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sabelle Giordano Secretary of the Rescue & Recover Fund Head of Group Philanthrony

## EDITORIAL ISABELLE GIORDANO

For 12 years now, the Rescue & Recover Fund, a BNP Paribas endowment fund, has regularly supported its NGO partners during disasters. Over the years, it has become a key player in the Group's outreach commitments, thanks in particular to the matching of donations, and is now well known by employees and retail banking customers in France.

The Rescue & Recover Fund enables the BNP Paribas Group to react quickly and mobilise its donors, whose growing generosity enables it to continue its actions.

The increase in the number of floods, storms and cyclones in the last few years has had terrifying consequences for the people concerned, destroying homes, limiting access to drinking water, and causing power outages. The repercussions of these events have a long-term traumatic effect on the population.

These developments were fully illustrated in 2024, with the Rescue & Recover Fund rallying around two emergency campaigns. The first was launched in November following the violent floods in south-east Spain, the second was rolled out in December following cyclone Chido, which ravaged the Mayotte archipelago.

Funding of more than €1.4m enabled our partners in the field to help the people affected by these two crises, through consultations and first aid, the supply of medicines and food, the distribution of essential goods for shelter and hygiene kits to maintain dignity, as well as psychological support. On the ground, the partners of the Rescue & Recover Fund are working together to respond as effectively as possible to the needs of the populations. Their complementary actions and effectiveness contribute to the fund's popularity and success.

The development campaign was dedicated to access to water, essential to the survival of all living beings, a fundamental right to which too many people in the world still have no direct access. Thanks to your generosity, more than €400,000 are supporting our partners' projects for vulnerable people in French Overseas Territories, children in the Amoron'i Mania region of Madagascar, and displaced people in Haiti.

As climate change increasingly exacerbates natural disasters, we will continue to proudly support the field missions of our partner NGOs.







## OUR MISSIONS

## THE RESCUE & RECOVER FUND WORKS IN TWO MAIN AREAS



#### THE 5 FOUNDING MEMBERS OF THE FUND ARE-

reated in 2012, the Rescue & Recover Fund is the endowment fund of the BNP Paribas Group. Integrated in the Group's philanthropy, its purpose is to take emergency action in the event of serious

humanitarian crises. To that end, it collects donations from Group employees around the world, from retired Group employees, and from retail banking customers in France. The donations collected



are matched by its Founding Members.





and its retail banking network in France





**BNP Paribas Switzerland** 



The Fund's Board of Directors is made up of a Chairman and a representative from each of the Founding Members. The office consists of a secretary and a treasurer.

#### How we work

When a crisis occurs, be it an earthquake, hurricane, tsunami, conflict or fire, the Board of Directors examines the situation, including in terms of the human and material toll, the intervention capacity and presence of our NGO partners on site, the presence of BNP Paribas, and the geopolitical situation. On the basis of this information, it decides whether or not to launch an emergency campaign to help those affected, accompanied by our partners (French Red Cross, CARE and Médecins Sans Frontières).

The sums raised by these campaigns are then donated, with the corresponding matching funds, to humanitarian partners working on the ground in the event of a disaster.



Access to water. © Médecins Sans Frontières

# RESPONDING SWIFTLY TO EMERGENCIES

#### Is the Fund's main mission.

The Fund provides financial support to partner NGOs so that, as soon as a disaster strikes, they can rapidly dispatch emergency aid and assistance to the local populations affected.



Families fleeing Ukraine transport their goods through Zosin border post in Poland © UNHCR/Chris Melzer.

# VIOLENCES FAITES AUX FEMMES & AUX FILLES VOUS AVEZ LE POUVOIR D'AGIR FAITES UN DON MARDI 30 NOVEMBRE VOUS AVEZ LE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 ÉCEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! MARDI 30 NOVEMBRE VAITE DUE POUVOIR D'AGIR, FAITES UN DON! \*\*CONTRACTION D'AGIR \*\*CONTRACTION D'AGI

 ${\it Reminder of previous donation campaigns organised by the Rescue \& Recover Fund.}$ 

## SUPPORT DEVELOPMENT

The Fund provides aid to the most vulnerable populations by supporting the projects of humanitarian partners. The aim is to support them in tackling long-term development issues, such as access to drinking water, mother and child health, the adaptation of vulnerable populations to climate change, and the fight against violence to girls and women.

A development campaign is launched every year on Giving Tuesday, the international day of generosity. The theme of the campaign is chosen and approved by the Board of Directors of the Rescue & Recover Fund, which takes into account current events and the needs of humanitarian organisations.











# PARTNER NEOS

#### TOGETHER, THEY CARRY OUT COMPLEMENTARY ACTIONS ON THE GROUND DURING DISASTERS

## CARE

Founded in 1945, CARE aims to reduce poverty by addressing its root cause: inequality. In more than 120 countries, this NGO carries out complementary development and emergency programmes in areas such as food security, education, health, access to water, and economic devel**opment**, with real and lasting results. CARE also appeals to governments on human rights, including women's rights, social justice, economic and environmental aspects, and the establishment of good governance.



## **MÉDECINS SANS** FRONTIÈRES (MSF)

Médecins Sans Frontières (Doctors Without Borders) is an international medical humanitarian association created in 1971 in France. The MSF teams provide medical assistance to people whose lives or health are at risk, mainly as a result of armed conflict, epidemics, natural disasters or an absence of healthcare. MSF is independent of all political, military or religious authorities and acts impartially after assessing medical needs.



## FRENCH RED CROSS

The International Red Cross and Red Crescent Movement was born out of a concern to provide non-discriminatory relief to the wounded on the battlefield. In its international dimension, the International Red Cross and Red Crescent Movement strives to prevent and alleviate human suffering in all circumstances. The French Red Cross (CRF) is part of this movement and is one of 191 national branches around the world.

Active before, during and after crises, CRF takes action during disasters or conflicts thanks to precise and rapid interventions to provide relief on a daily basis. It also offers a wide range of prevention and development programmes, including disaster risk prevention, training, life-saving awareness and education. It also supports vulnerable people through a broad range of social action schemes, such as food and clothing assistance, social transport, the fight against digital exclusion, and access to rights.



