



MSF HONG KONG ACTIVITY REPORT

无国界医生（香港）活动报告2018



From the President and the Executive Director

主席和总干事的话

Dear Friends,

2018 was another extremely challenging year for refugees, displaced people, those trapped in conflicts, and communities at the heart of disease outbreaks.

Médecins Sans Frontières (MSF) teams faced the complexity of responding to an Ebola outbreak in an insecure region, where more than 100 armed groups were active. The Democratic Republic of Congo (DRC) was in the midst of its second Ebola outbreak of the year, its biggest ever. MSF was part of the response, led by the Ministry of Health. Although rapid and well-resourced - with teams having access to a promising new vaccine and several new drugs with the potential to better protect and treat people - the response, and those managing it, failed to adapt to people's priorities. As a result, they failed to gain the trust of the community. This lack of trust in the health services meant people delayed or avoided seeking treatment. By the end of the year, the epidemic in North Kivu and Ituri provinces had claimed more than 360 lives and in some areas was still not under control.

Refugee crises and indifference towards migrants are not abating either.

More than 700,000 Rohingya refugees fled violence in Myanmar to find safety in Bangladesh since August 2017. They joined those who had previously fled Myanmar. Nearly one million Rohingya refugees live in camps and makeshift settlements across Bangladesh's Cox's Bazar peninsula. The denial of their legal status, coupled with unacceptable living conditions in haphazard makeshift camps, continues to trap refugees in a cycle of suffering and poor health.

The majority of the Rohingya have experienced traumatic events. Many have suffered or witnessed violence and lost close relatives and friends. Many would like to go home, but that's not possible. So, they feel hopeless. Since the very beginning of the MSF response, providing mental health services has been a priority.

Our continued presence in the Cox's Bazar peninsula is also leading to an increase in consultations for members of the local Bangladeshi community, particularly in those health facilities that are not located in the middle of the camps.

Meanwhile, across the world in 2018, countries reinforced borders in a bid to keep out migrants and refugees. Governments attempted to cover up the human cost of their harmful policies by demonising, threatening and ultimately blocking some of our efforts to provide assistance and bear witness.

We were forced to end our search and rescue operations in the Central Mediterranean in early December after increasingly obstructive actions by European governments, particularly Italy, which shut its ports to migrant rescue boats, despite an estimated 2,297 people having drowned while attempting to flee Libya during the year.

In October, the Nauruan government expelled our team with just 24 hours' notice, with no more explanation than that our services were 'no longer required'. Until then, we had been providing desperately needed mental healthcare to local people and asylum seekers held on Nauru as part of Australia's inhumane offshore detention policy.

各位朋友：

对难民、流离失所者，以及身陷冲突和疫区的社群而言，2018年又是极度艰难的一年。

无国界医生的团队在局势不稳、有超过一百个武装组织活跃的地区应对埃博拉疫情，面对的情况相当复杂。刚果民主共和国处于这年内第二次、亦是该国有史以来最庞大的埃博拉疫情。抗疫工作由当地卫生部领导，无国界医生是其中的一分子。尽管这次抗疫行动迅速且资源充足，团队掌握有望预防感染的新疫苗，以及另外几种有机会提高病人治愈率的新药，但整个行动和负责的人员都未能配合当地社群的轻重缓急，以致未能取得信任。人们对医疗服务缺乏信任，使他们延误或避免求医。截至年底，北基伍和伊图里省已有超过360人死亡，部分地区疫情仍未受控。

流徙危机和对移民难民漠不关心的态度，亦未见消减。

自2017年8月以来，超过70万名罗兴亚人为逃避在缅甸的暴力冲突，涌到孟加拉国寻求庇护。这批近期到来的罗兴亚难民跟以往逃离缅甸的人加起来，有近100万人栖身于孟加拉国科克斯巴扎尔半岛的难民营和临时居所。罗兴亚人的难民身份不获承认，加上临时营地的环境极其恶劣，使他们持续陷于痛苦和疾病的循环之中。

大多数罗兴亚人都经历过创伤，他们曾遭受暴力对待，或目睹暴力发生，还失去挚亲好友；很多人都想回家，但却无法回去，因此他们感到绝望不已。从无国界医生开始进行紧急应对行动以来，提供精神健康服务一直是我们的首要工作。

我们继续在科克斯巴扎尔半岛工作，也令当地的孟加拉裔社群前来求诊的人数增加，特别是到那些并非设在营地中央的医疗设施。

与此同时，世界各地不同国家于2018年加强控制边境，以阻止移民和难民进入。这些政府试图通过妖魔化、威胁，甚至最终阻挠我们一些援助和见证的工作，来掩盖其有害政策对人们造成的伤害。

由于欧洲各国政府的阻挠越来越多，尤其是意大利当局关闭港口，不让救助移民的搜救船靠岸，我们被迫于12月初暂时结束在地中海中部的搜救行动。据估计，这一年有2,297人在尝试逃离利比亚时溺毙。

10月，瑙鲁政府仅提前24小时通知无国界医生，表示「不再需要」我们的服务，没有解释更多，就驱逐了我们的团队。之前，我们一直为瑙鲁当地人，以及因澳洲的不人道离岸拘留政策而被关押在该岛的寻求庇护者提供亟需的精神健康服务。

The humanitarian situation in Ethiopia during 2018 was very unclear. But what we do know is ethnic violence, high insecurity, and a lack of support in their places of origin forced at least 1.4 million people to become internally displaced in multiple, simultaneous and massive displacement crises. Ethiopia is now host to the second-largest refugee population in Africa, mainly Eritreans, Somalians and South Sudanese.

In northeast Nigeria, nearly two million people have been displaced across Borno and Yobe states by the ongoing conflict. Rann town in Borno came under attack on 1 March – for the second time in just over a year – forcing us to temporarily suspend activities.

Starting in March, the Israeli army responded with brute force to the ‘March of Return’ protests in Gaza, firing on people and leaving thousands with horrific gunshot injuries, mostly to the legs. Our medical teams in Occupied Palestinian Territories, performed over 3,000 major surgeries in 2018, compared with 400 in 2017. Patients and medical staff now face the challenge of long-term rehabilitation and multiple surgical procedures, while trying to avoid the high risk of infection, in an enclave with limited resources due to the 11-year blockade.

Healthcare systems in Syria and Yemen were also severely impacted by continued conflicts. Yemen was the country where our teams treated the highest number of war-wounded in 2018, over 16,000 people.

In many of the places we work, we addressed people’s invisible wounds, running mental health services in 54 countries, including group and individual counselling sessions for refugees in Bangladesh and Nauru, as well as South Sudan, Greece, Mexico and Liberia.

MSF’s Access Campaign continues to advocate better access to key sofosbuvir-based drug combinations, used to treat hepatitis C. This enabled our teams to scale up and simplify treatment in a number of countries in 2018, including Cambodia. In November 2018, MSF’s partner organisation Drugs for Neglected Diseases initiative (DNDi) received approval for fexinidazole, a sleeping sickness drug that is safer, easier to administer and more effective. MSF projects trialled fexinidazole, which is the first new chemical entity to be developed by DNDi.

Looking back at 2018, MSF teams provided medical and humanitarian assistance to people facing extreme hardship in 74 countries. Undertaking this valuable work is not without risks. Our teams provide care under the threat of detention, abduction and attack; our thoughts remain with Romy, Richard and Philippe, our colleagues abducted in DRC in July 2013, who remain missing.

On a final note, we would like to give a huge thank you to our donors in Hong Kong and the region. The contribution of MSF Hong Kong to the movement’s lifesaving humanitarian actions is only possible thanks to your generosity and support over the past two and a half decades. Thank you very much and here’s hoping for another 25 years of support and assistance from MSF Hong Kong to the wider world.

这一年，埃塞俄比亚的人道状况极不明朗，但我们知道族群冲突、局势高度不稳定，以及原居地不给予支持，迫使至少140万人经历多重、同时发生且大规模的流徙危机，在国内颠沛流离。埃塞俄比亚现时也是非洲第二大难民接收国，难民主要是来自厄立特里亚、索马里和南苏丹。

在尼日利亚东北部的博尔诺州和约贝州，近200万人因冲突持续流离失所。3月1日，博尔诺州的莱恩镇遭受袭击，是一年内的第二次，迫使我们暂停救援行动。

自3月起，以色列军队以暴力应对在加沙的「回归大游行」示威，向群众开枪，数千人遭受可怕的枪伤，大部分人腿部中枪。我们在巴勒斯坦的医疗队于2018年内进行了3,000多宗大型手术，2017年则为400宗。加沙被封锁长达11年，资源有限，伤者和医护人员正面对长期康复和多次手术，又要竭力避免伤口出现感染，挑战重重。

叙利亚和也门的医疗系统也因持续的冲突受严重影响。2018年，也门是无国界医生的救援队治疗战争伤者人数最多的国家，有超过16,000人接受医治。

在无国界医生工作的许多地方，我们医治了人们无形的创伤。团队在54个国家提供精神健康服务，包括为身处孟加拉国、瑙鲁、南苏丹、希腊、墨西哥和利比里亚的难民提供小组和个人精神健康辅导。

无国界医生的病者有其药项目继续进行倡导，希望病人能获得以索非布韦为基础的关键药物，治疗丙型肝炎。这些倡导工作使前线团队得以于2018年扩大和简化包括柬埔寨在内许多国家的治疗方案。由无国界医生的伙伴组织「被忽视疾病药物研发倡议组织」（DNDi）研发，更安全、更易用和更有效的昏睡症药物非昔硝唑于11月获准使用。非昔硝唑是「被忽视疾病药物研发倡议组织」首个成功研发的新化学实体，无国界医生亦在前线项目进行了临床试验。

回顾2018年，无国界医生的团队在全球74个国家为陷于绝境的人士提供医疗和人道援助。这些必不可少的工作并非毫无风险，我们的团队即使面对被拘留、绑架和袭击的威胁，依然奋力提供医疗服务。我们仍牵挂于2013年7月在刚果民主共和国被绑架的罗米、瑞乍得和菲利普，他们至今下落不明。

最后，谨此向香港和亚洲区的捐助者致以最衷心的感谢。过去25年，全赖你们的慷慨捐助和真切支持，无国界医生（香港）才能为全球救死扶伤的人道行动作出贡献。未来的25年，我们希望能向世界各地更多有需要的人提供援助。请您继续支持无国界医生，谢谢！



Dr Chen-Kun Liu
President, MSF Hong Kong
刘镇鲲医生
无国界医生（香港）主席



Mr Sam Taylor
Executive Director, MSF Hong Kong
戴义礼
无国界医生（香港）总干事

Projects by Country

各地项目

Asia - Pacific 亚洲及太平洋

Bangladesh 孟加拉国

MSF remains one of the main providers of medical and humanitarian assistance to stateless Rohingya, approximately one million of whom have sought refuge in Bangladesh.

In Cox's Bazar, MSF worked in four hospitals, five primary health centres, five health posts and one outbreak response centre, which provided a range of inpatient and outpatient care including mental health and psychiatric services. By December 2018, teams conducted nearly one million consultations for medical conditions that were directly related to the lack of healthcare available to the Rohingya in Myanmar or their abysmal living conditions in Bangladesh.

In addition, two water distribution systems were set up supplying 360 million litres of water and benefiting hundreds of thousands of people. Gaps in secondary healthcare were addressed through boosting the capacity of local hospitals.

目前约有一百万名无国籍的罗兴亚人在孟加拉国避难，而无国界医生在当地仍是医疗和人道援助的主要提供者之一。

在科克斯巴扎尔，无国界医生在四间医院、五间医疗中心、五个医疗站和一间疫情应对中心，提供多种住院和门诊服务，包括心理健康支持和精神科治疗。直至2018年12月，救援队进行了近一百万次诊症，所治疗的医疗状况，与罗兴亚人在缅甸无法得到医疗服务，或他们在孟加拉国栖身的恶劣环境直接相关。

此外，无国界医生设了两个供水系统，供应了3.6亿公升的水，惠及数十万人。救援队亦致力提升当地医院的服务能力，以解决当地二级医疗护理的不足。



A young Rohingya mother is looking after her premature babies.
一名年轻罗兴亚妇女正在照顾早产的婴儿。



MSF set up two water distribution systems in Kutupalong and Balukhali areas for refugees living there.
无国界医生在库图巴朗和巴鲁卡里地区设立两个供水系统让住在当地的难民使用。

Myanmar 缅甸

In 2018, the Myanmar government continued to refuse independent humanitarian access to northern Rakhine. MSF team in Maungdaw was not allowed to resume most of its medical activities. In central Rakhine, MSF established a new mental health programme, providing services in camps in Pauktaw township, a closed Muslim ghetto in Sittwe town, and ethnic Rakhine villages in Sittwe and Ponnagyun townships.

Once the largest provider of HIV treatment in Myanmar, MSF has been working towards transferring patients from the projects in Yangon, Shan, Kachin and Tanintharyi region to the decentralised National AIDS Programme. In Yangon alone, a total of 6,000 patients were transferred this year, meaning that they can receive care closer to home.

