

PAEDIATRIC CRITICAL CARE **in LESS DEVELOPED COUNTRIES**

About us

ROBINAID is based in Hamburg and was founded in 2009 by anaesthetist and critical care specialist Matthias Angrés; before devoting himself to humanitarian medicine and development assistance he was medical director at the Albertinen Hospital, academic teaching hospital of the Hamburg Medical University.

ROBINAID is accredited by the Foundation Supervisory Authority of the Free and Hanseatic City of Hamburg as a charitable foundation.

Anja Reschke, a well-known German journalist and television presenter, as well as Hinnerk Schönemann, an international reputed German actor, are supporting our foundation as ambassadors for several years.

In February 2017, the German President Joachim Gauck honoured our founder with the Order of Merit of the Federal Republic of Germany, and in August 2019, he was awarded with the Bremen Children's Oscar, given to an outstanding commitment for the underprivileged critically ill children in poor countries.

Founder + CEO

Dr. med. Matthias Angrés
Anaesthesiologist + Intensivist

Executive Board

Carsten Leverenz
Certified Accountant + Tax adviser

Stefan Buchen
Journalist

Head of Back Office

Susanne Robert

Board of Trustess

Dr. Ralf Güstel
Certified Accountant + Tax adviser

Jan Herdemerten
Lawyer

Wolfgang Pabst
Publisher



Ambassadors



What we stand for



ROBINAID establishes and supports paediatric critical care in less developed countries according to international quality standards; as a highly specialized medical expert organization we focus on the treatment of life-threatening disorders, particularly congenital and acquired heart diseases.

We are always working in conjunction with local partnered hospitals; according to their needs we provide teams of medical experts, equipment, and consumables. But in order to encourage them in their own abilities to become self-sufficient as soon as possible, medical education is the most important column in our strategy. All our medical treatments and services are basically free of charge.

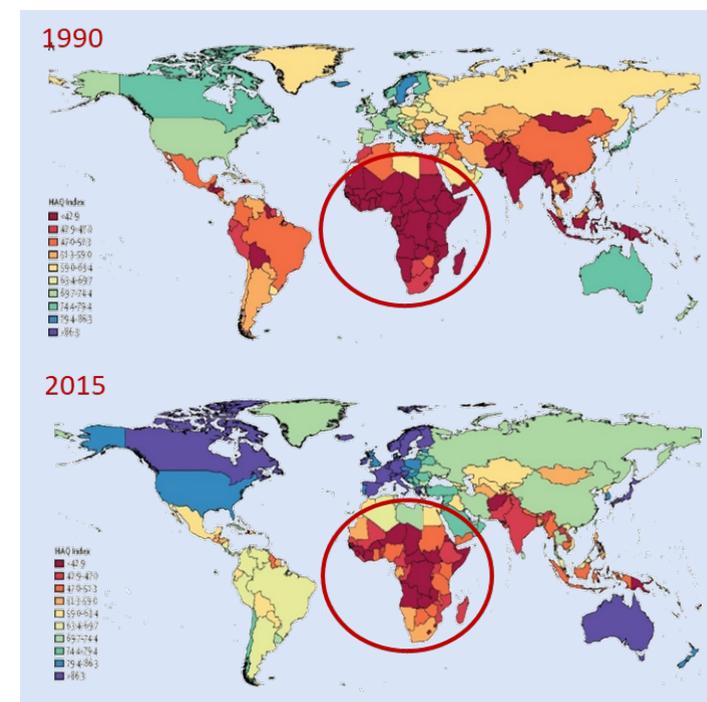
Professionalism, outstanding concepts, and an ongoing improvement process are fundamental demands on quality in our projects; to accompany our local partners on their own way to independency is always the ultimate target: they have to become strong and we have to make ourselves superfluous.

A world divided by health inequalities

Article 25 of the UN Universal Declaration of Human Rights states that “everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services”.

But the reality looks quite different: a third of the world’s population lacks of access to adequate quality health care; low- and middle-income countries bear 93% of the world’s disease burden yet account for only 18% of world’s income and 11% of global health spending. (*WHO Health Report + World Bank Group 2018*)

The Healthcare Access and Quality Index (HAQI) is based on mortality from causes amenable to personal health care in 195 countries; comparing the values from 1990 with those from 2015 shows alarmingly that particularly in Sub-Saharan Africa the situation has not significantly improved within the last 25 years. (*Global Burden of Disease Study 2015. THE LANCET. July 15, 2017. Vol. 390*)



The burden of critical illness



Global efforts to reduce child mortality have focused on reducing death from communicable diseases with little to no attention on critical care. Therefore, in poor regions of our world the burden of paediatric mortality remains high and a largely undocumented burden of critical illness continues to exist.

