Dear Supporter,

Usually, annual reports start with chronological breakdowns of highlights and achievements. All in all a positive optimistic overview, justifying use of funds and resources.

For 2019 this ‘usually’ seems somehow difficult and unsuitable. Indeed, there are thriving projects and achievements we can report on, such as: successful termination of our project in Bosnia and Herzegovina, provision of Water and Hygiene for people being stuck at the European borders, continuous effort regarding the health structures in Northeast Syria including setting up a field hospital.

But 2019 also gave us many reasons to reflect our actions. Therefore, we want to start this annual report with a less enthusiastic and more thoughtful tone.

The invasion of Turkey and Turkish-backed militias in Northeast Syria in October 2019 overshadowed many of our activities. The effect of the attacks on the people in Northeast Syria has been inexpressibly. For the first time some of our international team members experienced what it means to have undeniable privileges. Our approach is to minimize the hierarchy and differences between our international and local staff as well as between ‘us’ and the people we work for. Anyhow, the attacks in autumn showed us unmistakably the difference between international and local staff of one and the same organization. The international staff always had the possibility to escape the hostilities, a privilege which the local team members and the population of the region did not have.

This brings us to a subject influencing our work a lot during last year: Responsibility.

We once more experienced that working in crisis and conflict areas brings a huge responsibility. This responsibility exists for example towards colleagues who do not have the same privileges as others, due to their nationality and place of origin. This inequality was demonstrated to us in 2019. What became evident is the importance of continuous critical reflection of our actions, the outcome of our actions, and our objectives.

CADUS aims to establish sustainable projects by including the people we work for, and with, into our planning processes and structures. But the recent events showed us that humanitarian work in crisis and conflict areas can be very unpredictable. Many of our actions are to the most possible extend defined and driven by external factors which we cannot influence. The invasion of Turkey could have easily meant a final end for all our projects and activities that we and our local partners have been able to build and support since 2014.

Hence, we want to take the chance of this introduction to our annual report to stress the fact that: All the support you provide to us, and that we pass on to people affected by crisis, is support we can provide today based on the current situation. There is no protection against potential future harms and regions can be destabilized within weeks or even days, resulting in humanitarian catastrophes.

There is no such thing as a guarantee of ‘success’ of humanitarian action, no matter how well planned or implemented. We communicate these uncertainties and challenges and make them transparent to you as our supporters, in the hope that you value the transparency and feel encouraged to further support us in the future.

Your CADUS Team

ANNUAL REPORT 2019
CADUS – Redefine Global Solidarity

About CADUS

CADUS e.V. is a non-profit, non-governmental, independent, self-governing and voluntary organization with its headquarters in Berlin, Germany - registered as a non-profit association. CADUS operates a sub-branche in Erbil, KR-Iraq. Our work is primarily concerned with providing medical and technical support to people in crisis situations. These can range from sudden onset disasters to protracted and complex slow-onset emergencies. The humanitarian imperative and humanitarian principles are the foundation for all our actions. Furthermore, we aim to enable transformation of knowledge and technology. Together with local communities, we want to develop new and innovative projects that are both adapted to local conditions and also actively shaped by beneficiaries of humanitarian aid. Through interdisciplinarity, Organizations and individuals should be given the opportunity to develop innovative humanitarian solutions and facilitate active participation in humanitarian work.

In short, our goal is a reflected way of working within the field of humanitarian aid. This includes a focus on engaging local communities. We want to think about the causes and not just fight the symptoms. Social, technical, economic and environmental aspects are integral parts of a crisis and essential to take into account while supporting people in this crisis situation.

The principles of our work

The humanitarian principles are the basis for our work. Despite modern challenges and rapid changes within the humanitarian system these guiding principles remain essential for our work. Additionally, to Humanity, Impartiality and Neutrality, CADUS considers Accountability as an essential humanitarian principle and basis for our work.

Humanity

By humanity we understand that suffering - no matter what the circumstances, the place or the cause - must be fought. All our actions are legitimized by humanity alone and are accordingly unconditional. The goal of our work is to fight suffering, to protect life and to prevent future suffering!

Impartiality

The right to receive humanitarian support applies to everyone, no matter what a person has done before. As humanitarian workers we are neither judges nor executors. This means that we treat people according to their needs and not according to whether they are considered to belong to an 'ethnic', religious or political group.

Independence

It would be utopian to claim that humanitarian work takes place completely free of financial constraints. For us, it is important to deal with these monetary constraints in a transparent and open manner. We clearly oppose any funding that is linked to the interests of any political or religious party. Furthermore, a basic requirement for any donor is that they must not under any circumstances influence or direct our work and the way it is carried out. Furthermore, donors that support us must not contradict the values and principles we represent.