© Médecins Sans Frontières

he Board of Directors of the Rescue & Recover Fund met on 5 June 2024 for its Annual General Meeting. The Board reviewed and approved the financial statements for the year ended 2023, as certified by the Statutory Auditor.

The Annual General Meeting is a key opportunity for taking stock of the past year and reflecting on the various ways in which we can develop our operations and support.

Mindful of the importance of its support in the ecosystem of its partners for emergency actions, the Rescue & Recover Fund has decided to move ahead with the changes\* initiated two years ago and designed to adapt to future challenges.

\*Capping of the matching contribution and the possibility of supporting a new partner (already known to the Group) during development campaigns.

#### **Extended field of action**

With 12 years of experience and substantial stability, the Fund is now working on opening up its partnerships more widely and extending its field of action to better meet the needs of people affected by various crises around the world.

For example, the Board of Directors has authorised the fund to upgrade the development campaigns launched at the end of each year for Giving Tuesday, enabling it to support long-term development projects by working with another player in the humanitarian world, different from its current partners and specialising in an area not covered by them.

#### **Funds distributed differently**

To better respond to the needs of disaster-struck populations, the Fund's Board of Directors is also considering how to optimise the distribution among its partners of the sums collected and matched

#### End of an era

Founded in 1969, the International Fund For Animal Welfare (IFAW) is a global organisation that cares for and releases animals and restores and protects their natural habitats, particularly following disasters.

IFAW's partnership with the fund ended in July 2024 following the closure of its emergency animal rescue programme in Europe. For legal reasons, the fund cannot pursue a partnership with the US branch of this organisation, which remains active.

The Fund's Board members are therefore considering the possibility of integrating a new partner which, like IFAW, could round out the actions of our other partners.



2024 ACTIVITY REPORT - RESCUE & RECOVER FUND - 7



1,959,311€ distributed

to our partner NGOs (including the run, the balances and the donations received in 2024 paid in 2025)

- From retail banking customers in France
- from Group employees and BNP Paribas **Group retirees** who are members of the "Amicale Des Retraités" club
- from **business line** donations

## **2 EMERGENCY CAMPAIGNS**

SPAIN

576,649€

raised, matching donation capped at €250k

826,649€

donated to the Spanish Red Cross for actions in the fiel

Average donation:

Cruz Roja distribution of essential goods, provision of psychosocial support, help for people with reduced mobility, aid to reactivate businesses, rehabilitation of homes and replacement of household appliances.

MAYOTTE-

393,804€

raised, matching donation capped at €200k

593,804€

donated to the field operations of our partners (CARE, French Red Cross and Médecins Sans Frontières)

Average donation:

113€

Care distribution of emergency kits, strengthening local capacity for safe water management. .

**TRANÇAISE** restoring family links, access to water and hygiene, access to healthcare, distribution of emergency equipment to rebuild homes.

setting up mobile clinics, restoring infra-Setting up moone connect, restricting and treating water.

## 1 DEVELOPMENT CAMPAIGN

#### ACCESS TO WATER AND WATER SERVICES

156,988€

raised, matching donation capped at €250k

406,988€

donated to support our partners' projects

Average donation:

115€

#### **French Overseas Territories**

The French Red Cross is working to cover significant needs in terms of access to water and water services for the most vulnerable populations.

#### Madagascar

CARE is working to preserve the dignity of children in the Amoron'i Mania region, especially girls, by improving the management of menstrual hygiene, access to water and sanitation.

#### Haiti

Médecins Sans Frontières is making the daily lives of displaced people more bearable by improving their living conditions with water supplies and sanitation facilities.







































The number of climatic disasters, including floods, cyclones and fires, continues to rise around the world, with an increasingly violent impact on the most vulnerable people. In some countries already affected by extreme poverty, recovering from such a disaster is a huge challenge. Thousands of people can lose everything they own in the space of a few minutes, including their homes, livestock and means of subsistence.

Despite an increase in the intensity and unpredictability of natural disasters, it is possible to prepare for them to limit the damage and loss of life.

We review the situation with partners of the Rescue & Recover Fund.



### **3 QUESTIONS FOR AUDE SAINTOYANT,**



Head of Disaster Risk Management and Emergencies, French Red Cross.



#### Aude, in response to the increase in climate crises, could you tell us what the French Red Cross is doing to prevent and reduce the risk of disaster?

The French Red Cross has made disaster risk reduction (DRR) and adaptation to climate change a priority in its international humanitarian work. It leads a structured strategy aimed at boosting the resilience of local populations, the preparedness of local institutions, and the movement's ability to anticipate and respond to climate hazards and crises.

Our approach is based on a multi-risk and multi-sector approach, with a tiered response: with local populations and authorities, and in close collaboration with national Red Cross and Red Crescent societies.

OF LOCAL POPULATIONS, THE PREPAREDNESS OF LOCAL INSTITUTIONS. AND THE MOVEMENT'S **ABILITY TO ANTICIPATE** 

**BOOSTING THE RESILIENCE** Our activities generally begin with a participatory assessment of the vulnerabilities and capacities of communities. This participatory approach serves to identify hazards, vulnerability factors and local capacities, based on which a bespoke action plan can be built.

#### Depending on the implementation context, we work on several aspects:

- Early warning systems: setting up or strengthening multi-hazard, community-based warning systems adapted to the context (e.g. sound signals, radio messages, human relays), often linked to national mechanisms.
- Community contingency and preparedness plans: development of local emergency response plans with the clear allocation of roles, risk maps, evacuation routes, pre-positioning stocks, etc.
- Structural and ecosystem-based risk-reduction projects, such as protecting and restoring mangroves, stabilising slopes, and building shelters and hazard-resistant infrastructure.
- Awareness-raising, risk education and behavioural change initiatives.
- Integrating DRR issues into health, water and sanitation, food security and housing programmes, for a cross-cutting approach to resilience.
- The use of forecasting tools, with the progressive development of early intervention mechanisms based on weather forecasts so that action can be taken before disasters occur.

These actions are accompanied by capacity-building (volunteer training, support for local authorities) and advocacy to ensure that risks are better taken into account in local and national policies.

#### What role do local players play in these schemes?

Local players are at the heart of the system, particularly the national Red Cross and Red Crescent societies through their network of over 16 million volunteers. They play an active role in analysing risks, planning activities, implementing actions in the field, and monitoring results. The approach of the French Red Cross is based on strengthening local capacities and rallying communities, empowering them to build their own resilience.