2018年，缅甸政府仍然拒绝独立的人道组织进入若开邦北部提供援助，无国界医生驻孟都镇的救援队未获准恢复大部分的医疗服务。在若开邦中部，无国界医生新设了精神健康项目，在包多镇的流徙者营地、实兑镇封闭的穆斯林贫民窟，以及实兑镇和邦那均镇的若开族村庄提供服务。

无国界医生曾是缅甸最大的艾滋病治疗提供者，近年一直致力将其仰光、掸邦、克钦邦和德林达依地区项目的病人，转介至采用社区护理模式的国家艾滋病项目。仅在仰光，这一年共转介6,000名病人，使他们能在离家较近的地点跟进疗程。



MSF staff conduct a medical consultation with MDR-TB patients at MSF's Insein clinic, Yangon, Myanmar.
无国界医生的医护人员在缅甸仰光的永盛诊所为耐药肺结核病人诊症。

Malaysia 马来西亚

MSF continues to provide healthcare to stateless Rohingya and other refugee communities in the state of Penang. This year, the teams ran 45 mobile clinics, and conducted health education sessions for refugee children. In October, MSF inaugurated a fixed clinic offering primary healthcare and mental health services in a neighbourhood where many undocumented migrants and refugees reside.

As for survivors of human trafficking, MSF runs mobile clinics and patient referrals in five government protection shelters in Kuala Lumpur, Negeri Sembilan and Johor Bahru. Our teams also started providing psychosocial and counselling services in survivors' native languages.

In December, MSF and MERCY Malaysia jointly organised a symposium on improving access to healthcare for refugees and asylum seekers in Malaysia.

无国界医生继续在槟城州为无国籍的罗兴亚人和其他难民社群提供医疗服务。这一年，救援队开展了45次流动诊所，并为难民儿童举办了健康教育讲座。10月，无国界医生在许多无证移民和难民栖身的社区开设了一间固定诊所，提供基本医疗和精神健康服务。

针对人口贩卖幸存者，无国界医生在吉隆坡、森美兰州和柔佛州新山市五个政府辖下的庇护中心，开设流动诊所和转介病人，救援队亦开始以幸存者的母语提供心理社会支持和辅导服务。

12月，无国界医生和马来西亚医疗援助协会（MERCY）联合举办了研讨会，探讨如何增加在马来西亚的难民和寻求庇护者获得医疗服务的机会。



A Rohingya man is being seen by the nurse before consultation with the doctor at the MSF clinic in Penang.
一名罗兴亚男子在无国界医生位于槟城的诊所内接受护士初步检查。

Afghanistan 阿富汗

As the conflict in Afghanistan intensified in 2018, MSF reinforced activities in several programmes across the country, in particular emergency, paediatric and maternal healthcare. Number of people seeking medical assistance in our facilities steadily increased, as the population contended with insecurity, a dysfunctional healthcare system, and internal displacement resulting from violence or natural disasters such as drought.

Besides, we started the construction of a new MSF trauma facility in Kunduz. After the US airstrike that destroyed the trauma centre in 2015, killing 24 patients, 14 staff and four patient caretakers, we engaged in discussions with all parties to the conflict to formalise commitments that MSF's staff, patients and hospitals will not be attacked. We have explicit commitments that MSF can treat every person who needs medical care, no matter their ethnicity, political affiliations or which side of the conflict they are on.

在阿富汗，2018年的战斗加剧，无国界医生加强多项救援工作，特别是急诊、儿科和妇产科护理。鉴于安全形势不稳、医疗护理系统失效、加上因暴力事件或干旱等天灾导致民众流离失所，向无国界医生寻求援助的人不断增多。

另外，我们开始在昆都士兴建新的无国界医生创伤治疗中心。原有的创伤治疗中心于2015年遭美国空袭摧毁，导致24名病人、14名职员和4名病人看护人死亡，之后我们与涉及冲突各方讨论，达成正式承诺，无国界医生职员、病人和医院不会受袭击。无国界医生表明会照顾任何需要医疗护理的人，不论他们的种族、政治联系或属于冲突的任何一方。



MSF opened a winter clinic in northwestern Afghanistan to provide vulnerable population fled from conflict and drought with much-needed medical assistance.
无国界医生在阿富汗东北部开设冬季诊所，向因为逃避冲突和旱灾而流离失所的居民提供所需的医疗援助。

India 印度

MSF has been treating drug-resistant tuberculosis (DR-TB) and HIV in Mumbai, India. In 2018, an initiative was launched to ensure systematic clinical and psychosocial follow-up of DR-TB patients, aiming to demonstrate a replicable model of community-based care. Specialised care for TB, HIV and hepatitis C have been made available through three clinics in Manipur.

This year, MSF improved treatment capacity of a district hospital, and started using bedaquiline to treat patients with extensively DR-TB.

在印度孟买，无国界医生一直提供耐药结核病和艾滋病治疗。2018年，救援队展开一项新工作，确保有系统地跟进耐药结核病患者的临床状况和提供心理社交支持，旨在为可供复制推广的社区护理模式作示范。无国界医生亦在曼尼普尔邦的三间诊所提供结核病、艾滋病和丙型肝炎的专门治疗。

这一年，无国界医生提升了当地地区医院提供治疗的能力，并开始使用贝达喹啉医治广泛耐药结核病患者。



A female patient who has been treated for kala azar-HIV co-infection and tuberculosis at MSF's ward in Patna, Bihar talks to Health Promoter at MSF.
在印度比哈尔巴特那，一名同时感染黑热病、艾滋病和结核病的女病人，向无国界医生的健康促进员倾诉。

Pakistan 巴基斯坦

MSF has been providing a range of services in Balochistan and Khyber Pakhtunkhwa to improve access to mother and child healthcare. Nearly 30,000 births were assisted and almost 11,000 children were treated in outpatient feeding programmes across the country.

Cutaneous leishmaniasis is a neglected tropical disease that is endemic in Pakistan. MSF continued to provide specialised treatment through three locations in Balochistan, and opened a fourth treatment centre in Peshawar this year. Over 5,000 patients were treated for the disease.

Pakistan has the second-highest prevalence of hepatitis C in the world. In a clinic located in a densely populated slum in Karachi, MSF turned to diagnosing and treating hepatitis C.

为改善巴基斯坦的母婴健康服务，无国界医生一直在俾路支省和开伯尔巴图克瓦省提供多种医疗服务。这一年，救援队在该国协助了近三万名婴儿出生，并为一万一千名儿童提供门诊营养治疗。

皮肤利什曼病是被忽视的热带病，在巴基斯坦属风土病。无国界医生继续在俾路支省三个地点提供专门治疗，年内在白沙瓦开设了第四间治疗中心，治疗超过5,000人。

巴基斯坦是全球丙型肝炎患病率第二高的国家。无国界医生在卡拉奇人口稠密的贫民窟内的一间诊所，开始诊断和治疗丙型肝炎。



A nurse at the ambulatory therapeutic feeding centre set up by MSF at district Jaffarabad, Pakistan checks the height of a baby.
在巴基斯坦加法拉巴德地区的门诊治疗性喂食中心里，护士为婴儿量度身长。

Indonesia 印度尼西亚

To improve access to healthcare for adolescents, MSF launched a new programme in Pandeglang, Banten province, working with community health practitioners, training health centre staff, providing specialised maternity services and disseminating information on adolescent health services. In Jakarta, MSF supported the government's health screening programme and the development of adolescent reproductive health guidelines for the Thousand Islands archipelago.

Multiple earthquakes and tsunamis hit Indonesia in 2018, MSF sent emergency teams comprising medical, mental health and water and sanitation experts to Lombok and Palu to support the national response. Pandeglang was most affected by Sunda Strait tsunami in December. The team based in Pandeglang provided immediate and sustained assistance to the local response for displaced people.

Concerning the nationwide issue of methanol poisoning, MSF ran training sessions, workshops and hospital visits, and supported local doctors with specific guidelines on managing treatment.

为增加青少年获得医疗护理的机会，无国界医生在万丹省潘德格朗设新项目，与社区卫生人员合作，培训医疗中心员工，提供专门的妇产科服务以及分发青少年医疗服务的信息。在雅加达，无国界医生支持政府的健康筛查计划，并协助制订千岛群岛的青少年生殖健康指引。

2018年，印度尼西亚发生多次地震和海啸，无国界医生派出由医疗、精神健康和水利卫生专家组成的紧急救援队，前往龙目岛和珀鲁支持政府的救灾行动。12月发生巽他海峡海啸，潘德格朗受灾最严重，驻当地项目的团队参与救灾，为流离失所者提供实时和持续的援助。

至于影响全国的甲醇中毒问题，无国界医生举办了培训班和研讨会，并探访医院，同时向当地医生提供具体的治疗指引。



As the community health clinic was damaged after Sulawesi earthquake, MSF colleagues worked together with the local health office to carry out care services at one IDPs camp.
印尼苏拉威西岛发生地震之后，当地诊所损毁，无国界医生团队与当地卫生部门在流徙者营地治疗伤者。

Philippines 菲律宾

MSF has been working with Likhaan, a local organisation, to provide comprehensive sexual and reproductive healthcare aimed at young women in particular in the densely populated slums of Manila. The teams conducted 12,400 family planning sessions and screened 3,630 women for cervical cancer in 2018. Although victims of sexual violence are stigmatised in the Philippines, the number of people presenting at the MSF clinic for treatment has increased steadily.

In the city of Marawi, Mindanao region where the 2017 conflict destroyed over 70% of health facilities and left 200,000 internally displaced people and returnees without access to basic healthcare. MSF started supporting the outpatient department and emergency room of one of the few remaining health centres in October 2018. The teams also ran a measles vaccination campaign, and improved water and sanitation by building latrines and water points.

无国界医生一直与当地组织“Likhaan”合作，在马尼拉人口稠密的贫民窟提供全面的性与生殖健康服务，特别针对年轻女性。2018年，救援队进行了12,400次家庭生育计划辅导，并为3,630名女性进行宫颈癌筛查。尽管性暴力受害者在菲律宾受到歧视，到无国界医生诊所求医的人数稳步增加。

2017年在棉兰老岛马拉维爆发的冲突，摧毁了市内七成以上的医疗设施，20万仍在流徙和已重返家园的人因无法获得基本医疗服务。无国界医生于2018年10月开始在一间少数仍然运作的医疗中心，支援其门诊部和急诊室。同时，救援队推行了麻疹疫苗接种活动，并修建厕所和供水点以改善水利卫生。



Working with the Marawi City Health Office in the Philippines, MSF helped vaccinate over 5,600 children during Mindanao's measles outbreak.
菲律宾棉兰老岛爆发麻疹期间，无国界医生与马拉维市卫生办公室合作，为5,600多名儿童注射预防疫苗。

Nauru 瑙鲁

From November 2017, MSF provided free psychological and psychiatric care to Nauruans, as well as asylum seekers and refugees sent to the island, many of whom had been held for more than five years under the Australian policy of 'offshore processing'.

Without warning, the Nauruan government informed MSF in October 2018 that its services were "no longer required" and must cease within 24 hours. MSF was forced to abruptly abandon hundreds of vulnerable patients.

In December, MSF published the first independent report demonstrating the scale of the mental health emergency. Of the asylum seekers and refugees teams treated, 30% had attempted suicide and 60% had considered it. MSF called for an end to Australia's policy and for the immediate evacuation of all asylum seekers and refugees to a place of safety.

自2017年11月起，无国界医生为瑙鲁人以及被送往该岛国的寻求庇护者和难民，提供免费的心理和精神科治疗。由于澳洲的「离岸处理」政策，很多寻求庇护者和难民被关押在当地超过五年。

在毫无预警的情况下，瑙鲁政府于2018年10月通知无国界医生「不再需要」其服务，并须于24小时内结束项目，无国界医生被迫突然放弃数百名脆弱无助的病人。

12月，无国界医生发表首份独立报告，揭示在瑙鲁精神健康危机的规模。无国界医生治疗的寻求庇护者和难民中，三成人曾企图自杀，六成人有自杀念头。无国界医生促请澳洲终止其政策，并立即将所有寻求庇护者和难民撤离到安全的地方。



A patient is attended by MSF's mental health team in Nauru.
无国界医生的精神健康护理团队在瑙鲁治疗病人。



MSF had been providing mental health care for asylum seekers in Nauru. In October 2018, government of Nauru requested MSF to cease its service in 24 hours.
无国界医生团队在瑙鲁的寻求庇护者营地提供精神健康护理；可是在2018年10月，瑙鲁政府要求无国界医生于24小时内结束项目。

Americas 美洲

Venezuela 委内瑞拉

Venezuela's deteriorating political and economic crisis caused a steep decline in living standards and prompted hundreds of thousands to leave to other South American countries.

MSF expanded its activities in the capital, Caracas, providing medical and mental healthcare to victims of urban and sexual violence, making referrals for further treatment, legal assistance and social support as necessary. Besides, teams trained healthcare workers on how to receive and attend to the victims, and conducted awareness-raising campaigns.

