

Annual Report 2022

Redefine Global Solidarity



DEAR SUPPORTERS,

The year 2022 started for us at CADUS with a whole bunch of good ideas and plans: The Middle East department worked on expanding its activities in the region. The Emergency Response department focused on further developing the Mobile Hospital and strengthening rapid deployment capabilities. The EMT mission in Papua New Guinea was still in full swing, while we were already preparing for support in the context of COVID-19 in Pakistan.

But suddenly, everything changed. Time seemed to stand still, and at the same time, events moved at a breakneck pace:

On February 24, 2022, Russia attacked Ukraine. We were shocked but acted as quickly as possible. Thanks to the immense willingness to donate for emergency relief, we quickly procured an all-wheel-drive ambulance and soon brought it into action in Ukraine. Gradually, we adapted the entire Mobile Hospital concept to the new situation, which eventually grew far beyond our original plans. In this annual report, we can thus tell you, dear readers, about a rolling intensive care unit and a mobile makerspace, among other things.

Despite the new situation, we remained a reliable partner in our already existing deployment regions. In addition to the Emergency Response Ukraine, the Middle East department developed a first aid

training program for ambulance drivers in Iraq, most of whom have no medical training. At the same time, we continued to lead the field hospital in Camp Al Hol. Conditions there remain extremely difficult, and staff on-site must constantly engage in demanding risk management.

Our colleagues in Al Hol are doing an incredibly good job, and our training and constant medical support visibly lead to sustainable improvements in all areas. We, therefore, began initial considerations to permanently hand over the field hospital to local hands. However, the search for a successor organization on-site remained unsuccessful in 2022. We often heard: "You have built an impressive project, but we cannot take it over."

Our search for additional medical emergency organizations to join us in the deployment in Ukraine was equally challenging. We did not necessarily choose this role, but even in 2022, CADUS unconditionally provides emergency relief. Even where others do not go.

All this is only possible through our great network, which actively supports us with creative ideas and craftsmanship, and keeps the operation running with donations. We thank you from the bottom of our hearts and hope to continue to count on your support.

Your CADUS Team

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CADUS - REDEFINE GLOBAL SOLIDARITY

About us

CADUS provides medical and technical emergency aid where it is urgently needed. Our goal is to save lives, alleviate suffering, and prevent further hardship. People in need have a right to support. Likewise, everyone should have the opportunity to become self-sufficient by building their own capacities. Therefore, we work together with local partners on creative, needs-oriented solutions. We share our knowledge through training and are committed to sustainable, respectful humanitarian aid. In Berlin, at our Crisis Response Maker-space, we tirelessly work to rethink humanitarian emergency aid and develop new concepts. Here, field experience, ideas, and the tools to implement them come together. At the same time, we strive to maintain a critical perspective on the field of humanitarian aid and, not least, on our own actions.

Legal framework of CADUS

CADUS is a charitable, non-governmental, independent, and self-managed organization headquartered in Berlin, Germany – registered as a non-profit association at the Charlottenburg District Court. We adhere to standards and values to promote transparency, integrity, and accountability at CADUS. This is outlined in our Code of Conduct. Additionally, CADUS is an official signatory of the Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief. As a humanitarian organization, international humanitarian law (IHL) provides the legal framework for our actions. IHL is a set of rules aimed at limiting the effects of armed conflict. Civilians and humanitarian actors are given special protection under it.

The principles of our work

The humanitarian principles form the foundation of our work. Despite ever-new challenges and rapid changes in the humanitarian system, these guiding principles remain essential. In addition to the principles of humanity, impartiality, independence, and neutrality, CADUS regards accountability as the fifth essential humanitarian principle.

Humanity

We understand humanity to mean that suffering—regardless of circumstances, location, or cause—must be combated. All our actions are legitimized solely by humanity and are therefore unconditional. The goal of our work is to combat suffering, protect lives, and prevent future suffering.

Impartiality

The right to humanitarian support applies to everyone, regardless of what a person has done before. As humanitarian workers, we are neither judges nor enforcers. Therefore, we treat people based on their needs, not based on whether they belong to an “ethnic,” religious, or political group.

Independence

Humanitarian work is also subject to financial constraints. For us, it is important to handle these transparently and openly. We reject any funding tied to the interests of a political or religious party. Additionally, a fundamental requirement for any donor is that they do not attempt to influence or direct our work and its implementation. Supporters must also not act contrary to our values and principles.

Neutrality

In our operations, we do not take sides in political, religious, or “ethnic” conflicts. We focus on supporting all people affected by crises, regardless of whether they align with our own beliefs and values. At the same time, we reserve the right to report on structures and policies that clearly violate the principles and values we stand for and on which our work is based. Specifically, political measures that lead to suffering, violations of international humanitarian law, breaches of human rights, and overall crimes against humanity. Moreover, we report on and speak out against social issues such as racism and sexism that lead to discriminatory structures against groups of people. Bearing witness, advocating for our core values, and using our influence as a humanitarian actor are fundamental efforts of our work.

Accountability

Good intentions alone are not enough, and we aim to be accountable for our actions. People affected by crises are the reason for our existence and should therefore be the ones to whom we justify our work. Constant reflection on our work, our role, and the outcomes of our actions is essential. Only in this way can we avoid reproducing structures that entrench inequality and prevent additional harm to people already affected by crises. As a responsible organization, we believe we must be ready to continuously review, analyze, and criticize our operations at all levels.

Who we are

As a registered association, CADUS e.V. is represented by the board members Dr. Matthias Grott, Simone Schrempf, and Anna Sauerwein. The senior management team consisted of Dr. Corinna Schäfer, Verena Lauble, and Sebastian Jünemann until mid-2022.

