac Surgery.

32 BEDS

63 LOCAL STAFF

5 INTERNATIONAL STAFF

BETWEEN AUGUST 2023 AND NOVEMBER 2023

Outpatient consultations: 1,085

Patients operated on: 202

Surgeries: 531

DATA FROM AUGUST TO NOVEMBER 2023
202 PATIENTS OPERATED ON

SINCE 2005

MAYO

PAEDIATRIC CENTRE

PAEDIATRICS, PAEDIATRIC EMERGENCIES, PREVENTIVE MEDICINE, SEXUAL
AND REPRODUCTIVE HEALTH SERVICES

The Mayo Paediatric Centre, located about 30 km from Khartoum, immediately suspended clinical activities at the beginning of the war due to an inability to guarantee essential safety conditions for both staff and patients. The Centre had served an area with over 300,000 people living in extremely vulnerable health and economic conditions, providing care for children under 14 years old, ante- and post-natal care, screening for malnutrition and family planning services. Of the more than 1,900 children visited in the first three months of the year, most suffered from malaria and respiratory, parasitic and gastrointestinal diseases. Over 1,100 children were vaccinated and over 800 family planning consultations provided before the war.

2 clinics, observation ward, obstetric clinic, vaccination clinic, post-natal clinic, pharmacy, laboratory, technical and cleaning services, reception and medical education, area for cooking courses for patients' parents.

6 OBSERVATION BEDS

15 LOCAL STAFF

BETWEEN DECEMBER 2005 AND 31 DECEMBER 2023

Outpatient consultations: 302,334

Patients under observation: 30,143

Babies given post-natal consultations: 4,306

Patients referred to public hospitals: 18,777

Obstetric consultations: 57,477

**Outreach work (medical services
in surrounding area):** 58,466

DATA FROM JANUARY TO APRIL 2023
**ALMOST 1 IN 2 CHILDREN VISITED
UNDER 1 YEAR OLD**

PORT SUDAN

SINCE 2011

PAEDIATRIC CENTRE

PAEDIATRICS, PAEDIATRIC EMERGENCIES, PREVENTIVE MEDICINE, SEXUAL AND REPRODUCTIVE HEALTH SERVICES



With the escalation of the conflict, the Paediatric Centre in Port Sudan recorded a 60% increase in patients. Mainly, we treated cases of malnutrition, gastrointestinal diseases, diarrhoea, respiratory infections and sickle cell anaemia. In one year, we provided consultations to more than 15,000 children, 30% of whom were less than 1 year old. Over 3,000 have been vaccinated against polio, meningitis, measles and other viral diseases. Malnutrition affected 23% of the children visited.

The Centre also contains an obstetrics outpatient clinic, where more than 2,600 ante- and post-natal consultations and over 700 family planning consultations were carried out. Throughout the year, the Centre also monitored coagulation parameters for post-operative patients from the *Salam* Centre for Cardiac Surgery, performing over 1,800 tests to assess and adjust anticoagulant therapy.

3 paediatric clinics, radiology, laboratory, pharmacy, ward, sub-intensive care, warehouse, offices, services, outdoor areas for reception and play, technical and cleaning services.

