BEAR WITNESS & PROVIDE CARE

Médecins du Monde Switzerland

2024 ANNUAL REPORT

Médecins du Monde (MdM) Switzerland, founded in 1993, is an association working to improve global health. We strive for a world where the barriers to healthcare have been overcome and where healthcare is recognized as a fundamental right. We are a member of an international movement – volunteer and independent – that works in Switzerland and abroad. Our aim: to provide care, so that the most vulnerable people have genuine access to healthcare, and to bear witness to the intolerable via our practices, factual evidence, and the mobilization of civil societies. We also support social change so that identified needs can be met by legislation and communities develop their capacity to take action. The MdM Switzerland headquarters is located in Neuchâtel, Switzerland, and we have an office in Geneva.

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MESSAGE FROM THE PRESIDENT

Laurent LOB

Antoine KERNEN

The rise of nationalist and reactionary tendencies among many global leaders—most recently exemplified by the presidential election in the United States—is a wake-up call for organisations committed to upholding fundamental rights. At the same time, decisions taken by the Swiss federal authorities, particularly budget cuts affecting public institutions and stakeholders in the health and social sectors, are raising growing concerns about the sustainability of national solidarity. In this increasingly tense context, Médecins du Monde has a responsibility to remain vigilant and to take a clear-sighted and principled stance on contemporary challenges.

In 2024, Médecins du Monde Switzerland defined its strategic direction through to 2028.

In today's profoundly deteriorated environment, we reaffirm our full commitment to the choices and priorities set out in this strategy, which include:

- **Continuing our international engagement** in support of local public health systems—both in emergency contexts and within the framework of long-term development initiatives. We work alongside healthcare professionals, strengthening their autonomy and capacity to act. In the long run, this approach aims to foster the emergence of sustainable national organisations, envisioned as the pillars of a future Federation of national chapters within a global Médecins du Monde movement.
- **Strengthening our presence in Switzerland in order to provide care,** document, and bear witness to increasing social precarity—exacerbated by the growing delegation of healthcare governance to insurance providers and by budget cuts affecting public institutions. Our efforts aim to highlight the concrete consequences of these developments on access to healthcare, and to reaffirm health as a fundamental right and a common good.
- **Consolidating the Médecins du Monde international network** by establishing joint operational mechanisms and reinforcing our presence in International Geneva, to ensure that civil society voices are heard in global health fora. In November 2025, Neuchâtel will host the General Assembly of the 17 MdM chapters—a strategic moment to enhance network coordination and a unique opportunity to open a public dialogue on Switzerland's political role amid the global rollback of the right to health.

The gradual disengagement of certain governments, whether abrupt or more subtle, highlights the urgent need to move away from a vertical aid model, dictated by donors and often insufficiently attuned to local contexts. Paradoxically, this re-examination of humanitarian and development aid presents a valuable opportunity: to reimagine North–South relations through a more equitable model of cooperation, in which local actors define priorities and lead responses to health challenges. Médecins du Monde Switzerland is firmly committed to this approach, grounded in the autonomy and legitimacy of frontline actors, and guided by the conviction that aid must be truly localised to be both effective and just.

PROGRAMS MAP

THE MÉDECINS DU MONDE INTERNATIONAL NETWORK WORKS IN 71 COUNTRIES ON 456 PROJECTS

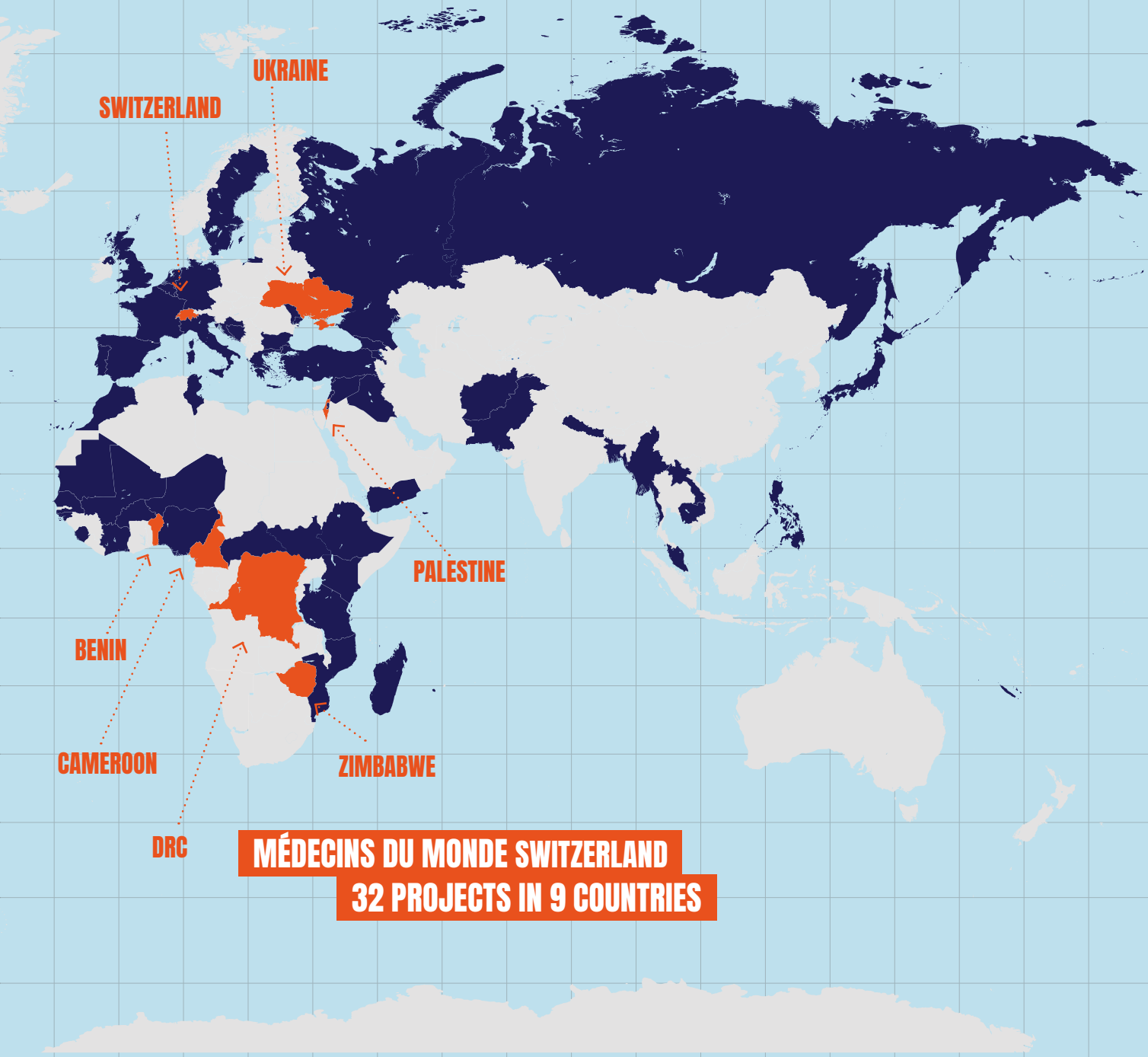
AFRICA
Benin / Burkina Faso / Cameroon / Central African Republic / Côte d'Ivoire / Democratic Republic of Congo / Ethiopia / Madagascar / Mali / Mauritania / Morocco / Mozambique / Niger / Nigeria / Sahrawi Arab Democratic Republic / Senegal / Sierra Leone / South Sudan / Tanzania / Tunisia / Zimbabwe.

THE AMERICAS
Argentina / Bolivia / Canada / Colombia / Guatemala / Haiti / Honduras / Mexico / Nicaragua / Paraguay / United States / Dominican Republic / El Salvador / Venezuela.

ASIA
Afghanistan / Cambodia / Japan / Laos / Malaysia / Myanmar / Nepal / Pakistan / Philippines.