Sebastian leads the rapid emergency response and innovation department. He holds degrees in Biology, Education, and Organizational Psychology,

but his passion has always been emergency medicine. Since 1999, he has regularly worked in humanitarian aid for various organizations and held leadership positions in emergency services. In 2014, he founded CADUS.

Verena headed the emergency response in the Middle East region. She studied International Economics and Development and holds a master's degree in Peace and Conflict Studies.

In mid-2022, Verena left CADUS, and Dr. Corinna Schäfer, who previously managed CADUS's main office, took over as head of the Middle East department. Corinna is a trained nurse and has studied Social Work as well as Media and Cultural Studies. She completed her Ph.D. at the University of Sussex in Brighton, UK, with research on German colonial media history. Corinna is one of the founding members of CADUS.

Our work would not be possible without the continuous support of our many volunteers. They are internationally deployed in our humanitarian projects, support emergency aid with their medical expertise, and develop concepts and equipment with their technical skills and passion for science and hacking in our Crisis Response Makerspace in Berlin. The time and energy they invest have made CADUS what it is today: an international humanitarian organization pursuing new approaches in humanitarian work.

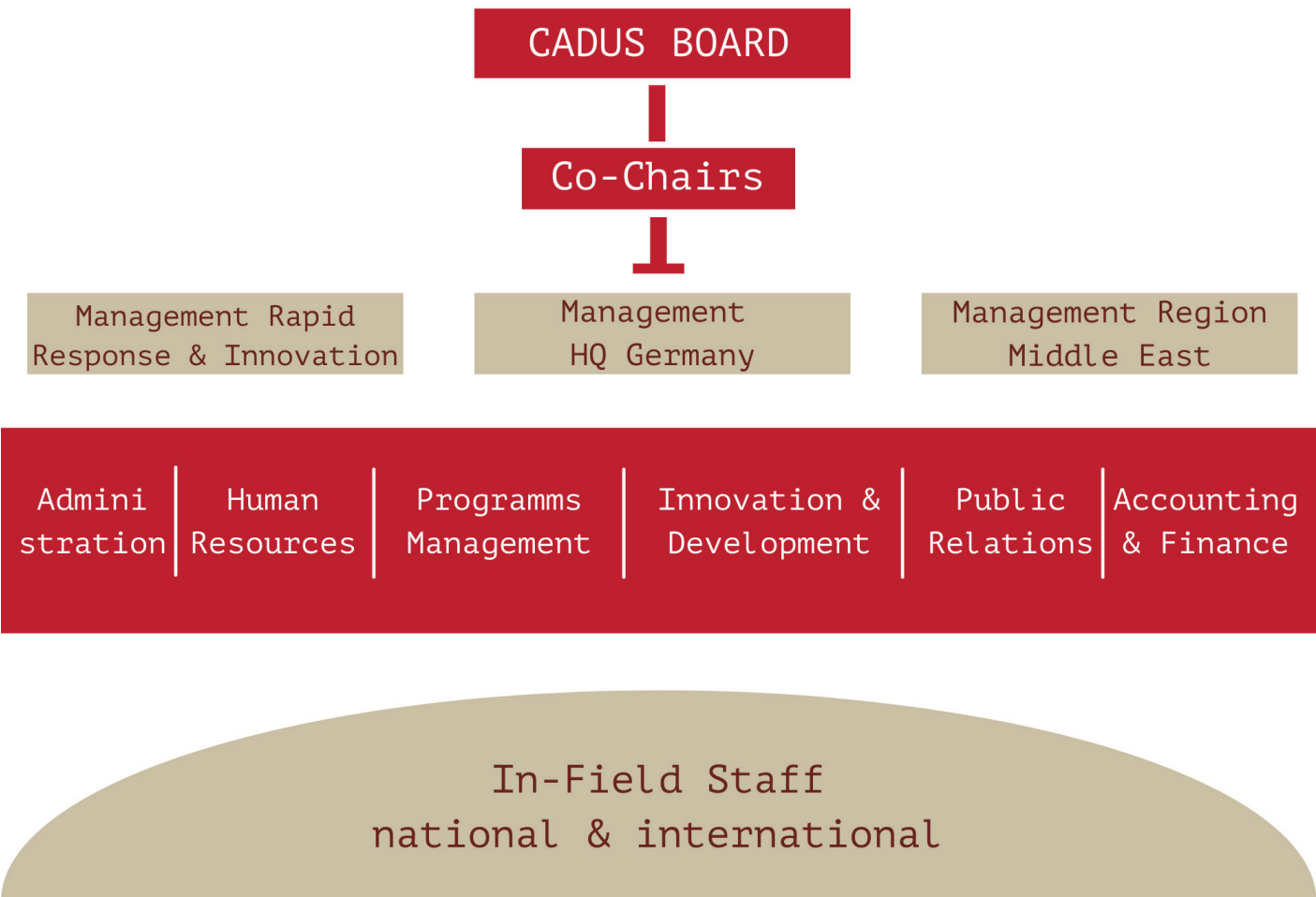
In 2022, CADUS employed 28 full-time or part-time staff members in Germany, most of whom work at the HQ in Berlin. Our branch in Erbil, KR-Iraq (Kurdish Region Iraq), fills key positions for Monitoring, Evaluation, Accountability, and Learning (MEAL). Additionally, we have a five-person administration and logistics team in Erbil. Our office in Northeast Syria is currently the largest in the organization. A total of 60 people work there, with the team mainly consisting of local staff, supported by a small international team. Most employees are medical professionals. Besides operational personnel, essential administrative positions such as Human Resources, Finance, Procurement, and Monitoring & Evaluation are represented in our office in Northeast Syria.

