



**DOCTORS WITHOUT BORDERS
STARTED WITH PASSIONATE DOCTORS
AND CARING DONORS LIKE YOU...**



**MEDECINS SANS FRONTIERES
DOCTORS WITHOUT BORDERS**

...and today we need **you** now more than ever.



Today, every day, every minute, and with the support of **donors like you**, Doctors Without Borders/Médecins Sans Frontières (MSF) is in action. Right now, on the frontlines of humanitarian crises in the world's most remote and insecure places, our doctors, nurses and field staff are at work providing urgent medical care where it's needed most.

MSF believes that every human life is worth defending, protecting and treating with dignity. We are intensely proud of our dedicated teams that perform surgeries, provide critical care, and maintain the health of our patients—women, men, children, and infants. We are there with them not only to alleviate their suffering, but to bear witness to their experiences, and speak out about what we see. This principle—we call it *témoignage*—plays a crucial role in our humanitarian action. We are not sure that words alone can always save lives, but we know that silence can certainly kill. We use our independent voice to speak truth to power.



Do you remember these humanitarian milestones within your own life story?

1971 — Médecins Sans Frontières is Founded
A group of French doctors and journalists creates MSF in the wake of war and accompanying famine in Biafra, Nigeria and the floods in eastern Pakistan (now Bangladesh)

1980 — War in Afghanistan
After the Soviet Union invaded Afghanistan, triggering a war that would last a decade, MSF medical teams clandestinely cross the Pakistani–Afghan border and travel by mule for several weeks to reach injured civilians.

1976 — War in Lebanon
MSF conducts surgery in the organization's first major response in a war zone.

1984 — Famine in Ethiopia
MSF starts programs to treat malnutrition in hunger-stricken regions of the country.

Cover image: In Nsanje, Malawi, MSF nurse Kate Gannon led a team transporting a woman with pregnancy complications to the nearest hospital by helicopter. Without urgent and immediate attention, the lives of both mother and child were in jeopardy. Thanks to the rapid response by the MSF team, the woman delivered a healthy baby by cesarean surgery.

A Doctor and A Patient: 2 Sides To Every MSF Story



“I said to her, ‘We’ll take you to the hospital to rest, and we’ll find room for your husband too, and tomorrow we’ll help you work on tents and food. **Don’t fear, we’re here, you’re safe.”**

— Dr. James Maskalyk

“One afternoon, I tried to walk from my outpatient clinic to the ward, and was stopped every three yards by a Somali woman who pointed at the baby on her hip before detailing an illness in a language I couldn’t understand. I nodded my head to the beat of a mother’s wagging finger, and over her shoulder saw the familiar eyes of a woman from the therapeutic feeding center. I had looked into those eyes each morning as she asked me, wordlessly, to do something more. Anything. ‘He’s dying,’ she would say. ‘I know, I know. Patience. He’ll make it,’ I said, only half believing.

“Now she was moving through the gate’s swinging door, a box with a month’s worth of cups and shawls and mats and plates under her arm. Behind, an older daughter carried her happy young brother, newly discharged. His mother and I looked at each other, as we had each day for a month. This

time she raised her hand in the air and shook it as she walked past. Though I will never be on the field for a goal that 60,000 fans will cheer, there’s no way it could sound any sweeter than the beads did clacking on her wrist.

“The credit, of course, was hers and the trip she made back and forth to the jug of oral hydration salts so she could pour water in as fast as it poured out, the nurses who took over when she was too tired, the MSF donor who gave us money for the tin cup she used. But it is these moments that are so remarkable that they keep us coming back. They are worth all the sleeplessness and latrine running, daydreams of drooping faces, the awkwardness of a home that fits you less well than it did before you left because we get to be witness to the concentrated effect of the human spirit’s brightest part; intention manifested.

1985 — Conflict in Central America
MSF provides medical care in Honduras to refugees fleeing armed conflicts in El Salvador and Nicaragua.

1988 — Earthquake in Armenia
MSF provides medical care in the Soviet Union for the first time.