EUROPE
Armenia / Belgium / Bosnia / Bulgaria / Croatia / France / Georgia / Germany / Greece / Italy / Luxembourg / Moldova / Netherlands / Poland / Portugal / Romania / Russia / Slovakia / Spain / Sweden / Switzerland / Ukraine / United Kingdom.

MIDDLE EAST
Iraq / Lebanon / Palestine / Syria / Turkey / Yemen.



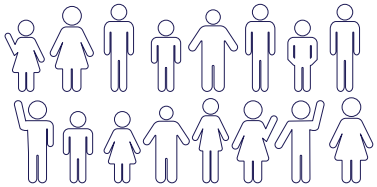
MÉDECINS DU MONDE SWITZERLAND
32 PROJECTS IN 9 COUNTRIES

YEAR IN REVIEW

Budget executed in 2024

CHF 15.4 million

HUMAN RESOURCES



282 MdM staff and volunteers

182 collaborateur·rice·s

157 national employees working in the field

11 international employees working in the field

21 employees at our headquarters

100 volunteers (including Board members)

Together, we supported more than 1,5 million people worldwide in 2024.

99’593
victims of violence (men, women, and children) were provided care.

80’860
women and children improved their knowledge and skills on sexual and reproductive health and rights (SRHR)

9’616
births were attended by healthcare personnel trained by Médecins du Monde teams

778
community leaders took part in discussions on gender norms.

177'400
women, men and children participated in discussions on SRHR and GBV

81
national or international policy measures, initiatives, or processes were supported in the field of health and rights

Over **120** local partners

OUR WORK IN FIGURES

WHAT WE WORK ON

Preventing and Addressing Violence

The year 2024 marked the conclusion of our four-year strategy (2021–2024) to prevent and respond to violence. Our efforts have been evaluated, progress measured, and new challenges identified. Notable achievements in 2024 include the launch of an integrated care service for survivors of violence in Mexico, tailored support for minors in conflict with the law in Cameroon, and professional reintegration opportunities for adolescent girls in Benin. At the same time, holistic centres continued to provide comprehensive care for survivors; violence prevention modules were maintained in university and police curricula, and tangible progress was made in promoting equality and respect in the media sector.

Over the past four years, innovative tools such as Arts & Violence and Positive Masculinities were developed and disseminated. Prevention charters were introduced in schools, and participatory diagnostic and awareness-raising approaches enhanced our understanding of local contexts.

Our advocacy contributed to improved access to healthcare for survivors, increased recognition of mental health as a public health priority, and strengthened multisectoral prevention policies.

The tools we have created, the partnerships we have consolidated, and the actions we have undertaken form a strong foundation to sustain and deepen our commitment. We remain fully aware of the challenges ahead, but resolutely committed to combatting all forms of violence.

Sexual and Reproductive Health and Rights (SRHR)

Sexual and reproductive health and rights, gender equality, and the empowerment of women and girls are crucial to reducing poverty and advancing sustainable development. When women are empowered to exercise autonomy over their sexual and reproductive lives, educational attainment improves, earning potential increases, and intergenerational benefits emerge. Sexuality education for children and adolescents is strongly correlated with increased contraceptive use, reduced rates of teenage pregnancy, and improved knowledge, attitudes, and communication on sexual health.

Investments in SRHR yield significant returns and generate multiplier effects. This is why Médecins du Monde is committed to ensuring universal access to SRHR and to dismantling social, cultural, economic, and gender-related barriers that hinder its full realisation.

In 2024, our interventions in this field were wide-ranging and adapted to diverse contexts: supporting adolescent and youth sexual rights in Benin, offering SRHR consultations in Gaza, and providing mobile healthcare services to people on the move in Mexico. Though the settings vary, the aim remains the same: to support women, girls, and young people in reclaiming control over their bodies, health, and futures.

Mental health

Humanitarian crises, conflicts, violence and forced displacement are all factors that significantly exacerbate mental health issues. Individuals exposed to these harsh realities, injustices or stressful environments are particularly vulnerable to psychological distress. In 2024, the integration of mental health and psychosocial support (MHPSS) remains one of our top priorities. Our interventions are designed to provide tailored responses to the needs of affected individuals, taking into account their specific contexts. We implement appropriate and context-sensitive measures to support people who have experienced violence, embedding MHPSS into a comprehensive range of services. Particular attention is given to migrant populations through the deployment of MHPSS services along their journeys.

At the same time, we are working alongside health authorities and civil society actors to strengthen suicide prevention mechanisms and improve mental health care provision whether in health facilities, social service structures or at the community level. Our teams and partners offer both individual and group support sessions to people showing signs of psychological distress. We also focus on capacity-building, empowering our partners with the skills and tools to deliver interventions that foster well-being and resilience in the face of adversity.

Recognising the challenges faced by professionals working on the front lines, we are also implementing specific measures to support caregivers and frontline workers, ensuring they receive the necessary psychological support and resources to sustain their engagement.

Child Health and Development

The early years of a child's life are critical in shaping future physical, mental and social well-being. Building on longstanding work in paediatric palliative care, Médecins du Monde's 2025–2028 strategy reaffirms our commitment to working with families, communities and health system actors to ensure young children have access to preventive, curative and palliative care that addresses the full spectrum of physical, psychological, social and spiritual suffering.

We are committed to supporting healthcare professionals in adopting a compassionate, child-centred approach that actively involves families as key partners in health and care.

According to UNICEF, over 200 million children under the age of five in the Global South are not reaching their developmental potential due to poverty, malnutrition and lack of access to quality health services. Elements such as strong social support networks, economic security and accessible healthcare are fundamental to building an environment that supports healthy early childhood development.

Our holistic approach therefore also includes the promotion of a nurturing emotional and educational environment, access to adequate nutrition, and the creation of safe, dignified living conditions that uphold the dignity and well-being of the most vulnerable children.

4 PROJECTS

Donors: The Republic and Canton of Neuchâtel Public Health Service, The Republic and Canton of Neuchâtel Department of Employment and Social Cohesion, Federal Office of Public Health (FOPH), Sandoz Family Philanthropic Foundation; Casino de Neuchâtel Foundation, Ernst Göhner Stiftung, Leenaards Foundation, ASPASIE, City of Neuchâtel, City of Renens, City of Yverdon-les-Bains, Loterie romande, Government of Vaud Directorate General of Health - Department of Health and Social Action. **Direct costs:** CHF 1,196,741. **Partners:** Armée du Salut (La Marmotte), Aspasie, Association Appartenances, Association Sleep-In, Caritas Vaud, Centre Neuchâtelois de Psychiatrie (CNP), Croix-Rouge neuchâteloise, Croix-Rouge Suisse, État de Vaud (Direction générale de la santé), Fleur de Pavé, Fondation AACTS, Fondation Le Relais, Fondation Mère Sofia, Fondation Point d'Eau Lausanne, Générations Sexualités Neuchâtel, Haute école ARC, Le Point d'appui, Nomad, Pharmaciens sans frontières (PSF), Plateforme Bas-seuil (PSB), Plateforme nationale pour les soins de santé aux sans-papiers (PNSSP), Plateforme Précarité Neuchâtel, Plateforme Précarité Riviera, Procore, The Republic and Canton of Neuchâtel (Service de la Santé publique, Service des Migrations, Service de la cohésion multiculturelle, Office des relations et conditions de travail, Ministère Public), Réseau hospitalier neuchâtelois (RHNe), SAVI, Service social de la ville de Lausanne (SSL), Unisanté. **Total number of beneficiaries:** 7,355.

SWITZERLAND

Types of actions
Accès à la santé, santé mentale, Sexual and Reproductive Health and Rights (SRHR), populations sans-abri et marginalisées

Rising precarity, renewed commitment

In 2024, across four programmes in French-speaking Switzerland, Médecins du Monde provided support on 7,355 occasions, through nursing services, social support, and outreach activities. This continued rise reflects a shifting reality: growing precarity now affects a broader and more diverse population. The opening of the CASO - Centre d'Accueil en Santé et en Orientation in Yverdon-les-Bains marks a real turning point in our approach.

