Reducing health inequalities for the most vulnerable populations

2018 - 2019
HEALTH INEQUALITY REFLECTS VULNERABILITIES AT THE HEART OF LIFE JOURNEYS

According to the WHO, «health is a state of complete physical, mental and social wellbeing, not simply the absence of disease or infirmity.» This means that any attempt to reduce health inequalities must be anchored at the heart of individual life journeys. Health, housing, family support, and economic conditions, along with access to healthcare, education, employment, information, and rights all determine a person’s welfare or – conversely – their vulnerability, a cardinal concept at the heart of our commitment.

Our vision
Collectively building a world where everyone has a chance to be born and live in good health. This is the meaning of our commitment to a comprehensive approach to human individuals and to a caring society that restores confidence in the future.

Our mission
We aim to reduce health inequalities by identifying them throughout the life-time of those who are most at risk. And especially during high-impact events that mark people for the rest of their lives. These start at the prenatal stage, then in childhood, and later during periods of extreme social vulnerability due to conflicts, migration, isolation, and more.

Our priority beneficiaries
Health is where basic human connections all converge. It begins with mothers and children, and later the family and child unit early in life, gradually distilling all the factors that lead to vulnerability. That is why we have defined three priority groups - children, women and families.

ENSURING ACCESS TO HEALTH ON THE LONG-TERM AGENDA

1. Supporting mothers and unborn children in low- and middle-income countries
   2.6 million children die each year during their first month of life, to which another 2.6 million stillbirths must be added, mostly in low- and middle-income countries. WHO, 2018

2. Supporting children with cancer in low- and middle-income countries
   Only 20% of children with cancer in certain low- and middle-income countries will recover, against 80% in high-income countries. Cancer is a leading cause of death among children worldwide. WHO, 2018

3. Accompanying the life journeys of the most vulnerable communities in France
   Poverty is not declining in France and the country is reproducing highly vulnerable conditions for young people. INSEE, 2017

RESPONDING TO HUMANITARIAN EMERGENCIES AND UNDETECTED CRISSES

4. Supporting families during health crises
   During natural disasters, there is a X14 greater risk of dying for women and children than men. UNICEF, 2015

OUR PRACTICAL RESPONSES FOR AND WITH OUR BENEFICIARIES

Whether those that benefit from our actions are people in vulnerable situations or the local associations and actors we support, our goal is always to develop their independence, and their ability to find and apply the resources they need.

4 ACTION TRACKS

acting

Working as closely as possible to realities on the ground, we deliver immediate health solutions and direct access to care. To respond better to local situations, we rely on joint actions and co-construction rather than on purely solo efforts.

reinforcing

Quality care from the appropriate actors and tools are essential for reducing health inequalities. Training, information and awareness-raising for all stakeholders are crucial in reinforcing our actions over the long term.

catalyzing

Guided by a global approach to life journeys, our action is fundamentally collective and holistic. That is why we focus closely on engaging with and uniting actors right across the medical and social spectrum to help them interact and drive change. We position ourselves as a catalyst of solidarity acting to reduce vulnerabilities.

innovating

In synergy with our founder Sanofi, innovation is one of our key drivers. Innovation can be technical (telemedicine, telepathology, etc.) or practical – redesigning our ways of working and acting jointly with our partners through our comprehensive approach. We aim to accelerate all forms of innovation and make them accessible to as many end users as possible in the general interest.
Although therapeutic progress is constantly creating new hope, there are still endemic health inequalities. This evident disparity between the countries of North and South is also widening inside wealthier countries. Urgency inevitably focuses on the poor. But to make an effective impact, we must improve on a piecemeal approach. We need to go beyond the symptoms and focus on the causes if we want to truly address social and personal vulnerability. This means digging down to the roots of the fragile, endangered life journeys that we encounter. And anticipating and understanding so that we can act usefully. To reverse the inequality curve, we advocate a comprehensive approach to the individual life journeys we encounter. This covers treating, educating, housing, informing, protecting and reintegrating people. We are working to provide comprehensive and inclusive support, which is the only guarantee of a newfound autonomy that can put people back on the path towards hope. Based on both conviction and pragmatism, this approach is now being widely shared, and we are stimulating the creation of an entire ecosystem of civil society actors from private, institutional, political, and other horizons who are used to working sector by sector. We also continue to face difficult and sometimes neglected issues such as children’s cancer in poor countries or support for migrants. And everywhere we look we seek out deep and lasting collective remedies.

