Throughout 2016, Doctors Without Borders/Médecins Sans Frontières (MSF)’s work delivering urgently needed medical care to people made vulnerable by conflict and crisis placed our teams on the front lines of some of the world’s most challenging humanitarian emergencies. This included places like Syria, where a brutal ongoing war continued to cause widespread suffering; Yemen, where a conflict that puts civilians in the line of fire entered its second year; and Nigeria, where fighting between government forces and armed groups displaced hundreds of thousands and created a severe malnutrition crisis. These interventions took place alongside our efforts responding to lesser known but equally devastating humanitarian emergencies in the more than 60 countries where MSF operates.

The daunting scale of the global crises that required our intervention in 2016 was at times overwhelming. But, thanks to the generous and unflagging support of our donors in Canada and around the world, MSF remained true to our cause and continued to respond to these emergencies by focusing on the individuals who needed our help the most, and by seeking to deliver hope, dignity and solidarity alongside urgently needed medical care.

That is why, when we look back together at our work in 2016, we see more than just large-scale headline crises. Your support brought assistance to people fleeing the world’s worst conflict zones, but also delivered care to people suffering far from the world’s view. It allowed, for example, pregnant mothers at risk of birth complications in Haiti to access safe deliveries. It also delivered lifesaving medication to patients with tuberculosis in Kyrgyzstan, and provided comprehensive treatment to survivors of sexual violence in Colombia. All of these, along with our many other interventions, made crucial differences in the lives of vulnerable people around the world.

As an emergency medical organization, MSF must act quickly in the face of urgent health crises. When an epidemic of yellow fever threatened central Africa last summer, we joined forces with local health authorities to contain its spread, and the unprecedented mass vaccination campaign we launched prevented an international health catastrophe. Similarly, when Hurricane Matthew struck Haiti last fall, our teams already on the ground were quick to reach many of the areas hardest hit by the storm, delivering vital care to those most affected.

Preventing as well as treating Effective medical action is not only about reacting to emergencies, but also preventing them. In addition to treating patients suffering from malaria, tuberculosis, measles and other potentially fatal illnesses in nearly every country where MSF works, we also prioritized activities such as vaccination and outreach that stop people — especially children — from becoming sick in the first place.

That same imperative lies behind MSF’s advocacy work, through which we draw attention to the obstacles that cut millions of people off from the medicines they need. In 2016, pharmaceutical giants Pfizer and GSK, the world’s only producers of the pneumonia vaccine — which could prevent hundreds of thousands of children from dying every year — agreed to lower the price of this essential
drug for humanitarian emergencies. It was your tireless efforts — and those of all our supporters who signed petitions, made phone calls and refused to give up — that helped make that lifesaving decision a reality, and brought new hope to people at risk from one of the world’s deadliest diseases.

These actions — bringing critical care to people in need, and taking the steps necessary to prevent health crises in the places least equipped to manage them — form the essence not only of our international activities, but also of MSF Canada’s efforts here at home. Our teams and partners across the country are committed to putting the best that Canada has to offer in the service of MSF’s lifesaving mission — whether it’s sending Canadian professionals overseas to deliver our programs, providing the resources we need to treat our patients, or building innovative and urgently needed solutions for the global health crises we face, both in the immediate term and in the years to come.

In this report, we hope to make clear not only the critical nature of MSF’s medical humanitarian work around the world, but also the crucial role you play in making it happen. You’ll see what MSF programs were supported by Canadian funds in 2016, what challenges we faced and how Canadian MSF workers and supporters enabled us to meet them.

Thank you for your ongoing support of MSF’s medical action, and for being a part of this vital humanitarian movement. We are grateful for your continued partnership, and look forward to having you with us delivering essential care to people in need throughout 2017 and beyond.

With deepest gratitude,

Stephen Cornish, Executive director

Dr. Heather Culbert, President

Doctors Without Borders/ Médecins Sans Frontières (MSF) Canada
YOUR SUPPORT IN ACTION

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
As a member of the international MSF movement, MSF Canada is an essential part of one of the world’s largest and most effective medical humanitarian organizations, delivering emergency care to people affected by conflict and violence, epidemics and disease, healthcare exclusion and natural disasters in more than 60 different countries.