## When we talk about prevention, what practical steps

- Raising the awareness of communities of natural hazards and how to react in the event of an alert.
- Training local risk-management and first-aid committees.
- Mitigation actions, including nature-based solutions, such as the reforestation of areas at risk of erosion or flooding, as well as mangrove restoration.
- Installing early warning systems adapted to the local
- Integrating DRR issues into community or municipal development plans.
- Simulation exercises to strengthen preparation.

These actions are always designed with and for local populations, taking into account each specific context, to ensure their relevance, sustainability and buy-in on the part of the local community. They are implemented in collaboration with our 191 national companies around the



HACE is working on a number of research projects where a lack of knowledge has been clearly identified (e.g. the impact of extreme heat on health in refugee camps)

## MÉDECINS SANS FRONTIÈRES

In 2019, Médecins Sans Frontières set up **Humanitarian Action on Climate and Environment (HACE)**, a unit composed of environmental epidemiologists and meteorologists who gather weather and climate information in order to adapt programmes to climate change.

HACE is working on a number of **research projects where a lack of knowledge has been clearly identified** (e.g. the impact of extreme heat on health in refugee camps), the aim being to prepare ahead with the relevant preventive measures.

The HACE unit also provides information to teams on the ground to prevent climate hazards and mitigate their severity (cyclones, floods, droughts, etc.).

#### **Epidemics**

To prevent epidemics, MSF has a unit called **Epicentre**, dedicated to epidemiology and research to monitor and assess situations. The information provided by Epicentre is used to make decisions or to anticipate the needs of the population in our intervention zones.

## More broadly, MSF helps to reduce the risk of epidemics by the very nature of its work:

- By providing a supply of drinking water and sanitation facilities to prevent the spread of water-borne diseases such as cholera,
- By organising vaccination campaigns,
- By improving the diagnosis of certain diseases,
- By strengthening local healthcare systems,
- And by conducting clinical trials to contain diseases (including Ebola) before they spread.

## CARE

The CARE teams have worked in **natural disaster prevention** for many years. They organise simulation workshops and first aid training, and raise awareness of the appropriate response to a disaster.

CARE also implements warning and evacuation plans and reinforces public buildings such as schools to serve as shelters.

In the regions most prone to cyclones, such as south-east Asia, the CARE teams have implemented **reforestation programmes** whereby trees are used as natural barriers against violent winds. To boost response times in the event of a crisis, CARE teams also pre-position essential foodstuffs and tents in countries regularly affected by disasters.



 $\langle \langle$ 

The shelter-building training I took part in gave me the skills I needed. I now know how to keep the people in my village safe in the event of a disaster.

Lina, supported by CARE in the Vanuatu Islands, hit by an earthquake in 2023.

#### **CARE in the Philippines**

Typhoon Haiyan in the Philippines in 2013 affected around 16 million people. Thanks to the deployment of a disaster risk reduction (DRR) strategy developed by CARE since 2007, the beneficiaries, already trained in and prepared for the actions to be taken, were able to react to the warning systems and minimise the impact.

Thanks to:

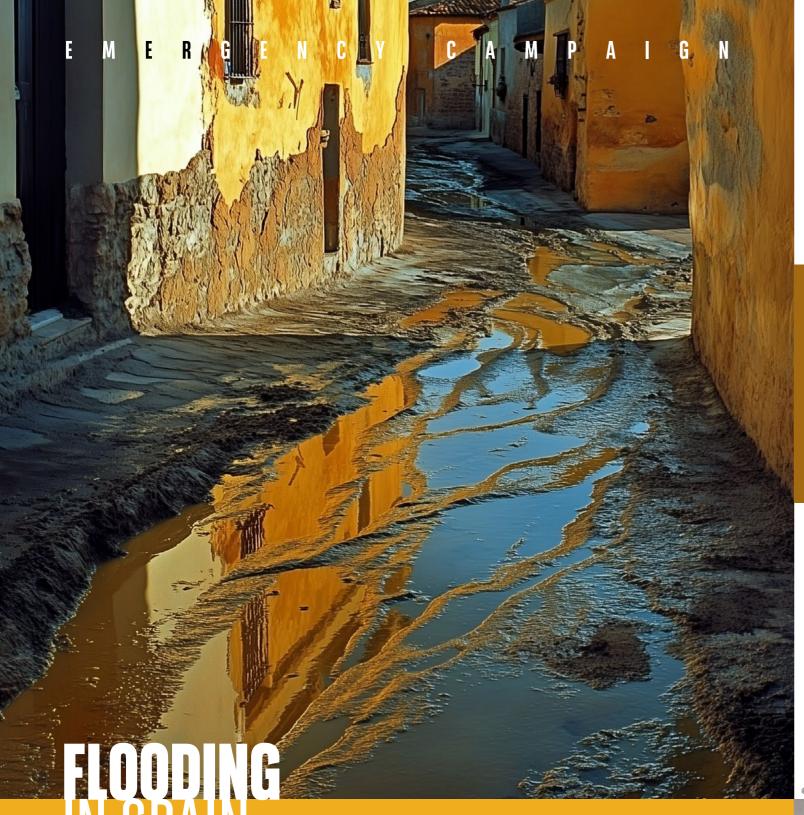
- Participative risk identification,
- Simulation exercises,
- The integration of DRR into the development plans of the Department of the Interior and local governments,
- School curricula and food security programmes.

The populations were able to evacuate their villages as a precautionary measure and implement their risk management plans.

The agents trained during the project became the focal points for distributing food and essential goods during the typhoon.

Through better communication and cooperation between all stakeholders, communities are now more receptive to messages. Annual municipal meetings are held to share risk analyses and plan actions.

Thanks to CARE's advocacy work, the Philippine government has been able to encourage communities to rebuild their homes outside risk zones based on identified risk maps.



he flood impacted 39 municipalities affecting over 650,000 people, mainly in the regions of Valencia, Castilla-La Mancha and Andalusia. The torrential rain caused rivers to overflow their banks, generated power cuts and forced the evacuation of numerous homes, leaving a large number of people homeless. Terrible mudslides caused immense material damage, impacting infrastructure, essential services and agricultural land and affecting the lives and property of thousands of people. In the words of Cécilia Boned, Head of Territory BNP Paribas Spain:

We are all devastated by the consequences of one of the greatest natural disasters Spain has ever experienced. The number of people missing and the testimonies of those directly affected by the floods are heartbreaking. We are immensely grateful to the Group for its solidarity with Spain at such a painful time for us.