15 BEDS

100 LOCAL STAFF

3 INTERNATIONAL STAFF

BETWEEN DECEMBER 2011 AND 31 DECEMBER 2023

Outpatient consultations: 234,140

Admissions: 12,262

Outreach work (medical services in surrounding area): 49,340

DATA FROM 2023

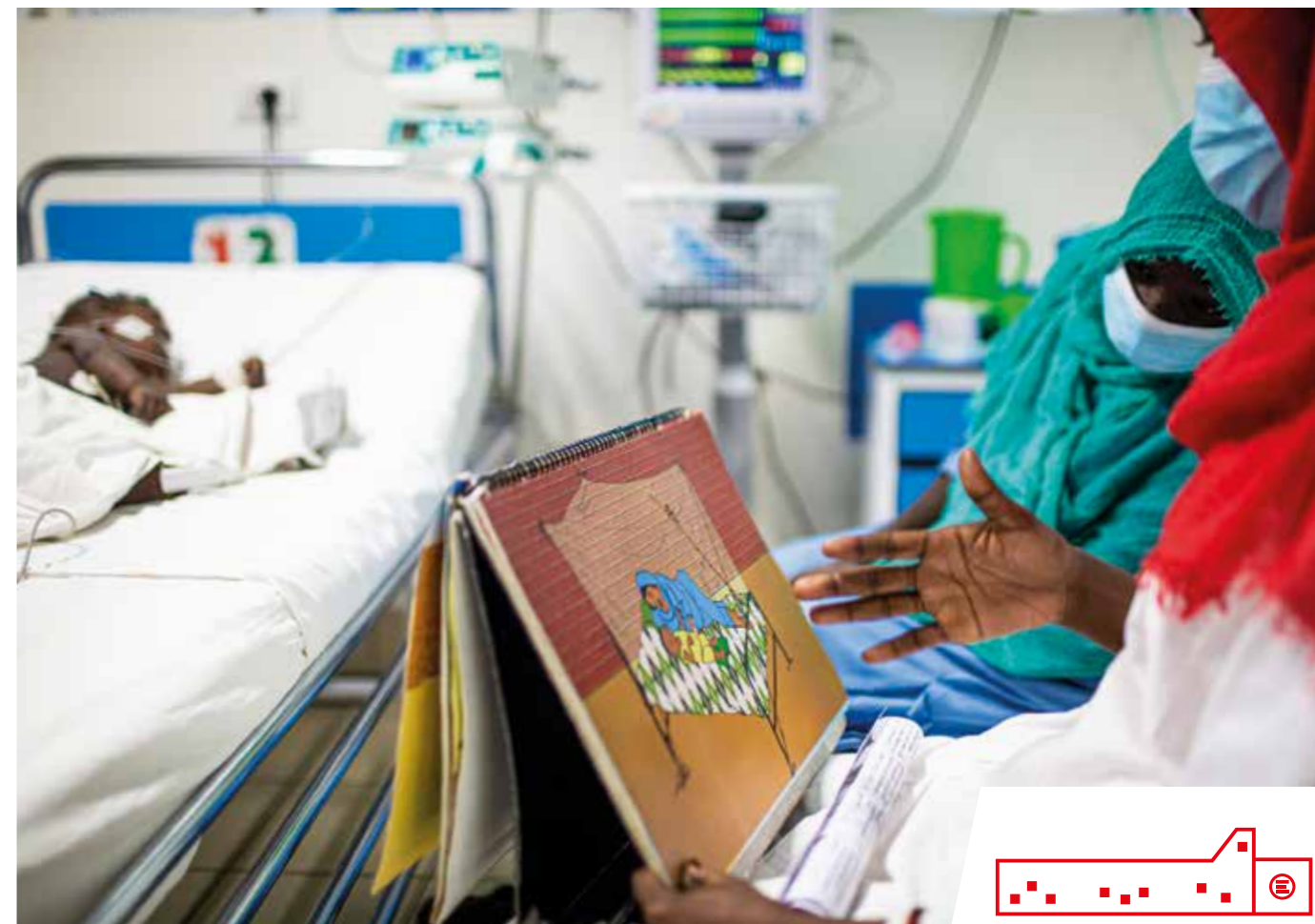
1 IN 3 CHILDREN VISITED UNDER 1 YEAR OLD

NYALA

SINCE 2020

PAEDIATRIC CENTRE

PAEDIATRICS, PAEDIATRIC EMERGENCIES, PREVENTIVE MEDICINE



After the outbreak of war, our staff continued to ensure paediatric care, health promotion and malnutrition screening despite the proximity of the fighting. On 25 October, some Sudanese colleagues were taken from the hospital by the Rapid Support Forces (RSF), and released after five days. During those days, the facility was looted and damaged: unable to guarantee the security of both staff and patients, alongside the inadequate condition of the facility, we were forced to suspend clinical activities.

