

MSF-HONG KONG ACTIVITY REPORT 无国界医生(香港)活动报告 2017



From the President and the Executive Director

主席和总干事的话

Dear Friends.

The year 2017 was another tough period for Médecins Sans Frontières (MSF), but it was also a year of refusing limits. In the face of escalating violence in the complex yet largely forgotten humanitarian crises in some parts of the world, our teams had to push beyond limits to provide much-needed lifesaving medical care. Where we were unable to secure direct access to people trapped at the heart of the violence, we focused our care on those who had escaped.

Targeted attacks by the Myanmar military drove 660,000 marginalised ethnic Rohingya into neighbouring Bangladesh, where MSF ramped up its activities in response to the influx. We dealt with multiple disease outbreaks triggered by the refugees' abject living conditions and poor underlying health. Retrospective mortality surveys conducted by MSF epidemiologists revealed the extreme violence inflicted in Rakhine state: by the most conservative estimate, at least 6,700 Rohingya were killed in a month, including at least 730 children below the age of five years old.

There was no let-up in Yemen's war in 2017 or in the direct trauma injuries suffered as a result. Preventable diseases like cholera and diphtheria also re-emerged, as the country grappled with a total breakdown of its medical, sanitation and economic systems, and import restrictions on fuel, food and medicines.

In both Mosul in Iraq and Raqqa in Syria, bombs rained down on trapped civilians as coalition forces wrestled back control from the Islamic State group. When the fighting was at its most intense in Mosul, our emphasis was on trauma surgery. We also provided paediatric, obstetric and primary healthcare and treated malnutrition for those escaping Mosul. The first stabilisation stages of trauma care were being offered by many organisations including MSF. However, a functional network of medicalised transport was lacking, as were easily accessible referral facilities for definitive surgery.

Our teams saw fewer wounded in the battle for Raqqa. This raised questions about what was happening in an area of urban warfare and bombardment, and whether people were accessing any care at all, or simply dying. To this day we do not know. We provided medical assistance to those fleeing Raqqa.

Several other long-running, lesser reported conflicts escalated. Conflict and violence affected South Sudan, where medical facilities and staff were not spared. MSF's clinics and hospitals were looted and our staff and patients were forced to flee. Over two million South Sudanese were displaced, inside and outside the country, creating the world's fastest growing refugee crisis. This prompted a huge MSF response in Uganda, Democratic Republic of Congo (DRC), Ethiopia and Sudan.



Filipino nurse Ji Monserrat Nacanaynay cares for malnourished children in the MSF's primary healthcare centre in South Sudan.

来自菲律宾的护士Ji Monserrat Nacanaynay在无国界医生位于南苏丹的基本医疗中心照料营养不良病童。

各位朋友:

对无国界医生而言,2017年是艰难的一年,然而也是拒绝退缩的一年。全球多个地区爆发形势复杂却备受忽略的人道危机,暴力不断升级,我们的团队为了向人们提供亟需的救命医疗服务,不得不超越救援的极限。当我们无法直接接触被困于战火中的人时,便集中照顾那些逃出来的人。

缅甸军方的针对性袭击,迫使66万名被边缘化的罗兴亚人逃到邻国孟加拉国。无国界医生在孟加拉国加大救援规模,以应对涌入的难民。难民本身的健康情况欠佳,加上营地环境恶劣,救援队应对了多次因此造成的疫症。由无国界医生流行病学家进行的死亡率回顾报告揭示,缅甸若开邦发生极端的暴力事件中,根据最保守的估计,至少6,700名罗兴亚人于一个月内被杀,其中包括至少730名五岁以下的儿童。

2017年,也门的战火持续,毫无缓和迹象,令人们遭受直接的 创伤。国内医疗、卫生和经济系统全面崩溃,燃油、粮食和药 物的进口亦受到限制,导致霍乱和白喉等可预防的疾病重现。

在伊拉克的摩苏尔和叙利亚的拉卡,随着联军从伊斯兰国组织夺回地方控制权,被围困的平民不断受到轰炸。在摩苏尔战事最激烈时,我们主要进行创伤手术,同时向逃离摩苏尔的人们提供儿科、妇产科和基本医疗服务,并医治营养不良病人。无国界医生与其他救援组织提供最初步的创伤护理以稳定伤者伤势,然而当地缺乏有效的伤者运送网络,也没有容易到达的转介设施进行决定性手术。

在拉卡的战事中,我们的团队接触到较少伤者,不禁疑惑这个 遭受巷战和轰炸蹂躏的地方发生了什么事,人们能否获得医疗服务,抑或只能伤重待毙。直到今天,我们对当地情况仍一无所知,只能向逃离拉卡的人们提供医疗援助。

一些地区旷日持久却未被广泛报道的战事,同样转趋激烈。在南苏丹,冲突和暴力影响严重,连医疗设施和医护人员亦无法幸免。无国界医生的诊所和医院被劫掠,员工和病人被迫撤离。超过200万南苏丹人在国内外流离失所,成为全球恶化得最快的难民危机。为此,无国界医生在乌干达、刚果民主共和国、埃塞俄比亚和苏丹进行大规模救援行动来应对。

刚果民主共和国饱受暴力困扰,当中开赛地区有150万人流徙。我们的团队只能在战事缓和时展开工作。我们发现当地幼童的严重急性营养不良比率极高,仅在6月至9月间,就有超过1,000名五岁以下的儿童接受治疗。队伍亦提供全面的儿科护理和外科服务。



DRC was wracked by violence, especially in the Kasai region, where 1.5 million people were displaced. Teams were able to intervene only when the fighting subsided. We discovered extremely high rates of severe acute malnutrition amongst young children in the area, with over 1,000 children under five years old treated between June and September alone. Comprehensive paediatric care and surgery were also provided.

Full-blown conflict resurged in Central African Republic. Several towns were emptied, with people seeking refuge in churches, mosques and even MSF hospitals, or surviving hand-to-mouth in the bush. MSF provided medical care to communities across the country in response to the growing health needs.

MSF also strived to provide medical services to pregnant women caught in the grind of conflicts. Over the year, teams assisted over 300,000 childbirths and worked in maternity hospitals in places where women have few other safe, free options.

People still perish with preventable diseases, prompting MSF to conduct mass vaccinations and treatment. Diphtheria, an almost eradicated disease worldwide, broke out in Yemen and amongst refugees in Bangladesh. DRC experienced its most significant cholera outbreak in 20 years, affecting 24 out of its 26 provinces. Measles also surged across eastern DRC where MSF treated 14,000 patients and vaccinated a million children in just eight months.

Tuberculosis (TB) persists as a huge concern. Together with partner organisations and local health authorities, we are pioneering and testing new drug-resistant treatment options, including regulated trials in South Africa and Uzbekistan.

As the largest non-government provider of TB treatment worldwide, we advocated for scaling up the use of the new and effective TB drugs bedaquiline and delamanid, and for the improvement of patient care and treatment.

Last, but not least, we are hugely grateful to all our donors, who make our work possible, and to all our dedicated MSF staff, who give their time and skills to assist others, at times at considerable risk to themselves. We don't forget that up to this day, our three colleagues – Philippe, Richard and Romy – abducted in DRC in 2013, remain unaccounted for. We are deeply saddened and remain committed to finding them: our thoughts are with you, your friends and families.

中非共和国再度爆发全面的冲突。一些城镇变得空无一人,人们到教堂、清真寺甚至是无国界医生的医院避难,或躲在丛林中苟全性命。为应对不断增长的医疗需要,无国界医生向全国多个社群提供医疗护理。

无国界医生亦竭尽所能向被困于冲突中的孕妇提供医疗服务,团队在年内协助逾30万名婴儿出生,并在妇女缺乏安全和免费医疗服务的地区支援妇产科医院工作。

不少人仍被可预防的疾病夺去性命,因此无国界医生进行大型疫苗接种运动和提供治疗。白喉这种几乎已绝迹的疾病,先后席卷也门和孟加拉国的难民营。刚果民主共和国经历了20年来最严重的霍乱疫情,全国26个省份中有24个受到影响。麻疹亦于该国东部肆虐,无国界医生共治疗了1.4万名病人,并于短短8个月内为100万名儿童接种疫苗。

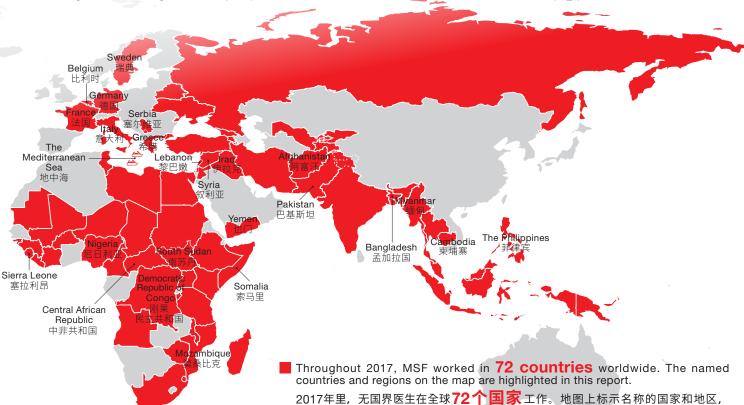
结核病依然是重大的问题。无国界医生与伙伴机构和各地卫生部门合作,引入和测试全新的耐药结核病治疗方案,包括在南非和乌兹别克斯坦等地进行受监管的试验。