Neutrality

In our missions we do not take sides of any political, religious or 'ethnic' conflicts. We focus on supporting all people affected by crisis no matter if they align with our own believes and values or not. At the same time, we reserve the right to report on structures and policies that clearly violate the principles and values that we stand for and that our work is based on. Namely, political actions resulting in suffering, violation of international humanitarian law, violations of human rights and overall crimes against humanity. We furthermore report on and speak out against societal problems like racism, sexism etc. that result in structures of discrimination against groups of people. Bearing witness, advocating our core values and using our leverage as a humanitarian actor are fundamental efforts of our work.
Accountability

Good intention is not enough, and we want to be held accountable for our actions. People affected by crisis are ultimately our reason d’etre and should be the ones in front of whom we have to legitimize our work. The constant reflection of our work, our role and the results of our actions is essential. Only by doing this we can contradict reproducing structures perpetuating inequality and avoid producing additional harm to people already affected by crisis. As an accountable organization, we believe we must be willing to review, analyze, and critique our operations constantly, at all levels.

Who are we and what are our goals

CADUS e.V. is a non-profit association registered in the district court of Charlottenburg in Berlin. CADUS is officially represented by the three board members: Dr. Matthias Grott, Simone Schrempf and Anna Sauerwein. Additionally, we are 13 people part time or full time employed with CADUS in Berlin. We come from various educational and social backgrounds. We are, for example, nurses, biologists, engineers, political scientists or carpenters. In our sub-branch in Erbil, KR-Iraq we have a small administration team of two people.

The Chief Executive Officer is Sebastian Jünemann. Sebastian has successfully graduated in biology, education and organizational psychology, but his heart has always been on emergency medicine. On a regular basis he has been involved in humanitarian aid for various organizations since 1999 and throughout his studies has worked in a senior role in rescue services. In 2014, he and some friends sparked off the founding of CADUS.

Supporter

Our work would not be possible without the large number of supporters. Only in this way we are able to implement the high workload and the various projects despite our small team size and the limited financial framework. Our supporters are as diverse as our fields of activity. From hackers to doctors to technicians, a wide variety of people are part of CADUS, who have spent so much time and energy making CADUS what it is today. In recent years, we have been able to evolve from a small group with an idea into an international humanitarian organization, pursue new approaches to humanitarian work.

How we work

We work based on collegial cooperation arising from common values and goals. We divide our responsibilities into five areas within which we structure our work. These five departments are in regular exchange with each other. This exchange and the associated results are coordinated, guided and evaluated by the management as the interface of all work areas.

CADUS is divided into the following five departments: Finance and Accounting, External Communications, Operations, Human Resources and the Crisis Response Makerspace divisions. The task area ‘Operations’ represents our largest
department with the most subgroups involved. These include above all the project management, crewing, logistics, Monitoring Evaluation and quality management and the ‘Safety and Security’ division. The research and development department implements activities and projects in our Crisis Response Maker Space. They take place in close cooperation with students and research departments of Universities within Germany. The department ‘Human Resources’ includes the preparation and training for volunteers and co-workers, the co-ordination of further education and the constant extension of our pool of specialized personnel, from the technician over the translator to the internist. The communication department represents CADUS Public Relations and Fundraising activities.

Our projects

Syria – Emergency and Primary Health Care in Raqqa

Since July 2018 we operate an emergency and primary health care facility in Raqqa City together with our partner organization Heyva Sor a Kurd. In average 120 patients receive treatment within the facility every day. In the city of Raqqa which was liberated in 2017 by the so-called Islamic State, the medical needs of the (returning) population are high. Amongst emergency and pediatric services, we also provide gynecological care since the beginning of 2019. Especially, gynecological care and woman’s health are medical services which are systematically underserved within the region of Ar-Raqqa.

In October 2017, the former stronghold of the Islamic State was liberated after four years under the control of the terrorist regime.

The fight of Raqqa cost thousands of lives and destroyed wide parts of the city. Under the control of the so-called Islamic State, population was cut off from basic medical services. During the withdrawal, health facilities were deliberately destroyed by the Islamic State. Furthermore, mines were systematically put in place among the whole city. A tactic of war which claims serious injuries and fatalities long after the active fighting ceased.