Before then, we had provided consultations to more than 6,000 children, mainly for sickle cell anaemia, pneumonia, gastrointestinal and skin diseases, eye diseases and rheumatic fever. Prior to the conflict, we reached more than 9,600 people, including more than 1,000 children, with outreach activities - medical education sessions in the areas surrounding the Centre.

3 paediatric clinics, 1 cardiology clinic, radiology, laboratory, pharmacy, ward, sub-intensive care, warehouse, offices, services, outdoor areas for reception and play, technical and cleaning services.

14 BEDS

62 LOCAL STAFF

1 INTERNATIONAL STAFF

BETWEEN NOVEMBER 2020 AND 31 DECEMBER 2023

Outpatient consultations: 41,185

Admissions: 1,901

Specialist cardiological consultations: 1,581

Outreach work (medical services in surrounding area): 38,338

DATA FROM JANUARY TO OCTOBER 2023

MORE THAN 8,000 CONSULTATIONS PROVIDED

ANME: the African Network of Medical Excellence

Building excellent healthcare in Africa April 2009 - 2023. The third ANME meeting in Khartoum

In April 2009, EMERGENCY set up a health cooperation network with ministers and representatives of the health authorities of several African countries to promote healthcare of excellence in Africa based on high standards of care, free services and the training of local staff. This is the African Network of Medical Excellence (ANME), which aims to build high-quality medical and surgical centres capable of responding to health needs on a regional scale and of affirming the principles of equality, quality and social responsibility in practice.

These three principles are articulated in the 'Manifesto for a Human Rights-Based Medicine,' a joint initiative of EMERGENCY and nine African countries signed in May 2008 on the island of San Servolo.

The *Salam* Centre for Cardiac Surgery, opened in Khartoum, Sudan, in 2007, was the first piece of this network. From the experience at our hospital, a desire was born to propose a model of medicine based on the right of every human being to receive safe, fair, timely and quality care. The Children's Surgical Centre, opened in Entebbe, Uganda, in 2021, is the second piece of this network and, like the *Salam* Centre, represents a replicable model of excellence in surgery and staff training. Both facilities rely on a dedicated regional programme that manages the flow of patients and residents from different countries, and to whom they offer surgery and training, respectively. Thanks to continuous screening missions in the region, we identify patients for referral. Once they have returned to their countries of origin, we ensure continuity of care through monitoring consultations with the collaboration of health focal points, facilities and doctors.

In 2023, patient screening missions began for referral to the Children's Surgical Hospital in Entebbe, where we operated on 71 patients from Afghanistan, Burundi, Ethiopia, Sierra Leone, Somalia, South Sudan and Tanzania. Regional Programme activities for the *Salam* Centre have been suspended since April 2023 due to the war.

On 1 and 2 February 2023, the "ANME: Moving Forward" conference was held in Khartoum with the collaboration of the Sudanese Ministry of Health, bringing together representatives from 15 African countries. The conference concluded with a joint statement that reiterated the goals of guaranteeing long-term continuity of care, access to specialist care, and continuous exchange of knowledge and human resources.

Following the principle of social responsibility, which calls for the participatory role of governments, representatives attended from Burundi, Central African Republic, Chad, Democratic Republic of Congo, Djibouti, Egypt, Eritrea, Ethiopia, Niger, Nigeria, Somalia, South Sudan,



Sudan, Uganda and Zimbabwe. Attendees also included representatives from the College of Anaesthesiologists of East, Central and Southern Africa (CANECISA), the College of Surgeons of East, Central and Southern Africa (COSECSA) and the African Union and the Pan-African Society of Cardiology (PASCAR).

The delegations agreed on the importance of cooperation to facilitate the identification of, transfer of, and continuity of care for patients in different countries. They recognised the fundamental importance of training local health personnel, and creating health systems that cannot only respond to the continent's major epidemiological needs but also promote clinical research and counteract the exodus of skilled health workers. Participating countries acknowledged the need to identify new sources of funding to make this approach sustainable in the long term. They concluded by renewing their commitment to champion the ANME model to national, regional and international institutions to promote the principles of equality, quality and social responsibility, as well as free and excellent healthcare in international health policy agendas.