作为全球最大的非政府结核病治疗提供者,我们倡议扩大使用全新而有效的结核病药物贝达喹啉和德拉马尼,以及改善对病人的护理和治疗。

最后,有赖于所有捐助者的支持,让我们的工作得以实行。同时,也感谢所有竭尽心力的无国界医生员工,付出时间和技术去帮助他人,有时甚至将自己置身危险之中。我们不会忘记菲利普、理查德和罗米这三位同僚,他们于2013年在刚果民主共和国被掳走,至今下落不明。我们非常难过,并会继续全力寻找他们:我们牵挂着你们和你们的亲友。

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

Dr. Natasha Reyes Interim Executive Director, MSF-Hong Kong 无国界医生(香港)署任总干事 韦达莎医生



在本活动报告内有项目简介。

The place names and boundaries used in this report do not reflect any position by MSF on their legal status. 本报告内采用的地名及边界并不反映无国界医生对其法律地位的立场。

Projects by Country

各地项目



An injured Rohingya boy sits on his bed at MSF's medical facility in Cox's Bazar, Bangladesh. 在无国界医生位于孟加拉国科克斯巴扎尔的医疗设施里,一名受伤的罗兴亚男孩坐在病床上。

Bangladesh

Asia

After a concerted campaign of violence unleashed in Rakhine, Myanmar since August 2017, over 660,000 Rohingya fled to neighbouring Bangladesh. By the end of the year, the total number of Rohingya refugees in the country was 830,000. In Cox's Bazar, MSF massively scaled up its activities, managing 19 health posts, 3 primary health centres and 4 patient facilities. Between July and December, the number of the patients seen by MSF teams each day increased 10-fold.

People who were suspected of having measles and diphtheria also sought care at MSF facilities. Teams treated 2,625 patients for diphtheria, and worked with the Bangladeshi health authorities to extend vaccination coverage. Nearly 200,000 people were vaccinated. Furthermore, they supplied 8 million litres of chlorinated water and installed 1,700 latrines and 170 wells to ensure that newly arrived refugees had access to safe drinking water and adequate sanitation facilities.

Between August and December, MSF treated 120 victims of sexual violence. The majority were rape victims, and one-third were under the age of 18.

Myanmar

Armed conflict, displacement, intercommunal tensions and statelessness led to a significant crisis in Myanmar in 2017, while provision of medical care further diminished.

In northern Rakhine, MSF used to offer primary and reproductive healthcare and support government hospitals with HIV care. Teams conducted 36,000 medical consultations and 1,045 referrals until August 2017. However, three of the four MSF clinics were destroyed amidst violence. Our operations were restricted because of a ban on international staff and a lack of authorisation to carry out medical activities.

In Wa Special Region 2, due to a worsening political situation and the inability to secure access for international staff, MSF activities ended in mid-2017.

In Kachin and Shan, while renewed conflict displaced 100,000 people, MSF kept treating 17,000 patients with HIV and tuberculosis.

MSF continued its work in eastern Rakhine, Yangon, Tanintharyi region, and opened a new programme in Naga.

亚洲

孟加拉国

自2017年8月缅甸若开邦发生一系列暴力冲突后,超过66万名罗兴亚人逃难至邻国孟加拉国。截至2017年底,栖身于孟加拉国的罗兴亚难民总数达83万。在科克斯巴扎尔,无国界医生扩大救援行动,设有19间医疗站、3间基本医疗中心和4间医疗设施。7月至12月期间,无国界医生团队每天治疗的病人人数增加了10倍。

怀疑感染麻疹和白喉的病人相继来到无国界医生的医疗设施 求医。医疗队治疗了2,625名白喉患者,并与孟加拉国卫生部门合作,扩大疫苗接种覆盖率,为近20万人接种了疫苗。此外,团队提供了800万公升经氯消毒的水,并安装了1,700个厕所和170口井,以确保最近抵达的难民能够获得清洁的饮用水和足够的卫生设施。

8月至12月期间,无国界医生治疗了120名性暴力受害者。大 多数是强暴受害者,三分之一的人未满18岁。

缅甸

2017年,武装冲突、流离失所、不同族群之间的紧张关系和罗兴亚人的无国籍状态,导致缅甸出现重大危机,医疗服务却进一步减少。

在若开邦北部,无国界医生多年来一直提供基本医疗和生殖健康服务,并支持当地公营医院的艾滋病治疗。截至2017年8月,救援队进行了3.6万次诊治,并转诊了1,045个病例。然而,无国界医生的四个诊所中有三个在暴力事件中被破坏。由于国际救援人员不获准前往当地,以及无国界医生不获准进行医疗行动,因此组织在当地的项目受阻。

在佤邦第二特区,由于政局恶化,以及未能确保国际救援人员能进入当地,无国界医生于年中结束在当地的工作。

在克钦邦和掸邦,当新一轮冲突导致10万人流离失所,无国界医生仍在当地治疗1.7万名艾滋病和结核病病人。

无国界医生继续在若开邦东部、仰光和德林达依地区工作, 并在那加展开新项目。

Afghanistan

After the US airstrikes destroyed the trauma centre in Kunduz in 2015, MSF returned to the city two years later. MSF opened an outpatient clinic for patients with minor injuries or diseases. We continued to run another small clinic outside Kunduz and plans to open a new trauma hospital in 2019.

In the western part of the capital Kabul, MSF continued to support the Dasht-e-Barchi hospital that serves a million people and is the only facility for emergency and complicated deliveries. The team assisted 16,000 deliveries in 2017. MSF also started to support another hospital in the area with staff, training and essential drugs to increase the facility's capacity to provide maternity services.

The first patients on MSF's drug-resistant tuberculosis programme in Kandahar completed their treatment and were discharged. The programme introduced a shorter and better treatment regimen lasting 9 months only instead of 20 months.

Cambodia

MSF continues to offer free diagnosis and treatment for hepatitis C patients in the capital Phnom Penh. In 2017, MSF treated around 3,000 patients with direct-acting antivirals. The new drugs, with a cure rate of over 95%, are proven effective yet are expensive. Through the project, MSF aims to simplify diagnosis and treatment, show its cost-effectiveness and make it replicable in other countries.

In northern Cambodia, MSF is assessing its strategies to help eliminate drug-resistant malaria through a combination of screening, testing, and treatment. Research carried out in 2017 provides an insight into the development of resistance to the three main drugs used to treat Plasmodium falciparum malaria. The outcomes of the research will be evaluated, and recommendations will be made for replication elsewhere.

Pakistan

Women's and children's health remains our focus in Pakistan. In 2017, MSF assisted over 15,000 births across the country. In the city of Quetta, Balochistan province, the MSF's paediatric hospital admitted over 450 newborns and nearly 1,200 severely malnourished children before its closure in October. In Timergara, the newborn unit of the MSF-supported hospital doubled its capacity, and was upgraded to include an eight-bed 'kangaroo mother care' room.

In a slum in Karachi, nearly 800 hepatitis C patients started treatment provided by MSF, with over 690 patients completing the course. In Peshawar, MSF launched an awareness campaign in areas affected by the dengue outbreak in August.

MSF was forced to close its projects in the Federally Administered Tribal Areas in northwestern Pakistan. The authorities did not renew the certificates required for carrying out medical activities, leaving people without access to free and high-quality healthcare.

The Philippines

MSF responded to violent clashes between the Philippine armed forces and two pro-Islamic State factions in Marawi, Mindanao region from June 2017. Over 370,000 people were displaced from the city and its surrounding areas. MSF provided psychological first aid to more than 11,500 people, and distributed 1,500 hygiene kits and 1,150 jerry cans. When the siege was declared over in late October, MSF remained in the area to support the displaced and the returnees.

In the capital Manila, MSF partnered with Likhaan, a local organisation, to improve access to sexual and reproductive health services in two densely populated and impoverished districts. In 2017, the team conducted an average of 1,380 consultations each month. With concerted efforts from Likhaan, Manila City Health and MSF, 23,000 girls were vaccinated against the human papillomavirus virus (HPV) that is responsible for cervical cancer.