“International Recognition from the Scientific Community

Sanofi, a world class biopharmaceutical company, is a key player in public health. In this respect, the company is particularly proud that its Sanofi Espoir Foundation also plays this essential societal role. And like Sanofi, the Foundation enjoys international scientific recognition. For example, an article about its ambitious My Child Matters program, conducted in collaboration with governments and NGOs to improve the management of childhood cancers in developing countries, has been published in the Lancet Oncology. This program has increased median five-year survival by more than 5% and saved the lives of more than 1,300 children each year. Like many initiatives of the Sanofi Espoir Foundation, it stands at the heart of our fundamental mission.

Olivier Brandicourt
Chief Executive Officer, Sanofi
Director of the Sanofi Espoir Foundation

Let’s reverse the vulnerability curve

“We are shifting the boundaries of collective action to boost its impact.”

In line with international or national initiatives that combine different approaches and foster more integrated innovation, we are pushing back the boundaries of our action to maximize our impact. These new dynamics are creating an innovative form of more responsible and more offensive sponsorship that is stimulating both assistance and solidarity. Once again, there is greater strength in unity.

Xavier Darcos
President of the Sanofi Espoir Foundation
OVERVIEW OF FOUNDATION ACTIONS IN 2018

THE FOUNDATION’S BUDGET

€15M over 3 years (Sept. 2015 - Sept. 2018)

Valérie Faillat
Head of Sanofi Espoir Foundation

3 questions

Why are you de-siloing both your approaches and actors?

To reduce health inequalities we have to apply holistic actions that include many of the key factors that determine the fate of individuals. For example, education and culture have an obvious impact on maternal health. Through this global vision that espouses a systemic approach to health involving interdependent parameters, we need to enter the multidimensional universe of socially informed medicine. It would be illusory to act in isolation and only try to solve problems by means of a technical approach.

What are the key drivers of this de-siloing process?

First openness, which forms part of the DNA of our founder Sanofi, which has been multiplying partnerships with organizations of all sizes around the world ever since it was founded. Second, listening to the various actors we interact with who enrich our approaches with their detailed knowledge of the terrain. We are convinced that the most impactful actions grow from local roots. Third, humility - certainly our central value as it guarantees the constructive, multidisciplinary need to respect the identity of each actor involved. Rather than «doing for» we prefer «doing with».

What role do you play in practice?

As a solidarity catalyst, we act as the coordinator or facilitator of collective actions by leveraging the concept of self-help. This leads to mutual mobilization but without any obligation to act symmetrically. In this less technical, more horizontal role, we can better stimulate and instigate overall collective change.
Supporting mothers and their unborn children in low- and middle-income countries

WHAT WE BELIEVE

While inequalities start even before birth and continue within the mother/child unit, maternal and newborn health is one of the key markers of health inequalities worldwide. Our involvement in this field, where many cultural, social, economic and material issues are interrelated, is emblematic of our commitment to the heart of women’s life journeys.

HOW WE ACT

In this global approach to pre and post-natal monitoring, we need to be fully aware of our impact. Which is why we took a step back in 2018 to assess our actions, especially our Midwives for Life training program.

We also decided to focus our commitment geographically on specific countries in Africa and Asia so we could improve our performance by integrating more effectively into the local context.

“Training is worth nothing if it can’t be properly applied due to a lack of infrastructure (no latrines, difficult access to water, etc.). Health support is a deeply interrelated undertaking.”