The medical and psychological care project for young people in Maracaibo ended in March, yet the support to the national malaria programme in the gold-mining area of Sifontes continued. Medical and psychological care were offered to people affected by floods in Caicara del Orinoco and Churuguara.

委内瑞拉的政治和经济危机日益恶化，导致人民生活水平急剧下降，并触发数十万人离开前往其他南美国家。

无国界医生扩大在首都加拉加斯的项目，为城市暴力和性暴力的受害者提供医疗和精神健康服务，并转介有需要人士接受进一步治疗，获得法律援助和社会支持。同时，救援队培训当地医护人员如何接收和照顾这些受害者，并展开提高公众关注的活动。

无国界医生设于马拉开波、针对年轻人的医疗和心理健康项目于3月结束，在西丰特斯金矿区支持国家疟疾项目的工作则仍然继续；救援队还向凯卡拉德尔奥里诺科和丘鲁瓜拉的洪水灾民提供医疗服务和心理支持。

Democratic Republic of Congo 刚果民主共和国

The Democratic Republic of Congo (DRC) has endured decades of multiple overlapping crises and severe limitations in medical capacity. 2018 was marked by further upsurges of extreme violence and frequent, far-reaching disease outbreaks.

Responding to epidemics is a core activity for MSF in DRC. We responded to nine measles outbreaks and two successive outbreaks of Ebola in 2018, including the country's largest ever, which was still ongoing at the end of the year.

MSF ran 54 medical projects in 17 of the country's 26 provinces in 2018. With services ranging from basic healthcare to nutrition, paediatrics, treatment for victims of sexual violence and care for people living with HIV/AIDS. We also launched emergency responses to violence-related trauma and displacement.

刚果民主共和国数十年来不断受多重危机困扰，医疗能力却相当有限。2018年，该国的极端暴力事件持续升级，也面对着频繁且范围广泛的疫症爆发。

应对流行病是无国界医生在刚果民主共和国的重点工作。2018年，我们在当地应对了九次麻疹爆发，以及接连两次埃博拉疫情，其中一次为该国历来最大规模疫情、持续至年底仍未结束。

2018年，无国界医生在当地其中17个省进行54个医疗项目，包括基本护理、营养治疗、儿科、治疗性暴力受害者和艾滋病患者，同时还因应暴力引发的创伤与民众流离失所，展开紧急救援。



© John Wessels

A health worker waiting to receive a new unconfirmed Ebola patient, at a newly-built MSF-supported Ebola Treatment Centre in Bunia, DRC. 在刚果民主共和国的布尼亚，医护人员在无国界医生支持的埃博拉治疗中心等候接收疑似感染埃博拉的病人。

Central African Republic 中非共和国

Renewed, full-blown conflict across Central African Republic produced scenes of extreme violence, particularly in the capital Bangui, Bambari and Batangafo. By the end of 2018, 650,000 people were internally displaced, while civilians continued to flee into neighbouring countries. MSF assisted local and displaced communities in eight provinces and Bangui.

MSF's ability to respond was repeatedly hampered by insecurity and attacks on its facilities. In Bambari, the operations were temporarily scaled down in April after the hospital was violently looted. The MSF-supported Batangafo hospital where 10,000 people sought refuge in November was threatened and accused of sheltering "enemies".

中非共和国再度爆发全面冲突，特别是在首都班吉、班巴里和巴坦加福出现了极端暴力事件。直至2018年年底，65万人在该国流离失所，平民持续逃往邻国。无国界医生在八个省和班吉援助当地社群和流离失所者。

局势不稳，加上医疗设施遇袭，无国界医生的救援行动一再受阻。在班巴里，无国界医生的医院于4月遭抢掠后，项目工作被迫暂时缩减；而位于巴坦加福、由无国界医生支持的医院，11月有一万人涌入避难，其后医院收到恐吓，被指控匿藏「敌人」。



© MSF / Helena Cardellach

Ten thousand people sought shelter in an MSF-supported hospital after violent clashes in Batangafo in northern Central African Republic.

中非共和国北部的巴坦加福发生暴力冲突后，一万人逃到无国界医生支持的医院寻求保护。

South Sudan 南苏丹

Civilians in South Sudan have borne the brunt of over five years of conflict. Healthcare is scarce or non-existent in many parts of the country, with less than half the population estimated to have access to adequate medical services. Around 80 per cent of services are delivered by NGOs such as MSF.

In 2018, we responded to the urgent medical needs of people affected by violence while maintaining essential healthcare services through 16 projects across the country. We responded to disease outbreaks, provided quality primary and secondary healthcare to displaced and remote communities, mental health care for former child soldiers to better integrate them into communities, continue to assist Sudanese refugees, and responded to other emergencies. But as in previous years, direct attacks against healthcare staff and facilities repeatedly hampered activities in 2018.

受内战困扰逾五年的南苏丹，不少地方缺乏甚至没有医疗护理，估计少于一半人口获得适当的医疗服务，当中约八成服务由无国界医生等非政府组织提供。

2018年，我们在该国展开16个项目，应对暴力事件引发的紧急医疗需要，以及维持必需的护理。工作包括应对疾病爆发；为流离失所和偏远社区提供有质量的基本和二级健康护理；为曾经当童兵的人提供精神健康护理，以协助他们回归社区；继续协助苏丹难民；应对其他紧急情况。一如往年，医疗人员和设施多次因受到攻击而活动受阻。



© Sarah Murphy / MSF
An MSF doctor treats a young patient in Pibor outpatient clinic in South Sudan who has suffered a horrific crocodile attack.

无国界医生的医生在南苏丹皮博尔州的门诊诊所治疗遭鳄鱼严重咬伤的年轻人。

Ethiopia 埃塞俄比亚

This year, ethnic violence broke out in several parts of Ethiopia simultaneously, displacing at least 1.4 million people.

In July, we launched one of our biggest emergency interventions of 2018 in the regions of SNNP and Oromia. The teams conducted 91,000 outpatient consultations, treated 3,000 children for severe acute malnutrition, and vaccinated nearly 104,000 under-15-year-old against measles. They also provided mental health support, treated victims of sexual violence, distributed relief items and trucked in 69 million litres of clean water.

Besides, MSF teams supported Ethiopian migrants being forcibly expelled by Saudi Arabia in the capital Addis Ababa.

这一年，埃塞俄比亚多个地区同时爆发种族暴力冲突，至少140万人流离失所。

7月，我们在南方民族州和奥罗米亚州展开2018年无国界医生其中一个最大规模的紧急救援行动。救援队进行了9.1万次门诊症，治疗了3,000名严重急性营养不良的儿童，并为接近10.4万名15岁以下儿童注射麻疹疫苗。同时，无国界医生提供精神健康支持、医治性暴力受害者、分发救援物资，并用卡车运入6,900万公升的干净用水。

此外，无国界医生在首都亚的斯亚贝巴，支援被沙特阿拉伯强行驱逐的埃塞俄比亚籍移民。



© Nicolas Guiral / MSF
Dr Joanne Liu, MSF International President visited Ethiopia in March 2018 and met patients in Gambella General Hospital supported by MSF.

2018年3月，无国界医生时任国际主席廖满嫦去到无国界医生在埃塞俄比亚支援的甘贝拉总医院探望病人。

Nigeria 尼日利亚

The conflict in northeast Nigeria showed no signs of abating in 2018, while insecurity and violence escalated across the middle of the country and in the northwest, too. By the end of the year, 1.9 million people were internally displaced and 7.7 million in need of humanitarian assistance in northeast Nigeria.

MSF continued to assist people affected by the violence in Borno and Yobe states throughout 2018, while maintaining a range of basic and specialist healthcare programmes and responding to other emergencies across the country like the large Lassa fever outbreaks in March.

In June, we launched an emergency intervention in Cross River state to provide medical care and clean water to refugees and host communities.

尼日利亚东北部的冲突没有平息迹象，而中部和西北部的暴力事件也升温。至2018年底，190万人在国内流离失所，东北部770万人急需人道援助。

2018年，无国界医生继续于博尔诺和约贝州协助受暴力冲突影响的人，同时维持多项基本和专科护理项目，及应对其他紧急医疗状况，例如3月的拉萨热大爆发。

在6月，我们在克里斯河州展开紧急救援，向难民和当地社区提供医疗护理和干净用水。



© Albert Masias
Installing hand-operated pumps and latrines were important for local communities in Nigeria because of the increasing number of refugees living in the area.

尼日利亚难民人数日增，在他们聚居的社区安装手动水泵和厕所相当重要。

The Migration Crisis 流徙危机

As people were drowning in the Mediterranean Sea or being forcibly returned to Libya, MSF was forced to terminate rescue operations this year, because of increasingly hostile manoeuvres by European governments particularly Italy.

The search and rescue vessel Aquarius, operated by MSF and SOS MEDITERRANEE, assisted 3,184 people in 2018. However, the Italian authorities closed its ports to migrant rescue ships in June, leaving the Aquarius and 630 vulnerable people on board stranded at sea. The Aquarius came under further political pressure with its registration being revoked, followed by dubious allegations of illicit waste trafficking. MSF and its partner were left with no choice but to end rescue operations in December.

Despite this, MSF continued to assist migrants and refugees arriving on its shores, transiting through or living in Europe. Medical and mental health services, as well as specialised care for victims of torture were provided in Greece, Italy, Bosnia-Herzegovina, Serbia, Belgium and France.

这一年，人们继续在地中海溺毙或被强行遣送回利比亚，然而因欧洲各国政府，特别是意大利越趋激烈的敌对行径，无国界医生被迫终止海上搜救行动。

由无国界医生和SOS MEDITERRANEE共同运作的搜救船「Aquarius」，于2018年共协助了3,184人。可是，意大利当局于6月关闭港口，拒绝让协助移民的搜救船靠岸，令「Aquarius」和船上630名获救人士滞留海上。其后「Aquarius」受到更多政治压力，遭撤销注册，更被指不当运送废料。无国界医生及其合作伙伴最终别无选择，于12月结束搜救行动。

尽管如此，无国界医生继续援助那些抵达欧洲海岸、过境或定居的移民和难民。救援队在希腊、意大利、波斯尼亚和黑塞哥维那、塞尔维亚、比利时和法国，提供医疗和精神健康服务，以及酷刑受害者的专门护理。



© Guglielmo Mangiapane / SOS MEDITERRANEE

Twenty five people were rescued in Central Mediterranean near the Libyan coast in August 2018. They were found adrift on a small wooden boat with no engine on board and were believed to have been at sea for nearly 35 hours.

2018年8月，25人在地中海中部近利比亚岸边获救。他们当时挤在一艘失去动力的小木船上，相信已在海上漂流了近35小时。



© Guglielmo Mangiapane / SOS MEDITERRANEE

The sustained campaign, spearheaded by the Italian government and backed by other European states, delegitimised and obstructed aid organisations providing assistance to vulnerable people.

由意大利政府带头、获其他欧洲国家声援的持续性行动，把救援机构「非法化」，阻挠它们援助脆弱人群。



© Robin Hammond / Witness Change

Thousands of life jackets left behind by arriving migrants are gathered at a dump on Lesbos Island, Greece. Migrants fled from countries such as Syria, Afghanistan, Iraq for safety and continued to risk their lives to reach Europe.

希腊的莱斯沃斯岛堆积了数千件难民登岸后丢弃的救生衣。难民为寻求安全，逃离叙利亚、阿富汗、伊拉克等国，再冒生命危险前往欧洲。

Middle East 中东

Iraq 伊拉克

With almost two million people still displaced and many health facilities damaged or destroyed, medical needs remain extremely high in Iraq. Many displaced families lack the necessary documentation, properties and livelihoods have been damaged if not destroyed, and security concerns persist in some areas. The context remains complex and unpredictable, due to ongoing political disputes, tribal conflicts and attacks by armed groups.

In 2018, MSF continued to offer services ranging from basic healthcare and treatment for non-communicable diseases, to maternity, paediatric and emergency care, surgery and mental health support for displaced people, returnees and communities most affected by violence. We also rehabilitated and equipped hospitals and clinics in some of the most war-affected regions such as Baghdad governorate to help get the Iraqi health system back on its feet. We also scaled up our medical activities in both east and west Mosul in response.

在伊拉克，约二百万人还在受流离失所之苦，很多医疗设施遭破坏，医疗需求依然非常巨大。不少流徙家庭失去必需的文件和财物，生计遭到破坏或摧毁，部分地区继续面对安全问题。因为政治纷争、部族冲突和武装袭击持续，当地的局势依然复杂难测。

在2018年，无国界医生提供基本医疗护理，治疗非传染病、妇产与儿科病人案和急症，进行外科手术，以及为流离失所者、其后重返家园的居民，还有最受暴力冲突影响的社区提供精神健康支持。我们也在巴格达省等最受战乱影响的地区修复医院和诊所，并添置设备，协助恢复伊拉克的医疗系统。另外，我们在东摩苏尔和西摩苏尔加强医疗应对。

Syria 叙利亚

Civilians, civilian infrastructure and areas, including medical facilities, came under direct fire again in 2018. MSF continued to operate in Syria but our activities were severely limited by insecurity and access constraints. Our teams conduct independent evaluations to determine medical needs and what assistance we provide. In areas where access could be negotiated, we ran or supported hospitals and health centres and provided healthcare in displacement camps. In areas where no direct presence was possible, we maintained our distance support, consisting of donations of medicines, medical equipment and relief items and remote training of medical staff.