How we work

CADUS focuses on both emergency aid and capacity building. Emergencies can be sudden disasters or escalating crises where it is crucial to act quickly and fill gaps until local response mechanisms and structures can take over. On the other hand, a prolonged crisis can create emergencies that last for years. In such cases, we focus on deploying local personnel and engaging in capacity building,

such as through training programs. We follow a cooperative and sustainable approach to humanitarian aid, aiming to be replaced by local capacities. This approach ensures that our interventions are both immediate and impactful in the short term, while also fostering long-term resilience and self-sufficiency within the affected communities.

CADUS Organigramm

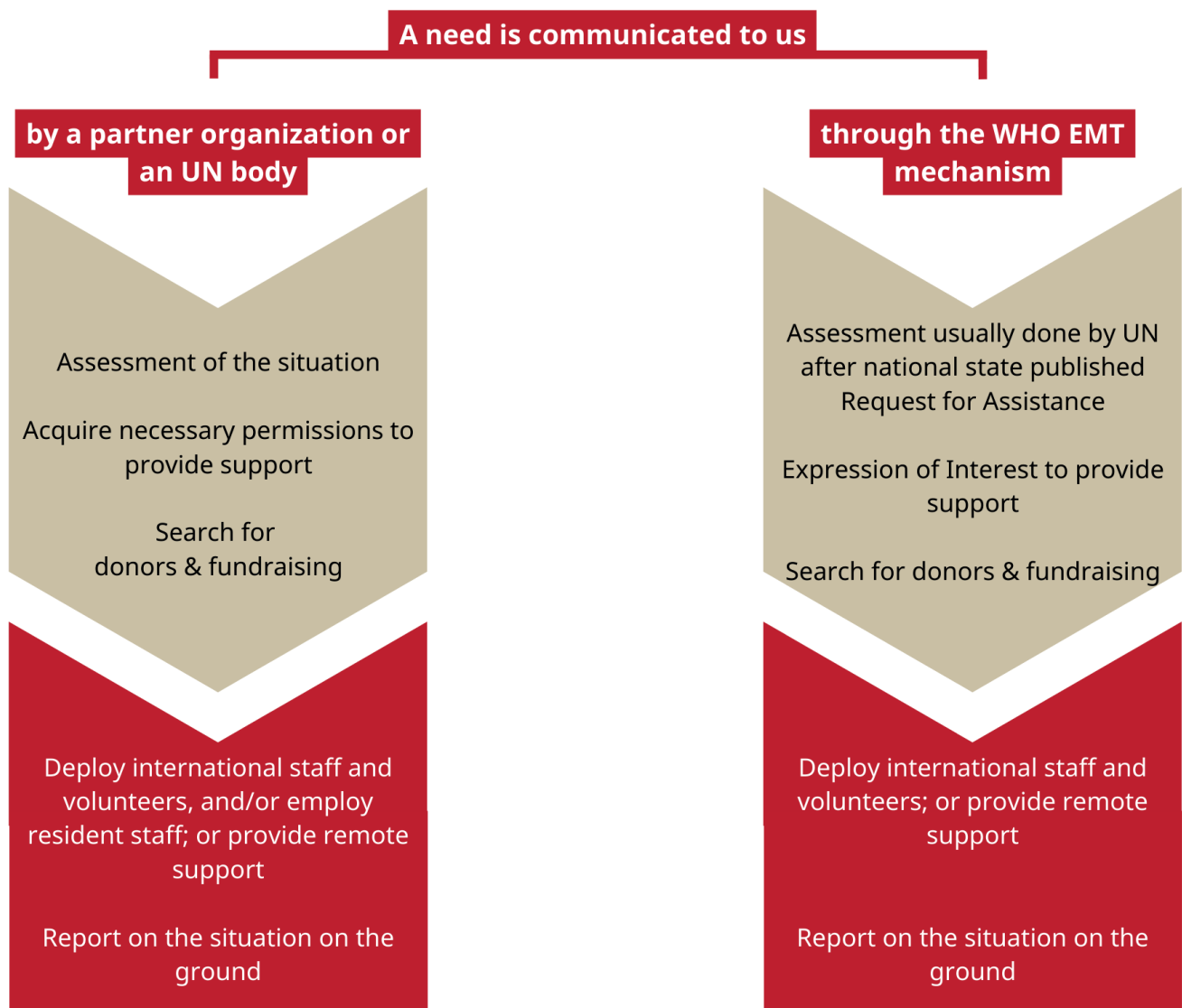


What We Do Before, During, and After Emergency Aid

Donations, especially unrestricted ones, enable us to respond quickly to emerging emergencies. Before a team is dispatched to a new location and crisis, a lot happens behind the scenes: equipment and materials must be procured, developed, and maintained; staff and volunteers are trained in their use; teams are prepared through regular training sessions and short-term briefings before deployment; security and needs assessments must be conducted; and a lot of paperwork is done, from obtaining short-term permits to defining our core values, permanent standards, and long-term strategies. This all happens in our offices in Berlin, Northeast Syria, Erbil/KR-Iraq, as well as in our workshop and warehouse in Berlin. To organize this, we employ a minimum of long-term core staff. After the end of a deployment or project, debriefing and evaluation begin to learn from our missions and further develop the organization. And we do

not keep the knowledge we gain to ourselves: by publishing articles, organizing presentations and discussion rounds, and participating in conferences, we share our experiences and promote the general development of the humanitarian sector. Unrestricted donations allow us to foster a critical perspective and practice and engage in the second pillar of our registered organization: public education.

Our branches in KR-Iraq and Northeast Syria are well integrated into regional humanitarian coordination hubs. Through coordination, reflection, and information exchange, overcoming challenges, and strengthening advocacy, we aim to contribute to a lasting improvement of humanitarian efforts in these regions.



OUR PROJECTS IN 2022

COVID-19: Still an important Issue in 2022

CADUS has gained significant expertise in dealing with the pandemic during the first two years. Thus, 2022 also began with us providing international assistance in the context of COVID-19.