Valérie Faillat
Head of Sanofi Espoir Foundation

23 projects supported
4.55 million women cared for, including
1.17 million pregnant women
8,746 health actors trained, including
4,380 midwives
There are many actions in favor of maternal health worldwide, with very diverse actors and widely-dispersed initiatives but very little overall coordination.

In an effort to help this ecosystem deliver greater collective impact, we are supporting The Synergist association, which in 2018 launched a joint training effort that has helped change the profession’s practices on the ground. It has been one of the main factors behind the drop in maternal and neonatal mortality in two districts in Tanzania, and has boosted the size and reputation of both TAMA and CAM. Through this effort, both partners are now consulted by local authorities, government, and the WHO. The two associations, which today enjoy greater influence, have highlighted the need for midwives and achieved greater recognition for this profession.

Ultrasound equipment is expensive, fragile and bulky, making it inaccessible for poor countries, under-medicalized locations, and those with complex climatic conditions.

To remedy this, the echOpen association-based fablab, hosted by the Hôtel Dieu hospital in Paris, designed an affordable miniaturized echostethoscope connected directly to a smartphone, in order to provide diagnostic imaging for extremely remote places.

We have been supporting this project since the end of 2017 due to its doubly innovative nature:
- first, through its unique, user-friendly ultrasound technology, it will help health professionals provide better support for maternal and newborn health in locations lacking adequate sanitation. This will enable the monitoring of normal pregnancies and detect and quickly re-orient those at risk;
- second, due to its open-source design, this device has benefited from improvements suggested by more than 500 doctors, researchers, engineers, etc., worldwide.

After creating a prototype, the tool will be clinically qualified during a trial at the Pasteur Institute of Madagascar during 2019, with an initial implementation expected in Benin in 2020.

"Operating at the interface between medicine and new technologies, echOpen explores and opens up new practices in clinical medicine for this new century."

Mehdi Benchoufi
President of the echOpen Association

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Mehdi Benchoufi
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## OUR PROJECTS IN 2019

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<tr>
<th>COUNTRY</th>
<th>DESCRIPTION</th>
<th>ORGANIZATIONS</th>
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</thead>
<tbody>
<tr>
<td>Worldwide</td>
<td>Enable the screening of high-risk pregnancies by designing a miniaturized low cost, open-source ultrasound device.</td>
<td>echOpen</td>
</tr>
<tr>
<td>India</td>
<td>Working in partnership with communities and health systems to provide women living in slums and their children with the resources to improve their health.</td>
<td>EPIC-SNEHA</td>
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<tr>
<td>Senegal</td>
<td>An immersive approach in the Saint-Louis and Dakar regions to provide strategic policy recommendations in fields where intervention is needed to fight care deficits related to maternal and newborn mortality.</td>
<td>Saegus</td>
</tr>
<tr>
<td>Worldwide</td>
<td>&quot;SYNaPsE&quot; collaborative platform for cataloging and classifying associations working for maternal health, covering current initiatives, resources, experts, and stakeholders, to build an ecosystem for the digital age.</td>
<td>The Synergist</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>Maternal, newborn and child healthcare on the remote river islands in the Gaibandha district.</td>
<td>Friendship</td>
</tr>
<tr>
<td>Madagascar</td>
<td>Mastering the risk of infection during caesarean deliveries in three hospitals.</td>
<td>Jhpiego</td>
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<tr>
<td>Madagascar</td>
<td>Raising awareness and educating women and young children about malnutrition using the Nutricartes tool and the 1000 days game.</td>
<td>L’APPEL</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>Preventing infections in maternity homes using an innovative multi-sectoral approach.</td>
<td>UNICEF</td>
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<tr>
<td>Niger</td>
<td>Developing tools to implement the &quot;Prenatal Care WHO 2016&quot; model.</td>
<td>WHO (World Health Organization)</td>
</tr>
<tr>
<td>Senegal</td>
<td>Boosting the level of midwifery training in Francophone Africa.</td>
<td>ICM (International Confederation of Midwives)</td>
</tr>
<tr>
<td>Algeria</td>
<td>Improving midwifery skills.</td>
<td>Santé sud</td>
</tr>
</tbody>
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Photos: SAEGUS Patrick Bar/ADSF; Friendship, Santé sud
Accompany children with cancer in low- and middle-income countries