阿富汗

美军于2015年的空袭,摧毁了无国界医生在昆都士的创伤中心。两年后,组织重返该市开设门诊诊所,为伤势或病情较轻者提供医疗护理,同时继续在昆都士市外运作另一间小型诊所,并计划于2019年开设新的创伤医院。

在首都喀布尔西部,无国界医生继续支持达什特巴尔切医院。这间医院服务100万人口,为该区唯一一间能处理紧急分娩和妊娠并发症的医疗设施。2017年,医疗队共协助逾1.6万名婴儿出生。组织亦开始支持该区另一间医院,通过提供人手、培训和基本药物,提升该医院的妇产科服务。

无国界医生在坎大哈开展了耐药结核病项目,首批病人已完成治疗出院。此项目引入为期九个月的疗程,较以往长达20个月的治疗需时较短,而效果较好。

柬埔寨

无国界医生于2017年继续在首都金边为丙型肝炎患者提供免费诊断和治疗,以直接抗病毒药物治疗了约3000名病人。这些新药的治愈率逾95%,虽已证实有效,但药价高昂。无国界医生旨在通过此项目简化丙型肝炎的诊断和治疗,显示出其成本效益,从而令其他国家仿效。

在柬埔寨北部,无国界医生正审视其筛查、检测和治疗三管 齐下的策略,能否有助杜绝耐药性疟疾。2017年进行的研 究,就恶性疟原虫引致的疟疾对三种主要药物产生耐药性提 出见解。无国界医生将评估研究结果,为策略推行至其他地 方作出建议。

巴基斯坦

妇女和儿童的健康依然是无国界医生在巴基斯坦的工作重点。 2017年,组织在全国共协助超过 1.5万名婴儿出生。在俾路支省圭达市,无国界医生的儿科医院于10月关闭前,接收了逾450名新生婴儿和近 1,200名严重营养不良儿童住院。在蒂默加拉无国界医生支持的医院,新生婴儿部可接收的病人人数增加一倍,部门内增设了一间有八张病床的「袋鼠护理法」母婴护理室。

在卡拉奇的贫民窟, 近800名丙型肝炎患者开始接受由无国界医生提供的治疗, 逾690人完成疗程。在白沙瓦, 组织于8月在爆发登革热的地区展开健康推广活动。

在该国西北部联邦直辖部落地区,当局未有更新无国界医生进行医疗活动所需的证明文件,无国界医生被迫关闭当地所有项目,令人们得不到免费且优质的医疗护理。

菲律宾

菲律宾军方与两支亲伊斯兰国武装派系在棉兰老岛马拉维的激烈战斗,令该市及周边地区超过37万人失去家园。无国界医生自2017年6月起向逾1.1万人提供心理急救援助,并分发卫生用品套装1,500套和水桶1,150个。10月下旬,当围城的状况终宣告结束,组织继续留守当地,支持仍然流徙和重返家园的人们。

在马尼拉,无国界医生与当地组织Likhaan合作,在两个人口稠密的贫民区提供性与生殖健康服务。2017年,救援队平均每月进行1,380宗诊症。在Likhaan、马尼拉市卫生局和无国界医生通力合作下,超过2.3万名女童接种了子宫颈癌疫苗。



In Tanganyika province, DRC, an emergency team is sent to a village where intercommunal fighting occurred to reach the wounded. 在刚果民主共和国坦噶尼喀省,一支紧急救援队被派往刚发生族群武装冲突的村落,为伤者提供治疗。

Africa 非洲

Democratic Republic of Congo (DRC)

New waves of violence erupted in DRC, where 4.1 million people were internally displaced in 2017 alone. In Tanganyika province, MSF increased its medical services in and around two towns. In Greater Kasai region, teams performed surgery on war-wounded patients, provided care for victims of sexual violence, and ran mobile clinics in city outskirts where health centres were looted, destroyed and burned. As the situation in the Kivus deteriorated, MSF provided 1.5 million outpatient consultations and admitted 95,000 patients to its facilities.

Sixty-two emergency interventions were launched this year, including vaccinations of a million children against measles and treatment of another 14,000 for the disease. From mid-2017, MSF responded to one of the biggest cholera outbreaks of the last two decades in DRC, and cared for 20,000 patients nationwide.

Malaria is endemic and the main cause of death in the country. In 2017, MSF treated more than 850,000 malaria patients, and has been introducing large-scale community-based projects to improve treatment.

刚果民主共和国

刚果民主共和国爆发多轮新的暴力冲突,仅2017年,就有410万人在国内流离失所。在坦噶尼喀省,无国界医生在两个城镇及周边地区加强提供医疗服务。在大开赛地区,救援队为战争伤者进行手术,向性暴力受害者提供护理,并在医疗中心被抢掠、破坏和烧毁的市郊地区开设流动诊所。随着南北基伍省的局势恶化,组织在当地进行了150万次门诊诊症,并接收了9.5万名住院病人。

无国界医生于年内展开了62项紧急救援行动,包括为100万名儿童接种麻疹疫苗和医治1.4万名已受感染的病童。由年中起,组织应对了该国20年以来其中一次最大型的霍乱疫情,在全国共治疗了2万名患者。

疟疾在刚果民主共和国属风土病,亦是该国人口最主要的死因。2017年,组织医治了超过85万名疟疾病人,并持续推行以社区为本的大型项目来改善治疗。



An MSF doctor checks on a patient who has recently arrived at the hospital in Bangassou, CAR.

在中非共和国班加苏的医院, 前线医生为一名最近来求医的病人检查。



As renewed conflict further exacerbated mass displacement in CAR, MSF continued to offer outpatient and inpatient care in 10 provinces. In 2017, teams assisted 17,855 births, performed 8,900 surgical interventions and conducted 749,000 outpatient consultations. MSF also adapted six projects to address the urgent needs of people directly affected by the spiraling conflict. Sadly, teams were forced to suspend and even end their support to health facilities in Bangassou and Paoua due to the worsening security situation.

Networks of community workers were set up to offer free testing and treatment of malaria in various locations. 445,000 malaria patients were treated throughout the year. Vaccination campaigns were organised to protect children from diseases such as diphtheria, hepatitis B, measles, and pneumonia, enabling 185,400 children to be vaccinated.

Mozambique

Mozambique is struggling to curb a dual epidemic of HIV and tuberculosis that claims 34,000 lives each year.

MSF cares for vulnerable and stigmatised groups in the country. In Maputo, the pilot project targets intravenous drug users, aiming to develop a model of care that includes comprehensive harm reduction. Out of 150 patients, one-third and one-fifth are HIV and hepatitis C positive, respectively. Ten of the 27 hepatitis C positive patients who started treatment were cured, the first in the country, as treatment was previously unavailable. In Tete and Beira, the team provides sexual and reproductive health services, including HIV testing and treatment for sex workers and men who have sex with men (MSM). In the last quarter of 2017, 1,270 sex workers and almost 220 MSM were followed up.

Nigeria

In 2017, Nigeria saw its largest meningitis C outbreak in ten years. MSF responded by supporting the Ministry of Health in the four worst-affected states. In Sokoto town, MSF ran a 200-bed facility. Teams assisted in a vaccination campaign that reached more than 278,000 people in Sokoto and Yobe.

Between August and November, MSF responded to a cholera outbreak in Maiduguri, Monguno and Mafa, operating four cholera treatment facilities and treating over 4,000 patients.

In Borno in the northeast, armed conflict has displaced two million people. This year, MSF conducted emergency interventions in 11 towns, providing nutritional and medical care, relief items, and water and sanitation. Teams conducted 400,000 outpatient consultations and assisted 9,000 deliveries. Our health facility in the isolated town of Rann was bombed by the Nigerian army in January, resulting in at least 90 deaths, including three MSF workers.



In Banki, Borno State, Nigeria, MSF provides several water points, which greatly improve access to clean drinking water.