1990 — Civil War in Liberia
MSF provides emergency care at the height of the fighting.

1991 — Civil War in Somalia
MSF runs surgical programs in war-stricken Mogadishu and aids refugees in neighbouring countries.

1992 — Famine in Somalia
MSF alerts the international community to widespread famine and opens programs to treat malnourished children and adults.

1993 — Civil War in Burundi
MSF aids civilians in Burundi and refugees in Tanzania and Rwanda.

1986 — Civil War in Sri Lanka
MSF organizes mobile clinics and hospital programs to treat citizens injured and traumatized in the fight between the government and the Tamil Tigers.

1989 — MSF Opens First Mental Health Programs
MSF brings mental health support to survivors of the Armenian earthquake and the following year starts mental health programs for people in the Palestinian Territories.

1991 — War in Bosnia
MSF runs medical and mental health programs in the region and provides assistance in the UN’s supposed “protected zones” of Gorazde and Srebrenica.

1992 — Civil War in Afghanistan
As a vicious civil war takes hold in the country, MSF continues working in Afghanistan, constantly negotiating with the fighting parties to move material into the country and to get access to those in need of medical care.

1994 — Crisis in Goma, Zaire (now Democratic Republic of Congo)
MSF withdraws its staff from refugee camps in Zaire and Tanzania, and denounces the hijacking of humanitarian aid by the perpetrators of the genocide who are controlling the camps.

“MSF is the world’s largest medical NGO. Our budget is made up almost entirely by contributions of individuals around the world who give because they believe that reducing suffering, even by a little bit, lightens the weight on us all.

“With that money, we mark on maps the movements of militaries, deciding if we can get close enough to strike, not with weapons, but with a hospital large enough to accommodate the wounded from both sides—the hundreds of civilians who are drawn screaming into today’s modern version of war. With it, we sit like I did the

other day, with a group of new arrivals who walked for kilometres through the desert heat to give up their freedom. Because it was better here, in this place where even highly-adapted camels just fall over and die, than where they came from. Among them, was a young mother who had delivered just the day before, on the road, a tiny baby, invisible under her scarf. It wasn’t until she pulled it aside that I saw him, fragile and new, clinging to her breast. I said to her, ‘We’ll take you to the hospital to rest, and we’ll find room for your husband too, and tomorrow we’ll help you work on tents and food. Don’t fear, we’re here, you’re safe.’”

— James is an emergency physician, and when not in the field, lives and works in Toronto. He is also an acclaimed author, who has written about his experiences as an MSF physician in Sudan.

Actually, 3 Sides: **You, Our Cherished Donors,** Are Present in Every Story

These are the voices and stories of our donors, and why they choose to support MSF. We would love to hear how you make MSF part of your story.



“Zo kwe zo...”

© Ricardo Garcia Vilanova

1995 — Srebrenica Massacre

MSF witnesses the fall of the UN “protected zone,” and speaks out against the subsequent massacre of some 8,000 Bosnians and the mass deportation and abuse of many thousands more by Serbian troops.

1996 — Rwandan Refugees Seek Aid

MSF assists Rwandan refugees forced out of camps in Zaire as they return home but is blocked by the Rwandan army and allied Congolese rebels — people who fall victim to widespread massacres.

1998 — Famine in Southern Sudan

MSF responds to widespread famine caused by civil war and drought in Bahr-el-Ghazal province.

1995 — War in Chechnya

MSF brings medical aid to civilians uprooted by war and living in precarious conditions in the Russian Republics of Chechnya and Ingushetia, and in neighbouring Georgia.

1997 — Street Children Neglected in Madagascar, Brazil, and the Philippines

MSF expands its medical and social programs in several countries to include marginalized youth.

1998 — Hurricane Mitch

MSF assists victims in Honduras, Nicaragua, Guatemala, and El Salvador.

1998 — Civil War in Republic of Congo (Brazzaville)

After encountering numerous victims of sexual violence, MSF changes its emergency response protocols to integrate treatment for victims of rape and sexual assault.