Especially Sub-Saharan African children have still little or no access to critical care medicine; specialized services e.g., to treat serious illnesses like congenital or acquired heart diseases are virtually absent except for a handful of units in a few of the wealthier nations.

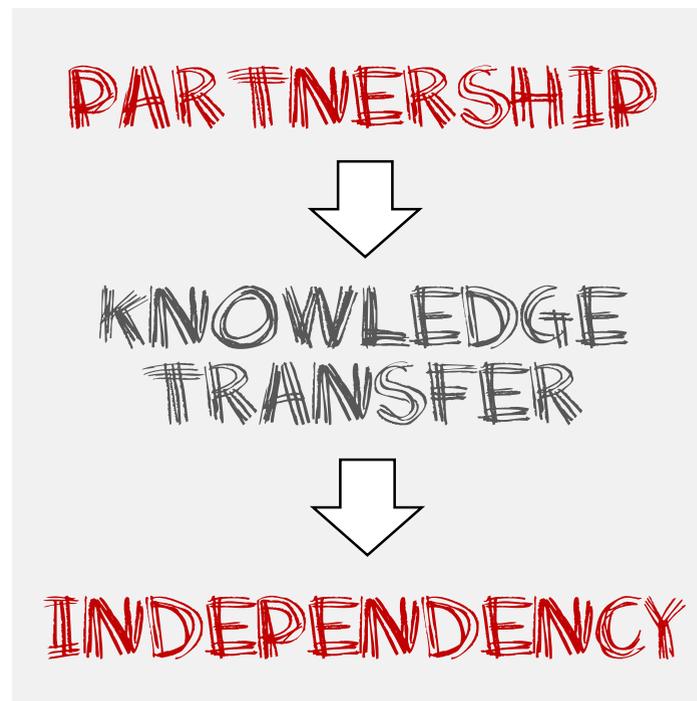
Lack of awareness, competing health priorities, socio-economic barriers caused by poverty, and a critical shortage of specialists are the most important reasons why critical illnesses in children are still not addressed adequately in low resourced settings. Political instability, bad governance and corruption are additional factors which often essentially complicate the development.

Capacity building is a mandatory obligation

Access to critical care is a crucial and life-saving component of healthcare and an important factor of reducing morbidity and mortality. Beside the need of qualified staff, specialized and well equipped critical care units as well as the sufficient supply with drugs and medical consumables are fundamental essentials. But such challenges are still not solvable for most of the less developed countries.

The dramatic disproportion between medical access and healthcare services within rich and poor countries comprise one of the gravest problem of medical ethics but also great challenges of social as well as political responsibility; we are obligated to find equitable solutions very quickly.

Capacity building of critical care services in less developed countries is predicated on the belief that all human beings belong to a single community, based on a common morality of three basic principles: all people are of equal worth, the dignity of individuals, and the existence of human rights binding to all.



Education is the key to independency



Considering the essential importance of medical education to become independent of foreign assistance, in 2018 we established **ROBINAID ACADEMY** to professionalize our educational offers and to make them accessible to a larger amount of health professionals.

Our academy is aimed to cover the entire spectrum of training in paediatric critical care to improve knowledge, skills, and competencies for practicing in critical care environments. Given the tremendous need of critical care services in less developed countries, we also offer courses in general critical care to provide core skills in early detection and care of critically ill patients to health care providers.

In our strategy we are following a structured 4-stages concept of basic courses, specialized training, and advanced studies, added by a comprehensive continuous medical education program; committed in a medical specialty which has a huge lack of experts our range of training programs are experiencing a great demand.