Cécilia Boned, Head of Territory BNP Paribas Spain.

The needs of the Spanish Red Cross to help the disaster victims were colossal. **Donations were channelled directly into the local community via our NGO partner, the French Red Cross.** The Fund's other partners were not present in the field.



The significant support from the Rescue & Recover Fund enabled the Spanish Red Cross to act as swiftly as possible and respond to the first emergencies.



Flooding in Spain. © AFP

On the night of Tuesday 29 to Wednesday 30 October 2024, south-eastern Spain was hit by violent floods that killed more than 200 people and left hundreds more missing.



826,649€

donated to the Spanish Red Cross for actions in the field

Matching donation capped at 250,000€

#### INTERVENTION BY THE SPANISH RED CROSS



mmediately after the floods, Spanish Red Cross teams were deployed on the ground to provide emergency aid to the affected populations, accompanied by a large number of volunteers from other regions of Spain.

#### Distribution of essential goods and equipment:

- 5,409 rest kits (beds, sheets, duvets and pillows)
- 405 power supply kits
- 497 cleaning kits
- 1.892 electric radiators
- 318 hotplates
- 1,562 dehumidifiers

## Implementation of psychosocial support to help people cope with the impact of the disaster

Psychosocial support teams made up of psychologists, social workers and first-aid workers assisted families and individuals suffering significant human and material losses, directing those with more specific needs to dedicated services.



🕽 Croix-Rouge espagno



© Croix-Rouge espagnol

#### Assistance for people with reduced mobility

A total of 934 trips were made using electric evacuation chairs, enabling access to medical consultations for people with reduced mobility who were unable to use the lifts in their homes because of the flooding.

#### Distribution of prepaid cards

Some 8,488 prepaid cards were distributed to people whose homes had been badly hit, with the priority given to the most vulnerable, providing them with a sum of money for essential purchases or services.

The amounts distributed were calculated to cover needs for three months, depending on the number of people in the household.

- For a single person: €657; for two people: €987; for three people: €1,317; for four people: €1,647; and for five people or more: €1,977.
- Applications assessed and processed: 18,702
- Amount relating to claims assessed and processed: €21,772,462
- Cards distributed: 8,488
- Average amount: €1,200



© Croix-Rouge espagnole

#### **Reactivation of businesses**

Many businesses were impacted substantially, generating diverse needs, including support in applying for aid, business recovery viability assessments, a response to sudden unemployment, and other workforce-related needs

A total of 1,161 companies were eligible for financial assistance of up to €5,000; 154 subsidies were awarded for a total of €762,500.

## Refurbishing homes and replacing household appliances

A number of initiatives were rolled out to renovate homes and distribute household appliances: 269 requests for housing renovations and 5,056 requests to replace household appliances (washing machines, fridges, ovens, hobs and cookers) were received.



© Croix-Rouge espagnole

#### FURTHER ACTIONS

2,099

toys were distributed to children

126

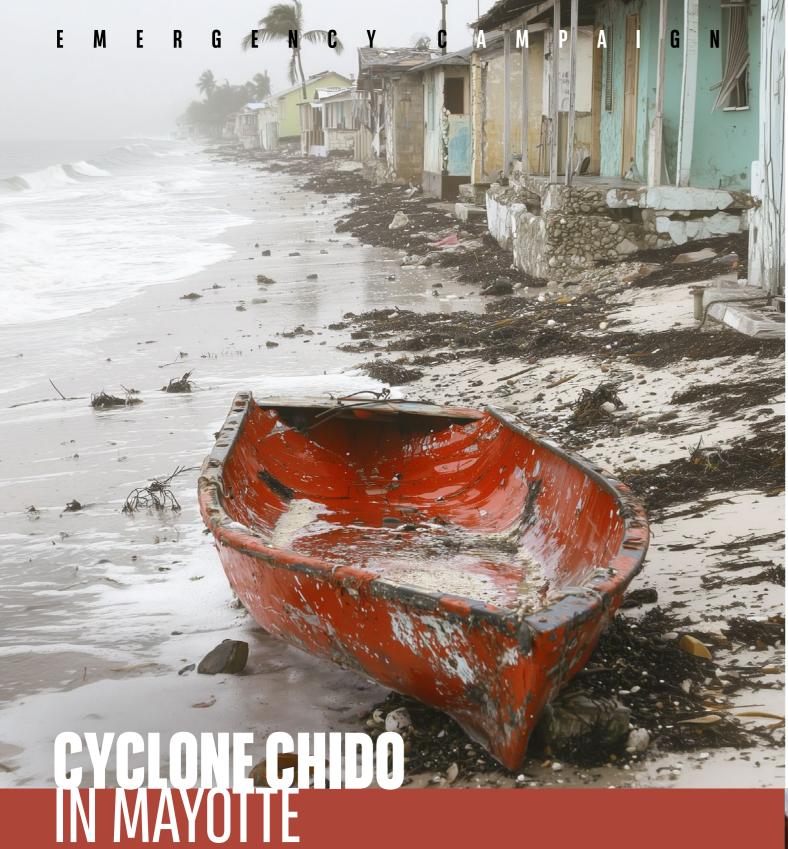
## requests for specific assistance were processed, including the distribution of:

- 90cm and 105cm of articulated beds with lifting trolleys.
- 90cm and 105cm viscoelastic mattresses.
- Self-propelled wheelchairs.
- Electric wheelchairs.
- 2- and 4-wheel walkers with brakes.
- Anti-bedsore mattresses.

## 11

sessions were organised on access to rights. The most frequently asked questions concerned accommodation and insurance.

Other actions included cleaning up rivers and identifying the needs of homeless camps.