ENTEBBE	SINCE 2021	
	CHILDREN'S SURGICAL HOSPITAL	
GENERAL PAEDIATRIC SURGERY		



In 2023, the hospital performed more than 1,600 elective surgeries, including over 600 complex surgeries, operating on more than 1,200 children. Training is a key component of our model of medical excellence. Accredited by the Uganda Nursing and Midwife Council as a reference for specialist nursing education, in 2023 the hospital launched an OT Specialist Course for scrub nurses, which in its first year trained two professionals from Mulago Hospital (Kampala) in perioperative nursing. In October, a team of surgeons and nurses from the Association for the Bladder Exstrophy Community (A-BE-C) and Johns Hopkins University visited the hospital to perform elective surgery and train our local staff on orthopaedic and urological intra- and post-operative procedures.

3 operating theatres, 1 sterilisation unit, intensive care, sub-intensive care, ward, 1 observation ward, 6 clinics, digital radiology, laboratory and blood bank, CT scanner, pharmacy, administration, cleaning services, guest house for foreign patients, area for reception and medical education, outdoor and indoor play areas.

72 BEDS

368 LOCAL STAFF

43 INTERNATIONAL STAFF

BETWEEN APRIL 2021 AND 31 DECEMBER 2023

Outpatient consultations: 26,320
Admissions: 3,901
Surgeries: 3,786

DATA FROM 2023
1 IN 2 PATIENTS UNDER 5 YEARS OLD

For EMERGENCY, promoting a culture of peace means combining experiences with ideas to create a shared space where we can understand, intervene and effect change. It is an objective set forth in our statute: to care for those in need, and to organise events that raise awareness of peace, solidarity and human rights.

From art exhibitions to short films to virtual reality, EMERGENCY's public events and media create the common ground that makes our work in the field possible.

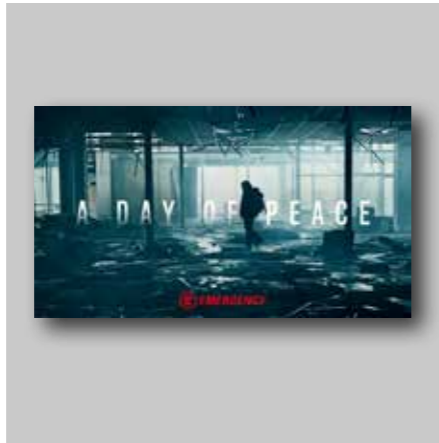


video

WE CAN MAKE PEACE COME TRUE

“We can make peace come true”: EMERGENCY's first use of Artificial Intelligence in its communication. Thanks to Ogilvy Italia and ARTI, a group of AI (Stable Diffusion, MidJourney, Dall-e 2, Lexica Aperture) created a video out of the words of Gino Strada, EMERGENCY's founder. Words that speak of a future of fraternity and solidarity, written with the hope that the abolition of war would become a reality: “to create a world without war, we have to imagine it first.”

The video, released at the beginning of the New Year, was presented in June 2023 at “We Make Future” in Rimini, one of Italy's most important digital innovation festivals. ○



video

A DAY OF PEACE

“A Day of Peace” depicts a man searching for food and other people, while encountering traces of the past – like a newspaper announcing the looming nuclear threat.

Peace and silence turn into loneliness and despair, increasing as the camera pans away to show a destroyed, barren world: he is the last man on Earth. The short film by EMERGENCY and Ogilvy was released one year after the outbreak of war in Ukraine, calling for deep reflection on the true meaning of peace.

“A Day of Peace” has won many awards, including: Gold, Silver and Bronze for “Direction, Direction of Photography” at the ADCI Awards (Art Director Club Italiano) and *Altri schermi No profit*. It also won the Award of Excellence at the Global Shorts Festival in Los Angeles. ○



video

MAN AT SEA

A short film that reenacts on a beach, among ordinary people, what happens every day between countries on the Mediterranean. A lifeguard goes to rescue a person who is drowning a few metres from the shore, while beachgoers block him under any pretext: “Who knows where that guy comes from,” “Where would he stay?,” “As long as they know they'll get rescued, they'll swim here.”