CASO, a transversal response to a changing reality

This new, inclusive, and innovative primary care facility is designed to meet increasing demand for accessible healthcare for all people on the margins of society, not just those in extremely vulnerable situations. It will also enable a systemic problem to be tackled head-on: a health insurance system that makes many people vulnerable and even excludes them. The CASO is an inclusive, open and essential space.

Taking care of others also means taking care of our teams

The year 2024 placed significant strain on our field teams. Faced with constant pressure, we had to acknowledge that our internal support mechanisms were no longer adequate. This difficult but necessary realisation led us to initiate a structural rethinking of our organisational practices. This shift is essential: there can be no dignified care without genuine attention to the wellbeing of those who provide it.

Strengthened and recognised advocacy

Médecins du Monde has established itself as a key actor in local political processes. In 2024, this engagement took tangible form: submission of a postulate to the Yverdon-les-Bains local council, two parliamentary interpellations in Lausanne, participation in the development of Bern's municipal homelessness strategy (2024–2027), involvement in the Neuchâtel General Council to support the creation of an emergency accommodation facility, and co-organisation of the first forum on homelessness at the Lausanne School of Social Work and Health (HETSL).

Projects rooted in ground realities

Our homelessness programme in the canton of Vaud faced a challenging year, marked by recruitment difficulties that led to the cancellation of several outreach sessions. This situation highlights the structural constraints faced by low-threshold services. At La Maison de Santé in La Chaux-de-Fonds, our work with migrants continued steadily, with the reinforcement of our mental health services through the addition of a psychologist. Securing the long-term sustainability of this service remains a significant challenge. The THAYS project, dedicated to sex workers in the canton of Neuchâtel, was relaunched with a stronger structure better aligned with field realities, allowing it to fully resume its harm reduction and individual support mission.

A promising academic collaboration

Finally, 2024 saw the launch of a valuable partnership with the Haute École de la Santé La Source in Lausanne. This collaboration enables student nurses to immerse themselves in our work, while strengthening our academic engagement. It reflects our commitment to promoting nursing practice within community-based, hands-on, and socially engaged settings.

4 PROJECTS

Donors: Global Affairs Canada - GAC, Swiss Agency for Development and Cooperation – SDC, World Bank/SWEDD Project/Lead Educo, UNICEF, Canton of Geneva, Service for International Solidarity, Fédération Vaudoise de Coopération – Fedevaco, Swiss Solidarity. **Direct costs :** CHF 1,567,326. **Partners:** Institutional partners: Ministry of Health (MS); Ministry of Social Affairs and Microfinance (MASM); Ministry of Secondary andTechnical Education and Vocational Training (MESTFP); Ministry of Pre-school and Primary Education (MEMP); Ministry of the Interior and Public Security; Institut National de la Femme (INF); Plateforme Nationale des Structures Religieuses engagées pour la Promotion de la Santé en Bénin (PNSR-PS/B). **Implementation partners:** Réseau Ouest Africain des Jeunes Femmes Leaders (ROAJELF), Cercle International pour la Promotion de la Création (CIPCRE). **Total number of beneficiaries:** 582,520 including 345,347 girls/women.

BENIN

Types of actions
Preventing and Addressing Violence, Mental health, Sexual and Reproductive Health and Rights (SRHR), Child Health and Development

2024 was a year of transition for Médecins du Monde in Benin, marked by the completion of two projects focused on violence prevention, the approval of a new four-year maternal and child health project, and the completion of the restructuring process initiated in 2023.

The team's resilience in navigating these changes made it possible to continue implementing ongoing activities aimed at preventing and responding to gender-based violence (GBV) and promoting sexual and reproductive health and rights (SRHR) among the most vulnerable populations in Benin, particularly women and girls. Activities were carried out in close collaboration with local civil society organisations and Beninese authorities, enabling context-sensitive engagement with communities and contributing to sustainable improvements in healthcare access.

Protecting women and children affected by gender-based violence

In the area of GBV prevention, efforts in 2024 helped strengthen the engagement of religious leaders, who played an active role in developing a charter of commitment to combat GBV. Health workers were also involved, with GBV now integrated into their training curricula. These initiatives — focused on both prevention and GBV management — enabled the holistic care (medical, psychosocial, legal, and judicial) of 607 persons impacted by GBV, 23 of whom saw their cases lead to prosecution or conviction.

Improving access to quality SRHR services for adolescents and youth

To combat the risks of unintended and early pregnancies and the spread of sexually transmitted infections (STIs) among young people, SRHR activities in 2024 focused on community sensitisation, reaching 35,598 individuals with awareness-raising on sexual and reproductive rights and gender-based violence (GBV). Particular emphasis was placed on empowering adolescents to embody and advocate for their own rights. As a result, 30 members from six youth organisations strengthened their advocacy capacities on gender equality and sexual and reproductive health. In terms of prevention and women's leadership, 171 female apprentices continued their vocational training in hairdressing, glazing, and sewing, with some having completed their apprenticeships and preparing to sit the national exams required for the Master Craftsperson certification.

Protecting children from domestic violence

The project on domestic violence concluded in October 2024 and had a measurable positive shift in community attitudes towards non-violent child-rearing and parent-child communication. Among surveyed children, 89.2% reported improved educational practices, including violence-free environments in families, schools, vocational training centres, and Koranic schools. The project also enhanced children's ability to protect themselves. Three school clubs were established, involving 30 children, who were trained in slam poetry and graffiti to help them express their experiences of violence and raise awareness among their peers.

4 PROJECTS

Donors: Fedevaco, Medicor Foundation, Fondation Smartpeace, Migros Aid Fund, Swiss Agency for Development and Cooperation – SDC. **Direct costs:** CHF 1,298,870. **Partners:** Association des Cadres Supérieurs de Santé du Noun; Regional Delegation of Public Health, West; Regional Delegation of PublicHealth, Northwest; International Federation of Women Lawyers; Ministry of Social Affairs; Ministry of Justice; Ministry for the Promotion of Women and the Family. **Total number of beneficiaries:** 173,244

CAMEROON

Types of actions
Preventing and Addressing Violence, Sexual and Reproductive Health and Rights (SRHR), Mental health

In 2024, Médecins du Monde continued its longstanding commitment to improving access to essential healthcare and protecting vulnerable populations in Cameroon. In a context marked by multiple health and social challenges, our teams implemented a comprehensive response combining medical care, prevention, and health system strengthening.

Working alongside local partners—including decentralised government services and civil society organisations—we supported 587 survivors of gender-based violence (GBV) including158 girls and 12 boys as well as 400 women and 17 men. This integrated programme offered medical care, psychological support, legal assistance, and support for social reintegration. At the same time, our mobile clinics and community outreach workers raised awareness of GBV among 15,355 people in the towns of Bamenda, Santa, Mbouda, and Bafoussam, strengthening both prevention and community vigilance.

Schools as Safe and Protective Spaces

Recognising the vital role schools play in protecting children, we worked with education stakeholders in the West and North-West regions to make ten schools in the Mbouda and Bamenda areas safe and protective environments. As a result, 121 members of the education community were trained in violence prevention, and 2,573 displaced children received psychosocial support through school support and recreational activities. Two non-violence charters, developed locally through participatory processes, now provide clear and shared frameworks for the prevention of violence in schools across both regions.