1999 — MSF Awarded Nobel Peace Prize

MSF is honoured for its “pioneering humanitarian work on several continents.”

2000 — The HIV/AIDS Pandemic

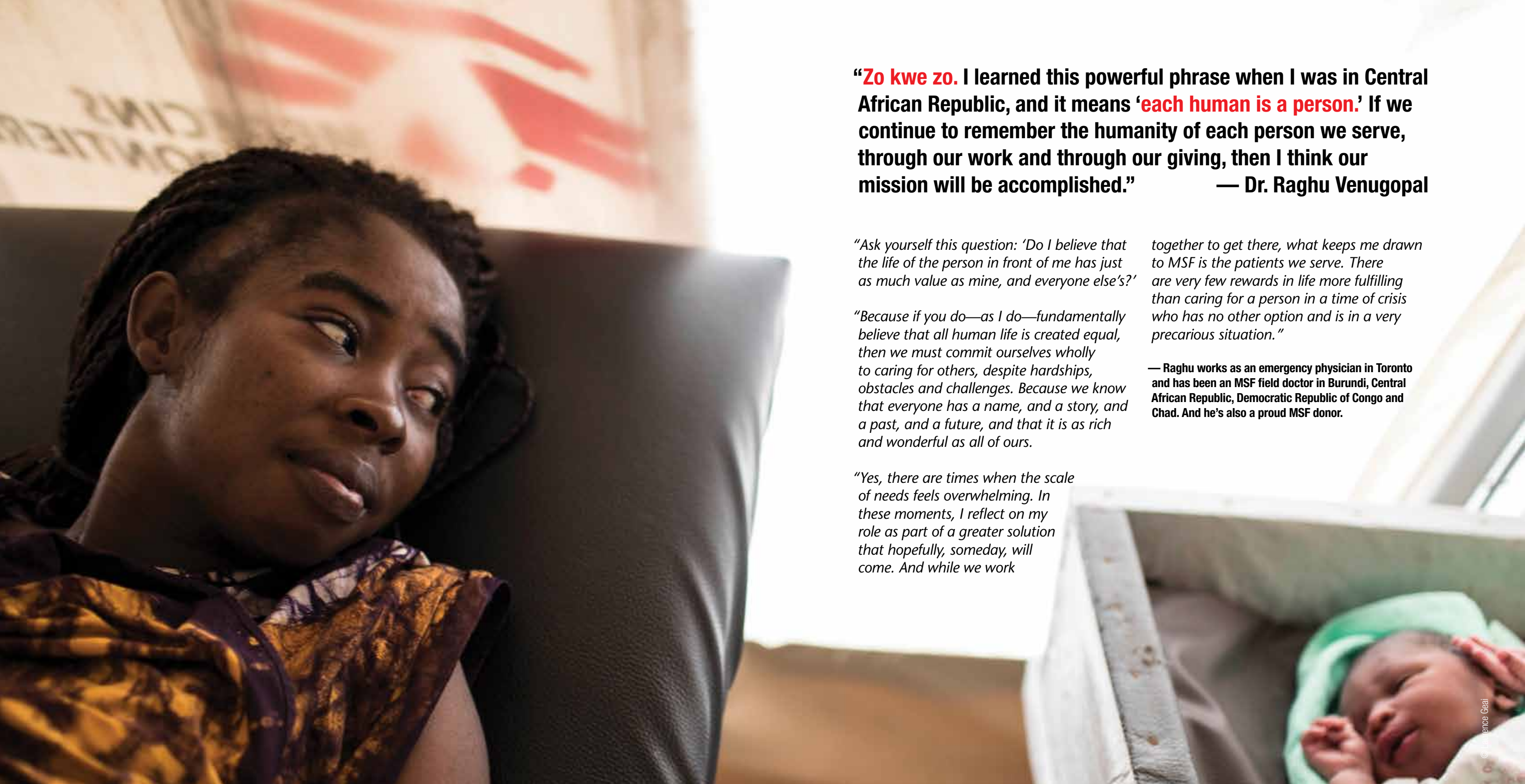
MSF starts providing antiretroviral therapy to people living with HIV/AIDS in Thailand, and the following year opens projects in Cambodia, Cameroon, Guatemala, Kenya, Malawi, and South Africa, primarily using generic antiretroviral medicines.