“Man at Sea” highlights the absurdity of the objections to rescuing those who risk their lives crossing the Mediterranean. The powerful message invited empathetic reflection on the issue and has amassed more than 7 million views. ○



Watch the film by visiting youtube.com/@emergency_ngo or by scanning the QR code.



technology

LIFE SUPPORT VR

In collaboration with the *Impersive* agency, we created a virtual experience on board *Life Support*.

The virtual reality headset allows the public to board our ship from the moment of rescue until disembarkation. They learn about the efforts of our staff, immerse themselves in rescue operations, and listen to migrants' personal stories.

The initiative was displayed multiple times throughout year, including the exhibition “Like Waves on the Sea” in Reggio Emilia and Rome, the annual EMERGENCY Festival, and within EMERGENCY's 19 Christmas Shops in Italy. ○



exhibition

LIKE WAVES ON THE SEA

“Like Waves on the Sea: Encounters Without Borders,” EMERGENCY's main photography exhibition in 2023. Starting with the photos of six photographers who spent time on board *Life Support* - Giulio Piscitelli, Gabriele Micalizzi, Dario Bosio, Davide Preti, Francesco De Scisciolo and Giorgio Dirindin - the exhibition presents the story of the ship's first year of search and rescue.

Images, sounds, videos and testimonies combined to create an immersive journey through which visitors could experience what happens during rescues at sea, from the perspective of the people being rescued and the rescuers. The installation was curated and designed by The Buss, and displayed at the *Palazzo dei Musei* (Reggio Emilia) in September 2023 and the *Auditorium Parco della Musica* (Rome) between December 2023 and January 2024. Altogether, the exhibition was visited by over 5,000 people. ○



events

THE EMERGENCY FESTIVAL

The Border was the theme of the third annual EMERGENCY Festival, held in Reggio Emilia from 1 to 3 September 2023. 88 special guests and more than 15,000 attendees participated in 46 events across eight locations, including a photo exhibition, an evening live show, a sporting event, training workshops, five films, seven activities dedicated to children, families, educators and teachers, a pop-up shop, and a book shop. Speakers and experts from every field – from geography to politics, from the arts to anthropology, from science to sociology - shared their interpretation of the border, deconstructing current narratives and presenting ideas for overcoming borders with the ‘other.’ ○

Since the war began in Gaza in October 2023, EMERGENCY has been active in advocacy efforts calling for a permanent ceasefire. In Italy, the appeal 'Cessate il fuoco' - led by EMERGENCY, *Laboratorio Ebraico Antirazzista*, *Mediterranea*, and *Assopace Palestina* - collected over 120,000 signatures in a matter of weeks. Internationally, EMERGENCY joined the appeal 'Ceasefire Now' alongside more than 1.3 million signatories.

Together the appeals call for immediate humanitarian aid and an end to the violence, as well as long-term political solutions. Civilians are not bargaining chips, and hospitals and aid workers are not legitimate targets. The only solution is a ceasefire, now.