WHAT WE BELIEVE
The fight against health inequalities from the earliest stages of life is the main driving force behind our Foundation’s missions. This is reflected in actions in priority fields such as pediatric oncology. Indeed, cancer is one of the leading causes of death among children worldwide and a telling example of unequal access to care. While survival rates reach 80% in rich countries, they are around 20% in some poor countries. These include poor access to diagnosis and care, and high treatment abandonment rates leading to high mortality rates.

HOW WE ACT
Pediatric oncology care is intended to be holistic and built on the concept of a health journey. This approach identifies such key steps as access to information, diagnosis, the health system, treatment, comfort care, pain management and palliative care. These steps are being addressed, for example by training onco-pediatric teams and creating cancer registries. Since 2005, with our My Child Matters program, we have embraced all these initiatives to reduce the loss of caring opportunities. As a catalyst for care, we take a multidisciplinary, networking approach, while respecting the specific situation in each country.

58 projects in 42 countries
85,000 children in care
25,000 health professionals trained

Our main added value relates to the collective dimension. We use this to make a real impact.

Dr. Anne Gagnepain-Lacheteau
Medical Director of the Sanofi Espoir Foundation
In African countries, certain specialties are often under-represented. This is the case for anatomopathologists (specialized in the study of tissues), who are few in number and often isolated, suffering in particular from a lack of exchanges with their peers. To boost interactions and cross-fertilize their expertise, the University of Basel has developed an open-source collaborative platform called i-Path. African professionals can use this to share their analyses, which are supplemented with further content from each patient’s file, and then exchanged with experts around the world. By using this innovation, it is possible to improve the diagnosis of certain cancers.

Poverty, distance, lack of infrastructure, and expensive travel are just some of the reasons why many Paraguayan children with cancer abandon their treatment in the health centers of the capital, Asunción. So in 2009, a local team decided to launch a project to decentralize care via a network of satellite clinics. The aim was to take care of each child as close as possible to their home. At the same time, a data register was created to improve the monitoring process. In the event of absence from a consultation, families are automatically contacted and all possibilities for follow-up by telephone or on site are implemented. Result: 0% treatment abandonment rate due to this service.

In Paraguay, there’s a before and after My Child Matters when it comes to treating children with cancer.

Prof. Angelica Samudio, Faculty of Medical Sciences at the National University of Asunción
A NEW CALL FOR PROJECTS

As part of the new mandate of the Sanofi Espoir Foundation (2019-2021), a call for projects was launched at the end of 2018.

196 letters of intention were submitted. After a preselection process, 57 detailed submissions were examined by the experts committee. This committee valued the proposals, taking into account their feasibility and potential impact in changing practices in pediatric oncology.

Some twenty projects will be supported over a period of 3 years, around the themes of:

- Cancer Registry
- Strengthening professional skills
- Early diagnosis
- Palliative care and pain reduction
- Access to care
- Combating treatment abandonment

AN INTERNATIONALLY-RECOGNIZED PROGRAM

Our commitment is recognized by international institutions. In 2018, for example, The Lancet Oncology published an article on the positive impact of our action. In addition, the program has been included in the WHO Global Initiative on Pediatric Cancers.

The My Child Matters program is a partner of City Cancer Challenge, a foundation that operates in close collaboration with the Union for International Cancer Control (UICC). City Cancer Challenge aims to help resource-limited countries fight the growing burden of cancer, based on a vision that cities can be catalysts for better patient care.