Places of our activities

Cameroon / Central Africa	Shisong + Yaoundé
Egypt / Northern Africa	Aswan + Cairo
Jordan / Middle East	Amman
Syria / Middle East	Damascus
Senegal / Western Africa	Dakar
Afghanistan / Asia	Kabul
Romania / Eastern Europe	Bucharest + Iasi
Germany / Western Europe	Hamburg (head office) Bremen (International Medical Class)
In preparation:	
Rwanda / Eastern Africa	Kigali



The TSSF Cardiac Centre Shisong



The TSSF Cardiac Centre is placed in the Northwest Province of Cameroon and is part of the St. Elizabeth's Catholic General Hospital in Shisong. Founded in 2009 with the support of the Italian organization Bambini Cardiopatici nel Mondo, the centre initially was dependent on international medical visiting teams.

But, little by little the centre became able to cover a broad spectrum of cardiac procedures according to international quality standards by a small but well-trained local team. However, the planned performance capability according to the needs has not been achieved for a variety of reasons, mainly due to a lack of financial resources and the shortage of qualified staff, above all in ICU and anesthesia.

In 2016, **ROBINAID** was asked to join the project; in accordance with our core competence we have taken responsibility to improve the critical care and to establish structured training programs; additionally we started supporting the centre in the procurement of equipment, consumables, and drugs.

The project had to move to Yaoundé

Long-running tensions between the anglophone and francophone population in the Cameroon Northwest and Southwest regions have increasingly shifted into armed conflict and a wave of violence has shaken the region. Unfortunately, in November 2018, the Shisong Cardiac Centre had to be closed due to safety concerns.

Given the uncertainty of the situation and in responsibility for the patients as well as for the local team, the decision was made to relocate the project to the capital Yaoundé and to restart at a central and safely accessible place.

In March 2019, the TSSF rented the necessary facilities at the Yaoundé Jordan Hospital; this private hospital offered a modern operating theatre and the technical options for placing a 5-bed ICU in close proximity. The surgical equipment was transferred from Shisong to Yaoundé and we equipped the ICU in a short period; due to an exceptional achievement of the local team, already in May 2019 the first open-heart surgeries could be performed successfully in this new environment.



At the Yaoundé Jordan Hospital



The Aswan Heart Centre



The Aswan Heart Centre (AHC) is an exceptional project founded in 2009 by Prof Sir Magdi Yacoub and run by the Magdi Yacoub Heart Foundation; this unique centre is aimed to combat heart diseases at the highest international quality level and to provide free medical treatment to Egyptian people, particularly the under-privileged and vulnerable age groups.

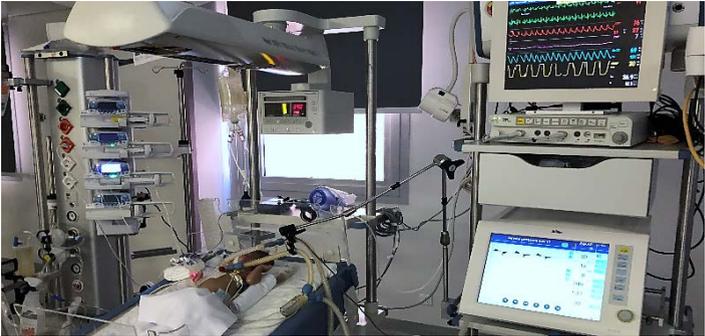
In just a few years, the AHC developed to a Centre of Excellence and Reference with international standing, providing hope, improving life chances, serving newborns, infants, children as well as adults, and performing advanced training programs at the highest standards for young doctors, nurses, and scientists.

Since 2015, we are closely linked to our Egyptian colleagues in the paediatric critical care unit and support them by exchanging expertise, performing common academic education as well as bedside training programs, working on applied research projects, and providing access to international scientific networks.





The Aswan Heart Centre



The Aswan Heart Centre



The AHC is a vibrant institution that embraces modern medicine and the Yacoub doctrine: hard work, perseverance and going the extra mile to serve the patients with highest degree of medical expertise and respect, and to contribute to global knowledge through translational life sciences' research programs.

The AHC has 41 ICU beds, 50 ward beds, two operating theatres, two catheter suites, a 9-bed chest pain unit, and a state of the art imaging centre. Every year around 22,000 patients are reviewed, more than 1,100 complex heart surgeries, and 2,600 heart catheterization procedures performed. Nearly 600 dedicated personnel with 100 doctors and 270 nurses contributing to this worldwide high respected medical center.

The patient centered approach pivots on providing quality care to the underserved communities in Egypt and now extends to other African countries. In its magnificent spirit, quality, and commitment the AHC is a unique and shining example.