Building an Inclusive and Resilient Healthcare System with the most vulnerable populations

Our programme to improve maternal, neonatal and child healthcare was implemented in the districts of Foumbot, Mbouda, Foumban, and Malentouen (West), as well as Bamenda, Bamenda III, Tubah Banakuma, Njikwa, and Wum (North-West). We modernised technical infrastructure at 22 health facilities and enhanced the skills of 273 healthcare professionals in managing common illnesses. With our technical and financial support, 7,970 vulnerable individuals accessed local primary healthcare in line with their dignity, preferences and cultural context. These achievements—the result of coordinated efforts by our teams and institutional and community partners—demonstrate our commitment to building a healthcare system that is inclusive, resilient, and focused on the most vulnerable populations.

4 PROJECTS

Donors: UNFPA, BHA, City of Geneva, FEDEVACO, SDC, Government of Navarre. **Direct costs:** CHF 1,428,369. **Partners:** FONKOZE, DASH, CHAIFEJ. **Total number of beneficiaries:** 93,505.

HAITI

Types of actions
Preventing and Addressing Violence, Sexual and Reproductive Health and Rights (SRHR), Mental health

Haiti is plunging deeper into a multidimensional political, economic, social, and humanitarian crisis. Armed gangs, operating under the Viv'Ansanm coalition, have tightened their control over the country, particularly the capital Port-au-Prince, of which they control 85%. Looting, rape, and murder are widespread.

Fleeing Violence and Insecurity

In 2024, the number of internally displaced persons more than tripled. Over one million Haitians lost their homes. While 83% found refuge with relatives, many were forced into displacement sites, mainly in the Port-au-Prince metropolitan area (ZMPP). More than half of those displaced are women, and one-third are children. Violence continues to devastate Haitian society with 5,626 homicides in 2024 and 5,857 cases of gender-based violence (GBV), 69% of which were sexual assaults. Nearly half the population (5.5 million) faces acute food insecurity while the threat of cholera looms (9,497 cases).

A Country in Crisis, Targeted Responses

Cholera emergency, combating VbG, support for pregnant women and new mothers, MdM maintained operations in the West department (Port-au-Prince, Petit-Goâve) and the South-East department (Jacmel, Marigot, Belle-Anse), although one project had to be discontinued due to a lack of institutional funding.

In 2024, our teams and partners—including two community referral hospitals in the Goâve region—provided care to 1,447 women who survived rape, violence, or sexual harassment. Dozens of GBV awareness and prevention campaigns were carried out at displacement sites in Port-au-Prince, reaching over 16,000 people. In the Palmes region, 31,577 people participated in awareness-raising sessions conducted by 60 school-based watch committees established by MdM.

As part of our work on sexual and reproductive health and rights (SRHR), we conducted 409 education sessions on maternal and neonatal health and family planning in the Goâve region. These sessions reached 13,100 pregnant women and caregivers, and 3,330 men, addressing the specific needs of the community. The quality of healthcare was improved through professional training and the provision of medical supplies and equipment. In support of the Ministry of Public Health and Population (MSPP) and the national cholera response in the South-East, 1,692 suspected cholera cases (944 women and 654 men) were treated with oral rehydration solutions. In the Goâve region, 2,046 patients, including 159 survivors, received care from MdM's mobile clinics.

3 PROJECTS

Donors: BPRM, Latitude 21, J&K Wonderland, ACNUR, SDC. **Direct costs:** CHF 738,288. **Partners:** ACAS A.C., College of Education, Preparatory School 2, CECyT 20 School, Orchestra and Choir for Peace, Public transport Line 1, CERSS 5 prison, Hospital of Cultures, Women's Hospital, Trato Digno Collective, General Pediatric Alliance, Nich Ixim traditional midwife movement, Sakil Nichim Antsetik A.C. **Total number of beneficiaries:** 10,152.

MEXICO

Types of actions
Preventing and Addressing Violence, Mental health, Sexual and Reproductive Health and Rights (SRHR)

In 2024, Médecins du Monde consolidated its efforts to prevent gender-based violence (GBV) in schools, families, and communities by promoting gender-equitable relationships. Nearly 3,000 individuals in San Cristóbal de las Casas enhanced their understanding of GBV prevention as well as their awareness of sexual and reproductive health and rights (SRHR). At the same time, MdM strengthened its partnership with ACAS A.C., a local organisation that operates a shelter and a day centre for women affected by GBV. As part of a holistic approach, a medical consultation service and an integrated care model are being established at the day centre. This pilot initiative, with the potential for replication in shelters across the country, was presented at a national forum co-organised by MdM, the United Nations, and the Mexican government. The event brought together various state actors and prospective funding partners and received media coverage. We also continued to train healthcare professionals from public institutions in the respectful, rights-based care of survivors of obstetric and sexual violence. To ensure continuity and cultural relevance in care provision, a new generation of traditional midwives in rural Chiapas also underwent comprehensive training.

Mobile clinic along the migration route

Amid a deepening migration crisis, MdM scaled up its healthcare programme for migrants along Mexico's southern border, particularly in the states of Tabasco and Chiapas. The mobile clinic operated in the municipalities of Tenosique, Palenque, and Salto de Agua, delivering medical and psychosocial consultations to people in transit and asylum seekers throughout the year. By the end of 2024, additional interventions in Villahermosa and within migrant detention centres enabled the team to adapt to shifting migration patterns shaped by regional geopolitical developments—most notably the transition of government in the United States, expected to have a profound impact on migrant populations in 2025. Despite disruptions in early 2025, the project continued, having reached over 7,000 individuals in 2024. Against a backdrop of increasing violence, and in collaboration with the UNHCR, MdM identified, supported, and referred 171 individuals impacted by GBV to sustainable care pathways.

8 PROJECTS

Donors: BMZ, Swiss Solidarity, SDC, ECHO, Latitude 21, OCHA, City of Zurich. **Direct costs:** CHF 3,044,269. **Parners :** AISHA, AWDA, PFPPA, SAWA, YMCA, Ministry of Education, Ministry of Health, MdM France, MdM Spain. **Total number of beneficiaries :** 83,320.

PALESTINE

Types of actions
Mental health, Sexual and Reproductive Health and Rights (SRHR), Emergency response

In 2024, Médecins du Monde marked 30 years of presence in the Occupied Palestinian Territory, amid one of the most acute humanitarian crises in recent history. Since October 2023, 1.9 million people have been displaced and over 70% of Gaza's infrastructure has been destroyed or severely damaged. Essential services are barely functioning, and the health system has collapsed: The World Health Organization (WHO) recorded 1,273 attacks against health infrastructure, resulting in 883 deaths among healthcare personnel and damage to 643 facilities. Only 37% of primary healthcare centres and 47% of hospitals remain partially operational. Access to mental health support is virtually nonexistent, even as psychosocial needs are surging. Displaced families face increasingly precarious conditions marked by trauma, malnutrition, poor sanitation, and prolonged exposure to violence.

