



FROM CRISIS TO DEVELOPMENT
HUMANITARIAN AID FOR SUSTAINABLE HEALTH

About The Comité d'Aide Médicale

The Comité d'Aide Médicale (CAM) is a non-profit humanitarian organization established in 1990 whose mandate is to provide medical support to communities affected by conflict, natural disasters and other humanitarian crises. Our programs prioritize the strengthening of local community capacity and have been implemented in partnership with Asian, African as well as French local communities. More recently, CAM has created a US-based sister organization, the Medical Aid Committee, so as to coordinate strategies and develop joint missions.

At CAM, our interventions revolve around two principal themes:

- The implementation of programs within post-crisis settings, the objective being to support communities in their transition from crisis to development.
- A commitment to implementing programs which are both effective and sustainable by working in partnership with local authorities and communities.

As a medical NGO, our first goal is to respond to the health needs of communities, particularly women and children.

Our expertise and activities are structured around four program areas:

■ Primary Health Care:

Provision of direct health care via mobile and fixed clinics; reproductive maternal and child health; rehabilitation and construction of health facilities; training and capacity building of local health personnel and local health authorities; provision of essential drugs and medical equipment.

■ Environment Health:

Medical waste management activities and water and sanitation programs including construction and maintenance of wells, latrines and locally adapted incinerators; training and support of local water committees, capacity building of local health facilities and artisans.

■ Community Health:

Health education, community capacity building in relation to health promotion, individual advocacy and support to ensure access to mainstream health services for disadvantaged and marginalized populations; and surveying of local knowledge, attitudes & practices.

■ Psychosocial Health:

Individual and family support for those traumatized by loss and grief as a result of conflicts or natural disasters.



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The Missions Of The Comité d'Aide Médicale

Angola

The Comité d'Aide Médicale started working in Angola in 2003 with primary health care and water and sanitation programs implemented in the provinces of Luanda Norte and Uige. CAM is currently running an environmental health program in Luanda and its outskirts. The aim is to build six medical waste incinerators in order to reduce risks of contamination due to waste mismanagement in health facilities. These incinerators, which are made out of natural and locally available materials, are both inexpensive and sustainable. To ensure its durability after CAM's departure, the program includes training for the construction and use of the incinerators as well as hygiene awareness sessions addressed to health workers in the structures involved.



Donor: AECID



Donors: EuropeAid, UNICEF

Central African Republic

The Comité d'Aide Médicale has been running expanding programs in the CAR since 2007. This year, its psychosocial support program was established in the east of the Vakaga province located in the north-eastern part of the country. This program specifically targets vulnerable children and aims at restoring the ties between those formerly involved in armed groups and their communities. In addition, CAM is jointly running a two-year health care program with the Ministry of Health in Birao. The city's Prefectural Hospital was severely damaged during the 2007 conflict and CAM's program ensures its renovation as well as the restoration of health care operations.

Chad

In July 2009, the Comité d'Aide Médicale launched a new mission in Wadi Fira, a region located in the north-east of Chad close to the Sudanese border. This region's health needs were long neglected until the recent influx of 58,000 refugees from Darfur. CAM will take over MSF-Luxembourg's primary health activities in Iridimi and Touloum, two refugee camps with about 46,000 recipients. Healthcare will also be provided to the Chadian population living close to the camps. Thanks to this program, CAM seeks to maintain permanent access to healthcare in the Iriba district, notably by focusing on maternal and child health and strengthening community health education.

Donors: BPRM, UNHCR



Donors: DDASS 93, GRSP, CRIF, Fondation Abbé Pierre

France

In France, the Comité d'Aide Médicale runs several health education and social emergency programs for vulnerable and disadvantaged communities. There are three main areas of intervention: social support and medical advocacy for Rrom communities of Seine-Saint-Denis, programs specializing in the prevention and detection of lead poisoning in 23 towns of Seine Saint Denis, emergency accommodation for families with children and crisis accommodation following a disaster (fire, floods, etc), or during periods of extreme cold.

Donors: ECHO, CHF, Centre de Crise

The Comité d'Aide Médicale runs a primary health care, community and environmental health program in the district of El Geneina in western Darfur, benefiting more than 120,000 vulnerable people. Thanks to our fixed and mobile clinics located in the most isolated areas, we spread access to quality health care for refugees, displaced and nomadic people, and local communities affected by the humanitarian crisis. We also carry out community health programs focused on maternal and child health and disease control. This integrated medical program is complemented by our water and sanitation program which expands access to drinking water (wells) and sanitation (latrines, medical waste management incinerators). Our community health program aims to address the preventable causes of illness through education and sensitization.

Sudan



Sri Lanka

Donors: Conseil Général de Seine Maritime, OMS, MAEE (Centre de Crise), AECID

CAM's mission in Sri Lanka involves several medical and psychosocial programs in eastern Sri Lanka (Batticaloa and Ampara districts). CAM provides psychosocial support to the victims of the tsunami and the thirty year old internal conflict by way of educational and cultural activities in purpose built community centers. CAM's medical program consists of three mobile clinics providing primary health care services to isolated populations. Consequently to the increasing conflicts in the north, CAM has a team prepared to expand its activities to this region as soon as necessary authorizations have been granted by the Sri Lankan government.