Since autumn 2017, more and more people have returned to the city. Among the returnees medical needs are especially high since this population was forced to flee and live for months or years in underserved locations such as Camps. Hence, together with Heyva Sor a Kurd we decided to set up an Emergency and Primary Health Care facility in Raqqa City which became operative in July 2018. Heyva Sor a Kurd is providing a medical team of local employees consisting of internists and pediatricians as well as nurses and gynecological specialists. In addition to general medical, pediatric and gynecological care, acute emergencies are received, stabilized and transported to the nearest hospital.

The activities conducted at the Emergency and Primary Health Care Facility (EPC) in Ar-Raqqa city aimed to provide essential health care such as trauma care, emergency care, primary health care and gynaecological service, including referral capacities to secondary health facilities for people in need. The patients are mainly woman, children and woman in need for maternity care who have suffered from months and years of undersupply. Approx. 120 patients and thus tens of thousands of people have received medical care so far. From October 2019 onwards, Internally Displaced People were included as an additional beneficiary group since newly erupted hostilities led to an increase of people forced to flee to Ar-Raqqa Governorate and Ar-Raqqa City.

Syria – Field Hospital Al Hol Camp

In April 2019 CADUS supported the set-up of a field hospital in the IDP and Refugee Camp Al Hol in Northeast Syria.

As the final strikes against the last ISIS stronghold transpired in the end of 2018, beginning 2019, the number of refugees in Al Hol Camp increased immensely, rising from 10,000 to 75,000 people, thereby over-stretching any infrastructural capacities. Congestion of the camp and the surrounding hospital created an overwrought atmosphere.

Providing medical care for this many people is a difficult task, which is aggravated by the fact that most inhabitants have a poor general state
of health. Years of IS dominance and recurrent battles in the region have left the population exhausted and malnourished with a high child mortality rate and years without any medical attention.

The field hospital significantly improves medical care and also sustainably increase local capacities in the local health sector. In total 30 patients can receive in-patient care at the hospital. In addition to an operating room the hospital is equipped with an isolation until for infectious disease, laboratory, x-ray and ultrasound for diagnostics.

**Syria – Emergency Response**

After the Turkish invasion began on October 9, 2019 in northeast Syria, we initiated our emergency aid. The humanitarian situation in Autumn in Northeast Syria was dire. An estimated 200,000 people were on the run from the Turkish armed forces and their allied militias. In a region in which the population suffered for many years from the struggle against the so-called Islamic State and over 1.8 million people were dependent on humanitarian support even before the Turkish attacks, the effects were catastrophic.

Hostilities have also hit local health structures. Hospitals such as Tal Abyad and Serekaniye, ambulances and medical personnel have been targeted on several occasions. The capacities of the hospitals of Qamishlo, Tal Tamr and Hassakeh were completely overstretched.

**Syria – Emergency response - Tal Tamr Hospital**

Financed by small scale donations Cadus supported the Tal Tamr Hospital logistically, covered part of the hospitals running costs and medical supplies from November 2019 until end of the year. The hospital was one of the most important facilities in order to treat injured during the offensive due to its proximity to Serekaniye and its healthcare wise strategic position.

**Syria – Emergency Response - Ambulance Center Quamishli**

Since October 15, 2019, we have been operating five ambulances from the emergency center of our partner Organization Heyva Sor A Kurd in Qamishli. The vehicles are essential for medical care. They care for sick and wounded civilians and refer medical emergencies. The ambulances also supported the evacuation of 30 life threatening injured civilians from Serekanyie on October 19, 2019. One of our ambulances was also a victim of an attack on November 9, 2019 in which our driver was injured.

**Syria – Emergency Repsonse – Food Distribution Tal Tamr**

Also as a direct reaction to the hostilities and mass displacement in Autumn 2019 we started food distributions in the City of Tal Tamr. In total we were able to distribute over 800 food baskets to internally displaced people in and around Tal Tamr. The food baskets contained basic food supplies such as oil, sugar, dates, canned meat, semolina and chickpeas.

**Emergency Response Balkan**

From November 2018 until March 2019 CADUS operated a mobile clinic in Sarajevo in Bosnia and Herzegovina in order to provide basic medical care for refugees on the Balkan route.

After a detailed assessment in Bosnia and Herzegovina in 2018, it turned out that two locations with especially high need of medical support are expected in winter 2018/2019. On the one hand it was the area from Bihac to Velika Kladusa in the north, on the other hand Sarajevo, the capital of Bosnia. In consultation with other local organizations, we have combined our meager resources so that we achieve the best possible benefit. Hence, we focused with our activities on Sarajevo. We decided to provide support via a mobile clinic and mobile medical team. In autumn 2018 we converted a transporter into a mobile clinic which set off for Sarajevo in mid-November.