Gaza: Responding to an Unprecedented Emergency and war

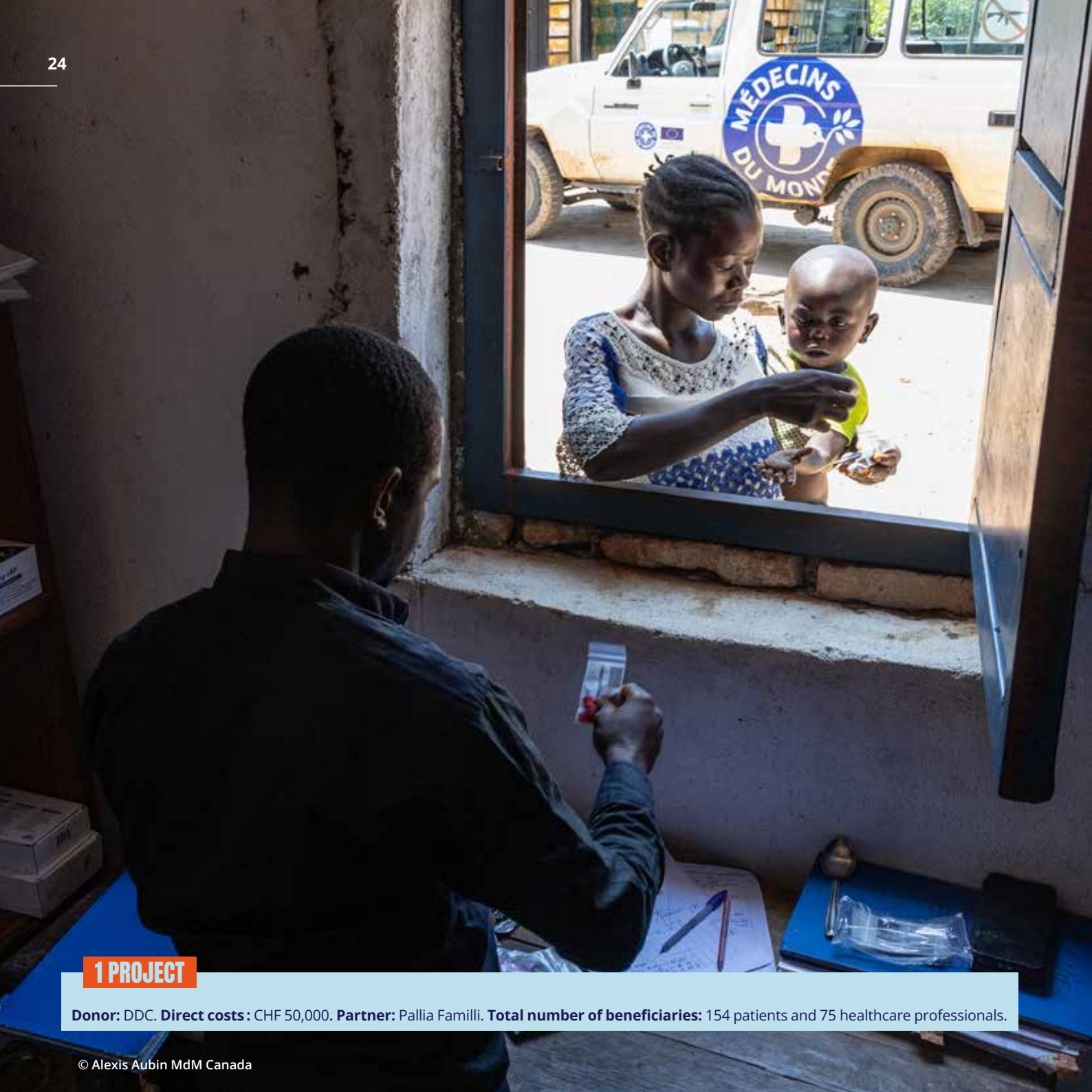
In response, MdM launched an emergency intervention focused on meeting urgent needs and enhancing the resilience of both displaced individuals and healthcare workers. Support included cash transfers to 1,500 vulnerable households (including pregnant women, persons with disabilities, and GBV survivors), distribution of 1,915 menstrual hygiene kits and 3,400 food parcels, and the provision of primary and SRH services to 29,883 individuals via a mobile clinic in partnership with a local organisation. Mental health and psychosocial support services reached more than 33,500 children.

MdM also provided capacity-building to frontline responders and professionals, aligned with international standards in MHPSS (e.g. PFA, PM+), and ensured accessibility of all interventions for persons with disabilities.

West Bank: Rising Violence and insecurity

In the West Bank, the security situation deteriorated significantly. According to the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Israeli military operations accounted for 42% of all displacements in 2024. Despite escalating constraints, MdM provided psychosocial care to 2,967 displaced Palestinians and survivors of violence in Jerusalem, Bethlehem, and Hebron. MdM also equipped 27 health facilities and schools with consultation spaces and medical equipment and trained 31 health professionals and community workers. A specific focus was placed on suicide prevention — an issue still heavily stigmatised in the region.

Despite the volatile context, MdM has continued its activities with agility and commitment, in coordination with its local partners.



1 PROJECT

Donor: DDC. **Direct costs :** CHF 50,000. **Partner:** Pallia Familli. **Total number of beneficiaries:** 154 patients and 75 healthcare professionals.

RDC

Types of actions
Child Health and Development

Paediatric Palliative Care (PPC) is a vital component of primary health care, encompassing preventive, promotive, curative, and palliative services—although the latter is often overlooked. PPC aims to enhance the quality of life for children living with life-limiting or life-threatening conditions by offering comprehensive, person-centred care that includes the family and wider social environment. This approach seeks to prevent and alleviate suffering through the management of pain and other physical, psychosocial, or spiritual challenges.

Sustaining efforts to improve child health outcomes

In 2024, the fourth phase of the project built on previous interventions with the goal of consolidating achievements and ensuring long-term sustainability. The intervention focused on three strategic pillars:

- Strengthen local skills in paediatric palliative care through training, leveraging MdM's technical know-how and established partnerships, notably the creation of a dedicated PPC department within ISTM Kinshasa.
- To encourage the adoption of a holistic approach to patient care, including pain management and non-pharmacological therapies, to improve the quality of support for seriously ill children and their families.
- Advocate for the integration of paediatric palliative care into the national health strategy and the adoption of a legislative measures to recognise PPC as an essential component of universal health coverage.

The project is anchored in a network-based model that fosters collaboration between palliative care actors and facilitates knowledge exchange between health professionals from both the Global North and South. It is aligned with MdM's global strategy to promote equitable and sustainable access to health care, with a strong emphasis on reaching marginalised and vulnerable populations through innovative, inclusive approaches. Since its inception, the core objective has been to ensure the availability of paediatric palliative care for vulnerable populations in Kinshasa, with a particular focus on improving care for children.

3 PROJECTS

Donors: Swiss Solidarity, SDC. **Direct costs:** CHF 1,665,465. **Partners:** MdM Spain, MdM France and MdM Germany, Red Cross, AFEW-Ukraine, Right to Protection. **Total number of beneficiaries:** 439,020.

UKRAINE

Types of actions
Mental health, SDSR, Child Health and Development

The Ukrainian healthcare system is facing collapse. More than 40% of hospitals experience critical drug shortages, while widespread infrastructure damage and healthcare workforce shortages paralyse service delivery – particularly near the frontlines. The harsh winter of 2024 saw a sharp increase in respiratory illnesses, seasonal infections, and mental health conditions.

War and Access to Healthcare

In 2024, Ukraine endured one of the most severe humanitarian crises in Europe. Over 6.9 million people fled the country, and 3.6 million remain internally displaced, placing immense strain on host communities. Repeated attacks on vital infrastructure – especially the energy grid – have triggered widespread blackouts, severely disrupting healthcare services. The harsh winter has exacerbated the situation, leaving thousands of people without heating, electricity or reliable access to healthcare. Despite limited resources and deteriorating conditions, humanitarian actors – including the Médecins du Monde international network (Switzerland, Germany, Spain, France, the Netherlands, and Greece) – have played a key role in mitigating human suffering.

Our Impact in Ukraine

MdM Switzerland, in collaboration with MdM Germany, Spain, and France, provided essential health services in the regions of Luhansk, Donetsk, Kharkiv, Vinnytsia, and Zaporizhzhia. Our interventions included primary healthcare, SRHR, mental health and psychosocial support (MHPSS), cash assistance, and capacity building for healthcare personnel. Our operations were constantly adapted to the evolving context: withdrawal from high-risk areas, expansion of mobile health units, and distribution of generators and fuel to ensure continuity of care.

As a result, 4,471 people (74% women) received primary care, 3,570 women received sexual and reproductive health services (including 1,190 with maternity and birth kits) and 2,860 people (78% women) received mental health support. In addition, 177 health professionals (88% women) were trained to enhance their skills. The mobile clinics exceeded their targets by 20%, providing consultations and referrals in the affected areas. In addition, 54 health facilities were supported with deliveries of medicines, equipment and medical supplies.