无国界医生在尼日利亚博尔诺州班吉设置了几个供水点,大大改善了 当地清洁饮用水的供应。

中非共和国

中非共和国再度爆发冲突,当地人口大规模流徙的状况进一步加剧,无国界医生继续在10个省份提供门诊和住院治疗。2017年,救援队协助了17,855名婴儿出生,并进行了8,900次手术和74.9万次门诊诊症。组织亦调整了六个项目,以应对直接受冲突升级影响的人们的迫切需要。由于班加苏和帕瓦的局势持续恶化,救援队被迫暂停甚至中止支持该两处的医疗设施。

无国界医生在多处设立社区人员网络,提供免费疟疾检测和治疗,全年共医治了44.5万名疟疾病人。组织亦推行了疫苗接种运动,以保障儿童免受白喉、乙型肝炎、麻疹和肺炎等疾病困扰,共有18.5万名儿童获接种疫苗。

莫桑比克

莫桑比克正努力遏制艾滋病与结核病双重疫情,这两种疾病每年夺去该国3.4万人的性命。

无国界医生在该国向脆弱无助和饱受污名的社群提供治疗。在马普托,组织推行针对吸毒人士的试点项目,旨在发展出包括全面减轻毒品伤害的护理模式。在150名病人当中,分别有三分之一和五分之一的人感染艾滋病和丙型肝炎。27名接受丙型肝炎治疗的病人中有10人成功治愈,是该国首批能够接受治疗并且康复的患者。在太特市和贝拉市,组织向性工作者和男男性接触者提供性与生殖健康服务,包括艾滋病病毒测试和治疗。在2017年最后一季,组织跟进了1,270名性工作者和近220名男男性接触者。

尼日利亚

2017年,尼日利亚爆发10年来最大规模的丙型脑膜炎疫情,无国界医生在四个最受影响的州支持当地的卫生部门。在索科托镇,组织设有一间有200张病床的医疗设施。救援队又协助展开疫苗接种运动,为索科托州和约贝州逾27.8万人注射疫苗。8至11月期间,为应对在迈杜古里、蒙贡诺和马法爆发的霍乱疫情,无国界医生设立四间霍乱治疗设施,并医治逾4,000名病人。

在东北部的博尔诺州,武装冲突已令200万人流离失所。这一年无国界医生在11个城镇进行紧急救援行动,提供营养治疗和医疗护理,分发救援物资,以及进行水利卫生工作。救援队进行了40万次门诊诊症,并协助了9,000名婴儿出生。在被围困的莱恩镇,我们的医疗设施于1月遭尼日利亚军方轰炸,造成至少90人死亡,当中包括组织的三名工作人员。



An MSF nurse checks on a woman at the hospital in Koinadugu district, Sierra Leone.

在塞拉利昂北部科伊那多谷区的一间医院, 无国界医生的护士正为一名妇女检查。

Sierra Leone

MSF contributes to combating high mortality rates among pregnant women and children while the Sierra Leonean health system is recovering from the impact of the Ebola outbreak. MSF supports the paediatric, maternity, obstetric and neonatal services of various facilities in three districts. In a hospital in Koinadugu district, MSF assisted over 1,300 births and treated almost 620 women with pregnancy complications. In Kenema district, one of the hardest hit areas during the Ebola outbreak, a new teaching hospital that focuses on reducing maternal and child mortality will open in 2018.

In the capital Freetown, MSF continued to respond to emergencies. MSF provided clean water to more than 3,000 people at three different points after the landslides and floods that occurred in August. Teams also assisted the health authorities during a cholera vaccination campaign that reached around 120,000 people in high-risk areas.

Somalia

The situation in war-ravaged Somalia remains extreme. After withdrawing from the country in 2013 following repeated attacks on our teams, MSF continuously monitored the situation and re-engaged with relevant authorities. Despite ongoing security concerns, MSF returned to Somalia in May this year, running nutrition programmes and supporting paediatric and emergency services in a regional hospital in the Puntland region. In response to a surge of malnutrition in the Horn of Africa, MSF launched emergency projects in November in Galmudug state, as well as in Gedo region which is on the border with Ethiopia. Teams also carried out exploratory missions to assess the medical and humanitarian needs in Baidoa.

However, the scale of MSF activities in the country remains limited. Our ability to operate depends largely on the acceptance and active support we receive from the authorities and host communities.

South Sudan

Insecurity remains a challenge for humanitarians in this conflict-ridden country. Violent clashes, attacks on health facilities, and lootings forced MSF to temporarily suspend its activities and evacuate its teams from four locations in Greater Upper Nile region. In Yei, Equatoria region where MSF manages two clinics, six MSF staff were arrested by the South Sudanese army forces while on duty in January. Though they were subsequently released, the incident raised serious concerns.

As violence led to further civilian displacement, MSF continued to develop a decentralised model of primary healthcare to reach as many dispersed communities as possible. Teams started running clinics on boats to serve people in isolated villages along the Akobo and Pibor rivers. A system was also set up in which local staff travelling with displaced people could continue to provide medical care.



A nurse feeds a child who has been admitted with severe acute malnutrition in an MSF-supported hospital in Puntland, Somalia. 在索马里邦特兰地区一间由无国界医生支持的医院,护士正在喂一名因严重急性营养不良入院的病童。

塞拉利昂

塞拉利昂的医疗系统受埃博拉疫情严重影响,现正逐步恢复。无国界医生致力于协助该国应对孕产妇和儿童死亡率高的问题,在三个地区不同的医疗设施支持儿科、妇产科和新生婴儿护理服务。在科伊那多谷区,组织协助逾1,300名婴儿出生,治疗近620名出现妊娠并发症的孕妇。在其中一个受埃博拉疫情影响最严重的地区——凯内马区,组织将于2018年开设以降低孕产妇和儿童死亡率为重点的教学医院。

在首都弗里敦,无国界医生继续应对紧急状况。当地于8月发生山泥倾泻和水灾后,组织在三个地点向逾3,000人提供清洁的饮用水;救援队亦协助卫生部门进行霍乱疫苗接种运动,在一些高危地区为近12万人注射疫苗。

索马里

饱受战争蹂躏的索马里局势仍然紧张。无国界医生因救援队多次遇袭,于2013年撤出该国,但依然继续观察当地情况,并与有关部门重新接触。无国界医生对索马里的不安全状况仍有忧虑,但于2017年5月重返该国,在邦特兰地区的一间地区医院开设营养治疗项目,并支持该医院的儿科和急诊室服务。为应对非洲之角激增的营养不良个案,组织于11月在加勒穆杜格州以及与埃塞俄比亚接壤的盖多地区展开紧急项目;救援队亦到拜多阿评估当地的医疗和人道需要。

不过,无国界医生在该国的项目规模仍然有限。我们在当地的救援能力,主要取决于有关当局及当地社群对我们的接受和支持程度。

南苏丹

在这个冲突频繁的国家,动荡的局势仍然是人道工作者的一大挑战。激烈冲突、针对医疗设施的袭击和抢掠,迫使无国界医生暂停在上尼罗大区四个地点的项目,并撤走救援队。无国界医生在赤道地区的耶伊设有两间诊所,1月时组织的六名员工在当值期间遭南苏丹军队拘捕。虽然他们其后获释,但组织高度关注事件。

由于暴力冲突令更多平民流离失所,无国界医生继续以分散模式提供基本医疗服务,尽可能接触更多散落的社群。救援队亦开始出动小艇进行流动诊所,救助阿科博河和皮博尔河沿岸偏远村落的居民。组织亦采用新做法,让当地员工与人们一同流徙时可继续提供医疗服务。



Wooden boats filled with people are rescued by MSF in the sea off the coast of Libya. 无国界医生在利比亚对开海域,从遇难木船上救人。

Europe

The Migration Crisis

In 2017, MSF's search and rescue operations that assisted refugees, asylum seekers and migrants on the perilous central Mediterranean route faced increasing political and operational challenges.

Italy, the European Union and Libya have stepped up their efforts to prevent people on the move from reaching Europe, leaving them exposed to widespread violence and arbitrary detention in Libya. Meanwhile, NGOs were threatened and accused of colluding with traffickers and smugglers. In May, MSF witnessed a Libyan coastguard vessel firing gunshots into the air as it approached a boat in distress.

Despite this, MSF rescued 23,850 people through two dedicated vessels. Teams treated people with injuries they had suffered while in Libya and at sea, and heard the accounts of violence and abuses they had experienced throughout the harrowing journey.

Furthermore, MSF provided medical and mental health support, as well as food, shelter and basic essential items for people seeking refuge and safety in Belgium, France, Germany, Greece, Italy, Serbia and Sweden.

欧洲

流徙危机

无国界医生于2017年沿着危险重重的地中海中部路线,援助难民、寻求庇护者和移民,但搜救工作不断面对日益增加的政治和行动上的挑战。

意大利、欧盟和利比亚继续加大力度,阻挠人们前往欧洲。滞留在利比亚的流徙者遭受广泛的暴力对待和任意拘留。与此同时,多个救助流徙者的非政府组织受到威胁,被指控与贩卖和走私人口的分子勾结。5月,无国界医生目睹一艘利比亚海岸防卫队舰艇在驶近遇险船只时,舰艇上有人向天开枪。

尽管如此,无国界医生的两艘搜救船从海上救出了23,850人,救援队为人们在利比亚遭受的伤害提供治疗,同时听取他们在逃难旅程中经历暴力和虐待的惨况。

此外,无国界医生还在比利时、法国、德国、希腊、意大利、塞尔维亚和瑞典,向寻求庇护和安全的人们,提供医疗服务和精神健康支持,以及食物、栖身之所和基本必需品。

Middle East

Iraq

MSF was part of a major emergency response in the battle of Mosul. Several trauma stabilisation posts were positioned close to the front lines. In west Mosul, MSF opened a hospital in June to treat trauma patients as violence escalated. In Hammam al-Alil, 30 kilometres south of Mosul, teams ran an emergency trauma surgery hospital until July, and set up a primary healthcare centre. In Al-Hamdaniya, southeast of Mosul, MSF established a 40-bed department at a hospital with another NGO to provide post-operative care and rehabilitation for the war-wounded.