1999 — MSF Launches Access to Essential Medicines Campaign

With millions of people dying every year from treatable infectious diseases, MSF starts an international effort to push for increased access to medicines for the world’s poor.

2000 — Aid to Asylum Seekers In Europe

MSF expands its programs assisting asylum seekers and undocumented immigrants in Belgium, France, Italy, and Spain.



“Zo kwe zo. I learned this powerful phrase when I was in Central African Republic, and it means ‘each human is a person.’ If we continue to remember the humanity of each person we serve, through our work and through our giving, then I think our mission will be accomplished.” — Dr. Raghu Venugopal

“Ask yourself this question: ‘Do I believe that the life of the person in front of me has just as much value as mine, and everyone else’s?’

together to get there, what keeps me drawn to MSF is the patients we serve. There are very few rewards in life more fulfilling than caring for a person in a time of crisis who has no other option and is in a very precarious situation.”

“Because if you do—as I do—fundamentally believe that all human life is created equal, then we must commit ourselves wholly to caring for others, despite hardships, obstacles and challenges. Because we know that everyone has a name, and a story, and a past, and a future, and that it is as rich and wonderful as all of ours.

— Raghu works as an emergency physician in Toronto and has been an MSF field doctor in Burundi, Central African Republic, Democratic Republic of Congo and Chad. And he’s also a proud MSF donor.

“Yes, there are times when the scale of needs feels overwhelming. In these moments, I reflect on my role as part of a greater solution that hopefully, someday, will come. And while we work

2001 — Trauma Counseling in Colombia, Sierra Leone, Sri Lanka, and Beyond
MSF increasingly includes mental health activities in its emergency responses around the world.

2002 — Famine in Angola
After the UNITA rebel army collapses and a 28-year civil war ends, MSF treats thousands of malnourished children in areas previously inaccessible to humanitarian aid. MSF denounces the UN for prioritizing a political settlement for post-conflict Angola over distributing aid.

2001 — US-Led Coalition Invades Afghanistan
Following 9/11, MSF briefly evacuates many members of its international staff from Taliban-held areas, relying on Afghan staff to keep medical programs running. By November, however, international staff returns and programs continue.

2002 — Aid Workers Under Attack
MSF’s Arjan Erkel is abducted in the Russian Republic of Dagestan in the North Caucasus, the most recent victim of increasing dangers faced by aid workers in conflict zones worldwide. It will be 20 months before he is released.

2002 — Malaria Killing Millions in Africa
As malaria in several countries shows increased resistance to common antimalarials like chloroquine, MSF increases its use of artemisinin-based combination therapy and pushes for wider availability of the treatment.

2003 — Civilians Suffer in Democratic Republic of Congo (DRC)
MSF continues to operate and expand a host of medical programs designed to provide emergency medical care for people caught in a conflict that has claimed millions of lives but still remains practically invisible to the outside world.

2003 — US Invades Iraq
MSF remains in Baghdad during the initial invasion, providing support to hospitals and clinics. Later, MSF challenges the US government for co-opting some aid agencies into the war effort and for failing to provide adequate medical assistance to civilians.

2003 — Drugs for Neglected Diseases Initiative (DNDi) Created
MSF is a founding partner in a new non-profit organization dedicated to developing medicines for neglected diseases such as Chagas, kala azar, and sleeping sickness, and to challenging the existing profit-driven structure for research and development.

“I think the values he saw in MSF—compassion** and **helping others** and **doing right**, whatever the situation—those are values that are guiding me in my desire to become a doctor.”**
— Charlotte Roy, MSF donor

“For many years, my grandfather, Peter, quietly supported MSF—a charity he felt demonstrated the power of solidarity through humanitarian action in the face of extremely urgent needs around the world. He grew up in England during World War II and he experienced for himself how life could change drastically, in an instant, for those facing the devastation of conflict.”