In 2018, MSF was one of the only organisations providing medical assistance inside the city of Raqqa, where we ran a primary healthcare unit and a stabilisation point.

平民区和医疗设施等民用基建在2018年再次受炮火攻击。无国界医生继续在叙利亚救援，但因为局势不稳和通行限制，工作举步维艰。我们的团队展开独立的医疗需求和援助评估，在能够通行的地区运作或支持医院和卫生中心，并在流徙者营地里提供护理。在无法抵达的地区，我们则维持远程支持，例如捐赠药物、医疗器材和救援物资和远程训练医疗人员等。

2018年，无国界医生是少数在拉卡市内提供医疗援助的组织。我们在那里有一所基本护理设施和稳定治疗点。

Lebanon 黎巴嫩

More than a million people have fled into Lebanon since the conflict in neighbouring Syria began in 2011, making it the country with the largest number of refugees per capita in the world.

MSF continues to work across Lebanon to provide these communities with free, quality medical assistance such as treatment for non-communicable diseases, sexual reproductive healthcare, mental healthcare and maternity services. In 2018, we expanded our projects to offer specialist services, such as paediatric intensive care, treatment for thalassemia and general elective surgery.

自2011年，过百万人从叙利亚涌到黎巴嫩逃避战乱，令黎巴嫩成为人均难民人数最多的国家。

无国界医生在黎巴嫩提供免费、优质的医疗援助，例如治疗非传染病、性和生殖健康护理、精神健康护理和妇产科服务。2018年，我们开始提供儿科重症监护、地中海贫血治疗和一般非紧急手术。

Yemen 也门

As the conflict escalated throughout 2018, the Emirati- and Saudi-led coalition continued to target civilian areas with airstrikes and bombings, including the MSF new cholera treatment centre in Abs. MSF was forced to close its projects in Ad Dhale after its staff house was targeted with explosives in November.

Insecurity also prevented aid organisations from collecting reliable data. MSF teams treated 5,700 malnourished children in five governorates, but saw no signs of impending famine.

In Hodeidah, following major offensives began in June, MSF opened a surgical hospital in Mocha. Teams in Mocha treated 150 people, of whom one third were children, wounded by mines planted by Houthi troops.

也门的冲突在2018年愈趋激烈，以阿联酋和沙地阿拉伯为首的联军继续以平民区作为空袭和轰炸的目标，包括无国界医生新设在阿布斯的霍乱治疗中心。11月，无国界医生在达利省的员工宿舍遭炸弹袭击，被迫结束当地项目。

局势不安全也妨碍救援组织收集可靠的数据。无国界医生的救援队在五个省共治疗了5,700名营养不良儿童，但未见濒临饥荒的迹象。

在荷台达，在6月重大军事攻势展开以后，无国界医生在摩卡开设了一间外科医院。驻摩卡的救援队治疗了150人，三分之一是被胡塞武装组织埋下的地雷所伤的儿童。



© Guillaume Binet / MYOP
A young man injured in mine explosion receiving rehabilitation session at MSF Hospital in Mocha, Yemen. 位于也门摩卡的无国界医生医院里，一名被地雷炸伤的青年接受康复治疗。

The Rohingya: No country to call home 罗兴亚人：何处是我家？

Over a year after their largest exodus from Myanmar, the future looks more uncertain than ever for the Rohingya. Following a campaign of violence by the Myanmar military in August 2017, the Rohingya continue to flee into Bangladesh. Over 908,000 sought refuge there by the end of 2018.

In Bangladesh, the Rohingya's precarious situation remains, even though their most urgent needs have been met and many lives have been saved. They are still confined to dangerously cramped and squalid camps. Their experiences of unspeakable violence in Rakhine and anxiety about what the future holds exacerbate their health problems, yet the availability of specialised services, such as mental health support or free, high-quality secondary healthcare, is extremely limited. They are almost entirely dependent on humanitarian assistance, but some aid organisations have started to close or scale down their operations. Donor countries have lost interest and funding for the humanitarian response remains grossly inadequate.

有史以来最大批罗兴亚人逃离缅甸已超过一年，然而他们的未来，似乎比过去任何一刻都更不确定。2017年8月缅甸军方发动暴力袭击，触发罗兴亚人陆续涌到孟加拉国。至2018年年底，有近91万人在当地寻求庇护。

在孟加拉国，尽管救援组织应对了最迫切的需求，也抢救了不少性命，但罗兴亚人仍是朝不保夕，受困于极其狭窄肮脏的营地。罗兴亚人在若开邦经历过难以言喻的暴力创伤，前景未明又使他们充满焦虑，原有的健康问题只会恶化下去。然而，不论是精神健康支持或是免费、优质的二级医疗等专科服务，在当地都极其有限。罗兴亚人几乎完全依靠人道援助生存，一些救援组织却开始关闭项目或缩减行动规模，捐助国也不愿再施予援手，人道救援所需的拨款至今远远不够。



© Patrick Rohr

Rohingyas living in tents set up on the slope in Kutupalong refugee camp in Cox's Bazar, Bangladesh.
在孟加拉国科克斯巴扎尔区的库图巴朗难民营，罗兴亚人居于建在斜坡上的帐篷里。

The challenge for 2019 and beyond will be to keep the plight of one of the most vulnerable groups of people in the world visible. We will continue to provide much-needed medical and humanitarian services and speak out about the scale of the Rohingya's needs.

2019年及往后的挑战，是要让世上其中一群最为脆弱的社群不被遗忘。无国界医生会继续为罗兴亚人提供亟需的医疗和人道援助，同时就他们庞大的需要公开发声。

Rohingya Refugee Emergency 无国界医生对罗兴亚难民的应急工作

Hundreds of thousands Rohingya refugees have arrived in neighbouring Bangladesh from Myanmar since late August 2017. MSF has deployed over 2,000 staff there to respond to the medical and humanitarian need. In the first year:

自2017年8月底起，数以十万计罗兴亚人自缅甸涌到邻国孟加拉国。无国界医生派出逾2,000人在当地展开医疗人道救援，于第一年：



Treated 医治 **656,000** patients 名病人



Admitted over 接收逾 **13,170** patients 名病人 to hospitals 入院



Treated over 治疗逾 **6,400** suspected diphtheria cases 名疑似水样腹泻病人



Treated over 治疗逾 **4,800** suspected measles cases 名疑似麻疹患者



Assisted 协助近 **4,800** baby deliveries 名婴儿出生



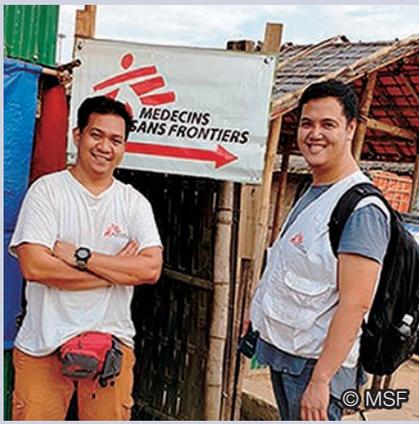
Treated 诊治 **2,680** patients with violence-related injuries 名因暴力冲突而受伤的人

Note: Figures until 30 June 2018 注：数字截至2018年6月30日



© Robin Hammond / NOOR

Many Rohingya women fled from violence in Rakhine state of Myanmar. They brought their young children to Bangladesh for a temporary shelter. 为了逃避缅甸若开邦的暴力冲突，不少罗兴亚妇女带同年幼子女涌到孟加拉国，寻求临时安身之所。

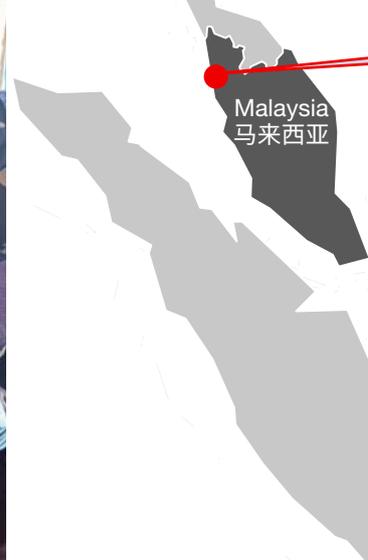
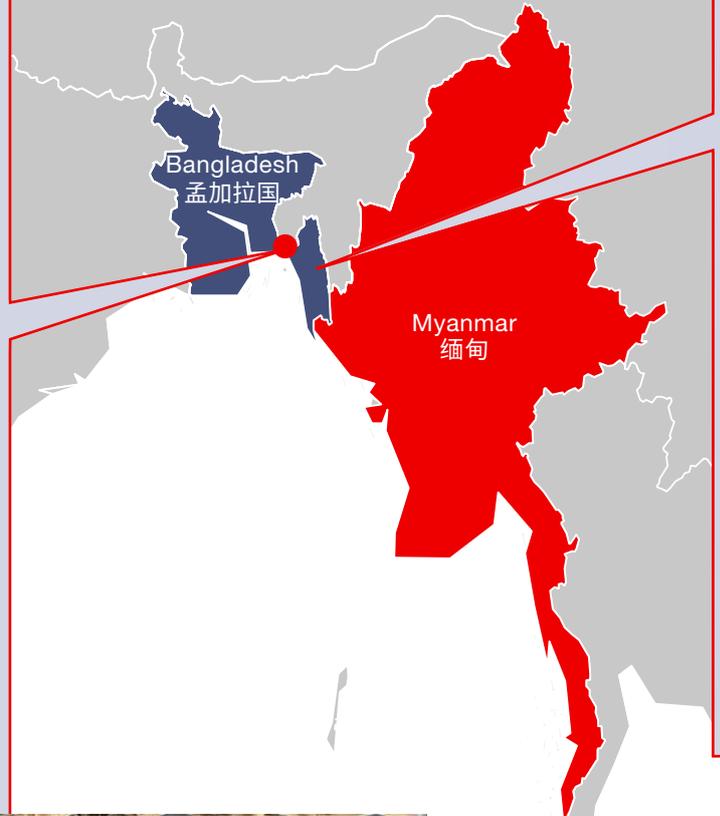


“ We see an average of 500 Rohingya refugees and Bangladeshi patients every day at the three MSF primary healthcare centres located in Jamtoli camp. Due to the high number of patients, our staff were trained to do proper triaging. They also take vital signs and guide patients on what to do next. This keeps the flow of people organised and manageable. Poor hygiene and sanitation greatly affect the quality of life in refugee camps. Common diseases include acute watery diarrhoea, upper respiratory tract infection, and skin diseases. ”

「 在无国界医生位于贾姆托利难民营的三间基本医疗中心，我们平均每天接收 500 名罗兴亚难民和孟加拉国病人。由于病人众多，医护人员已接受培训做好分流，同时会记录病人的生命体征，并教他们下一步该做什么。这样才能有秩序管理人流。卫生环境恶劣，大大影响难民营内的生活质量。常见的疾病包括急性水样腹泻、上呼吸道感染和皮肤病。 」

Darwin Diaz (right) and Jose Vincent Pagarugan (left), Filipino nurses, worked in Bangladesh in 2018.

菲律宾籍护士 Darwin Diaz (右) 和 Jose Vincent Pagarugan 在 2018 年被派往孟加拉国参与救援。



图片来源 Photo source: Darwin Diaz, Jose Vincent Pagarugan

With the number of patients Darwin Diaz and Jose Vincent Pagarugan saw every day, a simple triage system was key to attending to each patient and seeing quickly what they can do for them.

Darwin Diaz 和 Jose Vincent Pagarugan 每天都见到大量病人，简单的分流系统，是处理病人、快速判断能提供的服务的关键



© MSF

“ The sheer mass of shelters built with plastic sheeting, held up by bamboo poles and precariously balanced on steep hills was simply an overwhelming sight. Walking through the camps, rubbish and waste were lying in puddles of stagnant, almost blackened and stenchy water, while the majority of the children ran around bare-foot. Some latrines were blocked and filled with maggots. I was in Bangladesh during the monsoon season, and the fear of mudslides, shelters collapsing and refugees being buried alive was very much real. ”

「 看到无数以塑料布以及竹竿搭起的帐篷，在陡峭的山坡上岌岌可危，是相当震撼的景象。穿过营地，垃圾和废物浸在污浊发臭的死水中，大多数的孩子赤着脚跑来跑去，一些厕所被堵塞且充满了蛆虫。我在孟加拉国时正好是季候风季节，团队最担心泥石流、营帐倒塌和难民被活埋等灾难发生。 」

Chiao-yu Cheng, Finance and HR Manager from Taiwan, worked in Bangladesh

来自台湾的郑巧钰，在孟加拉国担任财务与人力事务经理



© Simon Ming

During monsoon season, drainage canals fill up fast after thunderstorm in the Rohingya refugee camp. 在季候风季节，罗兴亚难民营里的水道水位会在暴雨后急速上涨。



© MSF

“ Gravely ill refugees who go to hospital for treatment risk being reported and detained. Sadly, this means refugees may abscond from hospital due to a fear of being arrested, delay seeking medical care until it is extremely serious or never seek medical care at all. Being subject to unsubsidized foreigner rate for medical fees, which many refugees cannot afford, refugees are often times barred from accessing the medical diagnoses and treatments they need. ”

「 病况严重的难民到医院求医，有可能被卫生官员向入境部门举报而遭拘禁，于是难民或会因害怕被捕而悄悄逃离医院，或延误求医至病情恶化，甚至是宁愿不求医。很多难民因为负担不起未经补贴的外国人医疗收费，未能获得所需的诊断和治疗。 」

Tin-wai Lau, Beatrice, Head of Mission, from Hong Kong worked in Malaysia
来自香港的柳天蕙，在马来西亚担任项目总管



© Vincenzo Liveri

A pharmacy of MSF outpatient department in Rohingya refugee camp in Bangladesh. Apart from primary healthcare, MSF also provides mental health services to refugees.