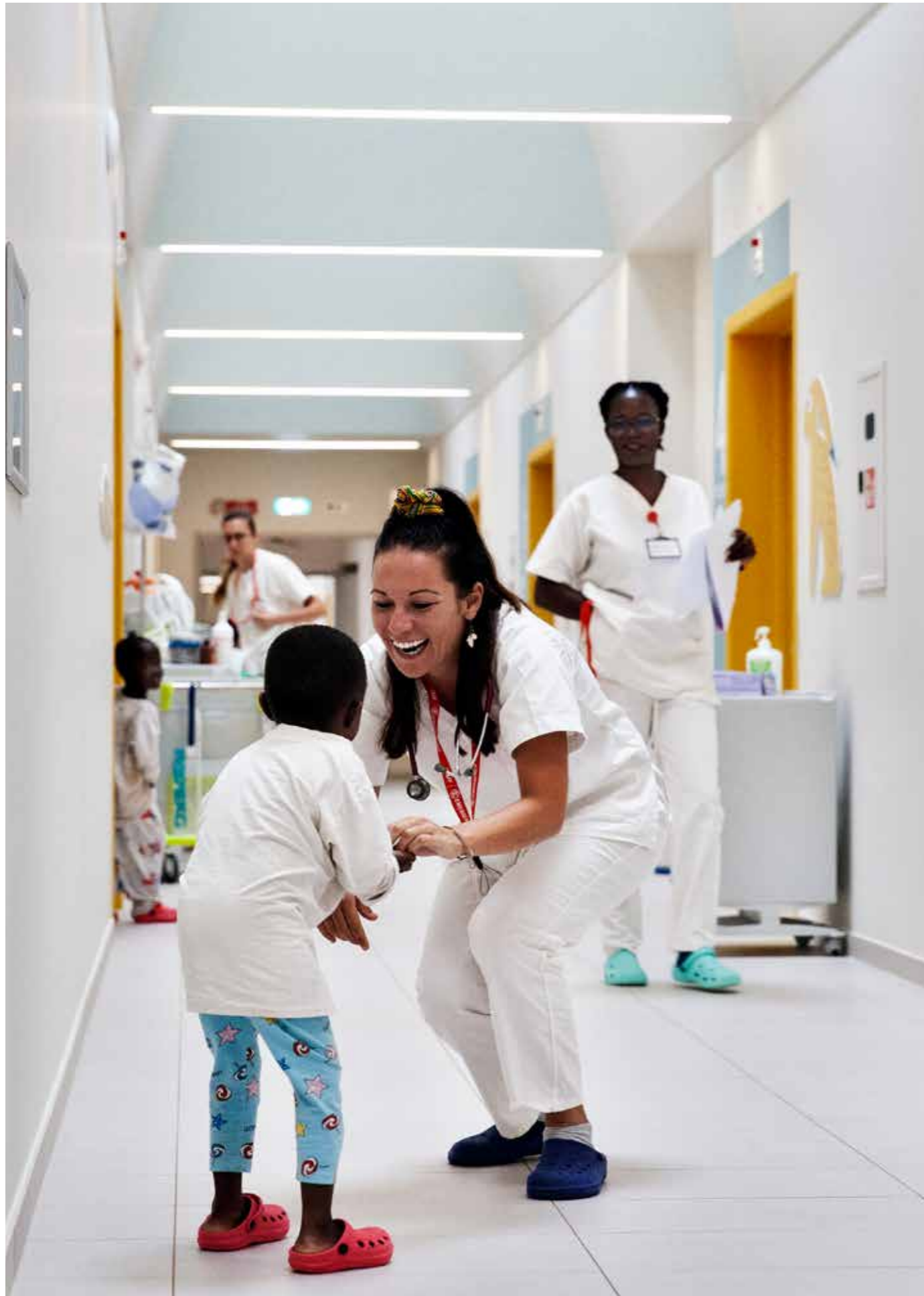


Read and sign the petition at chnng.it/WprJR4RpB6 or by scanning the QR code.

In London in July 2023, the Old Truman Brewery hosted "EMERGENCY in Afghanistan: Drawings from Helmand, Kabul and Panjshir," an exhibition of drawings by illustrator George Butler. Using ink, pen and watercolour, Butler painted scenes of everyday life in EMERGENCY's hospitals, depicting the stories of Afghan patients and medical staff. From operating theatres to maternity wards, Butler's drawings reveal a glimpse of life in Afghanistan, in contexts where life and death often hang by a thread.

"I felt immediately connected to the extraordinary work which is being done within these wards, and for these patients. I think that it's very easy in the modern world to be increasingly disconnected and this is a chance to slow down and read some stories, to be present and give some time back to people who you would otherwise not have known about."