Across the country, nearly 3 million people were not able to return home due to conflict and violence. MSF delivered basic healthcare, nutrition programmes, maternal health services, treatment for chronic diseases and mental health support for displaced people in 10 governorates throughout the year.

Lebanon

As neighbouring conflicts continue to spiral, MSF works to meet the growing needs of Syrian refugees and Lebanese communities in the country. In 2017, teams carried out more than 291,000 outpatient consultations and 11,100 mental health consultations, and assisted almost 5,600 births.

In Bekaa Valley, MSF expanded its services with the opening of a paediatric ward in a government hospital in March, providing inpatient and elective surgical care to vulnerable children. A paediatric intensive care unit was added in December.

In north Lebanon, MSF implemented a water and sanitation programme in informal tented settlements that were not covered by other humanitarian organisations. In the largest Palestinian refugee camp located in southern Lebanon, the team launched a new home-based care programme for patients who suffer from mobility problems.

Syria

MSF continues to provide assistance in Svria, but its activities are severely limited by insecurity and constraints on access.

Across northern Syria, MSF ran or directly supported 13 health facilities, and deployed mobile clinic and vaccination teams. During the battle of Raqqa in June, MSF set up a medical stabilisation unit near the front lines, and supported the hospital in Tal Abyad which admitted hundreds of injured patients for major surgery. In other parts of the country where MSF could not be present, MSF maintained its remote support to medical facilities.

In 2017, 11 medical facilities supported by MSF were hit in targeted or indiscriminate attacks. In May, MSF suspended all its medical support in East Ghouta for around a month in response to nonrespect of healthcare during intense fighting between armed opposition groups.

Yemen

Outbreaks of diseases exacerbated the already dire humanitarian situation in war-ravaged Yemen. In April, a cholera outbreak prompted MSF to open 37 cholera treatment centres and oral rehydration points in nine governorates. Nearly 101,500 cholera patients were admitted over the year. While the cholera epidemic subsided, diphtheria, which was last seen in Yemen in 1992, re-emerged. In response, MSF ran diphtheria treatment units in lbb city and Ad Dhale and supported two others. Teams treated over 400 patients with the disease.

Overall, MSF scaled up its activities in the country, working in 13 health facilities in 12 governorates and supporting 20 others. Yet in November, a complete naval and air blockade on humanitarian staff and cargo was imposed by the Saudi-led coalition. Our capacity to assist vulnerable communities was hampered by arbitrary restrictions on aid operations.

伊拉克

在摩苏尔战事中, 无国界医生是参与主要紧急救援行动的一 分子,在靠近战线的位置设立数个稳定伤员状况的医疗站。 在摩苏尔西部,组织于6月开设了一间医院,以治疗因暴力升 级受创的伤者。在摩苏尔以南30公里的哈曼阿里尔,救援队 运作一间紧急创伤手术医院至7月,并设立另一间基本医疗中 心。在摩苏尔东南部的哈姆达尼耶镇, 无国界医生与另一个 非政府组织联手设立有40张病床的医院部门,为战争伤者提 供手术后护理和复健服务。

伊拉克全国有近300万人在冲突和暴力下未能重返家园。无 国界医生于年内在10个省份,为流离失所者提供基本医疗、 营养治疗、孕产妇健康服务、慢性病治疗和精神健康支持。

黎巴嫩

随着邻近国家的冲突持续升级, 无国界医生在黎巴嫩致力应 对叙利亚难民和黎巴嫩社群日益增长的需求。2017年, 救援 队进行了 29.1万次门诊诊症, 1.1万次精神健康辅导, 并协助 近5,600名婴儿出生。

在贝卡谷地,无国界医生于3月扩大一间公立医院的服务, 开设儿科病房, 向脆弱的儿童提供住院护理和进行选择性手 术。12月,组织在该院增设儿童危重症监护病房。

在黎巴嫩北部, 无国界医生在没有其他救援组织工作、由帐 篷搭建的非正式营地进行水利卫生项目。在黎巴嫩南部最大 的巴勒斯坦难民营, 救援队展开了新的住家护理项目, 照顾 行动不便的病人。

叙利亚

无国界医生继续在叙利亚提供援助,不过,受当地不稳的局 势和进入境内地区限制的影响,项目严重受阻。

在叙利亚北部,无国界医生设立或直接支持13间医疗设施, 并出动救援队进行流动诊所和提供疫苗接种。6月拉卡战事期 间,无国界医生在靠近战线的位置设立稳定伤员状况的医疗 站,并支持在塔勒艾卜耶德的医院。该医院接收了数以百计 需接受大型手术的伤者。至于无国界医生无法到达的地区, 组织向当地的医疗设施提供遥距支持。

2017年,11间无国界医生支持的医疗设施遭到针对性袭击, 或在无差别袭击中遭受破坏。5月,由于武装反对派爆发激战 时不尊重医疗设施的中立性,组织暂停对东高塔的所有医疗 支持约一个月。

也门

在饱受战争蹂躏的也门, 疫症爆发令原本已经严峻的人道状 况进一步恶化。4月, 当地爆发霍乱疫情。无国界医生在9个 省开设了37间霍乱治疗中心和口服补液站,全年共接收超过 10.1万名病人。当霍乱疫情缓和时,自1992年以来在也门 未出现过的白喉重现。组织在伊卜市和达利设立白喉治疗中 心,并支持另外两间治疗中心,救援队医治了逾400名病人。

整体而言,无国界医生加强在也门的救援行动,在12个省共 13间医疗设施工作,并支持另外20间医疗设施。然而于11 月,以沙特阿拉伯为首的联军向救援组织的人员和物资实施 全面的海空封锁。我们为脆弱社群提供的援助, 因肆意限制 救援行动的举措而受阻碍。



After receiving care at the Tabarre hospital in Port-au-Prince, Haiti for a year, the patient is recovering from his injuries. 这名伤者在海地太子港泰巴尔创伤医院接受治疗一年后,正逐步康复。

The Americas

Haiti

In the capital Port-au-Prince, MSF continues to provide specialised care in three temporary facilities built after the 2010 earthquake. That includes the country's only specialised centre to treat patients with severe burns. In 2017, the team conducted 1,300 emergency room visits and admitted 700 patients. The two other facilities are the 176-bed centre targeting pregnant women and newborns with complications, and the Tabarre trauma hospital. Both teams assisted 4,900 births and performed 6,500 surgical operations throughout the year.

In Port-à-Piment in the west, MSF launched a new project in an area devastated by Hurricane Matthew in 2016. The team focuses on improving maternal health services in the local health centre. Since MSF's support began, the number of births in the facility has quadrupled.

MSF treats cholera patients, as well as supports health authorities with epidemiological surveillance, assists with vaccinations, and organises water and sanitation activities to prevent its spread in various locations.

Venezuela

Political and economic crisis and the social consequences continue to have a serious impact on Venezuelans. In 2017, MSF expanded its activities in the capital Caracas, providing mental health support to victims of urban and sexual violence, in collaboration with local organisations and public institutions. MSF also started working in Maracaibo, the second largest city, by offering ante- and post-natal checks, contraception, emergency deliveries and psychological support to young people and victims of sexual violence. Furthermore, MSF advocates for considering sexual violence a medical emergency and integrating medical services and psychological care to help survivors.

Protests that took place in the first half of 2017 resulted in over 100 deaths and thousands of wounded. MSF supported hospitals in five cities with medical supplies, psychological support and technical assistance.

美洲

海地

在首都太子港,无国界医生继续在三间于2010年地震后兴 建的临时设施提供专科护理,其中包括全国唯一专门治疗严 重烧伤者的中心。2017年, 救援队进行了1,300宗急诊室诊 症,并接收了700人入院。另外两间设施分别是针对出现并发 症的孕妇和新生婴儿、有176张病床的医疗中心,以及泰巴 尔创伤医院。在这两间设施工作的医疗队于全年合共协助了 4,900名婴儿出生,并进行了6,500宗手术。

在西部皮芒港,无国界医生于2016年遭飓风马修破坏的地区 展开了新项目, 集中改善当地一间医疗中心的孕产妇健康服 务。自组织开始提供支持后,该中心的出生人数增加了三倍。

此外,无国界医生在不同地点治疗霍乱病人,并支持卫生部 门进行流行病学监察、协助接种疫苗和进行水利卫生工作, 以防止疾病传播。

委内瑞拉

政治和经济危机以及其引致的种种社会后果,继续对委内瑞拉 人民造成严重的影响。 2017年, 无国界医生扩大在首都加拉 加斯的项目,与当地组织和公营机构合作,向城市暴力和性暴 力的受害者提供精神健康护理。组织开始在第二大城市马拉开 波工作, 为年轻人和性暴力受害者提供产前和产后检查、避孕 服务、紧急分娩和心理支持。无国界医生亦提倡当地把性暴力 列为紧急医疗状况,并结合医疗服务和心理支持去帮助性暴力 幸存者。

2017年上半年,委内瑞拉爆发示威,造成超过100人死亡,数 千人受伤。无国界医生支持了五个城市的医院, 向它们提供医 疗物资、心理支持和技术协助。

Feature

特写



In northern Syria, a young boy was hit by an astray bullet when he was at home. The MSF medical team at the Tal Abyad hospital are trying to save his life.