位于孟加拉国一个罗兴亚难民营内的无国界医生门诊部药房。除了基本医疗护理，无国界医生也向难民提供精神健康服务。

Worldwide Operations Highlights

全球前线工作概要

Below are the highlights of MSF activities around the world in 2018:
 以下是无国界医生于2018年在全球进行救援工作的概要:



South Sudan 南苏丹
 © MSF

Conducted 进行 **11,218,700** Admitted 接收 **758,200** patients 人次入院治疗
 outpatient consultations 次门诊诊症



Ethiopia 埃塞俄比亚
 © Gabriele François Casini / MSF

Treated 给予 **159,100** patients with first-line HIV antiretroviral treatment at the end of 2018
 名病人抗艾滋病第一线药物治疗 (至2018年底)

Treated 给予 **17,100** patients of first-line failure with second-line HIV antiretroviral treatment at the end of 2018
 名第一线治疗失败的病人抗艾滋病第二线药物治疗 (至2018年底)

Admitted 接收 **16,500** patients to tuberculosis first-line treatment
 名病人开始接受结核病第一线治疗

Admitted 接收 **2,840** patients to drug-resistant tuberculosis treatment
 名病人开始接受耐药性结核病治疗



Myanmar 缅甸
 © Alessandro Penso / MAPS



Syria 叙利亚
 © Roaa Hasan / MSF

Vaccinated 为 **1,479,800** people against measles in response to an outbreak
 人接种麻疹疫苗以应对疫症爆发

Vaccinated 为 **33,900** people against meningitis in response to an outbreak
 人接种脑膜炎疫苗以应对疫症爆发

Treated 医治 **63,700** patients for cholera 名霍乱病人

Treated 医治 **2,396,200**

cases of malaria 宗疟疾个案



Mauritania 毛里塔尼亚
© Nyani Quarmyne



Lebanon 黎巴嫩
© Elisa Fourt / MSF

Assisted 协助 **309,500** women to deliver babies, including caesarean sections 名妇女分娩, 包括剖腹生产

Performed 进行 **104,700** major surgical interventions that require anaesthesia 宗涉及麻醉的大型手术

Medically treated 医治 **24,900** patients for sexual violence 名性暴力受害者

Admitted 接收 **2,800** to Ebola treatment centres 人到埃博拉治疗中心

of whom 当中 **450** were confirmed as having Ebola 人确诊感染埃博拉病毒



Democratic Republic of Congo (DRC) 刚果民主共和国
© John Wessels



Afghanistan 阿富汗
© Adhmadullah Safi / MSF

Admitted 接收 **74,200** severely malnourished children to inpatient feeding programmes 名严重营养不良儿童接受住院营养治疗

Treated 医治 **14,400** people on hepatitis C 名丙型肝炎患者

Conducted 进行 **404,700** individual mental health consultations 次个人精神健康辅导



Belgium 比利时
© Bruno De Cock / MSF

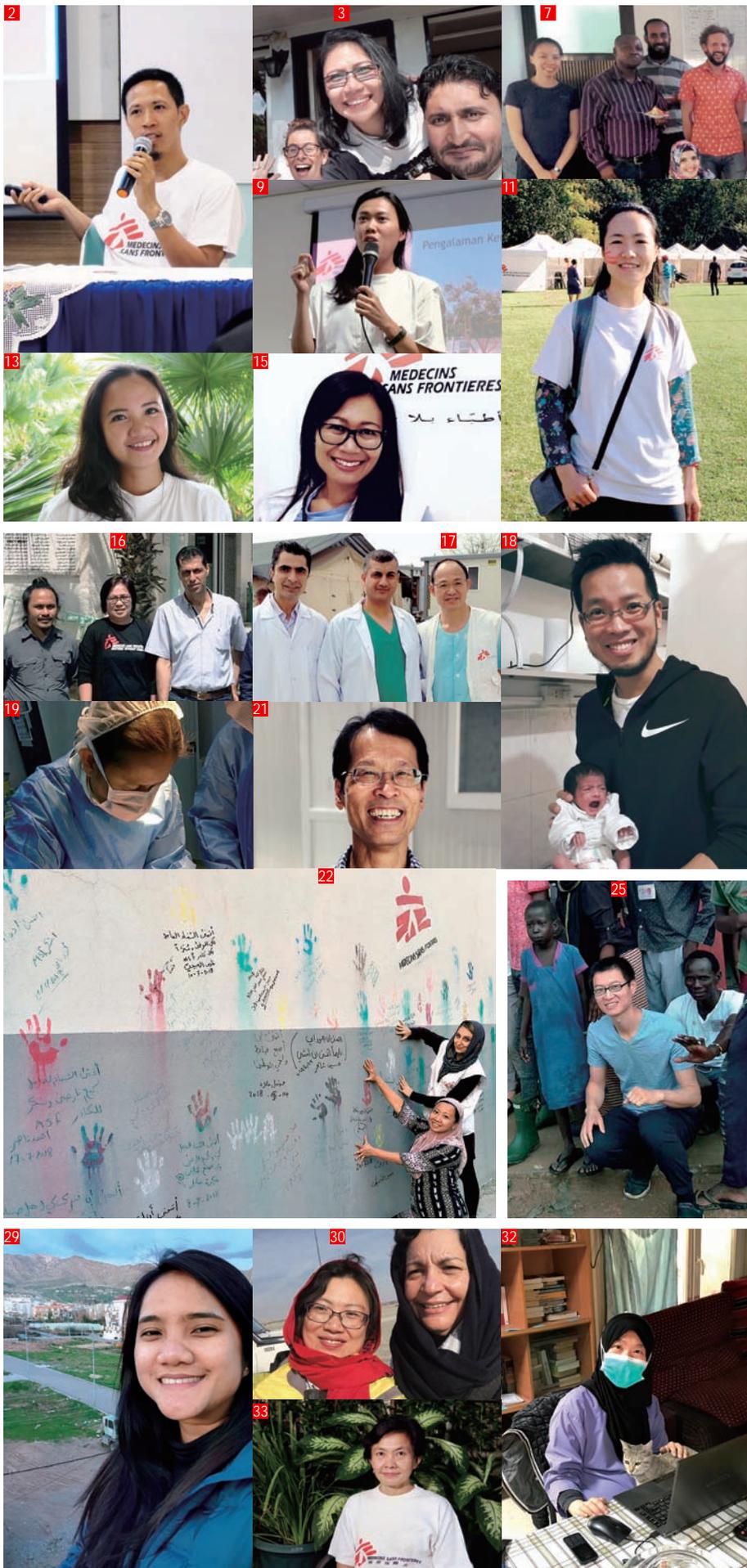


Mediterranean 地中海
© Guglielmo Mangiapane / SOS MEDITERRANEE

Rescued and assisted 在海上搜救和协助 **3,184** migrants and refugees at sea 名移民和难民

To the Field

无国界医生 (香港) 派出的前线救援人员



Medical Doctors 医生

- 1 * Cheryl Arbon **PH**
- 2 Lukman Hakim Bauty **ID**
- 3 Cecile Catacutan **PH**
- 4 * Chin Saw Sian **MY**
- 5 * Anna Kathrina De Jesus **PH**
- 6 * Ei Hnin Hnin Phyu **MM**
- 7 Hui Min Kang **SG**
- 8 * Lim Chin Siah 林振锡 **SG**
- 9 Martiani Dona Oktavia **ID**
- 10 * Shirley Joy Pador **PH**
- 11 Poe Poe **MM**
- 12 * Alexandra Simanjuntak **ID**
- 13 Rangi Wirantika Sudrajat **ID**
- 14 * Theint Thida Soe **MM**
- 15 Sussie Sandra Maria Wiranangapati **ID**

Surgeons / Orthopaedic Surgeons 外科医生 / 骨科医生

- 16 Lynn Sarah Agdeppa **PH**
- 17 Yiu-kai Au 欧耀佳 **HK**
- 18 Kin-wah Chan, Akin 陈健华 **HK**
- 19 Evangeline Cua **PH**
- 20 * Maria Teresa Ingalla **PH**
- 21 Chi-cheong Ko 高志昌 **HK**
- 22 Wing-sze Tong, Jennifer 唐颖思 **HK**

Anaesthetists 麻醉科医生

- 23 * Janis Genterola **PH**
- 24 * Marjorie Ann Ladion 赖婷茵 **PH**
- 25 Xue-feng Li 李雪峰 **CN**
- 26 * Jacqueline Ontoy **PH**
- 27 * See Hooi Geok **MY**

Obstetricians / Gynaecologists 妇产科医生

- 28 * Heidi Cruz **PH**
- 29 Renny Anggia Julianti **ID**
- 30 Yun Shen 沈芸 **CN**
- 31 * Alexander Jr Tan **PH**
- 32 Yi-lei Wang 王伊蕾 **TW**
- 33 Damayanti Zahar 扎哈妲 **ID**



Operating Theatre Nurses 手术室护士

- 34 Maria Angelina Jimenez *PH*
- 35 Wai-ling Yim 严惠玲 *HK*



Nurses 护士

- 36 *Man-hin Chio 赵雯轩 *HK*
- 37 Ace Adelson Delizo *PH*
- 38 Darwin Diaz *PH*
- 39 *Iane Connie Espanta *PH*
- 40 *Fel Louie Kim Evangelista *PH*
- 41 Imee Japitana 查坦娜 *PH*
- 42 *Carmelita Manaois *PH*
- 43 *Romell Nalitan *PH*
- 44 Jose Vincent Sajulga Pagarugan *PH*
- 45 *Honey Maymor Panes *PH*
- 46 *Teresita Sabio *PH*
- 47 Jan Vincent Sotito *PH*

Interested in joining MSF?

MSF is always looking for motivated and skilled medical and non-medical staff for its projects all over the world.

To learn more, please visit msf.cn/fieldwork



Midwives 助产士

- 48 *Cherry Agustin *PH*
- 49 Tsz-yan Lee 李芷殷 *HK*



Pharmacists 药剂师

- 50 *Cheryl Armezin *PH*
- 51 Theingi Aye *MM*
- 52 *Chong Sook Han 张淑娴 *MY*

Mental Health Officer 精神健康人员

- 53 Lee-yung Lin 林莉蓉 *HK*



Epidemiologists 流行病学专家

- 54 Aung Aung *MM*
- 55 Mei-wen Zhang 张美文 *CN*



**有兴趣加入
无国界医生
行列?**

无国界医生经常招募有志和专业的医疗及非医疗人员，派他们到全球不同的项目进行救援工作。详情请浏览 msf.cn/fieldwork



Logisticians 后勤人员

- 56 * Sylvia Bakarbessy **ID**
- 57 Thimotius Simon Petrus Benu **ID**
- 58 Roje Garcia **PH**
- 59 * Roman Rhienhardt Ladaw **PH**
- 60 Yiu-fai Li, Vincent 李耀辉 **HK**
- 61 * Jonathan Pillejera **PH**
- 62 * May Sarah **ID**
- 63 Andreas Stefano Sinaga **ID**
- 64 Yerolla Harapando Sipayung **ID**
- 65 * Teoh Wei Yee **MY**

Administrators / Financial Controllers 行政 / 财务人员

- 66 Roslinda Perangin Angin **ID**
- 67 Gita Milana Aprilia **ID**
- 68 Chiao-yu Cheng 郑巧钰 **TW**
- 69 Meyna Christanty **ID**
- 70 * Wilma Cuaycong **PH**
- 71 Ruby Golimlim **PH**
- 72 * Andres Joaquin Hagad **PH**
- 73 Ismed Ismail **ID**
- 74 So-ching Lam 林素静 **HK**
- 75 Hwee Ling Sally Low **SG**
- 76 Lin Thu Oo **MM**
- 77 Sharon Carolyn Macaranas **PH**
- 78 * Thi Hoang Lan Nguyen **VN**
- 79 * Rachele Anne Maigne Pormento **PH**
- 80 Endang Dwi Satriyani **ID**
- 81 Pratiwi Sutowo **ID**
- 82 Maria Beatriz Uy **PH**