“As his health started to decline, I visited him as often as I could, and I shared with him that I hoped to one day become a physician. Sadly, my grandfather passed away before I could tell him I’d been accepted into medical school.”

“I felt like it was an unfinished story. I so wished that he could have known, that I had his seal of approval.”

“But, in a way, I did get his seal of approval. We received a letter from MSF thanking our family for Peter’s longstanding support and for the bequest he left to MSF in his Will. Knowing he had been an MSF donor his whole life, and also given a gift in his Will, made me realize the reasons I was going into medicine were the right reasons, and that he would have been so proud of me.”



© Peter Casar

2004 — Emergency in Darfur, Sudan

MSF starts nutritional programs, water-and-sanitation programs, clinics, and vaccination campaigns in Sudan and Chad, where thousands of people have fled violence, in what is to become in 2005 and 2006 one of the largest emergency responses in MSF’s history.

2004 — MSF Leaves Iraq

With humanitarian aid workers increasingly under attack, MSF decides that the level of risk to its staff is unacceptable and makes the difficult decision to close its medical programs.

2005 — Nutritional Crisis in Niger

Drawing on derestricted funds that came in following the tsunami, MSF responds to a neglected malnutrition crisis in Niger, treating 63,000 severely malnourished children on an outpatient basis with a new therapeutic ready-to-use-food.

2006 — Surgical Care for Victims of War in Iraq

Unable to work safely in Iraq, MSF sets up a reconstructive surgical program in Amman, Jordan to treat severely war-wounded patients referred by medical colleagues in Iraq.

2006 — Sri Lanka Returns to War

As tens of thousands of people flee renewed fighting in the north of the country, MSF reopens surgical programs in north and central Sri Lanka after facing a series of setbacks from the authorities.

2004 — Five MSF Aid Workers Murdered in Afghanistan

Fasil Ahmad, Besmillah, Hélène de Bier, Pim Kwint, and Egil Tynaes are assassinated in Badghis Province. MSF leaves Afghanistan, after providing assistance for 20 years.

2004 — Tsunami Hits South Asia

MSF receives \$133 million from the public and asks people to stop making donations, having received more funding than needed for medical programs. MSF also asks donors to “derestrict” donations to be used for other emergencies; the vast majority agrees.

2005 — Devastating Earthquake Hits South Asia

MSF runs mobile clinics to reach people trapped in remote villages and sets up inflatable surgical tents to treat thousands of people injured in the massive earthquake that hit the Kashmir region of Pakistan and India.

2006 — Massive Cholera Outbreak in Angola

MSF treats 26,000 people and sends more than 400 tons of supplies to respond to a cholera outbreak that spreads from the capital to more than half the country.

During emergencies and their aftermath, **your gifts help MSF respond quickly and effectively** to immediate needs. With your help, MSF runs hospitals and clinics, performs surgeries, battles epidemics, carries out vaccination campaigns, operates feeding centres for malnourished children, treats patients living with infectious and neglected diseases, and offers psychological care.

For more than 40 years, **donors like you** have supported doctors, nurses, midwives and other field staff who provide emergency medical assistance to people in need around the world.

MSF has always shared a belief that the world needs committed people to take action in the face of armed conflicts, disease epidemics, natural disaster areas, malnutrition crises and other emergencies. Whether these people are nurses who travel from Canada, doctors from the Democratic Republic of Congo, or supporters like you who make a donation, we are all an important part of MSF and **we all passionately share the belief that every human life is worth saving.**

Each of our stories—and the way we support MSF—is unique and valued. I hope you'll reflect upon your own MSF story and how the work we do together upholds your values and beliefs, and that you'll choose to take action by supporting MSF today.