The Rwanda Heart Centre



Flux Architects, London



The new Rwanda Heart Centre is aimed to provide free of charge treatment at highest international quality standards for underprivileged patients, children as well as adults, and to develop a new generation of physicians, nurses, technicians, engineers, and scientists to ensure stability in the region.

The Aswan Heart Centre in Egypt forms the basis of this project and acts as a model. By taking this step, the founder of the Aswan Heart Centre, Prof Sir Magdi Yacoub, opens another chapter in the development of high-quality medical care in Africa showing that medicine can take an exemplary leading role in overcoming social inequalities. We are proud that **ROBINAID** was asked to join this project.

The Rwanda Heart Centre will be located in the capital Kigali. In its first phase it will be equipped with two state of the art operating theatres, two catheter suites, a 9-bed ICU, a 6-bed intermediate care unit, and a 12-bed ward. The preparations for construction and operation are in full swing; the opening is planned in 2021.

Amman / Jordan + Damascus / Syria

In response to the humanitarian crisis in Syria we are providing paediatric cardiac surgeries on Syrian refugee children at the Amman Gardens's Hospital in a common project of La Chaîne de l'Espoir Europe. In international missions we are responsible for the critical care teams. The project is funded by the support of the European Civil Protection and Humanitarian Aid Operations.



At the Damascus University Children's Hospital we performed cardiac surgeries in neonates and infants in common missions with our colleagues from Bambini Cardiopatici nel Mondo. Due to the civil war there are dramatic gaps in many areas of the healthcare system. Many healthcare professionals left the country and this has led to a lack of trained staff, but also the supply of essential drugs and consumables is not guaranteed since a long time. Unfortunately, in 2017, the project had to be interrupted due to safety concerns.



Dakar / Senegal + Cairo / Egypt



The Dakar Cuomo Paediatric Cardiac Centre is a collaborative project between the Monegasque Cuomo Foundation, which financed the construction and equipment, our French partnered organization La Chaîne de l'Espoir, which managed logistics, and the local Fan National University Hospital which is in charge for the operation. In common missions we have sent critical care teams to perform bedside teaching and / or supervision in the treatment of complex congenital heart diseases in infants and small children.



At the Giza El Agouza Hospital we have supported the implementation of the paediatric cardiac surgery by sending intensivists and nurses in common missions with our Italian colleagues from Bambini Cardiopatici nel Mondo.

In 2018, we decided to finalize our commitment on-site in order to focus on our main projects but the local colleagues from Dakar and Cairo are still participating in educational programs of the **ROBINAID ACADEMY**.

Kabul / Afghanistan

This project presented the beginning of our humanitarian commitment in 2009. At the French Medical Institute for Mothers and Children (FMIC), founded in 2006 by the French La Chaîne de l'Espoir, we supported the implementation of the first paediatric cardiac anaesthesia team and critical care unit in Afghanistan over the course of more than five years. In 2015, we successfully completed the project.

Today, the FMIC is almost self-sufficient and annually more than 1,000 children are treated in the paediatric critical care unit and 250 paediatric cardiac surgeries are performed by local teams; in 2015 they were able to open the first neonatal critical care unit in Afghanistan.

We still support the intensivists of this unique hospital by sharing expertise and providing access to international medical networks; colleagues from the paediatric critical care department and the emergency department are participating regularly in our annual Bremen International Medical Class.



Bucharest + Iasi / Romania



At the Bucharest Marie Curie Children's Hospital, the biggest hospital for children in Romania, we supported the development of the first paediatric cardiac surgery department in the South of Romania in a joint project with the Italian organization Bambini Cardiopatici nel Mondo, the local non-governmental organization Inima Copiilor, and the Romanian Ministry of Health.

At the Cardiovascular Centre Medical University of Iasi we provided assistance in performing of paediatric cardiac surgeries by sending critical care experts.



Additionally, in 2014 + 2015, we participated in two academic teaching programs of the Romanian government at the Medical Universities of Bucharest and Iasi.