Communications Officer 传讯人员

- 83 Rocel Ann Junio **PH**

Coordinators 统筹人员

- 84 * Karina Marie Aguilar **PH**
- 85 Na An 安娜 **CN**
- 86 Rey Anicete 艾宁伟 **PH**
- 87 * Radoslav Antonov **MY**
- 88 Hana Badando **PH**
- 89 * Honorita Bernasor **PH**
- 90 * Yvonne Biyo 卜柔 **PH**
- 91 * Yuely Capileno **PH**
- 92 Maria Cristina De Costo **PH**
- 93 * Allan De La Rosa **PH**
- 94 Marve Duka **PH**
- 95 Denis Dupuis 狄培尔 **ID**



- 96 Ei Mon Khine **MM**
- 97 Htet Aung Kyi **MM**
- 98 Htike Kyi Pyar Min **MM**
- 99 Melvinn Kaibigan **PH**
- 100* Rodel Lambatin **PH**
- 101* Marianni Peggy Layzanda 黎珊达 **ID**
- 102* Beng Kwang Lee **SG**
- 103* Ezequiela Macaranas 马兰嘉诗 **PH**
- 104 Riezl Magtira **PH**
- 105 Raffy Matutino **PH**
- 106* Beverly Molina **PH**
- 107 Roselyn Morales **PH**
- 108 Claudio Moroni **SG**
- 109 Nyi Wynn Soe **MM**
- 110 Imelda Palacay 彭荔琼 **PH**
- 111 Angelika Pattihahuan 帕季夏 **ID**
- 112* Margarita Quilala **PH**
- 113 Jan Krisna Rodriguez **PH**
- 114* Francisco Raul Salvador **PH**
- 115* Maria C. Juan Sarte 沙蒂 **PH**
- 116 Monika Seng **KH**
- 117 Seng Bu **MM**
- 118 Yu-hui Sha 沙宇慧 **CN**
- 119 Maria Melissa Sindiong **PH**
- 120 Yan Debry Dominico Syauta **ID**
- 121* Celia Tang 邓贝芬 **HK**
- 122* Wei-bing Xu 徐卫兵 **CN**
- 123 Wei Zou 邹纬 **CN**

The above field workers departed for the following countries / areas on mission in 2018: Afghanistan, Bangladesh, Bolivia, Cambodia, Cameroon, Central African Republic, Democratic Republic of Congo, Egypt, Ethiopia, Haiti, India, Indonesia, Iran, Iraq, Jordan, Lebanon, Malawi, Malaysia, Myanmar, Nigeria, Pakistan, Palestine, Philippines, Philippines, Sierra Leone, South Africa, South Sudan, Swaziland, Syria, Tajikistan, Turkey, Uganda, Ukraine, Uzbekistan, Yemen and Zambia.

Coordinators include field coordinator, medical coordinator, deputy medical coordinator, financial coordinator, deputy financial coordinator, human resources coordinator, logistical coordinator and supply coordinator.

上述救援人员于2018年出发，前往以下国家或地区参与救援工作：阿富汗、孟加拉国、玻利维亚、柬埔寨、喀麦隆、中非共和国、刚果民主共和国、埃及、埃塞俄比亚、海地、印度、印度尼西亚、伊朗、伊拉克、约旦、黎巴嫩、马拉维、马来西亚、缅甸、尼日利亚、巴基斯坦、巴勒斯坦、菲律宾、塞拉利昂、南非、南苏丹、斯威士兰、叙利亚、塔吉克斯坦、土耳其、乌干达、乌克兰、乌兹别克斯坦、也门和赞比亚。

以上的统筹人员包括项目统筹、医疗统筹、副医疗统筹、财务统筹、副财务统筹、人力事务统筹、后勤统筹和物资供应统筹。

Country/Region of Residence 前线救援人员来自

| **CN** China 中国内地 | **HK** Hong Kong 香港 | **ID** Indonesia 印度尼西亚 | **KH** Cambodia 柬埔寨 | **MY** Malaysia 马来西亚 | **MM** Myanmar 缅甸 |
 | **PH** Philippines 菲律宾 | **SG** Singapore 新加坡 | **TW** Taiwan 台湾 | **VN** Vietnam 越南 |

* 没有照片 No photo

Activity Overview of MSF Hong Kong in Asia

无国界医生（香港）亚洲活动概览



© MSF

Through “drawings inside a drawing” illustrations, MSF invites the general public to dive into the neglected details of global humanitarian crises. 无国界医生以一系列三幅的救援场景画中画，加深大众对全球人道危机的认识。

One primary objective of MSF Hong Kong is to deploy qualified professionals to help deliver medical care and humanitarian assistance to people who would otherwise have none. In 2018, 157 mission departures were carried out, with South Sudan, Bangladesh, Iraq, Syria and Sierra Leone as the top deployment destinations. Twenty-seven field workers went on their first assignment whereas another 49 assumed coordinator positions. A total of 50 professionals were newly recruited from the region. In addition, MSF Hong Kong facilitated the 11th Annual Surgical Training, which enabled participants from different countries to further develop their skills.

Meanwhile, MSF Hong Kong contributes especially to the operations in Southeast Asia through its Operations Support Unit. This year, the Unit supported the relief response to the Sulawesi earthquake and Sunda Strait tsunami in Indonesia, and monitored other emergencies such as the dam collapse in Laos. New members were added to the team to increase its scope of services. The ASEAN Representative facilitated MSF’s engagement with the ASEAN and its platforms to support access to vulnerable populations. The Medical Research and Analysis Officer started building up knowledge on health-related issues such as migrant health and methanol poisoning, and contributed to the MSF report on the mental health emergency in Nauru. The team further developed other regionally relevant dossiers, including humanitarian access to emergencies, climate change and its impact on disasters, ASEAN relations with major actors and violent extremism in Southeast Asia.

Thanks to the dedicated support of our donors in Hong Kong and the region, MSF teams in different parts of the world can provide not only immediate and high-quality care but also neutral and impartial assistance. Striving to maintain financial independence, MSF Hong Kong focuses on raising funds from the general public as well as carefully selected private corporations and foundations. Over HKD518.3 million was raised in 2018, representing a 3.3% increase from 2017. Almost 100% of our donations came from private sources.

无国界医生（香港）的一个主要目标，是派出专业人员为孤立无助的人提供医疗服务和人道援助，2018年共派出救援人员157人次，他们最经常前往的地区包括南苏丹、孟加拉国、伊拉克、叙利亚和塞拉利昂；当中有27人首次参与救援任务，另有49人次担任统筹岗位。我们还在亚洲区新招募了50名专业人士。此外，无国界医生（香港）举办了「第11届外科训练」，让来自不同国家的参加者提升在前线工作的能力。

与此同时，行动支持组为无国界医生于东南亚地区的救援项目提供支持，在同年支持了印度尼西亚苏拉威西岛地震和巽他海峡海啸的紧急应对工作，并监察如老挝大坝坍塌等紧急状况。行动支持组也有新成员加入，以扩大其服务范围。驻东盟代表推动无国界医生与东盟及其平台接触，使前线团队得以接触到脆弱社群提供援助。医学研究和分析主任着手就移民健康和甲醇中毒等医疗问题建立知识，并为无国界医生有关瑙鲁精神健康危机的报告提供协助。行动支持组继续跟进地区相关的议题，包括人道工作者如何进入紧急状态地区进行救援、气候变化及其对灾害的影响、东盟与大国及主要国际组织的关系，以及东南亚的暴力极端主义。

感谢香港和亚洲区捐款人的慷慨支持，无国界医生在世界各地的团队能提供及时、优质的医疗服务，更给予中立不偏的人道援助。为保持财政独立，无国界医生（香港）致力向公众以及谨慎选择的私人企业和基金会筹款。2018年我们共筹得近5.2亿港元，比2017年增加3.3%，接近百分之百为私人捐款。

MSF Hong Kong continues to maintain a strong relationship with the Hong Kong public, and raise awareness about neglected crises so that violence and inhumanity would not go unnoticed. During the MSF Film Festival held in January 2018, a panel discussion was organised, highlighting the devastating assault on medical facilities and the blatant disrespect of International Humanitarian Law in conflict-ridden areas. A virtual reality exhibition toured around six malls in the city to provide a window into MSF's frontline work. Furthermore, MSF Hong Kong has increasingly used new initiatives to illustrate the day-to-day field realities, and an example is the project Click to Enlarge. Featured with "drawings inside a drawing", it captures untold stories of the Ebola epidemic in West Africa and Mediterranean migrant crisis. In Macau, a near neighbour of Hong Kong, the first-ever MSF Film Festival took place this year.

We are very grateful to many members of the public in Hong Kong who have taken part in two annual events. On Track To Save – MSF Orienteering Competition, scheduled to be held on March 4, 2018 at Hok Tau, Fanling, was regrettably cancelled due to adverse weather. We deeply appreciate all the participants, volunteers as well as sponsoring and supporting organisations for their understanding and continued support, and over HKD6.6 million was raised for MSF's programmes worldwide.

As the MSF Day 2018 Honorary Campaign Leader, Mr Ekin Cheng invited Ms Sandy Lamb, his good friend and manager to join hands and double the support to MSF. Together with MSF field worker Dr Hei-jim Jimmy Leung, they called on the public to volunteer for MSF by donating one day's salary. The event, having been participated by 115 companies and organisations, 48 schools and 6,000 individual donors, successfully raised HKD6.5 million.

In mainland China, MSF continues to engage with key stakeholders on a range of global health issues. MSF China Representative shared with the National Health Commission our experiences of developing and implementing medical programmes in Africa. Our project team in Cambodia was invited by the Chinese Center for Disease Control and Prevention (CDC) to present how new hepatitis C drugs are delivered through a simplified model of care. With MSF's support, a researcher from the CDC's National Institute of Parasitic Diseases received a three-month training on vector surveillance of visceral leishmaniasis at the Instituto de Salud Carlos III in Spain, whereas another two researchers from the CDC participated in an emergency response workshop in Thailand. MSF shared our response strategies and frontline experiences at a medical emergency symposium in Beijing, and attended a Belt and Road forum on northwest China's infectious disease prevention and control. Both events were convened by the CDC. MSF inducted the Structured Operational Research and Training Initiative (SORT-IT) into China, with 12 specialists trained in this one year programme and successfully published thesis focusing on key topics including malaria, ignored tropical diseases etc.

无国界医生（香港）一直与香港市民保持紧密关系，并提高大众对被忽略危机的关注，使暴力和不人道的状况不致被遗忘。在2018年1月「无国界医生电影节」期间，我们举办论坛，唤起公众关注冲突地区中针对医疗设施的狂轰滥炸，以及对国际人道法的公然漠视。另外又在城中六个商场举行虚拟现实巡回展览，让市民窥见救援行动的实况。此外，无国界医生（香港）采用更多新形式去展示前线的日常现实，例如名为「点击放大」的项目，以特别设计的救援场景画中画，捕捉西非埃博拉疫情和地中海流徙危机背后的小故事。在毗邻香港的澳门，我们于年内首次举办「无国界医生电影节」。

我们衷心感谢许多香港市民参加无国界医生（香港）举办的两项年度活动。「救援在野——无国界医生野外定向比赛」原定于2018年3月4日在粉岭鹤薮举行，但因恶劣天气赛事被迫取消。无国界医生非常感谢所有参赛者、义工以及赞助和支持机构的理解和支持，这项活动为前线项目筹得超过660万港元。

艺人郑伊健先生担任「无国界医生日2018」荣誉行动大使，邀请好友兼经理人林珊珊小姐携手支持无国界医生，加倍救援力量。他俩联同前线救援人员梁纪瞻医生呼吁各界捐出一天薪金，如同为无国界医生做一天义工。活动共获得115间公司和团体、48间学校以及6,000名市民响应，成功筹得650万港元。

在中国内地，无国界医生继续与相关各方就多项全球卫生议题交流。我们的驻华代表与国家卫生健康委员会分享在非洲开展医疗援助项目的经验；柬埔寨项目团队应邀在中国疾病预防控制中心（疾控中心）介绍以简化护理模式用创新药物治疗丙型肝炎。在无国界医生支持下，疾控中心寄生虫病预防控制所的研究员前往西班牙卡洛斯三世卫生研究所，接受三个月的内脏利什曼病媒介监测技术培训，疾控中心两名研究员则到泰国参加紧急救援研讨会。无国界医生在北京的卫生应急研讨会分享我们的应对策略和一线经验，并获邀参加「一带一路」西北地区传染病防控论坛，这两项活动均由疾控中心举办。此外，无国界医生将结构化项目研究和培训方案（简称SORT-IT）引入中国，为期一年的培训后，12名学员成功发表论文，且论文关注疟疾、被忽略的热带疾病等重点议题。



MSF shared the emergency medical response strategy and its first-hand experience on the medical emergency workshop organised by China CDC in Beijing in July, 2018.

2018年7月，中国疾控中心在北京举办卫生应急研讨会，无国界医生的专家在会上介绍医疗应急策略和一手经验。



A volunteer of the Taipei office introduces the movement's relief works to a visitor at the venue of the MSF Film Festival.