Our mobile team provided basic medical care over the winter until March 2019. People in need of additional medi-
cal support were referred for specialized medical treatment. Thanks to good local contacts, we were soon able to refer people to a dentist or optician. Opticians were necessary as many of the refugees on the Balkan route were regularly subjected to repression and glasses and cell phones were destroyed. Already during the assessment period, it became apparent that psychological challenges are widespread. Since our team itself had not the capacities we coordinated closely with other international and local NGOs in order to provide qualified medical services and corresponding referrals if possible.

The flexibility and mobility ultimately paid off, even though we were only active in Sarajevo and a few surrounding communities. The constantly changing political environment and the security situation have led us to change our treatment location several times. The biggest change for us came in January when we started working at a community center. The biggest advantage for our patients was that they no longer had to wait outside, but instead a heated waiting room was available.

By the end of the project in mid-March, our teams had carried out 2,625 treatments. In addition to the people on the street and in the squats, we were also able to take care of families with children by supporting a responding facility for families.

**Crisis Response Makerspace**

Our workshop at ‘Holzmarkt’ has in 2019 been equipped with some further specialized tools, enabling us to do everything from project planning to prototyping, manufacturing, testing and further improving a piece of equipment. We have created Europe’s first makerspace for the humanitarian sector, where our operational experience flows into the development of new technical solutions and concepts. From woodworking to milling, welding, and soldering, all works are possible. This is accompanied by guidelines for project development and documentation, and an IT infrastructure for advanced layout and renderings.

The makerspace enabled us to intensify our cooperation with universities of applied sciences and other institutions (further details see below). Among other projects, a prototype of a mobile incinerator was created that is able to burn infectious waste at a very high temperature, as specified in the WHO EMT regulations. It was the result of a final project of a student of industrial design, and the first of its kind in terms of the high temperature combined with mobility of the incinerator.

The Crisis Response Makerspace furthermore became a hub where fruitful discussions and exchange of knowledge takes place. We were able to provide space, tools and knowledge for a further mobile humanitarian supply unit to be constructed by a different NGO that will provide support for refugees on the Balkans. An initiative for and with disabled people created a piece of equipment for improved mobility of the affected person.

To follow our educational commitment, we started a discussion series by the name of ‘Debate! Humanitarian Aid’: Once a month we invite speakers for a presentation on current controversial topics in our field of work. After an input by the expert, CADUS staff, volunteers and guests enter into discussion, which is then picked up and developed further by our public relations department, as well as serves to refine our own approaches in humanitarian aid. In advance of ‘Debate!’, the open session ‘Meet CADUS’ takes place, where visitors can inform themselves about the history and current projects of CADUS, and about opportunities for volunteering with us.
Remo²hbo becomes the Life Sensor

The research and innovation project remo²hbo started as a collaboration between the universities of Applied Sciences HTW and Beuth Berlin, and CADUS as the experienced humanitarian partner. CADUS initiated the project by posing a question directly from the field: taking the example of vital parameter monitoring, how can technology for medical facilities be made available to local service providers even in economically weaker regions, away from traditional sales markets? How can those technologies be maintained and repaired in circumstances where no industrial supplier can reach the area?

In 2017, the remo²hbo (repairable patient monitoring in mobile hospital boxes) was kick-started with the help of funding by the IfaF Berlin (Institute of applied research Berlin). After two years of doing research and development, the funding ended, and the remo²hbo was turned into a community project under the name of ‘Life Sensor’. A group of CADUS volunteers took over to finalize the construction and documentation in collaboration with students from the Technical University Berlin. In December 2019, the project was presented in Nakuru, Kenya, at the annual conference of the Global Innovation Gathering, where it was met with great interest by African and Asian tech initiatives. The documentation of the Life Sensor is now publicly accessible on GitHub.

Collaboration with Universities and research projects

In 2019, the collaboration between the Universities of Applied Sciences HTW and Beuth Berlin and CADUS was taken further by combining the final thesis of several students into one project: research and innovation in the field of emergency response in outbreaks. This was done in cooperation with the RKI (Robert Koch Institute, the German Public Health Institute). The RKI contributed unsolved questions in outbreak response regarding quality and comfort of PPE (Personal Protective Equipment), and the handling of infectious dead bodies. CADUS as the humanitarian partner with operational experience posed the question of modular patient transport solutions in outbreaks and advised on challenges in practical implementation of the developed ideas. During regular meetings of this working group, the students developed models for new solutions to the challenges in-field.