Although some activities in Luhansk were discontinued due to non-renewal of local accreditation, MdM remains committed to defending access to healthcare, safeguarding dignity, and strengthening resilience among Ukraine's most vulnerable populations.

1 PROJECT

Donors: SDC, Latitude 21, commune de Meyrin, commune de Plan-les-Ouates. **Direct costs:** CHF 186,182**. Partners:** Family Support Trust. **Total number of beneficiaries:** 8,812.

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ZIMBABWE

Types of actions
Preventing and Addressing Violence

In 2024, Zimbabwe faced a historic drought triggered by the El Niño weather phenomenon, prompting the government to declare a national state of disaster. The introduction of a new national currency (ZiG – Zimbabwean Gold) failed to curb hyperinflation or alleviate the ongoing economic crisis. The cholera epidemic, which had persisted since February 2023, was finally brought under control by August. In September, President Mnangagwa enacted a revision of the criminal code, raising the legal age of sexual consent from 16 to 18 and criminalising all forms of child marriage.

Putting an end to gender-based violence in the Harare region

According to the United Nations, 2.6 million Zimbabweans required emergency protection from gender-based violence (GBV) in 2024. An alarming 42.5% of Zimbabwean women report having experienced physical and/or sexual violence in their lifetime – significantly higher than the regional average of 33% – and this figure has remained unchanged over the past decade.

The year 2024 marked a strategic shift in MdM's operations in Zimbabwe, with the launch of a new project focused on the prevention and response to GBV in Chitungwiza, on the outskirts of Harare. A total of 1,163 survivors (1,069 women and 94 men, including 1,034 minors) received medical care, psychosocial support and specialised services at a clinic run by our local partner, Family Support Trust (FST) – a pioneering NGO supporting minors affected by GBV in Zimbabwe.

Combining expertise to maximise impact

In partnership with the Women's University in Africa, based in Harare, MdM conducted a study on the socio-cultural determinants of GBV and community perceptions in Chitungwiza. The findings from this research helped tailor our prevention and early detection efforts to be more context-specific and culturally appropriate.

At the request of FST, MdM also mobilised the expertise of the Centre Universitaire Romand de Médecine Légale (CURML), which carried out an exploratory mission to Zimbabwe in December 2024 to assess the country's forensic medical capacity to manage GBV cases. The resulting recommendations aim to strengthen survivors' access to justice and reparations, and to tackle the prevailing impunity of perpetrators.

Throughout the year, we deepened our collaboration with FST, prioritising a needs-based, partnership-driven approach that reinforced FST's operational capacities. This collaboration further reaffirms MdM's commitment to the localisation of international solidarity.

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MDM NETWORK EMERGENCY ACTIONS

MOROCCO

On 8 September 2023, a 6.8-magnitude earthquake struck Morocco, with its epicentre in the High Atlas Mountains. The disaster affected 2.8 million people, destroyed 59,674 homes, and caused 2,946 deaths and 6,125 injuries mainly in the Marrakech-Safi and Souss-Massa regions. Médecins du Monde, which has been operating in Morocco since 2013 via its Belgian section, was quick to mobilise in these disaster-stricken regions, initiating its operations in the first week after the earthquake in collaboration with local Moroccan partners. Given the scale of the immediate and long-term needs of the populations affected by the earthquake, MdM very quickly developed, thanks to Swiss Solidarity, a Nexus Emergency-Development response after an initial intervention phase. This strategy integrates emergency actions and sustainable development initiatives, guaranteeing a global and sustainable response to the crisis. With local partners heavily involved, short-term interventions focus on immediate access to health and protection services, while long-term efforts aim to build community resilience to manage future crises.

ARMENIA

Since 2018, Médecins du Monde has been supporting vulnerable populations in Armenia, with a strengthened focus on mental health and psychosocial support (MHPSS) since 2021, in the context of the conflict in Nagorno-Karabakh (Artsakh).

In 2024, MdM continued its commitment through a comprehensive, cross-sectoral programme implemented across four centres located in Yerevan, Goris, Ashtarak and Massis. More than 5,300 displaced individuals benefited from mental health and social support services. In addition, 760 hygiene kits were distributed to the most vulnerable, and 17 “Help the Helpers” sessions supported 260 professionals and humanitarian workers facing high levels of stress and trauma.

A needs assessment conducted by MdM in November 2024 highlighted the scale of the mental health crisis: 85% of respondents identified anxiety and depression, and 70% post-traumatic stress disorder, as key concerns. However, 70% were unaware of the existence of local mental health services, while 90% viewed mental health as a top priority.

In a public health system where mental health remains largely neglected, MdM is working hand in hand with displaced and host communities to deliver concrete solutions, while also building local capacities in MHPSS and the prevention of gender-based violence.

OUR ORGANIZATION

GENERAL ASSEMBLY AND BOARD

The General Assembly is the central body regulating the activities of Médecins du Monde Switzerland. It has decision-making power and is the sole body authorized to amend the organization's articles of association. It meets once per year.

The Board is elected by the General Assembly. It elects the president, vice-president, treasurer and any other members of the Steering Council. The Board meets about 10 times a year, including once or twice a year for strategic meetings.

THE BOARD ELECTED AT THE GENERAL ASSEMBLY OF 23 AUGUST 2024

CO-PRESIDENTS

Prof Antoine KERNEN*
Teacher and researcher at the Faculty of Social and Political Sciences of the University of Lausanne

Dr Laurent LOB*
Specialist in general internal medicine and in tropical and travel medicine

VICE-PRESIDENTE

Mme Justine HIRSCHY*, Sociologist (PhD)

TREASURER

Mme Françoise JEANNERET*, Lawyer, private guardian

MEMBRERS

Dre Cécile BASSI
Specialist in internal medicine and tropical medicine

Dre Cécile CHOUDJA OUABO
Medical, pediatrician (FMH) / Pediatric hematologist-oncologist

Mme Sandrine DESTOUCHES
Clinical psychologist, MA in Developmental Psychology

Mme Manon DUAY
Senior lecturer in health promotion, mental health and global health

Dr Michel HUNKELER
Specialist in rheumatology, physical medicine, and rehabilitation

Dre Frédérique JACQUÉRIOZ BAUSCH
Specialist in tropical medicine

M. Laurent KURTH
Economist and former State Councillor

M. John ORLANDO
Social worker with a degree from HES, specialist in international cooperation and humanitarian aid

Dr Claude-François ROBERT*
Swiss Medical Association (FMH) specialist in public health

* Steering Council member

HEADQUARTERS TEAM

Managing Director
Morgane ROUSSEAU

Human Resources Manager
Marie WITTWER PERRIN

Health Referent
Nicole Niederberger
(from 1.4.2024)

SUPPORT DEPARTMENT

Department Manager
Virginia ALVAREZ
(from 1.5.2024)

International program support managers
Franck PETITJEAN
Diane ROSIER
Maxime VERGER
(from 8.1.2024)

Administration and Human Resources
Jérémie GOUMAZ
(from 14.10.2024)

Administration and Internal Control Officer
Emily LUCAS
(until 30.6.24)

Administration
Victor JÉQUIER
(from 1.6.2024)

Administration intern
Mainuddin ROUP
(from 1.4.2024)

Accountants (as service providers)
Fabrice BRACELLI
Carol CRETTAZ
(until 31.8.2024)

INTERNATIONAL PROGRAMS DEPARTMENT

Department Manager
Linh GROTH (until 31.8.2024 puis en congé maternité)

Stéphanie BAUX (from 1.9.2024)

International Programs Managers
Daniel CALZADA
Hortense DEVALIÈRE
Frédéric BOCQUET (from 9.1.2024)

Institutional Partnerships Manager
Elsa BETTENMANN

Institutional Partnerships Manager
Lise DAL SECCO (from 1.12.2024)

International Programs Junior Manager
Emma KOUYATÉ (until 31.8.24)
Louis BALLET (from 1.9.2024)