台北办公室义工在「无国界医生电影节」会场，向参加者介绍无国界医生的救援工作。

MSF has also worked to improve access to lifesaving medications in mainland China. MSF filed a legal challenge at the State Intellectual Property Office, requesting the invalidation of the patent granted to US pharmaceutical corporation Gilead Sciences for the oral hepatitis C medicine velpatasvir. Yet the patent was sustained. Despite this, the public's knowledge and awareness of access to medicine has improved significantly. MSF organised online and offline field worker sharing, documentary screening, also enabled people in different locations to experience humanitarian and without geographic barriers.

In Taipei, two mapathons were held in 2018, where teachers and students of the Taipei American School, and volunteers of the Taipei office and their friends, participated to mark settlements and buildings of African countries like Mali on cloud-based maps, to enable our teams on the ground to better understand the regions. An MSF Film Festival took place at the Spot Huashan cinema in October. We also reached out to colleges, middle and high schools in Taipei, New Taipei, Hsinchu, Taichung and Kaohsiung, with the aim for students to learn more about MSF's work.

In Indonesia, we provided emergency communications support to the field teams in the aftermath of the Sulawesi earthquake and Sunda Strait tsunami. In May, the biggest MSF public awareness event in the country was staged in Jakarta. With the theme #MedicinesNotBombs, the event focused on raising concerns about attacks against medical facilities. The first-ever MSF event in Yogyakarta was organised in collaboration with the Muhammadiyah Disaster Management Centre and Universitas Ahmad Dahlan.

In Singapore, a three-day MSF Film Festival attracted about 1,500 visitors, and three mapathons offered volunteers the opportunity to help create accurate and up-to-date maps and contribute to medical humanitarian work.

In Malaysia, we stepped up our communications efforts this year, having organised an MSF recruitment and public awareness event dubbed "A Day With MSF" in Kuala Lumpur and increased social media engagement.

In the Philippines, we organised a number of online and offline events including those in Manila and Iloilo to interact with the general public, and developed relationships with various schools, universities, NGOs and think tanks during the year. To support the field mission, a communications package was produced for the anniversary of the Marawi siege. A digital campaign raising awareness about sexual and gender-based violence was also launched.

无国界医生亦一直致力增加中国内地病人获得救命药物的机会。这一年，无国界医生向国家知识产权局提交专利挑战，请求宣告已授予美国制药公司吉利德科学公司的口服丙型肝炎药物维帕他韦的专利无效；惜判决结果维持该专利。尽管如此，公众对药物可及性问题的认知显著提升。无国界医生的线上线下救援人员分享会和纪录片放映会，也令各地大众得以跨越地域障碍体验人道救援。

在台北，无国界医生于2018年举办了两场群众地图绘制活动「地图松」，分别邀请台北美国学校师生、台北办公室义工及其亲友参与，在云端地图上标记马里等非洲国家的聚居点和建筑物，以协助前线团队掌握对当地情况。此外，「无国界医生电影节」于10月在光点华山电影馆举行。我们亦在台北、新北、新竹、台中和高雄的初高中和大专院校进行分享会，旨在让学生了解更多无国界医生的工作。

在印度尼西亚，我们在苏拉威西岛地震和巽他海峡海啸发生后，为无国界医生前线救援队提供紧急传讯支持。此外，5月在雅加达举行以「#药物不是炸弹」为主题的大型活动，希望大众关注针对医疗设施的袭击。在日惹，我们与穆罕默迪亚灾害管理中心和阿赫玛达兰大学合作首次举办活动。

在新加坡，为期三天的「无国界医生电影节」吸引了约1,500名观众。而在三次「地图松」活动中，义工协助绘制准确和最新的地图，为医疗人道救援工作贡献力量。

在马来西亚，我们加强传讯工作，在吉隆坡举办「与无国界医生的一天」的招募和提升公众关注活动，并开始用社交媒体与各界交流。

在菲律宾，我们于年内在马尼拉和伊洛伊洛等地举办了多个网上和线下活动与市民互动，并与不同学校、大学、非政府组织和智库建立联系。为支持前线救援队，我们就马拉维事件一周年制作特辑，并在网上提高民众对性和性别暴力的认识。



MSF held a large public awareness event #MedicinesNotBombs in Jakarta, Indonesia. The event focused on raising concerns about attacks against medical facilities.

无国界医生在印度尼西亚雅加达举办「#药物不是炸弹」的大型活动，希望引起大众关注针对医疗设施的袭击。



"A Day with MSF" event was held in Kuala Lumpur, Malaysia to help recruit field workers and raise public awareness on global humanitarian issues.

在马来西亚吉隆坡举行的「与无国界医生的一天」活动，旨在招募救援人员，并让更多人了解世上的人道危机。

Acknowledgements

鸣谢

MSF Hong Kong would like to thank all donors and the following corporations, organisations, schools, institutions and office volunteers for their generous support to our work.

无国界医生衷心感谢所有捐款人以及下列机构、团体、学校、大专院校和办事处义工对我们的支持。

Corporations 机构

Acorns Development Consultants
AK Medical Center
Bank of America Tower
BAS (H.K.) Limited
BB Group Company Limited
Brilliant International Incorporation Limited
Centro Design & Furniture Ltd
Chan Man Chau Fruit Co., Ltd.
Classic Beaute Limited
CNA Holdings Limited
Collyer Logistics International Limited
Communion W
Consolidated Marketing Group International
Wealth Management Limited
Deqingyuan (HK) Ltd
Elite Partners CPA Limited
Fubon Bank (Hong Kong) Ltd.
Global Call Limited
GUERLAIN (ASIA PACIFIC) LIMITED
HK Electric Investments Limited
Hong Kong Disneyland
iPassion Consulting Company
Katterwall Limited
KL Gateway Mall
LifeStyle Brands (HK) Limited
Mega World Asia Group Limited
Mitsubishi Pencil Marketing (Hong Kong)
Company Limited
NOVA Dynamic Media Co. Ltd.
Octal Capital Limited
Okamoto Industries (Hong Kong) Limited
Oriental Watch Holdings Limited
Prince of Peace (Hong Kong) Ltd.
RC Outfitters
S.F. Express (Hong Kong) Limited
Samily Home Company Limited
Samsonite Asia Limited
Secure Information Disposal Services Limited
(SSID)
Sims Trading Company Limited
Sino Group
Swiss Café

Swiss International Air Lines Ltd.
Tai Shing Group (Holdings) Co. Ltd.
Tak Lee Machinery Co. Ltd.
The Garden Company Limited
The Overlander
Thong Sia Watch Co., Ltd.
Top Victory Investments Limited
United Italian Corporations Ltd
Wilson Garment Accessories (Int'l) Ltd
Winga Apparel Group Limited
Wiseford Industries Limited
ZHONGHUI ANDA CPA Limited
一田百货
中原电器行有限公司
十胜牛和食料理
坚成塑料五金制品厂有限公司
盈健医务中心

Professional institutions 专业机构

Bright Union Hong Kong CPA Limited
Celia P. F. Tang
MDSSC, Queen Elizabeth Hospital
Zhong Lun Law Firm
Prince of Wales Hospital
创越法律事务所
建安联合会计师事务所

Community groups / associations 社区团体 / 协会

Orienteering Association of Hong Kong
Volunteers Orienteering Club
南极星义工队
同社
新方向定向会
圣约翰救伤队
香港定向人
香港野外定向会

Schools / Tertiary institutions 学校及大专院校

Alliance Française de Hong Kong
Catiine Kindergarten International Preschool
Creative Kindergarten

Evangelize China Fellowship Blessing Creativity
Kindergarten
Fung Kai Liu Yun Sum Memorial School
Hong Kong Baptist University
Hong Kong Chinese Women's Club College
Kau Yan College
Kwai Ming Wu Memorial School of the Precious Blood
Lingnan Secondary School
Mei Lam Estate To Kwong Kindergarten
Precious Blood Primary School (South Horizons)
reallyenglish.com Co., Ltd
Shun Sang Anglo-Chinese Kindergarten
SKH Lui Ming Choi Secondary School
True Light Kindergarten (Caine Road)
台北市立重庆国中

Foundation / Funding bodies 基金组织

Parsons Music Foundation
Speech & Music Recital Development Foundation

Media 传媒机构

8020 Media Company
Cosmopolitan
Fitz
Freshman Music Magazine
HK01
Manual Jakarta
Mind & Life
New Media Group
Running BUI HK
The "Star" Ferry Company, Limited
Weekend Weekly

Office volunteers 办公室义工

尹定晟 吴少兰 吴皓维 周汉明 孙圣峰
唐镇浩 陈永安 陈宇正 陈淑贤 梁信彦
冯维强 杨其颖 杨浩福 刘月明 刘曼璇

The above office volunteers provided services 36 hours or above in 2018. We are also thankful to have other volunteers contributed their precious help.

上述办事处义工于2018年服务36小时或以上，我们亦感谢其他义工于过去一年提供的宝贵协助。

Board of Directors of MSF Hong Kong · 无国界医生(香港)董事会

President 主席: Dr Morpheus Salarda Causing¹ Dr Chen-kun Liu 刘镇鲲
Vice Presidents 副主席: Dr Shut-wah Chan 陈述华 Dr Sartini Saman
Treasurer 司库: Kwong-wai Chan 陈广慧
Directors 成员: Yvonne Lucindo Biyo² Dr Ning Fan 范宁 Dr Marlene Lee Dr Yi-chen Lee 李一辰³
Dr Day-seng Tan Kuo-jing Alvin Teo⁴ Dick Van Der Tak⁵

¹ Resigned on 21 March 2019 2019年3月21日离任

² Appointed on 25 August 2018 and resigned on 3 December 2018
2018年8月25日上任、2018年12月3日离任

³ Resigned on 25 August 2018 2018年8月25日离任

⁴ Appointed on 25 August 2018 2018年8月25日上任

⁵ Resigned on 16 May 2018 2018年5月16日离任

Advisory Committee of MSF Hong Kong · 无国界医生(香港)顾问委员会

Members 成员: Dr Ying-yang Chan Emily 陈英凝医生 Po-kiu Fong Francis 方保侨 Lawrence Hui 许卓伦

Finance, Audit and Risk Committee of MSF Hong Kong · 无国界医生(香港)财务审核及风险委员会

Chairperson 主席: Kwong-wai Chan 陈广慧
Members 成员: Yvonne Lucindo Biyo¹ Dr Morpheus Salarda Causing² Benson Cheng 郑善斌 Donald Hess
Dr Day-seng Tan² Kuo-jing Alvin Teo³

¹ Appointed on 26 August 2018 and resigned on 3 December 2018
2018年8月26日上任、2018年12月3日离任

² Appointed on 26 August 2018
2018年8月26日上任

³ Appointed on 1 May 2017 and resigned on 26 August 2018
2017年5月1日上任、2018年8月26日离任

As of December 2018, the MSF offices in Hong Kong, Guangzhou, Beijing and Taipei had 68 staff and 15 regular office volunteers who helped with office tasks.
截止2018年12月，无国界医生在香港、广州、北京和台北的办公室共有68名职员，另有15名义工定期协助处理日常工作。

无国界医生(香港)2018年度财政概览 (以港元为单位)

	2018	2017
INCOME 收入		
Donations income 捐款收入	518,339,054	501,633,032
Other income 其他收入	604,273	279,940
TOTAL 总数:	518,943,327 ⁽¹⁾	501,912,972
EXPENDITURE 支出		
Supporting relief operations 救援项目与支持工作		
Emergency and medical programmes 紧急与医疗救援项目	377,285,890 ⁽²⁾	376,727,319
Programme support and development 项目支持与发展	52,951,965	44,100,511
Public awareness and other campaigns 提高公众关注与倡议	12,339,157	13,257,218
Other humanitarian activities 其他人道救援活动	3,249,143	3,096,508
Total supporting relief operations 救援项目工作总开支	445,826,155 ⁽³⁾	437,181,556
Management and general administration 行政经费	17,598,308	16,743,032
Fundraising 筹款经费	55,334,702	47,988,384
TOTAL 总数:	518,759,165	501,912,972
Net exchange loss 汇兑损失净额	(184,162)	0
Surplus / Deficit 盈余 / 亏损	0	0

Statement of Financial Position as at 31st December 2018

截至2018年12月31日止的财务状况表

	2018	2017
Fixed Assets 固定资产	4,563,777	1,327,531
Current Assets 流动资产		
Debtors 应收账款	182,945	36,756
Deposits and prepayments 押金与预付费用	2,874,774	5,306,802
Amount due from MSF entities 应收其他无国界医生办事处之账款	715,497	1,030,378
Cash and bank balances 现金与银行结余	67,969,834	36,024,961
	71,743,050	42,398,897
Current Liabilities 流动负债		
Creditors and accrued expenses 应付账款与应计费用	7,602,840	6,006,602
Deferred income 递延收入	0 ⁽⁴⁾	1,629,081
Amount due to MSF entities 应付其他无国界医生办事处之账款	68,703,987	36,090,745
	76,306,827	43,726,428
Net Current Liabilities 净流动负债	(4,563,777)	(1,327,531)
	0	0
Fund Balances 资金余额		
Accumulated funds 累积资金	0 ⁽⁵⁾	0