COVID-19 EMT Mission in Papua New Guinea

The year began for us with an ending. Papua New Guinea had requested international support to combat a wave of COVID-19. The health system was already heavily burdened and underfunded before COVID-19, partly due to its colonial history involving Germany.

A small deployment team set off at the end of 2021 to the region of East New Britain, one of the areas hardest hit by COVID-19 in Papua New Guinea, to support the local staff at Nonga Hospital. The focus was less on the active involvement of our team and more on professional exchange with local colleagues and improving processes to combat COVID-19 infections more effectively and safely. Training included the use of personal protective equipment and specialized ventilators, as well as general infection control and patient positioning in COVID-19 cases. After three weeks of observation, exchange, and optimization, our team returned to Berlin in early January.

COVID-19-Support for Kabul Airlift

In February, we supported Kabul Luftbrücke with a hygiene concept and COVID-19 tests at a shelter for Afghan refugees in Pakistan. The Kabul Luftbrücke initiative organizes evacuations and departures for people from Afghanistan who are acutely endangered by the Taliban's takeover. The evacuees were first brought from Kabul to Islamabad, where they awaited the necessary papers for further travel. At that time, the infection risk in Islamabad was very high, with few countermeasures taken by the state. To ensure that those waiting in the shelter did not contract COVID-19 and that infections were detected early, our medic conducted regular COVID-19 tests and developed a hygiene concept for the shelter. This ensured a smooth departure for the Afghans from a health perspective.



CADUS in Ukraine

The attack on Ukraine made humanitarian emergency aid necessary on many levels. CADUS provides support in three areas: medical aid, training, and technology. Once again, our creative and inventive network did an outstanding job, finding innovative solutions to the severe emergencies on the ground. The CADUS Crisis Response Makerspace served as a place where concepts were developed and implemented.

Medical Evacuations and Material Support

On February 24, 2022, with the start of the war in Ukraine, CADUS quickly began collecting donations. Within less than a month, we were able to purchase our first ambulance and equip it with essential medical supplies and equipment to treat critically ill patients. During our initial reconnaissance mission in eastern and central Ukraine, conversations with local actors made it clear that there was an urgent need for medical evacuations (MEDEVAC). Martial law prevented most male paramedics and doctors from crossing the

borders, and closed airspace prevented air ambulances from other countries from entering Ukraine. As a result, CADUS received official support from the World Health Organization (WHO) to carry out medical evacuations. Initially, we were also tasked with coordinating all other organizations conducting MEDEVACs in this part of Ukraine.

Our operations mainly began in Lviv, from where we transported patients across the border to Poland for further care. These operations included large convoys and individual transports, especially for critically ill patients and children who required intensive care.

While many humanitarian organizations focused their efforts on the safer western regions of Ukraine, CADUS decided to follow the most urgent needs of the patients and relocated the base to Dnipro in August 2022. With renewed support from the WHO, we began working closely with the local emergency services, evacuating patients from conflict-ridden eastern regions, such as Donetsk and Kharkiv, to Dnipro. This strategic shift allowed us to address the most pressing medical needs in



Just a few days after the war began, we were able to carry out our first transport of medical supplies from our Makerspace to Ukraine.

Photo: ©CADUS

areas where few organizations dared to operate. By the end of 2022, CADUS operated three ambulances in Ukraine. Additionally, we had procured more than twenty ambulances internationally for the Ukrainian emergency services, equipped them with ventilators, and delivered them to Ukraine. Before CADUS became directly operational in Ukraine, we also organized three aid shipments with medical supplies to the Ukrainian-Slovak border for the civil society initiative Project Nadiya, which distributed the supplies to organizations in Ukraine that provided medical care to those affected by the attack.

Medical Training in Ukraine

After establishing our MEDEVAC program in eastern Ukraine, we began developing a training program six months later. This initiative aimed to meet the urgent need for better medical care and emergency aid in conflict-affected areas, initially focusing on Dnipro and Donetsk regions. CADUS, acting as an Emergency Medical Team (EMT) under the supervision of the World Health Organization (WHO), recognized the catastrophic situation caused by the ongoing conflict and the strained healthcare infrastructure. By building partnerships on the ground, including collaboration with local actors such as Dnipro emergency services and NGOs like BaseUA and VostokSOS, CADUS tailored its actions to the actual needs

of the affected population, aiming to sustainably improve patient care.

The training measures covered a range of medical topics, including trauma first aid, cardiopulmonary resuscitation (CPR), and a five-day course serving as an introduction to emergency medical services (EMS). Despite the challenging circumstances, CADUS began to establish itself in the field of training by offering courses aimed at closing critical knowledge gaps and enhancing the skills of local healthcare providers and first responders. These initial trainings laid the foundation for future expansion, and the positive response from participants underscored the initiative's value.

Although these efforts were commendable, only limited resources were available, so the program could not meet the overwhelming demand for medical training and services in the conflict regions. This prompted us to apply for funding from the Else Kröner-Fresenius Foundation for our training program, which we fortunately received in December 2022. This allowed us to begin expanding our initiative in early 2023 and better meet the needs of our target population.



A Mobile Makerspace for Ukraine

The war in Ukraine poses a threat to civilian livelihoods and infrastructure, a reality that became evident immediately after the first attack by Russia. Therefore, CADUS decided to support humanitarian efforts on the ground through the TOLOCAR project, a collaborative initiative between Ukrainian and international organizations aimed at infrastructure development using Mobile Makerspaces.

Humanitarian Mobile Makerspaces are vehicles equipped with machinery for working with wood, metal, or other materials. They can be used for construction assistance or equipped with devices to monitor water, air quality, or radiation. They are an effective means of providing quickly deployable, scalable, and context-adapted humanitarian aid in crisis situations.