Continued was the running of the HTW AWE (General Studies Supplementary Courses) at the CADUS makerspace. This year, the course with the title ‘Innovative Solutions in Humanitarian Emergency Response’ offered two classes: in the first one, a model of a mobile incinerator meeting the regulations of the WHO (also see above) was developed by the students. This first version turned out to be not functional, but the learnings from this initial phase went into the development of the later, more successful version.

During the second class, the students learned how to construct a drone from scratch. In humanitarian response, a drone can serve to survey an area affected by disaster and bring aid quickly where it is needed. In the AWE, the basics of physics were taught and then applied by putting together the different parts of the drone, including the writing of some simple code. At the end of the class, an actually flying drone had been produced, even though operating it posed yet another big challenge to the students.

EMT classification

In 2018 CADUS decided to join the World Health Organization (WHO) classification process for Emergency Medical Teams (EMT), as an EMT 1 mobile. In 2019, CADUS structured the EMT classification process and started to work on a concrete timeframe for the classification process.

In practice this means that CADUS started to implement the WHO minimum standards for Emergency Medical Teams. These standards apply to all areas of an organizations work such as: training of staff, logistics and supply chain, technical standards of the material and devices the team is working with.
The aim of this year was to organize our ‘basic structure’, organizations backbone and consolidate our professional standards. In the meantime, we invested a lot of time, energy and creativity in developing new was of setting up an emergency medical team and set new standards when it comes to mobility, modularity and quality of such.

One important aspect of the certification process related to organizational structure and sustainability and learning on an organizational level. Additionally, we learned to differentiate the needs and requirements to us as an organization being active on sudden onset disasters and in more long-term projects in crisis and conflict region.

Developing and professionalizing the related challenges are time and capacity consuming. Nevertheless, we are positive for the year to come and are excited for the next steps in our classification process.

**E-learning and Telehealth platforms**

At the start of the year, we had to move a step back with the digital implementation of the E-learning and Telehealth Platform project for remote areas with scarce (educational) resources. The provider of the platform who we were working with was not able to deliver the necessary service anymore. CADUS and the provider went separate ways.

At the same time, the development of the E-learning content was taken further and finally first training classes were provided with the material in North-East Syria. In live sessions for medical service providers in Al Hol Camp, the teaching material served to illustrate medical care techniques according to international standards.

The concept of crowd-based telemedicine was further tested and partially implemented within our project in Bosnia. While we had to discontinue the initially constructed digital platform (see above), the planned collaborative work of our geographically wide spread network of medical specialists started by using already established messenger services. Our international medical volunteers were able to consult a wide range of medical specialists for advice when confronted with rare medical conditions.

A field test of conservative tele-medical equipment, that was done in collaboration with the University Hospital Oldenburg during the CADUS mission in Bosnia, demonstrated that the concept of crowd-based telemedicine is more suitable for our operative settings than traditional approaches. CADUS will continue to expand and intensify the use of crowd-based telemedicine in the next year.

**Finances**

In 2019, CADUS was able to significantly increase its realized funds. Overall, the total financial volume amounted to EUR 1,871,562.87 EUR. Mainly due to the increase in institutionally funded project-related funds. The majority of these grants were realized through our activities in Northeast Syria. In addition, the number of regular small donors was further expanded, and new permanent donors were generated. Most of these non-institutional funds were realized for our medical activities in Bosnia and Herzegovina. In addition, CADUS received in 2018 medium funding from foundations which mostly used for investment goods such as medical and technical devices.

As a result of the expansion of activities and project work, expenditure also increased to a total of around 1,486,956.25 EUR. This includes around EUR 499,566.43 personnel costs at HQ, Iraq and Northeast Syria. This is a significant increase of over 250% compared to 2018, where the personnel costs were 187,618.52 EUR. This can be explained by a significant increase of employees, mainly in Northeast Syria. In the end of 2019 CADUS counts about 40 medical and administrative people which are employed under CADUS. Additionally, about 20 people were employed via our local partner organization in Northeast Syria which are funded via CADUS.

Indirect costs which incurred for common or joint objectives and cannot be readily identified with a particular final cost objective also increased compared to 2018. Rent costs nearly doubled from 39,380 EUR in 2018 to 83,611 EUR in 2019. Additional rent costs occurred due to our opening of two branch one in Northeast Syria and one in Kurdish Region Iraq with a office/guesthouse for each branch.

As a result of project-related cooperation, funds totaling over 750,000 EUR were paid to our local implementation partners. Under 0.5% of our financial volume went to public relations and representation costs.

For further details please see the complete Financial Report.

**Impressum**

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