On Saturday 14 December 2024, the Mayotte archipelago was hit full force by cyclone Chido. Destructive winds of over 200 kilometres per hour resulted in a major humanitarian crisis. DECEMBER 2024—

593,804€

distributed for our partners' actions in the field

Matching donation capped at

200,000€

ayotte – already a vulnerable territory, with 77% of the population living below the poverty line, 40% of homes made of sheet metal and 30% of households having no access to running water – was devastated by the force of the cyclone. Women and children already affected by fragile living conditions were hit particularly hard by food insecurity, aggravated health risks and violence intensified by this disaster.

Chido destroyed numerous makeshift homes and heavily damaged Mayotte's infrastructure (hospitals, medical services and public buildings), often rendering these services inoperable. The archipelago was deprived of water, electricity and internet access, which took a toll on living conditions and made rescue operations extremely complicated.

But the French Red Cross, Médecins Sans Frontières and CARE, supported by the Rescue & Recover Fund, were able to intervene quickly to help those affected.

#### THE FIELD ACTIONS OF THE PARTNERS OF THE FUND

## CARE

CARE, Solidarités International (SOL) and the Mahoran NGO NAYMA joined forces as part of a consortium to help 20,000 beneficiaries in three areas:

- Access to basic services: rehabilitation of water networks, distribution of hygiene kits, and disease prevention awareness-raising.
- Environment and resilience: waste management, reforestation, and support for a centre for out-ofschool children.
- **Gender equality:** analysis of needs, distribution of menstrual hygiene kits, and training for local players.

By pooling their expertise, CARE, Solidarités International and NAYMA were able to provide immediate aid to the people affected by the disaster, with a particular focus on women and girls, who were the first to be affected by the crisis.





## Access to drinking water: targeted action for the most disadvantaged

In the absence of water access solutions for the most vulnerable, Solidarités International worked alongside the Emergency Response Units of the French Red Cross and volunteers from the Veolia Foundation. They repaired and installed infrastructure to boost storage capacity and cope with water shortages.

Thirteen water points were installed or rehabilitated in Kwalé Légion, Sana, Kirissoni, Gnambotiti and Brésil, and eight tanks were installed or refilled in mosques, schools and strategic neighbourhoods, giving 9,066 people living in bangas (informal dwellings built of flimsy materials) access to water.

#### **Distribution of emergency kits**

Following the passage of cyclone Chido, CARE teams and their partners set up an emergency response to ensure access to drinking water and improve hygiene conditions for people living in shantytowns. This was a crucial intervention, particularly in the *bangas*, where access to water was completely cut off, as the inhabitants were exposed to a high risk of water-borne diseases.

#### 4 MUNICIPALITIES – COVERED

Mamoudzou, Tsingoni, Dembeni, Koungou

705 beneficiary households 5,010 people



#### **Building local capacity for safe water** and hygiene management

CARE and its partners organised training courses on chlorination and water chemistry for local associations and community relays, with the aim of ensuring that renovated water points are effectively treated to limit the spread of water-borne diseases.

#### -WHY CHLORINATE WATER?-

Water treatment by chlorination eliminates most of the bacteria, viruses and germs responsible for diseases such as typhoid and cholera. Chlorination is essential for local communities that drink water from unsafe sources, including surface water, shallow wells and rainwater.

There are bad practices in the communities, such as drinking water from the river without boiling it or neutralising the bacteria with chlorine tablets. Which is why the presence of community relays is essential to inform at-risk populations of water-borne diseases.

Mounira Ahmed Houmadi, community mobiliser.

## FRENCH RED CROSS

The French Red Cross's response focused on several key areas: the distribution of basic necessities, access to water and hygiene, psychological support, the re-establishment of family links, and the continuity of Red Cross activities throughout the Mayotte department, particularly in nursing care and prevention.

#### EQUIPMENT DEPLOYED

tonnes of equipment transported, including:

2,656 tarpaulins, 600 hygiene kits, 800 shelter kits, 21 family tents.

#### Distribution

In the first few hours following the disaster, the French Red Cross organised an initial shipment of equipment containing tarpaulins to cover the emergency-shelter needs of 5,000 people.

More than 100 tonnes of equipment were then transported via air and sea bridges organised by the prefectural authorities: emergency equipment including housing reconstruction kits, protective tarpaulins, solar lamps that can also be used to recharge mobile phones, blankets, buckets, jerry cans, soap, individual hygiene kits, warehouse tents, generators, etc.

#### Access to healthcare

The limited access to care, particularly in rural areas, was one of the major issues after 14 December, with wounds to be treated, infections and epidemics to be prevented, care to be ensured for isolated people and those with reduced mobility, and people to be referred to hospital.

Health facilities, including the hospital in Mamoudzou, were severely damaged, the cyclone having severely impacted their capacity to provide essential care and cope with the influx of injured people and patients suffering from diseases linked to unsafe water.

The French Red Cross endeavoured to meet immediate needs while building local capacity to improve living and health conditions in Mayotte in the long term. Two days after the cyclone hit, one of the French Red Cross home nursing services was able to resume its activities. In parallel, a mobile health-poverty team set up outreach missions, with health professionals, including volunteer doctors, going out into the field to provide first aid to the inhabitants.

#### Access to water and sanitation

Access to water and sanitation, already a major issue before cyclone Chido, was one of the priorities of the French Red Cross teams.

Thousands of aquatabs were distributed to make the water drinkable. As the inhabitants obtain their water from rivers or rainwater, they were informed of the risks of water-borne diseases.

Several mobile water treatment units were deployed, with the capacity to supply 15 to 20 litres of drinking water per person per day for a population of 2,000. People living in the most remote areas were able to access safe drinking water and were protected against water-borne diseases thanks to the deployment of 960 stand-alone water purifiers.





#### **Reuniting families**

Following the cyclone, many people were left without news of their loved ones. In response, volunteers from the Restoring Family Links (RFL) service implemented outreach activities to explain their role, circulated a web page enabling people to search for missing relatives, and began distributing 4,000 SIM cards to help families re-establish contact.

92 contacts re-established

86 people sought

#### **Psychological support**

In the immediate aftermath of the cyclone, teams from the home nursing care service visited their patients (seniors and people with disabilities) to check on their health and provide them with care.