Canadian financial support made a direct impact in 27 of those countries in 2016, and also to our search-and-rescue operations on the Mediterranean Sea. Canadian field staff, meanwhile, were on the ground in nearly every context where MSF works around the world.

Your support also helped MSF Canada produce innovative healthcare solutions for use in the challenging environments in which our teams operate, and enabled us to continue advocating for our patients worldwide.

In 2016, over 166,000 private Canadian supporters — individuals, organizations, estates and community groups — donated more than $55 million to MSF’s lifesaving work. These funds, combined with contributions from the federal Canadian government to our front-line emergency response work, provided direct support to MSF’s humanitarian medical programs in 27 different countries, as well as to our international search-and-rescue response in the Mediterranean Sea.

Thanks to the generosity of people like you, MSF is able to maintain the financial and operational independence that allows us to provide urgent care where it is needed most. To read our full 2016 audited financial statements, please visit www.msf.ca.
RESPONDING TO THE NEEDS created by conflict is one of the most urgent reasons for MSF’s humanitarian medical action. People trapped in war zones can be subjected to brutal violence, physical trauma, deprivation and sexual assault, and are in desperate need of critical care.

But the effects of war go beyond the direct impact of violence. Conflict also drives people from their homes and cuts them off from essential resources. There are currently close to 65 million people around the world who have been forcibly displaced, mostly as a result of violence. Whether they cross borders to seek shelter as refugees or remain trapped in camps for the internally displaced, people fleeing war in places such as Syria, South Sudan, Nigeria and Iraq are extremely vulnerable and at risk.

Thanks to your support, in 2016 MSF was able to bring neutral, impartial and lifesaving care to people living precariously as a result of conflict, both on the front lines and along the global migration routes that many of war’s victims are forced to travel in search of safety and security.

In 15 of 28 contexts, conflict and violence were among the leading reasons for MSF’s intervention in 2016.

CHALLENGES:

Throughout 2016, the ongoing war in Yemen remained one of the world’s worst humanitarian crises. More than three million people have fled their homes, and acute malnutrition affects millions of children and young mothers. 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 structures such as hospitals, this makes MSF’s task of delivering effective emergency care exceptionally challenging.
WHEN OUTBREAKS OF DISEASE STRIKE
in low-income countries, the impact can be catastrophic. Many health systems are ill-equipped to manage acute medical crises, and this lack of capacity means affected regions are susceptible to deadly epidemics.

But thanks to your help, MSF is able to intervene in places at risk when early warning signs first become apparent. In 2016, when an epidemic of yellow fever threatened to spread through Angola and Democratic Republic of Congo to put the entire region of central Africa at risk, MSF quickly put teams on the ground and partnered with local authorities to launch an unprecedented vaccination campaign — the only means of preventing the spread of yellow fever, a deadly disease with no cure — that reached more than one million people, including close to 700,000 people in the city of Kinshasa within 11 days.

Without the rapid deployment of resources and trained personnel, preventing the spread of epidemics in places like central Africa can be close to impossible. Your continued support meant that MSF was able to act quickly, and helped prevent a large-scale health disaster.
CRITICAL ADVANCES IN MEDICINE and health technology have been able to prevent suffering and early death for many patients affected by disease and physical trauma, but for hundreds of millions of people around the world even basic lifesaving medical treatment remains out of reach, as a result of poverty, persecution or neglect.

With your help, MSF works in more than 60 countries to deliver essential medical care to the people who need it most, and to those who would otherwise be cut off from vital health services. Thanks to your ongoing support, we not only provide treatment, but we advocate on behalf of our patients in order to remove the barriers that prevent them from accessing the care they most desperately need.

In 2016, our supporters helped us achieve a breakthrough when GSK and Pfizer, the two pharmaceutical companies that produce the world’s entire supply of the pneumonia vaccine, agreed to reduce its price for use in humanitarian emergencies — a massive help in the fight against a disease responsible for one fifth of all global deaths for children under the age of five every year.

In five of 28 contexts, healthcare exclusion was among the leading reasons for MSF’s intervention in 2016.