Our analysis, conducted in collaboration with local partner organizations, revealed a significant need for housing repairs and infrastructural restorations, especially to accommodate internally displaced persons (IDPs), whose numbers had reached six million shortly after the war began. This joint needs assessment was the result of extensive networking, facilitated by the lead partner MitOst e.V. The CADUS Mobile Makerspace (MMS) is one of two Mobile Makerspaces in this joint project. The other is TOLOCAR, operated by the Ukrainian organization Ostriv. The project was funded by the GIZ (Deutsche Gesellschaft für Internationale Zusammenarbeit). Due to the project's success, a number of TOLOCARs now exist in Ukraine.

On May 14, 2022, our CADUS MMS (Mobile Makerspace) went into operation in Ukraine. In the following four months, we worked on five different missions to support local partner organizations in the western and central regions of the country. In addition to these missions, we were able to conduct two Hostile Environment Awareness Trainings (HEAT) to prepare our partners for work in crisis contexts.

During the deployment of the Mobile Makerspace, CADUS collaborated with more than 250 Ukrainian citizens and nine different local organizations,

building a network not only of humanitarian actors but also of Ukrainian and international civil societies. This network serves as an example of solidarity and mutual support in leading a self-determined life. CADUS has created a new, scalable approach for technical humanitarian interventions.

1. Renovation of Hotel Olya as Part of the Co-HATY Project

The first mission we participated in took place from May 18 to June 13, 2022, in Ivano-Frankivsk. It was a collaboration with the Ukrainian organizations MetaLab and Insha Osvita under the Co-HATY project. The goal was to create dignified and hospitable accommodation for up to 80 IDPs, primarily from eastern Ukraine, through the renovation of six houses, including Hotel Olya. CADUS provided technical assistance and supported construction and renovation work.

2. Renovations with Creative Rural Hub (CRH)

Following the work on the Co-HATY project, CADUS stayed in the area to support further housing production. By renovating an attic in Verkhni Verbizh from June 15 to 30, additional accommodation was created. The building also served as a base for TOLOCAR.

2. Reconstruction of the Civil Protection Office (DSNS) with Building Ukraine Together (BUR)

The MMS was eventually moved further east to the city of Makariv, Kyiv Oblast. This mission took place from July 7 to 15, aiming to support the 50 volunteers of BUR in rebuilding the Makariv Civil Protection Office (DSNS), which had been damaged by heavy shelling. Together with BUR and DSNS staff, we carried out work including erecting drywall walls, replacing doors, checking and repairing the electrical system, installing lighting fixtures, and working on the second-floor rooms of the building.

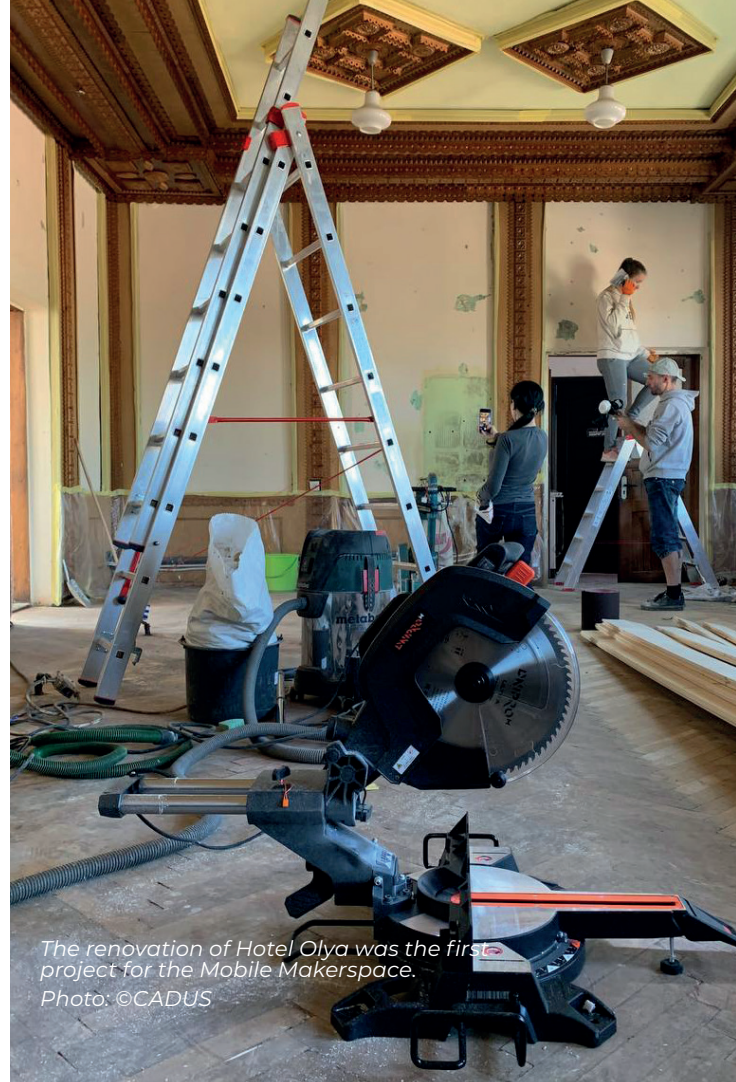
4. Rebuilding the School in Motyzhyn with BUR

During the work in Makariv, BUR suggested another joint construction project. The regional school in the small village of Motyzhyn was severely damaged by bombings, resulting in burnt corridors and classrooms and a roof no longer weather-

proof. The construction work took place from July 18 to 30. In collaboration with BUR and community volunteers (about 90 people in total), we focused on restoring the corridors on the first and second floors, which were the most affected by the fire, as well as repairing the roof and restoring the classrooms, whose walls were damaged by debris. The tools and materials provided by the CADUS Mobile Makerspace made a significant contribution to the workflow and safety at the construction site. After the construction work, the school was able to reopen for local children in time for the start of the school year in September and can now educate around 700 children despite the difficult times.