At the same time, volunteers joined the mobile health-poverty team (made up of health professionals, volunteer doctors and social and family information technicians) to carry out patrols, provide support and listen to the needs of the inhabitants. Initially the team visited emergency accommodation centres, but it soon extended its reach to the hardest-hit areas

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## MÉDECINS SANS FRONTIÈRES

The first Médecins Sans Frontières teams arrived in Mayotte on 21 December to rapidly deploy mobile clinics and carry out WASH (Water Sanitation and Hygiene) operations in the *bangas*.



© Michael Bunel

#### **WASH (Water Sanitation and Hygiene) activities**

These initiatives served to restore infrastructure and collect river water and channel it directly to the *bangas*. The initial interventions took place in Vahibé and Kawéni. A "WASH" group was formed by Solidarités International, the French Red Cross and Médecins Sans Frontières, with each partner's location and respective activities clearly delimited for greater efficiency.

Specific training courses on water chlorination were organised for the local associations of the various stakeholders.

A further key concern was cleaning up rivers with high concentrations of debris and waste, as the latter can cause flooding and landslides by restricting the flow of rivers. The abnormal presence of metal sheet debris also posed a significant risk of injury to residents.

#### **Mobile clinics**

Isolated populations were reached effectively thanks to mobile clinics. This population, made up of a large number of undocumented migrants, had had no medical contact because they were afraid of being arrested, because they had transport difficulties, or simply because some clinics refused to treat them on non-urgent grounds.

This initiative served to assess the health needs of these inhabitants and set up a system referring them to the nearest dispensaries and hospitals when direct care was not possible.

An initial mobile clinic was set up in the Vahibé shantytown to treat wounds, general health problems (chickenpox, headaches) and chronic illnesses for which treatment had been disrupted (diabetes, high blood pressure, etc.).

A second mobile clinic was opened in Kawéni, treating two-thirds of general health complaints (gastroenteritis, respiratory syndromes and skin disorders) and one-third of trauma cases.

Between 24 December and 20 January, MSF consulted more than:

3,400 patients

The teams took advantage of these consultations to carry out systematic nutritional checks on children aged between 6 months and 5 years, and then on adults, using bracelets to measure the brachial perimeter in order to detect malnutrition. A partnership was set up with the French Red Cross to support patients suffering from malnutrition. A partnership with the Terrapsy association was also set up to integrate psychologists into these mobile clinics.



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# A BNP PARIBAS GROUP EMPLOYEE RECOUNTS HIS EXCEPTIONAL ADVENTURE



Pierre Maurin was one of the volunteers mobilised by the French Red Cross National Operations Centre following the passage of cyclone Chido in Mayotte.

Having joined the Group in 2024, Pierre Maurin, IT Risk Officer at IT Group, is a fine example of commitment.

Alongside his professional activities, Pierre has for a year now been a first aid team member and deputy local director of emergency and first aid at his local French Red Cross unit. He quickly volunteered to help the people affected by cyclone Chido, which devastated the Mayotte archipelago. On 13 January 2025, he flew out to reinforce the teams already on site at the French Red Cross Operations Centre.

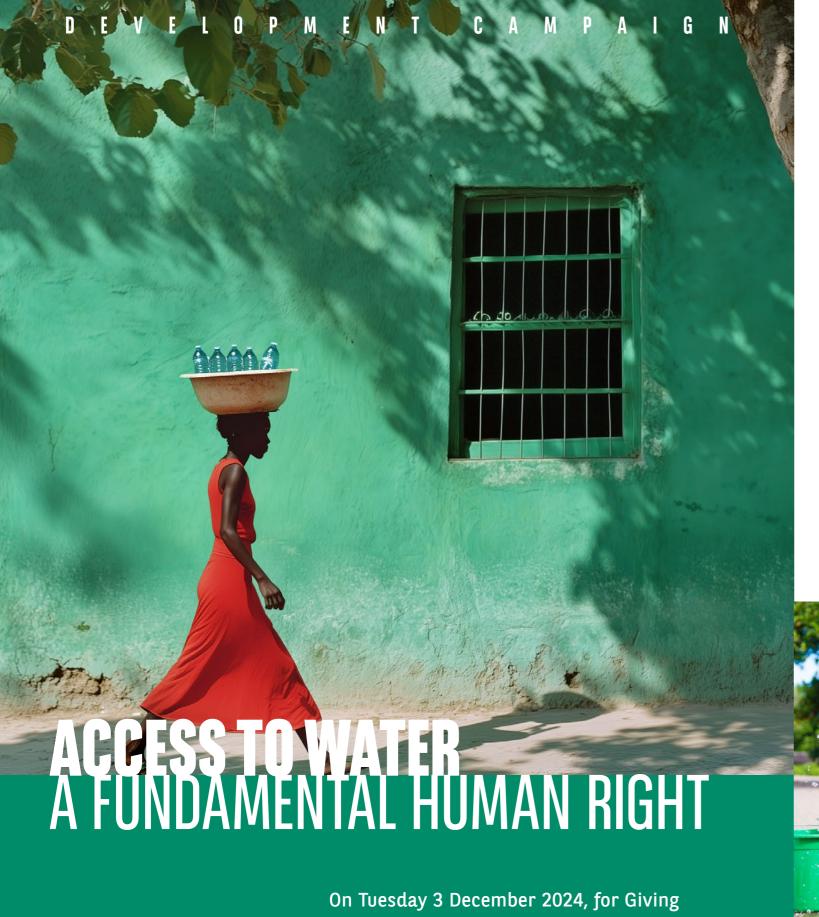
## **STRIKING**

between the speed with which the people of the bangas were trying to get back on their feet and the total chaos reigning across the archipelago.

He described the impressive images testifying to the force of the cyclone, with felled trees and utterly destroyed homes, as if a bomb had been dropped on Mayotte.

Spending two weeks in the field, he provided support to the local inhabitants, already in vulnerable situations owing to their living conditions. He contributed to first-aid operations, the distribution of basic necessities, the restoring of family links, and WASH (Water Sanitation and Hygiene) missions. The latter provide inhabitants with access to drinking water and improve sanitation, which are essential to making stream water drinkable and raising awareness of the risks of water-borne diseases. For Pierre, these missions were "the most memorable of this period, because they involved hands-on work, bringing me closer to people, through the distribution of drinking water, which is essential for survival, and I was able to see its direct impact".

This valuable feedback illustrates the commitment of the Group's employees and underlines the importance of the support provided by the Rescue & Recover Fund to its partners during disasters.