CHALLENGES:

Tuberculosis, or TB, remains one of the world’s deadliest diseases, killing nearly two million people every year. It is curable, and MSF runs TB programs nearly everywhere we work. But treatment is intensive and expensive, and drug-resistant forms of TB require an excruciating course of pills and injections that have life-shattering side effects. Without better access to existing treatment and more effective medicines, millions will continue to suffer and die from a disease that in many wealthier countries has become increasingly rare.
WHEN A NATURAL DISASTER OCCURS, urgent and immediate action is needed in order to save lives. While such incidents represent only a small portion of MSF’s medical humanitarian activities, they are an important part of our emergency response work.

Because of the ongoing and regular support we receive from our donors, MSF is able to act quickly when unforeseen emergencies happen. We deploy rapid-response teams and assess critical needs in order to determine the medical activities required, which allows us to act effectively in the midst of crisis.

When Hurricane Matthew struck Haiti last October, MSF already had staff on the ground. We were able to mobilize quickly, sending response teams to many of the areas hardest hit by the storm, and delivering care to those most affected. In the two months that followed, our teams treated more than 45,000 patients and set up cholera treatment centres in order to prevent the spread of disease.

Without your reliable support, we would not be able to move so rapidly in times of great need. Your ongoing contributions allow us to be ready for disasters wherever and whenever they strike.
MSF CANADA IS A VITAL LINK between MSF’s work on the front lines of emergencies around the world and the network of supporters, humanitarians and medical professionals in Canada who make it possible.

Our recruitment and placement teams ensure that qualified and highly valued Canadian field workers are there to help deliver care overseas, while our tireless fundraisers connect MSF medical programs with the resources they need. MSF Canada’s humanitarian affairs specialists, meanwhile, advocate on behalf of our patients to the decision makers in this country who can help make critical differences in their abilities to access care.

MSF Canada also provides crucial added value to our international medical interventions by pursuing innovations that can address the unmet needs of our teams and patients in the field. The initiatives being developed by MSF Canada’s Program Unit, such as telemedicine and e-learning, are the result of new ways of thinking about emergency medical care, and help provide made-in-Canada solutions — by tapping into Canadian expertise, networks and know-how — to the challenges MSF’s response teams face while trying to provide urgent assistance to vulnerable people around the world.

MSF CANADA AND THE TRANSFORMATIONAL INVESTMENT CAPACITY

Last year, MSF committed to responding to the emergencies of tomorrow by launching the Transformational Investment Capacity (TIC), an initiative that invites people from across MSF to propose and implement bold ideas that can transform our abilities to deliver essential lifesaving care. The TIC will invest funds, intellectual capital and human resources in projects that will better enable us to meet our patients’ needs, and will be managed for the entire international MSF movement by a secretariat hosted by MSF Canada at our offices in Toronto.
THANKS TO YOUR SUPPORT
343 CANADIANS TRAVELLED OVERSEAS TO HELP MSF DELIVER LIFESAVING CARE IN 2016

177
The number of Canadians who provided direct care to patients as MSF medical personnel (doctors, nurses, midwives, medical specialists).

166
The number of Canadians who helped direct and manage MSF’s field operations (heads of mission, coordinators, administrators, engineers, logisticians).

For a complete list of Canadians who worked in the field with MSF in 2016, visit msf.ca/canadians-on-mission-2016.

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Peggy Chan, pictured right, is a mental health specialist from Coquitlam, BC, who helped MSF provide care to Syrian refugees arriving in Turkey.
“THERE IS NO BETTER REWARD than seeing a smile return to the face of someone whose life had lost all meaning. This is thanks to you.”

**Prosper Ndumuraro**
MSF Project Coordinator
Toronto, Ontario

“WE THANK YOU for the support that allows us to be the eyes that witness, the ears that listen, the mouths that encourage and the hands that deliver children, mend wounds and embrace those who need it most.”

**Letitia Rose**
MSF Medical Team Leader
Vancouver, British Columbia

Prosper Ndumuraro, pictured right, and Letitia Rose are two Canadian field workers who help MSF provide care for victims of sexual and gender-based violence at the Pran Menm clinic in Haiti.