5. Deconstruction and Renovation of the Kindergarten in Ivano-Frankivsk

For our final mission, we decided to return to Ivano-Frankivsk in the west of the country. From August 1 to 12, we helped MetaLab and the local community renovate the kindergarten building, which the city administration had designated as a reception facility for about 150 IDPs.



*The renovation of Hotel Olya was the first project for the Mobile Makerspace.
Photo: ©CADUS*



*Our Mobile Makerspace enabled us to find a solution for (almost) every problem.
Photo: ©CADUS*

MICU – The Rolling Intensive Care Unit

To support the intensive medical transport capacities within Ukraine, we, together with our Ukrainian partner organization Metalab, converted a coach bus into a rescue vehicle: The Mobile Intensive Care Unit (MICU).

The high demand for medical transports, known as MEDEVACs, within Ukraine has existed since the beginning of the war. Hospitals near the front lines need to be evacuated, patients require transport for proper treatment within the country or abroad, and the injured need to be moved out of combat zones. There is a significant shortage of trained personnel, vehicles, and equipment, especially for intensive medical transports, such as those required for ventilated patients.

By converting a coach bus into a rescue vehicle at a low cost, we were able to increase the number of patients per transport while simultaneously reducing the personnel required and vehicle wear and tear, as conventional ambulances are not designed for long-distance trips like those needed in Ukraine.

In early summer 2022, we began by stripping the bus and planning the conversion in our Berlin Crisis Response Makerspace. Three volunteer drivers transferred the bus to Ivano-Frankivsk, Ukraine, where our technical team from the Mobile Makerspace, with extensive support from Metalab, equipped the bus with electrical systems, water, and oxygen distribution to cater to up to 10 patients (four stretcher positions, six seated positions). The MICU is also equipped with monitors, ventilators, infusion pumps, and suction pumps at each station, as well as two defibrillators – everything necessary to ensure intensive medical monitoring and care for the patients.

Since the end of October, the MICU has been in operation several times a week under CADUS management. After comprehensive training, we will hand it over to the local emergency medical service, EMS Dnipro, who will then operate the MICU independently.



Gutting the tour bus with the help of many volunteers. ©CADUS

Before handing over the MICU to the local emergency service, we conducted joint missions to ensure a smooth transition and training.

Photo: ©Nick Jaussi/CADUS



Mobile PHC – The Rolling Doctor's Office

At the end of 2022, we began working on another mobile treatment unit for Ukraine. An off-road truck is being converted into a mobile primary healthcare (PHC) clinic to serve the far eastern regions of the country. In war, it is crucial not only to treat injuries but also to maintain basic medical care, which is a significant challenge. A mobile and flexible concept can help address this need.

CADUS Projects in the Middle East Region

The regions of Iraq and Syria continue to face complex challenges, including armed conflicts, displacement, and the strain on healthcare systems. Throughout the reporting period, the CADUS Middle East department worked tirelessly to address these challenges and provide much-needed assistance to the affected people.

Iraq

The humanitarian landscape in Iraq has drastically changed in recent years. Although the healthcare system remains largely overwhelmed, the situation is now perceived as less critical by governments, donors, and various other actors compared to a few years ago. As a result, it has become increasingly difficult to secure financial support for project implementation. Concurrently, the focus has shifted more towards development cooperation, moving away from humanitarian emergency aid. Recognizing the importance of sustainable solutions, CADUS Middle East has focused on initiatives for training and capacity building, among other efforts.

Infection Prevention and Control (IPC) Training

CADUS aimed to reduce secondary infections

among patients and healthcare workers through a twelve-month Infection Prevention and Control (IPC) training program for healthcare professionals. The program, which ran from March 2021 to March 2022, consisted of five different modules: 1) Hand Hygiene, 2) Prevention of Surgical Site Infections, 3) IPC to Combat Antibiotic Resistance, 4) Injection Safety, and 5) Prevention of Catheter-Associated Urinary Tract Infections. The training was conducted in collaboration with our local health partner Viyan and funded by the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ).

First Aid Training for 120 Emergency Vehicle Drivers

In June and July, we trained over 120 emergency vehicle drivers in the Dohuk district, northern Iraq. With the help of volunteer professional trainers from Germany and Switzerland, training groups of up to 10 participants practiced proper behavior in various accident scenarios. Since the local ambulance drivers typically have little or no medical training, the focus was on reinforcing the basics to increase patient survival chances. Topics included resuscitation, wound treatment, and proper patient transport. The introduction and training of first aid measures were received with great interest and were explicitly requested and actively supported by local health authorities. German-Kurdish speaking personnel were provided for translation. The training took place in the provincial capital, Dohuk City, and the rural areas where the emergency drivers are stationed. It was agreed with the local health authorities to continue and intensify the training as much as possible. The project was funded by donations.

Syria

Al Hol Camp is an internally displaced persons and refugee camp located south of the town of al-Hol, near the Syrian-Iraqi border, in the al-Hasakeh Governorate. In March 2021, Al Hol Camp housed 60,696 people, including about 46% Iraqis, 39%

Syrians, and 15% third-country nationals (9,597) who are housed in the so-called “Annex.” Over 90% of the camp’s population are women and children, with 65% being under twelve years old. The population of Al Hol Camp has grown from around 10,000 people in December 2018 to over 73,000 in April 2019.

The security situation in Al Hol Camp is continuously deteriorating, making the working environment extremely challenging and requiring adjusted security measures. Due to the difficult security situation, access for humanitarian aid is often interrupted, and the camp’s residents can only receive basic services. This leads to significant frustration and a tense atmosphere.