在叙利亚北部, 一名小男孩在家中被流弹击中, 塔勒艾卜耶德医院的无国界医生医护人员正尽力抢救他的性命。

Performing Trauma Surgery in the Public Eye – and in the World's Forgotten Wars

创伤手术:抢救受关注与被遗忘的战争伤者

Wars are raging not only in places that receive lots of attention, but also in countries that are often forgotten by the rest of the world. Regardless of the locations, MSF strives to take the best care of its trauma patients possible.

MSF trauma response in northern Syria, similar to other projects in Yemen and Iraq, focuses on the treatment of blast wounds and high-velocity projectile injuries. That requires technical expertise including resuscitation, critical care, care of burn wounds, and treatment of complex abdominal, vascular and orthopaedic injuries. Where possible, teams set up trauma stabilisation points so that patients can receive first aid and emergency care, and be triaged and transported efficiently to a hospital where they can get lifesaving surgery.

战争带来的无情伤害和残酷破坏,不因国界而异。然而,在某些国度爆发的战争备受关注,在另一些地方却乏人问津。不管战火在哪里燃起,无国界医生都会竭尽所能,为伤者提供最好的治疗和护理。

无国界医生在叙利亚北部的创伤项目,与在也门和伊拉克的项目相似,主要治疗爆炸和高速炮弹造成的创伤。处理这些创伤需要专业技术,如协助伤者复苏、危重伤者护理、烧伤护理和治疗复杂的腹部、血管和骨科创伤等。在可行的情况下,医疗队会设立稳定伤员状况的医疗站,为伤者提供急救和较迫切的护理,并快速地按伤势把病人分流和运送至可进行救命手术的医院。

MSF activities in Syria in 2017 • 2017年无国界医生在叙利亚的救援行动

- Approximate locations where MSF was running facilities and activitiesties 直接运作医疗设施和进行救援工作的大概位置
- Pegions where MSF provided remote technical and material support 向医疗设施提供远程技术和物资支持的地区





An explosive device is found under the rubble in Ragga city, northern Syria. These explosive devices have deadly impact on civilians fleeing or attempting to return home. 叙利亚北部城市拉卡的废墟中发现一个爆炸装置。这些爆炸装置对逃离战火或是尝试重返家园的平民



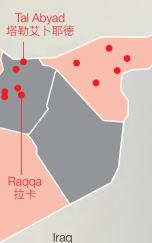
This man suffers from a leg fracture after he was injured in a mine blast in Ragga. MSF doctors at the Tal Abyad hospital are performing skin grafting for him in the operating

这名男子在拉卡的一次地雷爆炸中受伤,导致腿部骨折。塔勒艾卜耶德医院的医生正在手术室 内为他进行植皮手术。



Mainland Chinese anaesthetist Dr. Xue Feng Li worked in northern Syria's Tal Abyad hospital, the only civilian trauma facility in the area and the main referral centre for patients coming from Ragga. He was part of a team that managed a mass casualty incident when a group of residents fled a village previously held by the Islamic State. One of his patients who lost both legs told him how he got injured. "There were landmines planted along the route. As the villagers made their escape, someone stepped on an improvised explosive device and triggered simultaneous explosions of the others planted nearby. Many people were killed, including his two sons," said Dr. Li.

中国内地的麻醉科医生李雪峰曾在叙利亚北部的 塔勒艾卜耶德医院参与救援任务。这间医院是该 区唯一的民用创伤设施, 主要接收由拉卡转介的 伤者。当地有一班村民逃离曾被伊斯兰国控制的 村落时,发生大规模伤亡事故,李医生是应对该 次事故的医疗队成员之一。其中一名伤者在事故 中失去双腿, 李医生忆述该名伤者指: 「路上埋了 不少地雷。当村民逃难时,有人踏中一个简易爆炸 装置, 触发埋在附近的其他装置同时爆炸。很多人 当场被炸死,包括该名伤者的两个儿子。」



伊拉克

造成致命的影响。

Filipino surgeon Dr. Evangeline Cua who worked in Tal Abyad hospital thought that performing trauma surgery in war zones was not always about the trauma itself. "The most challenging part is to gain acceptance from the local community and to demonstrate that we treat everyone. Because of the war, the locals do not trust the foreigners who come here. They prefer to be treated at private facilities even if they would rack up serious debt. Our presence and medical actions have gradually changed this. We just do our best to treat all in need."

菲律宾外科医生夸亚曾在塔勒艾卜耶德医院工作,她认为在战区 中进行创伤手术,并非只是治疗创伤。「最具挑战的一环是要令 当地社群接纳我们, 让他们明白我们会医治每一个人。战争导致 当地人不信任到当地的外国人,即使他们债台高筑,也宁愿选择 到私家医疗设施接受治疗。我们的出现和进行的医疗行动,逐渐 改变了他们的想法。我们会尽力医治所有需要援助的人。」





In South Sudan, MSF surgical team treats a wounded patient in a temporarily setup operating theatre. 在南苏丹, 无国界医生的外科手术团队在临时搭建的手术室内救治伤者。

Unlike the Middle East, many war-torn countries which are largely outside of the public's consciousness have suffered from a neglected medical system for decades. Setting up an emergency surgery programme in a remote area of South Sudan or Central African Republic often means that we have to bring in everything. The injuries, mostly from gunshots, knives, machetes or spears, may be slightly less complex than the ones we see in the Middle East. But the principles of trauma surgery remain the same: resuscitation, damage control surgery, and cleaning of wounds.

The effects of conflict and violence ripple through communities, and thus a community response is essential. Our teams consist not just of surgeons, doctors, anaesthetists and nurses, but also mental health workers, physiotherapists, logisticians, administrators and interpreters, etc. Our trained and dedicated national staff especially are a huge asset in expanding our ability to provide quality surgical care.

然而,并非所有饱受战争蹂躏的国家,都像中东地区一般获公众关注,它们更面对 医疗系统长年荒废的问题。要在南苏丹或中非共和国的偏远地区设立紧急手术项 目,我们必须进口全套装备。医疗队在当地常见的伤势,大多是由枪、刀、砍刀或 矛所造成。虽然未必像中东地区所见的伤势般复杂, 但我们为病人所进行的手术原 理大致相同,包括协助伤者复苏、进行防止伤势恶化的手术和清洁伤口。

冲突和暴力造成的深远影响, 波及一个又一个的社群。因此, 以社区为本的全面应 对工作是非常重要的。无国界医生的救援队不仅有外科医生、医生、麻醉科医生和 护士,亦包括精神健康专家、物理治疗师、后勤人员、行政人员和翻译员等。曾受 训练、尽心尽力的当地员工,更是无国界医生加强提供优质外科服务的主要骨干。





Hong Kong surgeon Dr. Kin Wah Chan was tasked to establish an operating room in Old Fangak, an area affected by tribal conflict in South Sudan. "We had to set up everything from scratch. We managed surgical instrument sterilisation, waste disposal and operating room cleaning, etc. The night we finished the setup, we responded to a mass casualty event because of fierce fighting nearby. Sixteen patients with gunshot wounds flooded in. One surgery after another, we completed all the cases at 8P.M. the next day," said Dr. Chan.

香港外科医生陈健华被派往南苏丹旧凡加克,要在一处深受部落冲突影响的地区开设一间手术室。陈医生分享说:「我们一切都要由零开始,需负责消毒手术仪器、处理医疗废物和清洁手术室等。 我们当晚一完成设置手术室,随即便要应对因附近爆发激烈冲突而导致的大规模伤亡事故。16名枪伤伤者一涌而至,我们为他们一个接一个地进行手术,至翌日晚上8时才完成医治所有伤者。」



At the MSF hospital in Old Fangak, the treatment room which was originally used for wound dressing is converted into an operating room.

无国界医生位于旧凡加克的医院,本来用作清洗伤口的治疗室被改装为手术室。



The converted operating room is equipped with the necessary medical equipment and supplies to save the lives of critically injured people. 完成改装的手术室配备所需的仪器及物资, 以抢救危急的伤者。



MSF logisticians are setting up an inflatable, ready-to-use rapid deployment surgical unit. This unit incorporates the essential components that medical teams need for emergency triage, medical and surgical care.