Experiments have been conducted since 2017 in four cities: Asunción in Paraguay, Cali in Colombia, Kumasi in Ghana and Rangoon in Myanmar.
WHAT WE BELIEVE

Vulnerability is inseparable from all aspects of an individual’s life journey (collective and social relations, housing, health, welfare, education, training, employment, etc.) and must be understood in its plurality. Piecemeal responses have proved insufficient. Which is why we are committed to creating a collective, interdisciplinary agenda to build global support for people that matches their specific culture, origin, disability, and more.

HOW WE ACT

By coordinating, sharing, and cooperating, we work alongside our private and public partner associations to steer a coordinated network of effective actions.

We ultimately aim to create an “Institute of Vulnerabilities”, a laboratory of ideas and actions where we can discuss issues, develop joint solutions and share best practices.

Our primary beneficiaries will be the most vulnerable human groups - the homeless, people without rights, and refugees. In order to reflect together about our joint initiatives for improving the lives of the most vulnerable, we have established committees and a special discussion day on “Vulnerabilities and life journeys in France.”

As associations, foundations, and social economy or solidarity actors, together with public authorities and elected officials, we need everyone to play their part to ensure that this interdisciplinary paradigm becomes an everyday reality on the ground.
A digital platform with a comprehensive approach to individuals

Both professionals and those in vulnerable life situations find it so difficult to understand what resources are available to them that they are unable to identify the actors and services offering medical and social support in a given region. As a result, these sources of information are rarely updated and infrequently consulted. To overcome these obstacles to effective, comprehensive support, we have been working, together with public and partner associations (Federation of Acteurs de la Solidarité IDF, Emmaüs Défi, SOLIPAM, Fondation Millenia 2025) to set up a single global platform. This aims to clarify existing tools, help operators and professionals join in an overall approach to aid beneficiaries, and facilitate the approach to be promoted by the digital platform underpinning this global approach.

<table>
<thead>
<tr>
<th><strong>APPROACH</strong></th>
<th><strong>January-June 2018</strong></th>
<th><strong>June 19, 2018</strong></th>
<th><strong>February 14, 2019</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>A UNIQUE GROUP</td>
<td>Five months of co-building workshops (nearly 100 hours) on six themes defined with our partner associations.</td>
<td>A &quot;Vulnerabilities and Life Journeys in France&quot; Day to expand co-building to all stakeholders. 170 field workers participated.</td>
<td>Publication of the «National Conference on Vulnerabilities» White Paper signed by eleven partner organizations, providing concrete action proposals for a comprehensive approach to be promoted by the platform.</td>
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<td></td>
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<td>In the presence notably of Agnès Buzyn, French Minister for Solidarity and Health, and Christophe Itier, High Commissioner for the Social and Solidarity Economy and Social Innovation.</td>
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<td></td>
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<td><strong>2020</strong></td>
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<td></td>
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<td>Second “Vulnerabilities and Life Journeys in France” Day in Lyon.</td>
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<td><strong>2021</strong></td>
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<td></td>
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<td>Creation of the Institute of Vulnerabilities.</td>
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Convergence: demonstrating the relevance of comprehensive care

Only a coordinated support action that factors in interrelated issues will enable individuals to regain their autonomy and their place in society. Armed with this conviction, the Sanofi Espoir Foundation is supporting Convergence, a resource created and supported by Emmaüs Défi, an employability project for homeless people. This comprehensive approach goes beyond employment to include the issues of health and housing, together with training, administrative difficulties, disabilities and addictions. Following two evaluations, Convergence has shown that by acting on multiple factors simultaneously it is possible firstly to stabilize the recipients over time and, secondly to reduce the associated costs. As the Geste consultancy has shown, the rate of dynamic exits from vulnerability increased from 14% in 2012 to 47% in 2017. A study by a post-doctoral student, supervised by the ECOTA consultancy, meanwhile concluded that by the end of the second year of funding the public cost of Convergence will be lower than the savings realized.