**What's your MSF story?
We would love to hear from you!
Please contact Debbie Drewett
at 416-642-3466 to start a
conversation.**

© Michael Goldfarb

2009 — Conflict in Gaza

MSF supports hospitals in Gaza following an Israeli offensive launched to counter militants firing crude rockets into Israel. After a ceasefire is announced, MSF opens a surgical hospital and also offers post-operative and psychological care.

2009 — A Difficult Year in Sudan

MSF launches emergency interventions in the south in response to escalating violence and outbreaks, while, in Darfur, the government expels two sections and four staff members are kidnapped. Some projects are therefore closed, but MSF nonetheless provides nearly 129,000 consultations.

2009 — MSF Re-Opens Programs in Afghanistan

Following a five year absence (see 2004), the organization returns to the country and begins supporting hospitals in Kabul and in Lashkargah, the capital of Helmand Province.

2010 — MSF and VII Launch "Starved For Attention"

MSF and the VII photo agency launch the "Starved For Attention" multimedia campaign on global malnutrition. The ongoing exhibition, which has already been staged in the US, Europe, and Africa, highlighted the often overlooked global scourge of malnutrition.

2010 — Earthquake in Haiti

After a massive earthquake hits Haiti, MSF launches one of its largest ever interventions, expanding its projects in the country from 3 to 26, treating more than 173,757 patients, and performing more than 11,748 surgeries in the months that follow.

2010 — Cholera Strikes Haiti

In October, after cholera hits Haiti, MSF mobilizes hundreds of staff members to respond, eventually opening more than 50 cholera treatment centers across the country, launching widespread public education campaigns, and tending to more than 100,000 patients.

2011 — Treating Victims of Mass Rape in DRC

In the first few weeks of the year, MSF responds to incidents of mass rape in the Democratic Republic of Congo, treating more than 100 women, children, and men for sexual assault after they were attacked by militias.

2011 — Earthquake and Tsunami Wrecks Havoc in Japan

Targeting their support to respond to specific needs, MSF teams help build a temporary clinic, conduct medical consultations and provide counselling.

2011 — Worsening Crisis Across South-Central Somalia

With drought exacerbating the chronic conflict, MSF manages to treat more than 95,000 people for malnutrition, vaccinate 235,000 against measles and provide close to 540,000 consultations.

Why your support is needed more than ever

conflict

- More than half the time, conflict and violence are leading reasons for our intervention.
- When healthcare facilities are destroyed, MSF teams set up clinics, nutrition programs, epidemic control, mental health services and more to help people displaced by fighting.



climate change

- Climate change is one of the greatest, if not the greatest, global health threat of the 21st century.
- Droughts, fires, floods, food security, respiratory ailments and infectious disease are linked to climate change — and are all contexts where MSF is present.



migration

- Today, there are close to 65 million people around the world who have been forcibly displaced, mostly as a result of violence.
- Whether crossing borders to seek shelter as refugees or remaining trapped in camps for the internally displaced, people fleeing war are extremely vulnerable — MSF helps them by providing medical and psychological aid.



access to essential medicine

- At least one third of the world's population has no regular access to medicines.
- MSF's Access Campaign pushes for price cuts to medicines, vaccines, and diagnostic tests by stimulating the production of more affordable generic products.



2012 — Syrian Conflict Worsens

MSF opens three field hospitals starting in June, treating more than 10,000 patients, including 900 surgeries. Teams train medical personnel and support other health facilities, since Syrian officials would not authorize MSF to work.

2013 — Super Typhoon Haiyan devastates Philippines

MSF seeks to assist the Filipinos by providing medical care and relief supplies, while also rebuilding healthcare capacity.

2014 — Ebola Virus Outbreak

The largest Ebola outbreak in history strikes West Africa. In 2014, MSF admits 7,400 people to Ebola management centres in the three main West African countries, of which 4,700 are confirmed as having Ebola.

2012 — Flooding in Pakistan

An estimated three million people are affected by flooding in Sindh Province. MSF teams offer basic healthcare to the displaced through mobile clinics, and distribute thousands of relief kits.