GBV Referent
Elena MELANI

Mental health Referent (SMSPS)
Hélène LOING (from 1.9.2024)

Sexual and Reproductive Health and Rights Referent - Position shared with the MdM network
Stefania PARACCHINI

Security Referent - Position shared with the MdM network
Armando PALACIOS

SWISS PROGRAM DEPARTMENT

Department Manager
Nicolas MERCIER

Program and Support Manager
Laura MELLY

Advocacy and Quality Manager
Programme Syni Associate
Malick GEHRI (from 1.2.2024)

COMMUNICATION AND FUNDRAISING DEPARTMENT

Department Manager
Floryse DE SUSANNE
(from 1.4.2024)

Communication Officer
Antoine MORATA

Communication Officer
Christelle WÄLTI

Communication intern
Cassandre OSSONA DE MENDEZ
(from 13.5.2024)

Marketing Officer
Léa CHAILLET

Digital marketing and donor services
Mehdi MANAR (from 1.4.2024)

Partnership and Philanthropy Officers
Florence LACHENAUD
Dorothée NICOLAISEN
(from 1.12.2024)

MDM INTERNATIONAL NETWORK

For the Médecins du Monde international network to maximise its impact, each member must be institutionally robust and continue to grow. In response to escalating global conflicts in 2024, the various chapters reaffirmed their commitment to health and solidarity.

Advocacy and solidarity for Gaza and the West Bank

In the face of ongoing violence, MdM network members have mobilised to bear witness, raise awareness, and advocate for urgent action. Médecins du Monde Canada called on the Canadian government to halt all arms transfers to Israel. In the German Bundestag, Médecins du Monde Germany raised MPs' awareness of the health implications of the conflict and in Spain MdM launched the *"Healthcare is not a target"* campaign, mobilising hospital staff nationwide.

Médecins du Monde Switzerland invited the public to send messages of support to the team in Gaza - receiving thousands of messages.

This broad-based campaign unfolded both online and at summer festivals, amplifying collective compassion and advocacy.

The international network also participated in media briefings in the US, UK, and France, calling for an immediate ceasefire, unhindered and large-scale humanitarian access, and the protection of civilians and humanitarian workers. Members stand in unwavering solidarity with teams delivering care in life-threatening conditions.

Palestinian Photographer Mahmoud Issa Wins the Luis Valtueña International Humanitarian Photography Award

Each year, Médecins du Monde Spain organises the Luis Valtueña International Humanitarian Photography Award, established in 1997 in memory of Flors, Luis, Manuel, and Mercedes, four humanitarian workers killed during missions in Rwanda and Bosnia-Herzegovina.

This award honours their legacy by shedding light on humanitarian crises and recognising the work of photographers who denounce injustice and bear witness to human suffering across the globe.

The first prize for the 2024 edition was awarded to Palestinian photographer Mahmoud Issa for his powerful photo series “Siege and Hunger”, documenting life in the Gaza Strip one year into the ongoing conflict. His images not only depict the physical devastation of war but also convey its mental health toll. Through haunting portrayals of famine and malnutrition—especially among children—Issa's work draws urgent attention to the dire humanitarian conditions in the region.

Turning the Mobilisation of the Médecins du Monde International Network for Abortion Rights into Concrete Action

As part of its commitment to human rights, the Médecins du Monde international network reiterates: "Access to abortion services is a core element of Sexual and Reproductive Health and Rights (SRHR), a matter of public health, a fundamental human right, and an indicator of social and gender inequality."

In practice, the network pledges to provide access to safe abortion services wherever possible, either directly or through trusted referral partners. At a minimum, all services must offer accurate information about self-managed abortion and post-abortion care.

At its General Assembly in November 2024, the Médecins du Monde network unanimously adopted a shared eco-responsibility policy

“ This policy reflects our deep commitment to protecting the environment today and for future generations.

It forms the foundation for the individual roadmaps developed by each member association of Médecins du Monde, guiding the integration of eco-responsible practices across all operations.

The aim is clear: to actively contribute to the global environmental movement by adopting responsible practices. The policy outlines shared principles, priority action areas, and clearly defines roles and responsibilities to ensure effective implementation throughout the network."

International Network

The Médecins du Monde International Network is composed of 17 civil society organisations united by a shared vision: A world in which health is recognised as a fundamental human right.

We provide care, bear witness, and advocate for social change, while standing against injustice. We work in solidarity to ensure universal access to healthcare.

Around the world, we are committed to facilitating access to quality healthcare for all, wherever and whenever it is most needed.

GENDER EQUALITY & HEALTH ALLIANCE

The “Gender Equality and Health Alliance” brings together three Swiss NGOs:

- IAMANEH Switzerland
- Médecins du Monde Switzerland
- Women’s Hope International

These organisations are jointly engaged in an international programme supported by the SDC for the period 2021—2024. This collaboration is designed to enhance the overall impact on health and the fight against all forms of violence in approximately twenty countries. In 2025, a new phase will begin with the addition of a fourth member, FRIEDA, a feminist organisation committed to peace.

In 2024, the Alliance maintained its active presence in international advocacy forums amid a global context marked by rising authoritarianism, political polarisation, and increasing restrictions on women’s rights. It participated in five major conferences, including the 77th World Health Assembly and the Humanitarian Congress in Berlin, both of which addressed key challenges currently facing the humanitarian sector: shrinking operational space, decreasing funding, and heightened risks for humanitarian workers. Through MdM, the Alliance also contributed to the International Francophone Congress on Sexual Assault (CIFAS) in Lausanne, which brought together 500 professionals to explore sexual violence through a multidisciplinary lens.

At the national level, the Alliance supported 43 initiatives across nine countries: 33 focused on the fight against sexual and gender-based violence, 10 on sexual and reproductive health and rights (SRHR) and one on paediatric palliative care. Tangible progress included a study in Mexico on healthcare access for displaced persons, a national campaign on paediatric palliative care in Nicaragua, and the drafting of a pioneering law against digital violence in Albania.

Furthermore, the Alliance contributed to the adoption of 24 political measures supporting the rights of women and vulnerable populations in 10 countries. For example, a state commission was established in Mexico to prevent domestic violence and in Zimbabwe, the legal age of sexual consent was raised to 18, ending child marriage. At the programmatic level, the concerted efforts of Alliance members promoted access to inclusive, quality healthcare by strengthening maternal health services and ensuring holistic care for individuals affected by violence, while consistently ensuring the right to bodily autonomy and informed choice for women, young people, and children.

TO BE CARED FOR CAMPAIGN

Not everyone has access to care.

Médecins du Monde's 2024 end-of-year campaign raised public awareness of persistent and growing inequalities in healthcare, both in Switzerland and around the world.

The campaign's messages and visuals reminded audiences that health is a fundamental human right, and reaffirmed our commitment to the right to health for all. Each year, this campaign highlights Médecins du Monde's field activities and advocacy work while also helping to diversify funding sources to strengthen our operational capacity.

MESSAGE FROM THE TREASURER

Françoise JEANNERET

The year 2024 confirmed the continued growth trajectory of Médecins du Monde Switzerland, with a 36% increase in expenditures compared to 2023 (itself marked by a 30% increase over 2022). This rise reflects the expanding scope of our activities, with total expenses now exceeding CHF 15 million. At the dawn of a more uncertain period for international NGOs—due to increasing restrictions on access and funding—this growth compels us to manage our operations with both rigour and prudence, despite solid results and an overall balanced financial year.