Launched in 2012 in an experimental setting, the project has been run since 2016 on three other Paris integration projects and is due to spread to seven new regions by 2022. This pooling and spin-off mode forms part of the action of the Paris Pact To Fight Exclusion, and the national strategy to eradicate poverty.

With the support from Emmaüs Défi in terms of employment, health and housing, I have now been able to take care of myself. It’s like a chair: If it has only two legs, you fall down, but with three you can stay upright.

Philippe, Beneficiary of Convergence

A national health policy for young people and vulnerable families

To overcome the insufficiencies in screening and health-monitoring the young people and families aided by the Apprentis d’Auteuil organization, the Sanofi Espoir Foundation has supported a project to roll out a national health policy in more than 200 institutions. Following an internal investigation, a list of needs and priorities was established, including psychological issues, addiction, food and hygiene. Apprentis d’Auteuil worked on these areas to train its educators, visit schools, encourage the sharing of best practices, and involve young people. In 2018, more than 2,000 young people and families benefited from the project, while nearly 100 professionals were trained and more than 250 Sanofi employees committed to helping Apprentis d’Auteuil.

“ This is intended to build bridges between actors. The important thing is to work together, so that we can support people on a comprehensive basis.”

Perrine Meunier, General Manager of the Le Filon association
## OUR PROJECTS FOR 2019

<table>
<thead>
<tr>
<th>PROJECT DESCRIPTION</th>
<th>PARTNER ORGANIZATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Optimizing the care journey for vulnerable women and victims of violence Seine-Saint-Denis.</td>
<td>Women's Home of Saint-Denis</td>
</tr>
<tr>
<td>Promotion and rollout of a health policy for young people and vulnerable families supported by Apprentis d'Auteuil.</td>
<td>Apprentis d'Auteuil</td>
</tr>
<tr>
<td>Mobile Health Assessment and Guidance Team (EMEOS): a «go-to» and support resource to help people with somatic and/or mental disorders.</td>
<td>Paris Samusocial and the Groupement Hospitalier de Territoire Paris Saint Anne</td>
</tr>
<tr>
<td>Improve the access to healthcare for recipients of the Emmaüs « Convergence » project.</td>
<td>Emmaüs Défi</td>
</tr>
<tr>
<td>Mobile care access units for extremely deprived women in Île-de-France.</td>
<td>ADSF (Action for the Development of Women’s Health)</td>
</tr>
<tr>
<td>Improving access to care for Nigerian women in prostitution.</td>
<td>ADSF and Aux Captifs la Libération</td>
</tr>
<tr>
<td>Organization by experts of information, awareness and discussion meetings on perinatal mother and child health.</td>
<td>RSPP (Paris Perinatal Health Network)</td>
</tr>
<tr>
<td>Improved medical and social care of extremely deprived Romanian-speaking people living in squats and shanty towns in Seine-Saint-Denis (93) and in the Val-de-Marne (94) neighborhoods.</td>
<td>PUI (Première Urgence Internationale)</td>
</tr>
<tr>
<td>Implementation of the «Progress Star» application for tracking care recipients and measuring social impact.</td>
<td>Le Filon</td>
</tr>
<tr>
<td>Workshops and health hotlines to access care journeys for vulnerable people.</td>
<td>Osmose Network</td>
</tr>
<tr>
<td>Training and resources for persons in Reception sector institutions, Accommodation and Insertion to encourage targeted and coordinated medical and social support for those suffering from ageing-related loss of autonomy.</td>
<td>FAS (Fédération des Acteurs de la Solidarité)</td>
</tr>
<tr>
<td>An alternative to make it possible to provide home medical care for the vulnerable.</td>
<td>Habitat et Humanisme and the Centre Léon Bérard de Lyon</td>
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## PROJECTS IN FAVOR OF MIGRANT POPULATIONS