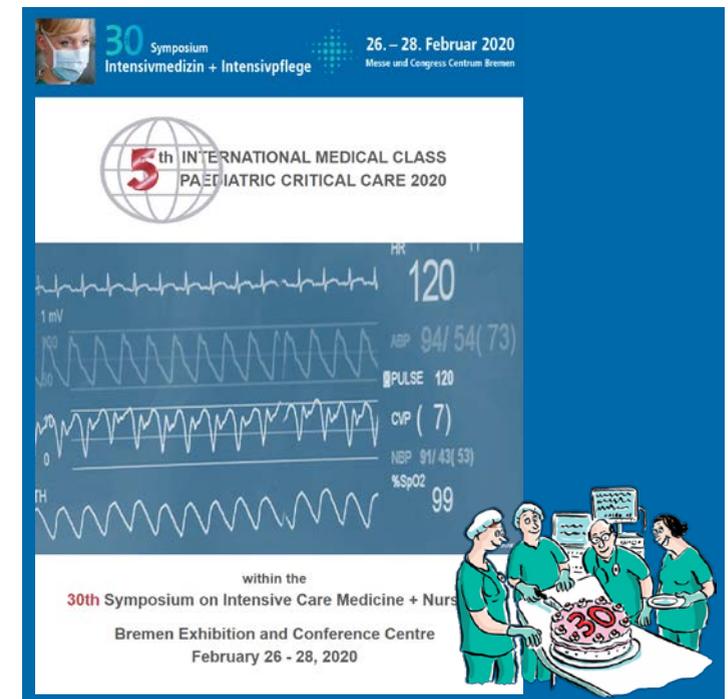
In 2017, we finished our activities in Romania.

Bremen International Medical Class Paediatric Critical Care

The International Medical Class Paediatric Critical Care is a joint project between **ROBINAID ACADEMY** and the annual Bremen Symposium on Intensive Care Medicine + Nursing which is one of the largest medical congresses in Germany dealing with the topics of anaesthesia, intensive care as well as emergency care.

Invited health professionals and fellows from our partnered hospitals and projects in different countries and continents are coming to Bremen, working on current topics in the field of paediatric critical care, sharing their experiences, interacting in a respectful manner with all their differences and building up trusting relationships as well as stable personal networks: coming as colleagues and leaving as friends.

In 2020, the combination of the **30th** Symposium and the **5th** International Medical Class is a very special anniversary edition and we are grateful that we were able to establish our satellite symposium successfully in recent years. Thanks to all who made this happen.



Cartoon: Bettina Bexte

Our services at a glance



Over the last 11 years we performed more than 140 mission to 12 projects in 8 countries on three continents; in doing so, we were responsible for the critical care in more than 3,500 newborns, infants, children, and adolescents.

In total, more than 80 local nurses and around 30 physicians underwent training in paediatric critical care; additionally we participated in three academic teaching programs at local universities with hundreds of participants and performed more than 120 guest lectures. Up to now more than 200 physicians and nurses from our local partnered hospitals were invited to Bremen, participated on our annual International Medical Class Paediatric Critical Care and have gained access to scientific networks.

Our heartfelt thanks goes to the **ROBINAID** team, to our local colleagues who are collaborating in the different projects, to our supporters, sponsoring partners, and donators. Without them, it would not have been possible to do what we did.

Our challenges ahead

Assistance in establishing the new Rwanda Heart Centre in Kigali: we are joining this project by supporting the development of the paediatric critical care unit and performing structured educational programs.

Start of the Aswan International Medical Class Paediatric Critical Care: together with the Aswan Heart Centre we create an analogous to our Bremen event.

Implementation of a PhD program for excellent local physicians: it's aimed to support their academic career to become teachers in their own fields.

Implementation of basic courses in general, paediatric, and neonatal critical care: as a pilot project with the Cameroon Association of Critical Care Nurses we are working towards to set up a wide-ranging training program in Cameroon.

Future development of the Cardiac Centre in Yaoundé: it's our vision to establish a centre of excellence and reference, based on the model of the Aswan Heart Centre; we are looking for the best local partner and final location.



Get involved, we are waiting for you



Our services are based on teamwork and partnership aiming to improve paediatric critical care resources in poor and less developed countries; we are skilled in our profession and have demonstrated this in many projects over the past 11 years since we started our activities in 2009.

All our services are done by volunteers and we provide them to the local hospitals, patients, and colleagues free of charge.

To accomplish our projects we depend on your support: we are looking for donators, sponsors, and activists who identify themselves with our humanitarian conviction.

Are you ready to start on a path with us?
Please, come on board.

Thank you from the bottom of our



Together we can make the world a better place

IT ALWAYS SEEMS IMPOSSIBLE
UNTIL
IT'S DONE

Nelson Mandela

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