2013 — MSF Pulls Out of Somalia

The situation in Somalia became untenable in 2013 as the balance could no longer be found between the risks involved and MSF's ability to provide medical care to the Somali people — MSF withdraws with heavy hearts.

2015 — Earthquakes hit Nepal

Between April and July, MSF conducts over 2,500 health consultations and provides psychological support to more than 7,000 people, mostly via helicopter. Staff also treat 240 patients with emergency needs and carry out over 1,200 physiotherapy sessions.

2015 — Migrant Crisis in Europe

During 2015, at least 3,771 people die while attempting the sea crossing to Europe. MSF conducts search and rescue operations at sea and provides assistance at Europe's entry points and along the migration route.

2016 — Hurricane Matthew Strikes Haiti

MSF already has staff on the ground and mobilizes quickly, sending response teams to areas hardest hit by the storm, and delivering care to those most affected. In the two months that followed, teams treat more than 45,000 patients.

2015 — MSF Kunduz Trauma Centre Hit By US Airstrikes

MSF demands an independent inquiry into the attack by an American aircraft on its hospital in northern Afghanistan.

Your gifts in action

How your donation is used

82%

programs

15%

fundraising

3%

administration

Who donates to MSF

85%

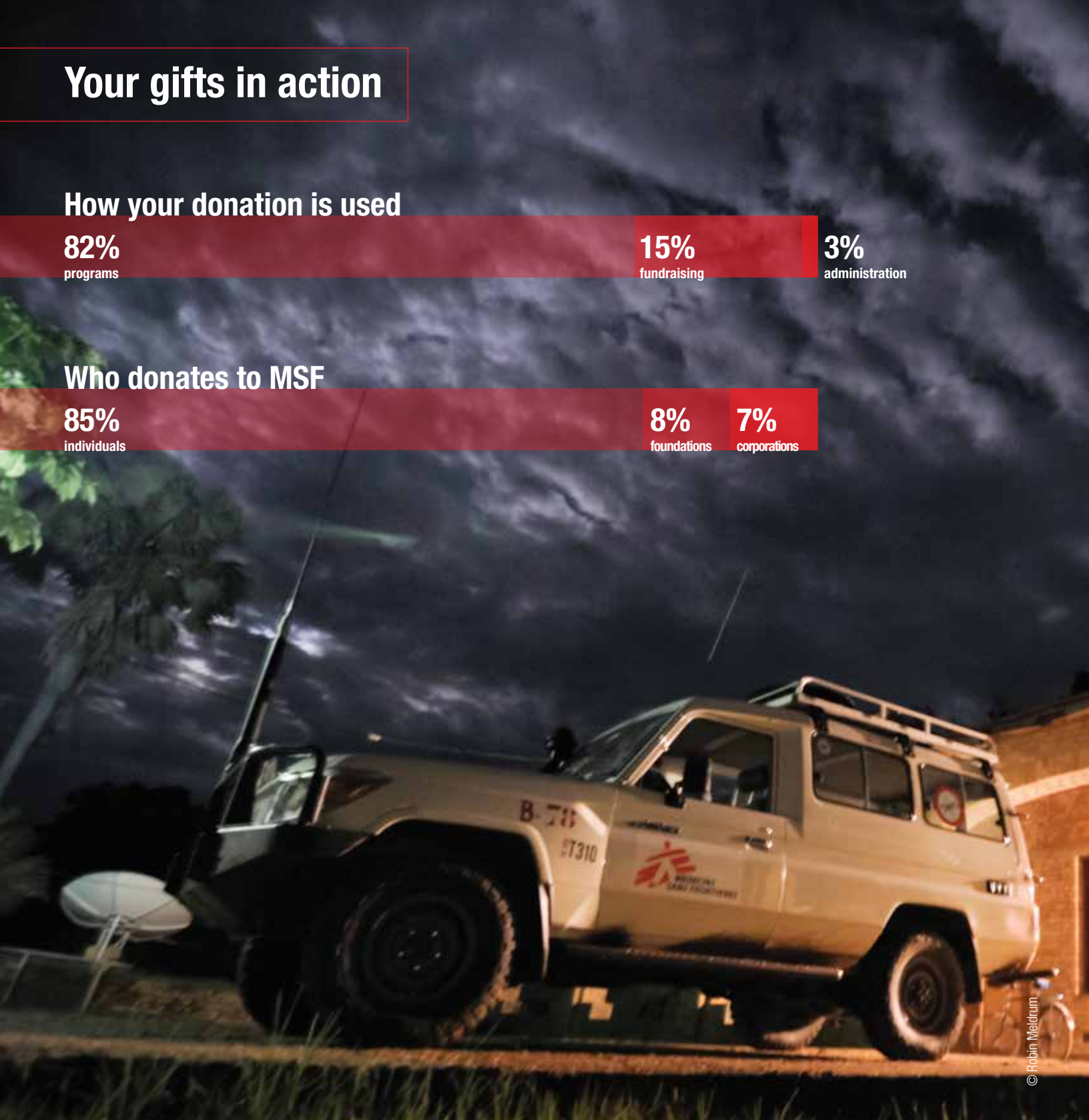
individuals

8%

foundations

7%

corporations



© Robin Meldrum

2016 — Ongoing War in Yemen

Despite the grave situation, the emergency in Yemen receives little international attention. Combined with indiscriminate attacks by all sides of the conflict on civilians and hospitals, this makes MSF's task of delivering effective emergency care exceptionally challenging.

2017 — MSF rejects Italy's Migrant Rescue Rules

MSF refuses to sign a new code of conduct drafted by Italy's Interior Ministry for non-governmental organizations rescuing migrants at sea, as Italy seeks to increase security amid the unrelenting flow of migrant arrivals.

2016 — Ongoing War in Yemen

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2017 — South Sudan Malnutrition Crisis