<table>
<thead>
<tr>
<th>PROJECT DESCRIPTION</th>
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</thead>
<tbody>
<tr>
<td>Comprehensive medico-psycho-social support for vulnerable migrants in precarious situations, particularly women and unaccompanied minors.</td>
<td>Comede (Committee for Exile Healthcare)</td>
</tr>
<tr>
<td>Access to healthcare for asylum seekers and recipients of international protection in a vulnerable situation with regard to health.</td>
<td>INSERM EPOPé team</td>
</tr>
<tr>
<td>&quot;Femmes Roseaux&quot;: comprehensive handling of elderly women migrant living with a chronic disease.</td>
<td>Ikambéré</td>
</tr>
<tr>
<td>Accompanying pregnancy and childbirth of future refugee mothers living in unprotected situations.</td>
<td>Maternity of Diaconesses</td>
</tr>
<tr>
<td>Research project: Groups For Pregnancy (G4P). Reaching out to the most vulnerable women using prenatal group monitoring.</td>
<td>INSERM EPOPé team</td>
</tr>
<tr>
<td>Improved medical care under the reform of the right to asylum and for homeless families in Paris.</td>
<td>CASP (Center for Protestant Social Action)</td>
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</table>
Supporting families in health crises

WHAT WE BELIEVE

During humanitarian crises, those affected find themselves in extremely vulnerable situations where everything runs out (access to care, housing, food, security, education, etc.). In such situations, we need to act immediately but also help on a sustainable basis. That is why we try to combine our emergency response with comprehensive support over the longer term to enhance its impact from the beneficiaries.

HOW WE ACT

Whether in natural disasters such as Hurricane Irma on St. Martin, conflicts such as in Syria, or population displacement such as that affecting the Rohingya in Bangladesh, we are committed to responding to humanitarian emergencies and crises that pass unnoticed in many countries around the world. With a special focus on women and children, the first victims of these attacks.

We aim for coordinated actions and in 2017 signed a cooperation agreement with the Crisis and Support Center of the French Ministry for European and Foreign Affairs. In this context, we act in concert with other foundations and companies.

Depending on the needs that are identified, our responses can take the form of financial donations to NGOs or drug donations, through our partnership with the Tulipe association or via Sanofi subsidiaries.

“Since 2017, the Sanofi Espoir Foundation has supported the Panzi Foundation of Dr. Mukwege, Nobel Peace Prize 2018, that acts to end the use of sexual violence as a weapon of war.”

Valérie Faillat
Head of Sanofi Espoir Foundation

39 countries received emergency actions
16 partner organizations
BANGLADESH

Friendship: encouraging access to care for Rohingya refugees

In August 2017, more than 900,000 Rohingya refugees, a Muslim minority fleeing repression by the Burmese army, took refuge in the Cox Bazaar camp in southern Bangladesh. According to the UN, this is the fastest growing refugee crisis for many years.

As they have been stateless for generations, the Rohingya families are an extreme vulnerable situation. In response, we have supported the Friendship NGO to set up two health centers providing essential primary health care and maternal, newborn and child health services.

In 2018, the Sanofi Espoir Foundation became a founding member of a platform called Kits4Life, and a mobile application to allow R&D centers to make unused medical supplies available for humanitarian aid. To ensure greater efficiency in inventory management and distribution, the platform uses approved recovery organizations. The goal is to ensure that the material is treated and distributed to humanitarian organizations in accordance with WHO guidelines and international laws. Kits4Life received the Society for Clinical Research Sites Prize in 2016. The platform was also voted one of the top 20 innovative projects in 2018 by Center Watch Monthly.

WORLD

Kits4Life: digital solutions to optimize the distribution of medical equipment

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Runa Khan
Founder of Friendship

"Supporting refugees is not just about food, aid, housing and health, but also dignity and above all, respect."

55% of refugees in the Cox Bazaar camp are children

22,500 people have had medical consultations in one of the two health centers (56% women)