Field Hospital in Al Hol Camp

In response to the dire health situation in the refugee camp, CADUS operates a field hospital that is open 24/7. The facility has 30 beds for inpatient care, performs minor and intermediate surgeries, treats infectious diseases, provides X-ray and laboratory services, and includes an intensive care unit and an isolation ward, including a special ward for COVID-19 suspected patients with comorbidities. The hospital employs nearly 60 staff members, including eight doctors, 17 nurses, three radiology technicians, two pharmacists, and nearly twenty support staff. The medical team is led by a team leader and advised by a medical coordinator, both ensuring high-quality standards and procedures. In 2022, the hospital treated more than 8,000 patients, including 2,150 surgical cases and 2,560 internal medicine cases.

The field hospital has been active in Al Hol since March 2019 and has become an essential component of healthcare in the camp. CADUS closely coordinates with other healthcare facilities within and outside the camp. The small international expert team from CADUS supports the local medical staff, ensures adherence to international medical standards, and provides training.

The field hospital is managed from our regional

office in Al Hasakeh. It is a crucial part of health-care in Al Hol, receiving approximately 60-80% of all referrals from other healthcare facilities. CADUS keeps the hospital operational even in the most challenging security situations. The increasingly tense situation in the camp poses a significant challenge and necessitates constant adjustment of our security measures. Thanks to close coordination with the Kurdish Red Crescent, CADUS has been able to remain active longer than other organizations on-site. The field hospital is funded by the Federal Foreign Office.

Coordination Center for Patient Transfers and Transport

Al Hol camp is a closed camp with strictly controlled entry and exit points, resulting in limited access and movement freedom for the residents. These access and movement restrictions significantly impact the medical referral pathways within and outside the Al Hol camp. Medical care in the camp is provided by 15 static medical centers, 8 mobile medical teams, 3 maternity clinics, 2 HIV and TB clinics, 3 field hospitals, 1 stationary vaccination center, and 1 stationary center for Leishmaniasis treatment.

To ensure a centralized system that coordinates patient transport according to medical needs between various healthcare facilities inside and outside Al Hol camp, CADUS, together with the Kurdish Red Crescent (KRC), managed an internal operations desk (coordination center) and advocated with key stakeholders for a smooth referral process. This project was essential for the overall healthcare provision to the camp’s population and served as a crucial coordination mechanism. CADUS led the project until November 2022, after which it was handed over to KRC. The project was part of a larger consortium program along with Un Ponte Per (UPP), Humanity and Inclusion (HI), and KRC, and it was funded by the Crisis and Support Center (CDCS) of the French government.

CADUS Mobile Hospital in 2022 – A (Deliberate) Neverending Story

The Mobile Hospital is a project that distinguishes CADUS. The concept has been deployed in many different contexts and continually evolves. This modular Mobile Hospital essentially becomes a “neverending story.” And that is both intentional and beneficial. The demands on a mobile hospital are as diverse as its potential uses. Whether it involves providing care to refugees stranded at the European borders under mostly inhumane conditions for months, responding to emergencies arising from a pandemic, or aiding those affected by natural disasters—each situation presents unique challenges. Whether it is a typhoon, earthquake, massive flooding, or war-related crises, the fundamental medical needs are always present, along with specific needs based on the cause and region.

Our experiences from various deployments in different emergencies inform our approach, and we clearly state that the development and expansion of our Mobile Hospital is a “neverending story.”

There will always be reasons and lessons learned to develop new modules or improve and expand existing ones.

In 2022, for instance, we completed the kitchen module. This allows us to provide food for our own team during deployments, as well as for people on the move or those affected by natural disasters. The kitchen can be housed in a transporter, making it possible to produce meals exactly where they are needed.

This year, we also added the “Intensive Care Transport – Patient Transfer” module to the Mobile Hospital concept. We assembled four sets, each consisting of a transport stretcher, defibrillator/monitor, intensive care ventilator, infusion pumps, mobile ultrasound, and an emergency equipment bag. With these four sets, we can simultaneously conduct intensive care transport for four patients. The “Intensive Care Transport” module is now operational in Ukraine.



FINANCES

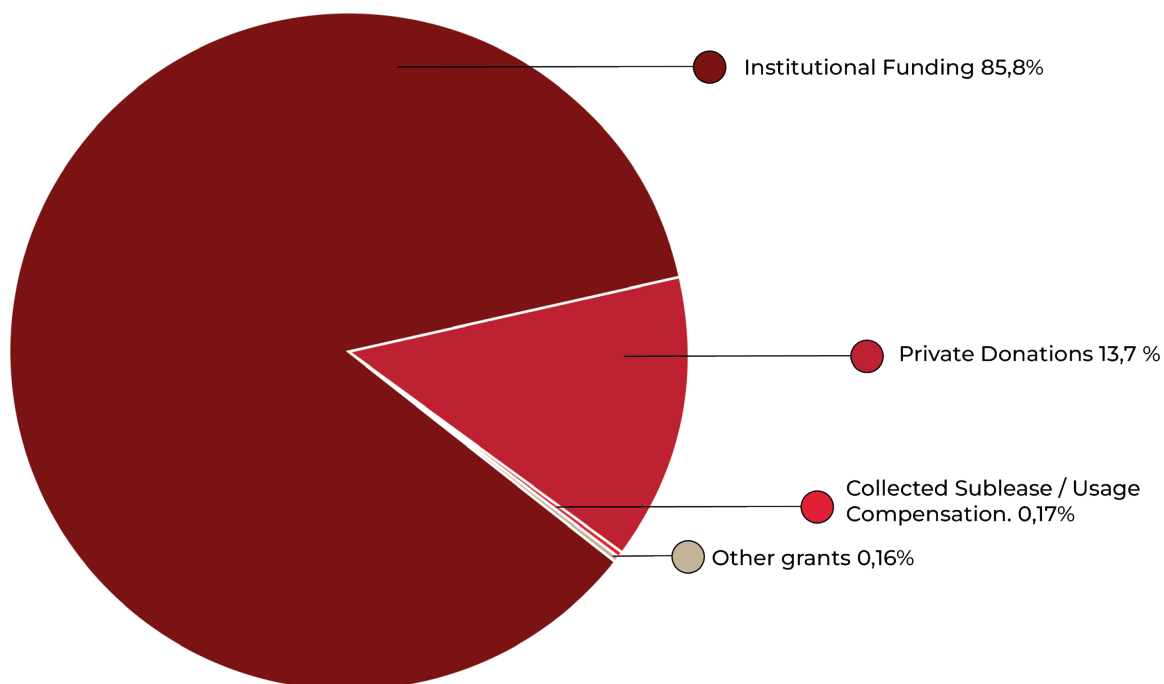
For the year 2022, we can report a sharp increase in our revenues and project-related expenditures. This is due to the high willingness to donate and provide funding following Russia's attack on Ukraine. Our initial rapid deployment was soon followed by the diversification of our activities in Ukraine, which were funded by various institutions after an application phase: medical evacuations by the Federal Foreign Office, training by