Tuesday 3 December 2024, for Giving Tuesday, the international day of generosity, the Rescue & Recover Fund launched its annual development campaign, dedicated to access to water.

D O N A T I O N C A M P A I G N

406,988€

to support our partners' actions

Matching donation capped at

250,000€

ield experts from our partners attended a conference at the National Natural History Museum, sharing valuable information about the projects supported.

More than 250 participants (physical and remote) learned about the scale of the problem, with 350,000 children under the age of five dying every year from diseases linked to unsafe water and an unsafe environment<sup>1</sup>, and more than two billion people still lacking direct access<sup>2</sup> to water.

The donations made to the Rescue & Recover Fund on Giving Tuesday were tripled, and then doubled on the other days through to the conclusion of the campaign at the end of December, with matching donation capped at €250,000. Thanks to an impressive outpouring of generosity, the €406,988 donated will enable our partners to take lasting action to help disadvantaged communities gain access to water and water services.

- 1 Source: Solidarités internationales
- 2 Source: UI

#### PROJECTS SUPPORTED



## CARE

## Access to water and dignity for children in the Amoron'i Mania region of Madagascar.

Through this project, called "Kilonga", CARE is working to preserve the dignity of children, especially girls, by improving the management of menstrual hygiene, access to water and sanitation.

The Amoron'i Mania region is located in the central highlands of Madagascar, a rural area where access to basic services, in particular water, hygiene and sanitation, remains extremely limited in schools. This situation exacerbates inequalities in access to education, particularly for girls.

The project targets 105 middle and high schools with the aim of improving the learning conditions of 20,000 students.

#### Examples of project activities:

- Installation of 500 latrines, construction of 105 water points and around 100 showers.
- Training and information for girls on menstrual hygiene.
- Training of teachers in water, hygiene and sanitation.
- Awareness-raising through the production of a radio programme and the broadcast of promotional messages on the radio.
- Training of 400 seamstresses in the manufacture of reusable menstrual products.
- Distribution of washable sanitary towels in schools.
- Organisation of discussions on the use of washable sanitary towels to promote their adoption.
- Study of the project's impacts on the issue of absenteeism from school.





## TO FIND OUT MORE, WE TALKED TO **MARINA OGIER**



Head of the Programmes Department and Gender Advisor at CARE France



#### Why do we talk about inequalities in access to education?

School drop-out rates among girls rise substantially at puberty, mainly because of menstruation. In Madagascar, many schools do not have suitable latrines or functional water points, which makes menstrual health management extremely complicated.

Further issues are the lack of menstrual products and the cultural taboo around menstruation, which is deeply entrenched in the region's communities, leading to discrimination and the isolation of young girls when they get their period.

#### BREAK THE TABOO OF MENSTRUATION AND PROMOTE **GENDER EQUALITY**

They avoid school out of shame or the fear of being stigmatised, which makes them more vulnerable and more likely to drop out and be excluded from the education system.

The Kilonga project is working to raise awareness among pupils, teachers, parents and communities in order to break the taboo of menstruation and promote gender equality. The aim is to change perceptions and behaviour on a lasting basis by creating a more inclusive environment that respects girls' rights.

#### In phase 1 of the project (we are now in phase 2), did you see an improvement in academic results thanks to work on a climate conducive to learning?

This was one of the most striking results of phase 1 of the project. Drawing on a rigorous study carried out by the research institute founded by Esther Duflo, winner of the Nobel Prize in Economics in 2019 (J-PAL / Abdul Latif Jameel Poverty Action Lab), we demonstrated that taking action on school infrastructure (latrines, access to water), making sanitary towels available, and lifting the taboo on menstruation can all have a real impact on the schooling of girls.

This combined approach has improved the education level of young girls by 13%, a remarkable result compared with an average improvement of just 3% for traditional education projects, even those supported by the world's largest

This confirms that an adapted and inclusive school environment is key to fighting against drop-out among girls, particularly in puberty.



#### A system of "young girl leaders" has been set up. Can you explain what this involves?

The project identifies and trains "Young Girl Leaders" in schools. These teenage girls are trained, supported and

## **AMBASSADORS OF BEST** AND GENDER EQUALITY They play a key role in spread-

equipped to become ambassadors of best practices in PRACTICES IN HYGIENE hygiene and gender equality.

ing awareness messages within schools and communities, breaking the silence around menstruation and encouraging other girls to go to school, even during their periods.

© Rano Wash

#### Does this project also contribute to the economic empowerment of women in the region?

Absolutely. The project provides technical and financial training for local seamstresses to produce washable sanitary towels. This will provide young girls with sustainable menstrual hygiene solutions that are affordable and adapted to their environment.

Access to menstrual protection is a real issue in the region. Very few girls have access to this protection, either because it is too expensive or because it is simply not available: less than 11% of girls had access to sanitary towels before the project began.

THESE WOMEN WILL BE ENCOURAGED TO FORM COOPERATIVES SUSTAINABLE LOCAL **ECONOMIC ACTIVITY** 

As well as meeting this essential need, these women will be encouraged to form cooperatives, thereby creating sustainable local economic activity.

This is a concrete driver of economic empowerment for women in the region, and it ensures sustainable access to menstrual hygiene products.



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With the multiple crises [...] significant needs are to be addressed [...] for the most vulnerable populations.



National Overseas Director

#### Could you describe the situation in French Overseas Territories regarding access to water?

This is a major issue in several French Overseas Territories, each one being home to specific challenges. The water crisis in Mayotte is particularly alarming, with frequent and prolonged cuts caused by increasingly intense droughts and a water supply network that covers only a tiny part of the island. In French Guiana, the issue is also linked to accessibility. Some remote areas lack the suitable infrastructure for a constant and secure supply of drinking water, and this issue is further aggravated by the droughts that are drying up the Maroni River. In Guadeloupe, the distribution network is outdated, leading to major leaks (40 million m³ of water in 2018) and regular service interruptions.

tioning of basic services.



#### What are the consequences for the inhabitants

Extreme weather events are becoming increasingly frequent, intensifying the difficulties of access to water. In Guadeloupe, for example, schools are sometimes obliged to close more than 60 days a year because of the lack of water, and this has a serious impact on children's education. No water means no hygiene, which means no school.