ADVOCACY

RESEARCH AND IMPACT

The Advocacy Office promotes and manages activities that advance EMERGENCY's core values at national, regional and international levels, collaborating with research centres, institutions and other professionals. In 2023, the team's initiatives, research, events and meetings focused on war, migration, global health and development, and access to care and inequalities: four areas in which EMERGENCY has always been committed to creating positive change.



report

"ACCESS TO CARE"

In March, in collaboration with CRIMEDIM (Centre for Research and Training in Disaster Medicine, Humanitarian Aid, and Global Health), we published the report "Access to Care in Afghanistan: Perspectives from Afghan People in 10 Provinces," examining health conditions in the country after August 2021. Based on testimonies from patients and family members, and medical staff at our facilities and those in public hospitals, the report found that half of respondents did not have access to the care they need. The report recommends that the international community commit to multi-year development funding that prioritises health, reforming and strengthening the Afghan public healthcare system to lay the foundations for economic and social sustainability and promote the active participation of women and girls. ○



report

"ACCESS TO VACCINES"

In collaboration with the research centres CERGAS and DONDENA, in June we published "Covid-19 Response in Africa and the COVAX Mechanism - Voices from the Field: Sierra Leone, Sudan, Uganda." The report gathered the voices of key decision makers during the pandemic from the three African countries where we have ongoing projects, highlighting critical issues in local and global systems that led to inequality in access to vaccines. To protect the human rights of every individual, we recommend a change in global health policies. Critical to this endeavour will be increased investment in healthcare and capacity-building in low- and middle-income countries, especially through technology and information sharing. ○



meetings

MEETINGS AND SUMMITS

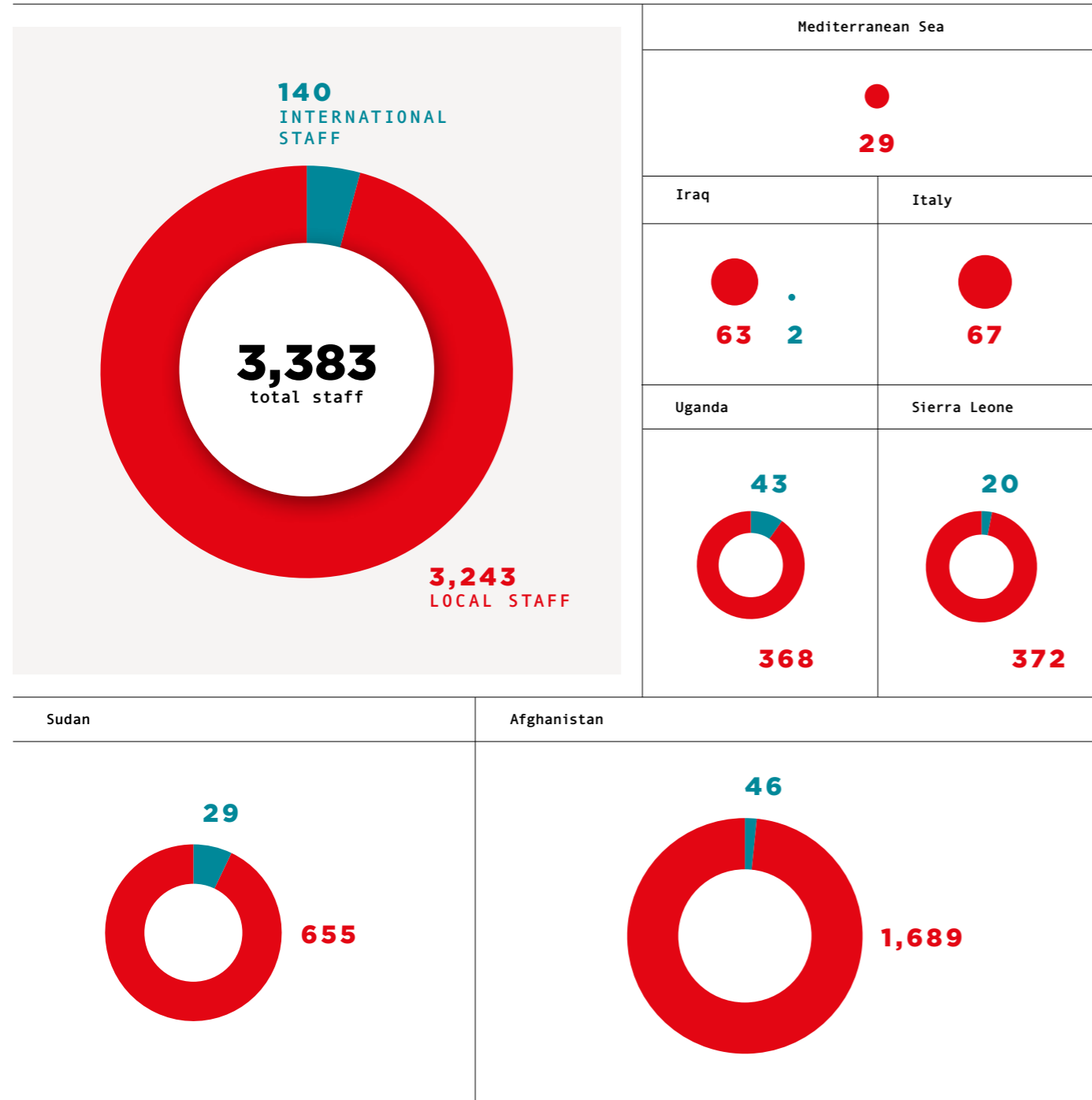
Throughout 2023, the Advocacy Office organised and participated in political and institutional meetings to advance EMERGENCY's principles and maintain a focus on issues critical to our work, such as migration and global health. A panel discussion on Afghanistan was held at Chatham House in London, and the third international meeting of the African Network of Medical Excellence (ANME) was held in Khartoum. EMERGENCY representatives also took part in the European Humanitarian Forum in Brussels, the World Health Assembly in Geneva, the Dolomite Conference in Trento, hearings in front of the Italian Parliament and EU bodies, and bilateral and multilateral meetings with Italian parliamentarians, international institutions and regional bodies - such as the African Union and ECOWAS, at the World Health Summit in Berlin. ○