South Sudan is currently experiencing a large-scale malnutrition crisis, as ongoing conflict is limiting access to food, clean water, shelter, and healthcare. MSF is working to deliver essential medical care, including treating malnutrition.

Contexts in which MSF's work was directly supported by Canadian funds in 2016:

1. Afghanistan
2. Cameroon
3. Central African Republic
4. Chad
5. Colombia
6. Democratic Republic of Congo
7. Ethiopia
8. Haiti
9. Iraq
10. Jordan
11. Kenya
12. Kyrgyzstan
13. Lebanon
14. Mali
15. Mediterranean Sea rescue (Italy)
16. Myanmar
17. Niger
18. Nigeria
19. Philippines
20. Russia
21. Sierra Leone
22. South Sudan
23. Sudan
24. Swaziland
25. Syria
26. Tanzania
27. Ukraine
28. Yemen



REASONS FOR INTERVENTION

- CONFLICT & VIOLENCE (Includes caring for refugees from neighbouring conflicts)
- EPIDEMICS & DISEASE
- NATURAL DISASTER
- HEALTHCARE EXCLUSION

On any given day...

35,000

volunteers and staff work in

69

countries in

384

locations with over

8 million

patients

2016 outcomes...

9.7 million

outpatient consultations

2.5 million

cases of malaria treated

1.1 million

yellow fever vaccinations

869,000

measles vaccinations

282,300

mental health sessions

250,300

births assisted

30,600

people rescued and assisted at sea

Malnutrition accounts for nearly **half of all deaths of children** under five worldwide.*

3 million young lives are lost each year, making **malnutrition** the single greatest threat to child survival.*

* According to UNICEF

Doctors Without Borders/Médecins Sans Frontières (MSF) is an international humanitarian aid organization founded in 1971 delivering medical relief to the victims of war, disease, and natural or man-made disaster, without regard to race, religion, creed or political affiliation.

MSF's Values

- At the core of our identity is a commitment to independence, neutrality and impartiality
- MSF is designed to respond fast and we will always try to help the people in greatest need
- We raise awareness and create debate about crises through our policy of 'témoignage', or bearing witness

Please contact Debbie Drewett at 416-642-3466 to start a conversation.



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