The health consequences are also a cause for concern. The lack of drinking water encourages the outbreak of water-borne diseases such as cholera and gastrointestinal infections. For example, during droughts in Mayotte, people sometimes have to turn to unsafe water sources, heightening the health risks.

#### What can we do to improve the situation?

Raising public awareness is vital to responding to these challenges. The Red Cross has set up "community relays", people trained to carry out preventive actions and support residents in adopting good hygiene and water management practices. These relays play a key role in providing information on the safe storage of water, the importance of hand-washing and what to do when a network becomes contaminated.

#### What are the long-term concerns?

The lack of access to drinking water, combined with the effects of climate change, is already having disastrous consequences for populations. These consequences could worsen in the coming years, leading to water shortages and the spread of water-borne diseases. Tensions over the quantity of resources could also lead to conflict, in turn leading to the displacement of populations in search of more dignified living conditions.



## THE FRENCH **RED CROSS**

#### Access to water for vulnerable populations in French Overseas **Departments and Regions.**

With the multiple crises (social, political, demographic, health, hygiene, security, etc.) that have affected these territories for several years, significant needs are to be addressed in terms of access to water and water services for the most vulnerable populations.

#### **Examples of project activities:**

- Provision of latrines and showers, accompanied by health training, awareness-raising, guidance and prevention, emphasising a local approach to healthcare.
- Installation of a mobile laundry system, particularly in deprived neighbourhoods with substandard housing that do not have access to water or to washing equipment (washhouse, modern laundrette or washing machine at home).
- Deployment of shower-buses, which are already in operation in Martinique and Guadeloupe. Shower buses offer hygiene to people living on the street or who do not have access to water.
- Support and awareness-raising for people who have been or want to be connected to the water network, including informing them of their rights to financial aid (e.g. water vouchers) and helping them with the administrative formalities.

## WE TALKED TO GAËLLE NERBARD

at the French Red Cross

In these territories, water is not only a precious resource but also essential to public health and the proper func-

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101,000

displaced persons in Haiti spread over approximately

96

sites on the island

## MÉDECINS SANS FRONTIÈRES

#### Access to water for displaced people in Haiti.

Almost four years on from the assassination of President Jovenel Moïse, Port-au-Prince is plagued by chaos and violence.

Its residents are struggling to survive amid regular clashes between gangs, police and vigilante groups.

The security situation has led to significant population displacement and the closure of numerous health centres, as well as making it much more difficult to travel to seek basic services.

Access to health services, water and hygiene facilities is therefore limited.

At the beginning of April 2024, the number of displaced persons in Haiti was estimated at 101,000, spread over approximately 96 sites.

Many of these sites are not adapted to the needs of the population and water and sanitation are a constant concern

In response, Médecins Sans Frontières provides drinking water, hygiene and disinfection kits for sanitary facilities, while also working to repair and renovate latrines, construct emergency showers and provide training in water chlorination in order to increase the volume of drinking water available.







## WE MET WITH LEÏLA DEBAGHI,

In charge of Partnerships at Médecins Sans Frontières



## Could you explain why the presence of Médecins Sans Frontières teams increased in Haiti in 2024?

Médecins Sans Frontières teams have been present in Haiti since 1991, providing trauma care, care for victims of sexual and gender-based violence, and sexual and reproductive care.

In the last few months, Haiti has also experienced a resurgence in gang violence, with gangs controlling 80% of the capital, Port-au-Prince (roads, infrastructure, etc.). The situation worsened in February 2024, when these gangs decided to join forces to overthrow Prime Minister Ariel Henry.

Today, almost 2,000 Médecins Sans Frontières employees are working in Haiti, on two major activities: access to healthcare (notably in hospitals and via mobile clinics) and access to water, mainly in Port-au-Prince, where the needs are greatest.

#### What impact does this have on women and children?

They are the main victims of these clashes, with kidnappings, sexual violence and a climate of fear. According to UNICEF, the number of children recruited into gangs increased by 70% between 2023 and 2024, such that children now account for half of the headcount of these gangs.

THE NUMBER OF
CHILDREN RECRUITED
INTO GANGS
INCREASED BY 70% [...]
SUCH THAT THEY NOW
ACCOUNT FOR HALF OF
THE HEADCOUNT

Schools are closed, there is a lack of access to healthcare and medicines for everyday needs as well as for chronic illnesses, the number of vaccinations has decreased (with many children no longer vaccinated), and safe places to give birth are lacking, leading to a high mortality rate among mothers and/or children. They are suffering immensely.

#### Where can these people take refuge?

Since the upsurge in fighting, many people in Portau-Prince have fled their homes, seeking refuge in overcrowded and informal sites for the displaced.

At the end of December 2024, more than 700,000 Haitian people were displaced, more than 112,000 of them living in 96 informal sites in the Port-au-Prince metropolitan area. These sites include schools, churches and sports grounds.

#### So conditions are extremely precarious?

The majority of the sites for displaced persons lack water supplies and sanitation facilities (such as latrines), resulting in difficult and dangerous living conditions, as they increase the risk of water-borne diseases. The city lacks any sort of system for guaranteeing clean water at these sites

MSF mobile clinics have treated hundreds of people for water-borne diseases, including acute diarrhoea and scabies (a skin condition linked to poor hygiene) in areas with inadequate access to treated water and latrines. In these circumstances, cholera remains a major threat and has broken out several times in Port-au-Prince since 2022.

Since the beginning of 2024, MSF has distributed 4.5 million litres of drinking water to 15 sites for displaced persons, trained site managers in water chlorination, built latrines and emergency showers, and distributed hygiene kits (soap, etc.).

## Médecins Sans Frontières teams are working in an extremely complicated security context?

The security situation is extremely tense. MSF is used to working in such environments, but safety conditions have deteriorated dramatically in Port-au-Prince since November 2024. Our staff have had to deal with a series of critical incidents, including death threats and rapes, and the arrest of one of our ambulances, which led to the death of the patients being transported. Consequently, at the end of November MSF decided to temporarily suspend its activities in Port-au-Prince (while maintaining vital activities) as a negotiating tool to obtain safety guarantees for staff and patients.

MSF was able to resume its activities on 11 December 2024 after a 22-day suspension.

#### VISIT OUR WEBSITE

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