无国界医生的后勤人员正在搭建一个充气即用的手术室,内里包含 医疗团队在分流和提供医疗和外科护理时所需的装备。



Local workers unload supplies from an MSF plane on the small airstrip of Old Fangak, which can be impassable during the rainy season. This remote town in South Sudan is only accessible by boat or small plane.

在南苏丹旧凡加克,当地工人正从停泊在小型跑道上的无国界医生飞机卸下物资。飞机在雨季是无法通行的,这个偏远小镇只能靠乘船或小型飞机到达。

MSF activities in South Sudan in 2017 • 2017年无国界医生在南苏丹的救援行动



Ethiopia 埃塞俄比亚

oital

Cities, towns or villages where MSF worked 无国界医生展开工作的城市、乡镇或村落

Worldwide Operations Highlights

全球前线工作概要

Below are the highlights of MSF activities around the world in 2017: 以下是无国界医生于2017年在全球进行救援工作的概要:



10,648,300

outpatient consultations 次门诊诊症

Admitted **749,700** inpatients 接收 **749,700** 人次入院治疗

Treated **2,520,600**

宗疟疾个案



eated 201,300 patients with first-line antiretroviral 给予 201,300 treatment at the end of 2017 名病人抗艾滋病第一线药物治疗 (至2017年底)

Treated **15,400** patients of first-line failure with second-line 给予 **15,400** antiretroviral treatment at the end of 2017 名第一线治疗失败的病人抗艾滋病第二线 药物治疗(至2017年底)



Admitted **18,500** patients to tuberculosis first-line treatment 接收 **2** 名病人开始接受结核病第一线治疗 . 名病人开始接受<mark>结核病第一线治疗</mark>

名病人开始以第二线药物进行耐药结核病





Vaccinated 为 **886,300** people against meningitis in response to an outbreak 人接种脑膜炎疫苗以应对疫症爆发

Vaccinated

people against measles in response to an outbreak 人接种麻疹疫苗以应对疫症爆发

Treated

医治 **143,100** patients for cholera 名霍乱病人

Assisted **288,900** women to deliver babies, including caesarean sections 名妇女<mark>分娩,</mark>包括剖腹生产

Performed **110,000** major surgical interventions that require anesthesia

宗涉及麻醉的大型手术

Medically treated **18,800** patients for sexual violence 医治 **18,800** 名性暴力受害者



Treated **5,900** people with hepatitis C 医治 **5,900** 名丙型肝炎患者



Admitted **81,300** severely malnourished children to inpatient feeding programmes 名严重营养不良儿童接受住院营养治疗



Conducted **306,300** individual mental health consultations 次精神健康个人辅导



Rescued and assisted **23,900** migrants and refugees at sea 在海上搜救及协助 **23,900** 名移民及难民

To the Field

无国界医生(香港)派出的前线救援人员







































- Rey Anicete 艾宁伟 PH
- Lukman Hakim Bauty ID
- Honorita Bernasor PH
- *Seng Bu MM
- Yuely Capileno PH
- Cecile Catacutan PH
- Saw Sian Chin MY
- * Marc Richard Dela Cruz PH
- * Marve Duka PH
- 10 Kyi Pyar Min Htike MM
- Sung Hsi Huang 黃崧溪 **TW**
- Htet Aung Kyi MM
- Hei Jim, Jimmy Leung 梁屺瞻 HK
- Chin Siah Lim 林振錫 **SG**
- Yau Tak, Peter Ng 伍有德 HK
- 16 Martiani Oktavia ID
- Anna Kathrina Panganiban PH
- Chandra Sembiring Meliala ID
- 19 Maria Melissa Sindiong PH
- Rangi Wirantika Sudrajat ID
- Sussie Sandra Maria Wirananggapati ID

Surgeons / **Orthopaedic Surgeons** 外科医生 / 骨科医生

- Kin Wah Chan 陈健华 **HK**
- Evangeline Cua PH
- Chi Cheong, Ryan Ko 高志昌 HK
- Zi Yang Zhang 张滋洋 CN









Interested in joining

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.org.cn/fieldwork





























Anaesthetists 麻醉科医生

- Karina Marie Aguilar PH
- Xue Feng Li 李雪峰 CN
- Jacqueline Caracol Ontoy PH
- Reynaldo Soria Jr. PH

Obstetricians / **Gynaecologists**

妇产科医生

- 30 Na An 安娜 **CN**
- Yun Shen 沈芸 CN
- *Yennz Crysyensen Tah ID

Operating Theatre Nurses 手术室护士

- Jerome Dael PH
- Fel Louie Kim Evangelista PH
- Maria Angelina Jimenez PH
- Carmelita Manaois PH
- Roselyn Morales PH
- Romell Nalitan PH

Nurses

护士

- 39 * Man Hin, Hebe Chio 赵雯轩 HK
- Cheuk Pong Chiu 赵卓邦 HK
- Ace Adelson Delizo PH
- * lane Connie Espanta PH
- Stephenn Hernandez PH
- Rodel Lambatin PH
- Ji Monserrat Nacanaynay PH
- * Jose Vincent Sajulga Pagarugan PH
- Honney Maymor Panes PH
- Teresita Baltazar Sabio PH

Midwives 助产士

- * Cherry Agustin PH
- Darwin Diaz PH
- So Ting Wong 黄素婷 **HK**

有兴趣加入

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.org.cn/fieldwork













Pharmacists 药剂师

- Cheryl Armecin PH
- Theingi Aye **MM**
- Anita Jasmine Vicentillo PH















Mental Health Officer 精神健康人员

55 Claudio Moroni **SG**

Epidemiologists 流行病学家

- 56 Chung Yu Chen 陈中瑜 TW
- Mei Wen Zhang 张美文 CN

Logisticians 后勤人员

- * Sylvia Bakarbessy ID
- Denny Capua TL
- Roje Garcia PH
- 51 Sofronio Hernandez Jr. PH
- Hiu Ching, Lucy Lau 刘晓静 HK
- Vincent Li 李耀辉 **HK**
- Jonathan Pillejera PH
- Raniela Rabe PH
- * May Sarah ID
- Andreas Sinaga ID
- * Wei Yee Teoh MY











Administrators / **Financial Controllers** 行政 / 财务人员

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- * Andres Joaquin Hagad PH
- Linda Isack 伊萨克 ID
- So Ching Lam 林素静 HK
- Sally Low SG
- 14 * Ezequiela Macaranas 马嘉兰诗 PH
- Riezl Magtira PH
- * Roslinda Perangin Angin ID
- * Mercenario San Jose PH
- Pratiwi Sutowo ID
- * Joan May Vasquez PH





Coordinators 统筹人员

- * Nardos Belay **KH**
- 图 Yvonne Biyo 卞柔 PH
- * Genevieve Cervantes PH
- Maria Cristina N. De Costo PH
- 84 Allan de la Rosa PH
- 85 * Denis Dupuis 狄培尔 ID
- 86 Dewi Dwiyanti ID
- 87 Roderick Embuido 颜奔涛 PH
- 88 Rita Endrawati 苏涓璐 ID
- Zainal Husni Mubarak ID
- 90 Melvinn Kaibigan *PH*
- 91 * Marianni Peggy Layzanda 黎珊达 ID
- *Beng Kwang Lee SG
- 93 Alan Leung 梁雅伦 HK
- Market Chenery Ann Lim 林菁菁 PH
- 95 Yones Mangiri 万杰烈 ID
- 96 Raffy Matutino PH
- 97 Beverly Molina PH
- 98 Wai Lin Oo 奥卫年 *MM*
- 99 Sumit Punnakari TH
- 100 Natasha Reyes 韦达莎 HK
- 101 Jan Krisna Rodriguez PH
- 102 Francisco Raul Salvador PH
- 103 Monika Seng KH
- 104 Hartini Sugianto 陈芳芳 ID
- 105 Karolina Rita Wulandari ID
- 106*Wei Bing Xu 徐卫兵 CN

The above field workers departed for the following countries / areas on mission in 2017: Afghanistan, Bangladesh, Burundi, Chad, Democratic Republic of Congo, Egypt, Ethiopia, Haiti, India, Indonesia, Iran, Iraq, Jordan, Lebanon, Libya, Malawi, Malaysia, Mozambique, Myanmar, Nauru, Nigeria, Pakistan, Serbia, Sierra Leone, Somalia, South Sudan, Sudan, Swaziland, Syria, Thailand, Tunisia, Ukraine, Uzbekistan, Venezuela, Yemen and Zimbabwe.