the Else Kröner-Fresenius Foundation, and the Mobile Makerspace by GIZ. Other projects such as the MICU and the Mobile PHC are funded solely by donations. Without private donations, it would not be possible for us to launch new missions and projects, as institutional funding always kicks in at a later project phase.

Revenues

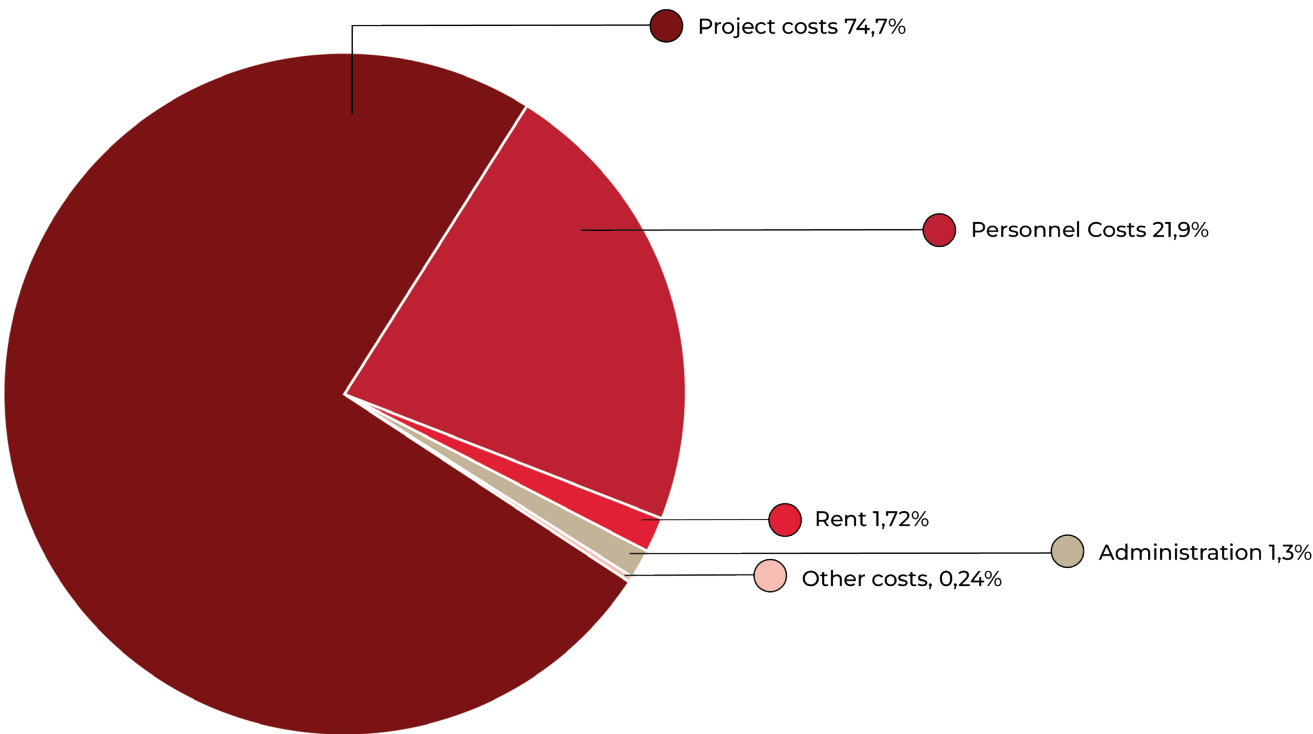
In 2022, revenues exceeded 6 million euros (6,108,173 EUR), far higher than in any previous year. Revenues from private donations (841,680 EUR) were two and a half times higher than in 2021, and institutional funding more than tripled, reaching 5.2 million euros (5,245,499 EUR). In addition to the new funding in the context of the war against Ukraine, the field hospital in Camp Al Hol in North-east Syria continued to receive support from the

Federal Foreign Office. The Operations Desk in Al Hol received funding from the French CDCS, and the IPC training in Iraq was funded by GIZ. Private donations were also essential for our activities in the Middle East, allowing us, among other things, to conduct training for ambulance drivers in Iraq.



Expenditures

In 2022, the most significant increase in expenditures was seen in project-related costs, which exceeded 3 million euros (3,202,984 EUR). More activities and projects require more personnel (939,392 EUR) and administrative support (56,015 EUR), leading to a slight increase in these expenses compared to the previous year (personnel: 24%, administration: 13%). However, this increase was relatively small compared to the rise in project-related expenditures (253%).





IMPRINT

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