WORK WITH US

Everyone who works with EMERGENCY shares its objectives and helps guarantee the right of anyone who is ill or wounded to free, high-quality treatment.

Our medical work is not done by volunteers but by paid specialists with specific professional profiles.

● Local staff ● International staff



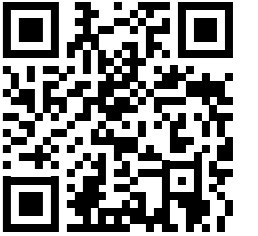
If you would like to apply, visit en.emergency.it/work-with-us

SUPPORT US

Please support us today. Visit en.emergency.it/donate

EMERGENCY's work is made possible by the support of generous individuals, companies, foundations, international organisations and the governments of some of the countries we work in.

If you live in Belgium, Italy, Switzerland, the UK or the USA, you can donate directly through our affiliates and receive all the associated tax benefits. For more information about supporting EMERGENCY or to enquire about donating by a cheque or bank transfer, giving in kind or leaving a donation in your will, please contact one of our offices:



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CO-FUNDING FOR OUR PROJECTS

In 2023, institutions, foundations and other donors helped our new and existing projects. We would like to thank them for their support.

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SUDAN	 SALAM CENTRE FOR CARDIAC SURGERY IN KHARTOUM	<i>Project co-financed by the Presidency of the Council of Ministers with the share of the eight per thousand of IRPEF devolved by Italian taxpayers to direct state management.</i>		ERITREA	 CARDIOLOGY CLINIC AT OROTTA HOSPITAL IN ASMARA
	PAEDIATRIC CENTRE IN PORT SUDAN		PAEDIATRIC CENTRE IN MAYO		CENTRE FOR EMERGENCY AND TRAUMA SURGERY IN KHARTOUM
ITALY				ITALY NOBODY LEFT BEHIND EMERGENCY's social project	

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“ALL HUMAN BEINGS ARE BORN FREE AND EQUAL IN DIGNITY AND RIGHTS.” RECOGNITION OF THIS PRINCIPLE “IS THE FOUNDATION OF FREEDOM, JUSTICE AND PEACE IN THE WORLD.”

**Universal Declaration of Human Rights,
Paris, 10 December 1948, Article 1 and Preamble**

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EMERGENCY
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