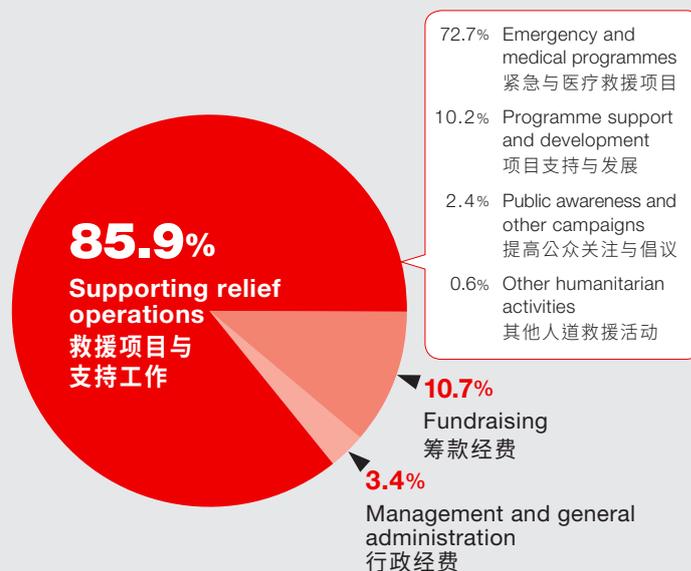
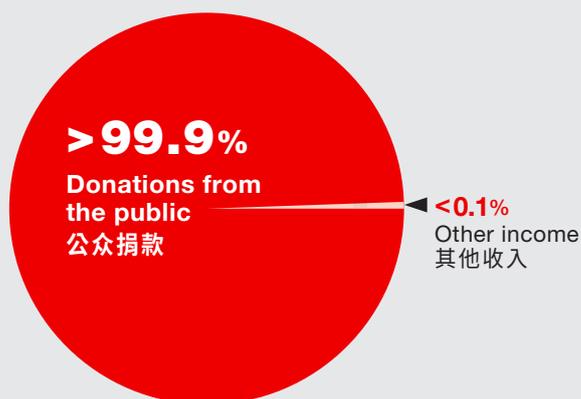
There is a legal obligation to explain that the figures listed above are only partial but not the full set of specified financial statements (i.e. statutory annual financial statements) for the year ended 31 December 2018. Those statements were prepared in accordance with the Hong Kong Financial Reporting Standards and in compliance with the Hong Kong Companies Ordinance (HKCO). They were also approved by the Board of MSF Hong Kong and were audited by the auditor, KPMG. The auditor's report was unqualified, which means that they are of the view that the statutory annual financial statements give a true and fair view of the financial position of the organisation as at 31 December 2018 and of its financial performance for the year then ended. The auditor did not refer to any matters which they drew by way of emphasis without qualifying their report, which means they did not have reservations about the statements. And they did not include any comments as required under section 406(2), 407(2), or (3) of the HKCO. These sections require the auditor to state in their report if the information in the directors' report is inconsistent with the financial statements; accounting records have not been adequately kept; financial statements are not in agreement with accounting records or they fail to obtain information or explanations necessary for their work. The full set of audited financial statements is available at msf.org.hk.

按照法例，谨此声明，以上陈列数据仅为截至2018年12月31日止年度的指明财务报表（即：法定财务报表）的一部分，并不是完整的财务报表。该报表是根据《香港财务报告准则》以及《公司条例》拟备。报表已由无国界医生（香港）董事会认可，并由毕马威会计师事务所审核。核数师在核数报告中，对报表无保留意见，即认为法定财务报表真实而中肯地反映了组织于截至2018年12月31日止的财务状况和该年度的财务表现。核数师亦没有以强调方式提述须予注意的事项，即核数师对报表没有保留。审计报告内也没有任何根据香港《公司条例》第406(2)、407(2)或(3)条的陈述。这些条例列明，若果财务报表与董事报告不吻合；公司没有保存充分的会计记录；财务报表与会计记录不吻合；或核数师没有取得所有对审计工作而言属必需的数据或解释，核数师必须在其报告内述明。完整财务报表可浏览：msf.org.hk

Explanatory Notes on Financial Overview 2018

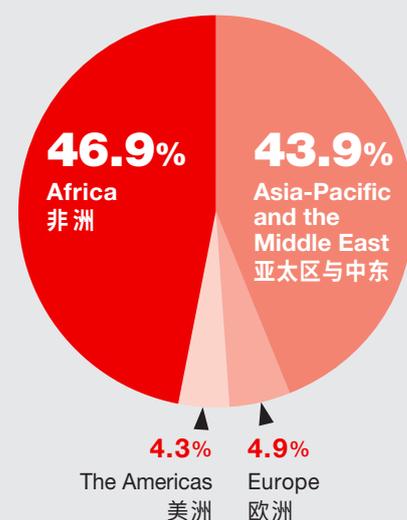
- (1) 99.9% of donations came from public donations.
- (2) A total of HKD377,285,890 was allocated for emergency and medical programmes in 50 countries and regions.
- (3) 85.9% of total income went to supporting relief operations.
- (4) Deferred income represents donation fund received and designated for the Ebola initiative which is yet to be spent as at 31 December 2017 and was recognised as donation income in 2018.
- (5) In 2018, MSF Hong Kong maintained a "zero reserve" policy: all donations received, after the fundraising, management and general administration expenses and exchange difference, were fully dispensed for supporting relief operations.
- (6) Other countries and regions include Greece, Madagascar, Malta, Nicaragua, Papua New Guinea and Tunisia.

The Hong Kong branch of Médecins Sans Frontières is incorporated under the Companies Ordinance of Hong Kong as Médecins Sans Frontières (HK) Limited, a company limited by guarantee.



2018 Allocation of MSF Hong Kong Funding for Relief Work by Country(HKD) · 2018年度无国界医生(香港)拨予各地区救援工作之款项(港元)

Country 国家	Funding 拨款	Country 国家	Funding 拨款
Democratic Republic of Congo 刚果民主共和国	49,469,579	Guinea 几内亚	4,645,889
Syria 叙利亚	27,660,637	Malawi 马拉维	4,373,976
South Sudan 南苏丹	27,410,537	Burundi 布隆迪	4,341,842
Afghanistan 阿富汗	27,074,732	Libya 利比亚	4,000,000
Lebanon 黎巴嫩	19,930,035	Chad 乍得	3,759,677
Central African Republic 中非共和国	18,786,830	Venezuela 委内瑞拉	3,743,084
Iraq 伊拉克	18,698,169	Egypt 埃及	3,718,496
India 印度	14,995,972	Kenya 肯尼亚	3,662,176
Pakistan 巴基斯坦	12,502,254	Mozambique 莫桑比克	3,654,035
Nigeria 尼日利亚	12,346,969	Mauritania 毛里塔尼亚	3,039,832
Bangladesh 孟加拉国	11,668,077	Uzbekistan 乌兹别克斯坦	3,000,000
Haiti 海地	11,015,916	Côte d'Ivoire 科特迪瓦	2,938,006
Yemen 也门	10,751,790	Ukraine 乌克兰	2,164,975
Myanmar 缅甸	9,000,000	Nauru 瑙鲁	1,708,293
Migrant Support Balkan Route 巴尔干半岛路线	8,976,446	Palestine 巴勒斯坦	1,564,025
Zimbabwe 津巴布韦	6,748,417	Cambodia 柬埔寨	1,544,137
Ethiopia 埃塞俄比亚	6,500,000	Belgium 比利时	1,543,819
Sierra Leone 塞拉利昂	6,166,346	Bolivia 玻利维亚	781,454
South Africa 南非	5,882,187	Indonesia 印度尼西亚	626,929
Mali 马里	5,078,890	Russia 俄罗斯	609,378
Malaysia 马来西亚	5,000,000	Ghana 加纳	505,587
Italy 意大利	4,864,123	Brazil 巴西	407,659
		Other countries and regions 其他国家和地区 (6)	424,715

TOTAL 总数:**377,285,890**

Africa 非洲	177,035,137
Asia-Pacific and the Middle East 亚太区与中东	165,727,050
Europe 欧洲	18,387,824
The Americas 美洲	16,135,879

2018年度财政概览说明

- (1) 99.9%经费来自公众捐款。
- (2) 合计377,285,890港元被拨作于50个国家和地区进行紧急与医疗救援项目的经费。
- (3) 85.9%收入用于救援项目与支持工作
- (4) 「递延收入」是指因应西非爆发的埃博拉疫情而收到、截至2017年12月31日为止尚未被使用的指定捐款。该笔款项在2018年被拨作「捐款收入」。
- (5) 2018年，无国界医生(香港)采取「零储备」政策：所有筹得的捐款，扣除筹款与行政经费及汇兑差额后，全数拨予救援项目与支持工作。
- (6) 其他国家和地区包括希腊、马达加斯加、马耳他、尼加拉瓜、巴布亚新几内亚与突尼斯。

无国界医生在香港是一家根据香港《公司条例》设立的担保有限公司，名为无国界医生组织(香港)有限公司。

The Médecins Sans Frontières Charter

Médecins Sans Frontières is a private international association. The association is made up mainly of doctors and health sector workers and is also open to all other professions which might help in achieving its aims. All of its members agree to honour the following principles:

Médecins Sans Frontières provides assistance to populations in distress, to victims of natural or man-made disasters and to victims of armed conflict. They do so irrespective of race, religion, creed or political convictions.

Médecins Sans Frontières observes neutrality and impartiality in the name of universal medical ethics and the right to humanitarian assistance and claims full and unhindered freedom in the exercise of its functions.

Members undertake to respect their professional code of ethics and to maintain complete independence from all political, economic, or religious powers.

As volunteers, members understand the risks and dangers of the missions they carry out and make no claim for themselves or their assigns for any form of compensation other than that which the association might be able to afford them.

无国界医生章程

无国界医生是一个国际的非政府组织，其成员主要为医生和其他医务人员，也欢迎有助于组织完成自身使命的其他专业人员参与。全体成员同意遵循以下准则：

无国界医生不分种族、宗教、信仰和政治立场，为身处困境的人们以及天灾人祸和武装冲突的受害者提供援助。

无国界医生遵循国际医疗守则，坚持人道援助的权利，恪守中立和不偏不倚的立场，并要求在其行动中不受任何阻挠。

全体成员严格遵循其职业规范，并且完全独立于任何政治、经济和宗教势力之外。

作为志愿者，全体成员深谙执行组织的使命所面临的风险和困难，并且不会要求组织向其本人或受益人作出超乎该组织所能提供的赔偿。

MSF Hong Kong 无国界医生（香港）

22/F, Pacific Plaza, 410-418 Des Voeux Road West, Sai Wan, Hong Kong
香港西环德辅道西410至418号太平洋广场22楼

Tel 电话：(852) 2959 4229 (General / 查询) Website 网址：msf.hk
(852) 2338 8277 (Donation / 捐款) E-mail 电邮：office@hongkong.msf.org
Fax 传真：(852) 2337 5442 (General / 查询)
(852) 2304 6081 (Donation / 捐款)

MSF in Guangzhou 无国界医生在广州

Room 1201, 12/F, Block A, Fuqian Mansion, No.618-620 JieFangBei Road, Guangzhou
广州市越秀区解放北路618-620号府前大厦A座1201室

Postal Code 邮编：510030 Website 网址：msf.org.cn
Tel 电话：(86) 20 8336 7085 E-mail 电邮：info@china.msf.org

MSF in Beijing 无国界医生在北京

2-3-31, SanLiTun Diplomatic Residence Compound, SanLiTun Dong San Jie, Chaoyang District, Beijing
北京市朝阳区三里屯东三街外交公寓2号楼3单元031房间

Postal Code 邮编：100600 Website 网址：msf.org.cn
Tel 电话：(86) 10 8532 6607 E-mail 电邮：info@china.msf.org
Fax 传真：(86) 10 8532 6717

MSF in Taipei 无国界医生在台北

6F, No. 6 Sec. 4 Xinyi Road, Da-an District, Taipei
台北市大安区信义路4段6号6楼

Postal Code 邮政编码：10683 Website 网址：msf.tw
Tel 电话：(886) 02 2709 1313 E-mail 电邮：tw.office@taiwan.msf.org
(分机 #111)
Fax 传真：(886) 02 2709 5151

© Vincenzo Livieri

Hundreds of thousands Rohingya refugees have arrived in Cox's Bazar district in Bangladesh since late August 2017 after fleeing violence in Rakhine State, Myanmar.

自2017年8月底开始，数以十万计罗兴亚难民为逃避缅甸若开邦的暴力冲突，涌到邻国孟加拉国的科克斯巴扎尔地区。



关注无国界医生
微博



关注无国界医生
微信



MSF Hong Kong Activity Report 2018 online version
无国界医生（香港）活动报告2018电子版
msf.hk/ar