Revenue also showed encouraging growth, driven by the initial outcomes of our development strategy. Unrestricted private donations increased by 79%, in line with our targets. The decline in income from foundations is due to the dissolution of the dedicated fund at the Swiss Philanthropy Foundation at the end of 2023, with the remaining balance transferred to MdM's new development reserve. A revised accounting method also enabled the inclusion of administrative income from donor contracts as unrestricted income, amounting to CHF 784,537. As a result, the ratio between unrestricted and restricted income remained stable (12% in 2023, 11% in 2024), despite the end of the SPF fund. Notably, institutional income from Swiss Solidarity and SDC increased significantly, including an exceptional CHF 1.5 million allocation for emergency relief in Palestine and Gaza.

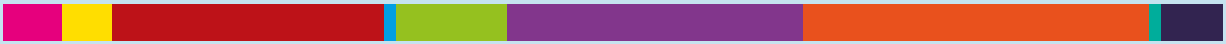
On the expenditure side, project costs naturally accounted for the largest increase (+34%). These include activities in nine countries (compared to ten in 2023, following the closure of the Bangladesh programme), as well as projects implemented in partnership with other Médecins du Monde network members (Turkey, Madagascar, Morocco, Nagorno-Karabakh, Ukraine) and in Switzerland. Activities in Palestine expanded by 300%, and those in Ukraine doubled. Conversely, the programme in Haiti saw a sharp decline due to a funding shortfall. In Switzerland, the launch of the Yverdon-les-Bains project contributed to a 34% increase in national programme costs. Support costs were scaled up to ensure effective operational monitoring. Communication and fundraising costs also increased in alignment with our strategy to ensure long-term financial sustainability. This was partially offset through a partnership with MdM France.

With revenue reaching nearly CHF 15 million (+21%) and operating expenditures at CHF 15.3 million (+36%), the operating result showed a deficit of CHF 375,562. This was partially offset by financial income and exchange gains of CHF 210,907, counterbalanced by a negative change in restricted funds (CHF -200,093), resulting in a net annual result before reserve allocations of CHF -321,966.

In line with a prudent financial approach, the Board decided to allocate CHF 200,000 to the securities reserve and draw CHF 521,966 from the development reserve created in 2023. This reserve was specifically established to be gradually used, particularly to strengthen our fundraising capacity. The reserve drawdown remained below the level initially budgeted for 2024. Consequently, the balance sheet declined slightly to CHF 8.2 million. This allows us to maintain a healthy level of equity coverage, equivalent to 4.8 months of operational expenses.

SOURCE & ALLOCATION OF FUNDS

SOURCE OF FUNDS



Private and corporate donors	6 %	Loterie Romande	1 %	Donors in countries of operation	28 %
Foundations	4 %	Swiss cantons and municipalities	9 %	Other donors	1 %
Swiss Solidarity	22 %	Swiss Confederation	24 %	Administrative income	5 %

REVENUE

Restricted revenue	89 %
Unrestricted revenue	11 %

ALLOCATION OF FUNDS

Projects	89,6 %
Administration	0,3 %
Communications & fundraising	10,1 %

BREAKDOWN

Palestine	26 %	Switzerland	10 %
Ukraine	14 %	Mexico	6 %
Benin	13 %	Emergency Network	5 %
Haiti	12 %	Zimbabwe	2 %
Cameroon	11 %	DRC	1 %

BALANCE SHEET

IN CHF	31/12/2024	31/12/2023
ASSETS	**10 403 026,36**	**9 331 101,36**
Current assets	**5 666 827,15**	**6 388 833,24**
Cash and cash equivalents	**2 937 537,20**	**1 977 810,11**
Cash and cash equivalents (headquarters)	2 299 950,88	1 524 127,98
Cash and cash equivalents (field)	637 586,32	453 682,13
Receivables	**2 697 844,48**	**2 007 911,60**
Donor receivables	1 776 637,00	534 060,40
Other receivables	921 207,48	1 473 851,20
Prepaid expenses / Deferred charges	**31 445,47**	**2 403 111,53**
Fixed assets	**4 736 199,21**	**2 942 268,12**
Financial assets	**4 736 196,21**	**2 942 265,12**
Tangible assets	**3,00**	**3,00**

LIABILITIES	10'403 026,36	9 331 166,21
External liabilities	**5 073 228,99**	**3 679 402,14**
Short-term liabilities	**1 870 938,24**	**654 005,03**
Current liabilities	**1 423 803,63**	**429 953,63**
Accrued liabilities / Deferred income	**447 134,61**	**224 051,40**
Restricted funds	**3 202 290,75**	**3 025 397,11**
Equity	**5 329 797,37**	**5 651 764,07**
Initial capital of the organization	213 942,46	213 942,46
Restricted reserves	**4 244 190,24**	**4 566 156,94**
Unrestricted reserves	**871 664,67**	**871 664,67**
General reserve	871 664,67	871 664,67

OPERATING ACCOUNT

IN CHF	2024	2023
Revenue	**14 989 533,81**	**12 338 389,31**
Restricted revenue	13 269 567,10	10 866 192,14
Unrestricted revenue	1 719 966,71	1 472 197,17
Operating expenses	**15 363 096,13**	**11 282 681,07**
Project expenses	12 546 142,68	9 392 672,03
Program support expenses	1 216 982,15	857 639,76
Organizational operating expenses (MdM Switzerland)	51 394,21	31 589,07
Communication and fundraising expenses	1 548 577,10	1 000 780,21
Operating result	**-373 562,32**	**1 055 708,24**
Financial result	210 907,52	-122 090,82
Extraordinary result	40 781,77	4 319 474,02
Annual result before change in restricted funds	**-121 873,03**	**5 253 091,44**
Change in restricted funds	-200 093,67	-1 258 745,95
Annual result before allocation / use of reserves	**-321 966,70**	**3 994 345,49**
Changes in reserves decided by the Committee	321 966,70	-3 994 345,49
Annual result before allocation / use of reserves	**0,00**	**0,00**

This overview is a summary of the financial statements audited by the firm BDO.
The detailed annual accounts are available on our website www.medecinsdumonde.ch

ACKNOWLEDGMENTS

PRIVATE DONORS

We warmly thank our 6,429 private donors who supported our activities in 2024.

INSTITUTIONAL FUNDERS

Global Affairs Canada (GAC), USAID Bureau for Humanitarian Assistance (BHA), USAID Bureau of Population, Refugees, and Migration (BPRM), Office for the Coordination of Humanitarian Affairs (OCHA), Swiss Solidarity, Crisis and Support Centre of the French Ministry for Europe and Foreign Affairs of France (CDCS), European Commission Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), Swiss Agency for Development and Cooperation (SDC), United Nations Children's Fund (UNICEF), United Nations Population Fund (UNPA), Government of Navarre, United Nations Office of the High Commissioner for Refugees (UNHCR), German Federal Ministry for Economic Cooperation and Development (BMZ), Sahel Women's Empowerment and Demographic Dividend Project (SWEDD).

CANTONS, MUNICIPALITIES, AND CITIES

City of Geneva, City of Neuchâtel, Municipality of Meyrin, Municipality of Plan-les-Ouates, City of Zürich.

FOUNDATIONS

Fonds de soutien Migros, Smartpeace Foundation, Medicor Foundation, J&K Wonderland Foundation, AXA Mexico Foundation, Loterie Romande, Madeleine Foundation, Alfred et Eugénie Baur Foundation, Christian Bachschuster Foundation.

SWITZERLAND PROGRAM FUNDERS

The Republic and Canton of Neuchâtel Public Health Service, The Republic and Canton of Neuchâtel Department of Employment and Social Cohesion Federal Office of Public Health (FOPH), Sandoz Family Philanthropic Foundation, Casino de Neuchâtel Foundation, Ernst Göhner Stiftung, Leenaards Foundation, ASPASIE, City of Neuchâtel, City of Renens, City of Yverdon-les-bains, Loterie romande, État de Vaud, Direction générale de la santé, Government
of Vaud Directorate General of Health, Department of Health and Social Action.

FEDERATIONS

Fédération Neuchâteloise de Coopération au Développement - Latitude 21, Fédération Vaudoise de Coopération – Fedevaco.

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