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

上述的救援人员于2017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、布隆迪、乍得、刚果民主共和国、埃及、埃赛俄比亚、海地、印度、印度尼西亚、伊朗、伊拉克、约旦、黎巴嫩、利比亚、马拉维、马来西亚、莫桑比克、缅甸、瑙鲁、尼日利亚、巴基斯坦、塞尔维亚、塞拉利昂、索马里、南苏丹、苏丹、斯威士兰、叙利亚、泰国、突尼斯、乌克兰、乌兹别克斯坦、委内瑞拉、也门和津巴布韦。

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、物资供应统筹、副物资供应统筹和资源经理。

Country/Region of Residence 前线救援人员来自的地方

| CN Mainland 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 | PK Pakistan 巴基斯坦 | PH The Philippines 菲律宾 | SG Singapore 新加坡 | TW Taiwan 台湾 | TH Thailand 泰国 | TL Timor-Leste 东帝汶 |

Activity Overview of MSF-Hong Kong in Asia

无国界医生(香港)亚洲活动概览



The interactive exhibit *Senses Square* allows the public to experience MSF's frontline work through five senses. 互动展览「Senses Square」让公众可以通过五官,感受和体验无国界医生的前线救援。

Striving to deploy qualified medical and non-medical professionals to MSF's programmes worldwide, MSF-Hong Kong carried out 142 mission departures in 2017, with Afghanistan, Iraq, Nigeria and South Sudan as the top deployment destinations. Nineteen of them were deployed for their first field assignment whereas another 33 assumed coordinator positions. There were 20 professionals newly recruited from the region. MSF-Hong Kong also facilitated the 10th Annual Surgical Training which was attended by field staff from different countries.

Further operational support was provided by the Operation Support Unit through monitoring of emergencies and support to emergency response in Southeast Asia and the Pacific. This includes conducting exploratory missions in Mindanao in the Philippines during the Marawi crisis, in Nauru on dengue outbreak and mental health needs, and in Bangladesh on the Rohingya refugee crisis. A database was developed to improve our monitoring and response capacity.

The Unit conducted context research and analysis and provided advocacy support on issues such as the impact of climate change on disasters and Islamist extremism in the Southeast Asia region. The Unit also supported missions outside of the region by sharing its expertise on the influences of China and specific Southeast Asian countries on the mission countries.

Financial independence is crucial for our neutral and impartial lifesaving activities. MSF-Hong Kong focuses on raising funds from the general public and carefully selected private corporations. Over HKD501.6 million was raised in 2017, representing a 12.3% increase from 2016. Almost 100% of our donations came from private sources. While online donation remains one of the most popular channels, we are eager to offer more diversified methods by promoting donation at convenience store. In 2017, 40,000 one-off donations were made respectively via both platforms.

无国界医生(香港)致力派出专业的医疗及非医疗人员到全球各地的前线项目。2017年共派出救援人员142人次,最经常前往的地区包括阿富汗、伊拉克、尼日利亚和南苏丹等。当中有19人首次参与救援任务,另有33人次担任统筹岗位。我们亦在亚洲区招募了20名专业人员。此外,无国界医生(香港)成功举办「第十届外科训练」,参加者来自不同国家的前线人员。

行动支持组积极支持前线项目,监察东南亚和太平洋地区的紧急状况,以及为紧急应对工作提供支持,包括就菲律宾棉兰老岛的马拉维危机、太平洋岛国瑙鲁的登革热疫情和精神健康需要以及孟加拉国的罗兴亚难民危机进行评估工作。行动支持组亦设立数据库,以提高我们的监察和应对能力。

此外,行动支持组就气候变化对灾害的影响和东南亚伊斯兰极端主义等议题,进行背景研究与分析及支持倡议工作,同时运用其对中国和部分东南亚国家影响力的认识,支持世界各地的前线救援项目。

财政独立对无国界医生中立不偏的救援行动至关重要,因此我们集中向市民大众和经谨慎选择的私人企业筹款。2017年我们共筹得逾5亿港元,较去年增加12.3%,接近百分之百为私人捐款。网上捐款是最受捐款者欢迎的捐款渠道之一,我们亦推广透过便利店捐款。2017年,我们在这两个平台都分别录得4万次单次捐款。



Taiwanese documentary filmmaker Mr. Li Chou Yang is invited to be the guest of the opening ceremony of the MSF Film Weekend.

台湾导演杨力州获邀担任 「无国界医生电影周末」 开幕嘉宾。

We are very grateful for the support of individuals and companies that organised fundraising events for our global medical humanitarian work. We launched the Wedding Favour Donation Campaign through which 160 happy couples donated to MSF instead of preparing traditional wedding favours for the guests on their special day.

MSF-Hong Kong continues to expand its public engagement activities, raising awareness on medical humanitarian action in different sectors of the community. An exhibition that incorporated virtual reality technology toured around malls in Hong Kong to show MSF's frontline scenes. School activities including exhibitions, talks and field worker sharing sessions were also organised.

We promote our work and principles through various online and offline initiatives. The interactive exhibit Senses Square and the thematic campaign Take No Sides highlighted that MSF treats everyone and our intervention in any crisis is based solely on people's needs but not political, economic nor religious interests. The online campaign Make a Choice offered participants an opportunity to learn about the dilemmas that field workers face in missions.

On Track To Save - MSF Orienteering Competition was held in Lamma Island, Hong Kong in March. Over 4,600 participants, including around 100 people from overseas, ran over hills and valleys and between control points to experience how we work especially in difficult terrains, and raised HKD6.4 million for our relief work. An interactive zone was set up where participants could sit in a model MSF car and view a 360-degree video featuring MSF's search and rescue efforts at sea and our projects in displaced persons camps.

As for MSF Day, Ms. Karena Lam and MSF field worker Dr. Shannon Chan were invited as the campaign leaders to mobilise the general public to support MSF by donating one day's income. The event, echoed by 140 corporations and organisations, 55 schools and over 8,000 donors, raised a record-breaking amount of HKD8.9 million.

In mainland China, MSF continued to foster engagement and dialogue with key stakeholders on global health issues. Our representatives were invited to the national tuberculosis conferences in Xiamen, Shenzhen and Chengdu to share their experiences on treating patients with multidrug-resistant tuberculosis and extensively drug-resistant tuberculosis. In November, the National Institute of Parasitic Diseases of the Chinese Center for Disease Control and Prevention (CDC), the World Health Organization and MSF co-hosted the visceral leishmaniasis workshop to provide training for some 70 staff working at various levels of the CDC.



MSF experts present the certificates for participants from seven provinces after the visceral leishmaniasis workshop.

无国界医生的专家们于内脏利什曼病培训班举行后, 为来自7个省 的学员颁发证书。

我们衷心感谢所有人士和企业支持无国界医生的全球医疗人道 救援工作, 自发举办筹款活动。我们新推出「婚宴回礼捐赠」 计划,共有160对新人将婚宴回礼捐给无国界医生,为他们人 生的大日子增添另一重意义。

无国界医生(香港)继续积极举办更多公众活动,以提高社会 各阶层人士对医疗人道救援工作的认识。我们在香港各大商场 举办具虚拟现实元素的巡回展览,将无国界医生的前线实况呈 现市民眼前,并在学校举办展览、讲座和救援人员分享会等。

我们亦通过网上和实体活动推广我们的工作和原则。互动展览 「Senses Square」和主题宣传活动「救人·不分正反」介绍 无国界医生的救人原则——在任何危机中,无国界医生只会根 据人们的需要提供援助,不受政治、宗教或经济利益左右。网 上游戏「选择・求生」则让参加者有机会了解救援人员在前线 面对的两难抉择。

「无国界医生野外定向——救援在野」于 3月在香港南丫岛举 行,逾4,600人参赛,当中包括100名海外参赛者。他们跋山 涉水寻找控制点,从中体验救援人员在艰难环境下工作的挑 战, 更为前线项目筹得640万港元。赛事场地设有互动区, 参 赛者可坐上无国界医生的模拟车辆观看360度影片,了解无国 界医生在海上的搜救行动和在流离失所者营地的工作。

艺人林嘉欣小姐和无国界医生前线救援人员陈诗珑医生获邀担 任「无国界医生日」荣誉行动大使,向市民呼吁捐出一天的薪 金以支持无国界医生的工作。活动共获得140间机构和团体、 55间学校以及逾8.000名市民响应,破纪录筹得890万港元。

在中国内地, 无国界医生继续与相关各方就全球卫生议题加强 交流和对话。我们的代表获邀参加在厦门、深圳和成都的全国 性结核病论坛, 就治疗耐多药结核病和广泛耐药结核病分享经 验。无国界医生亦于11月与中国疾病预防控制中心寄生虫病预 防控制所和世界卫生组织联合举办的内脏利什曼病培训班,为 约70位疾控中心的员工提供培训。



Dr. Maria Guevara, MSF Regional Humanitarian Representative (ASEAN) takes part in a round-table discussion on protection of medical missions in conflict zones.

无国界医生东盟地区人道事务代表格玛俐医生出席圆桌论坛,就如何在冲突 地区保护医疗救援行动发表意见。



In Taipei, the MSF Film Weekend was launched at the Huashan Spot Theater in June, with Taiwanese documentary filmmaker Mr Li Chou Yang, and officials from the Ministry of Health and Welfare as well as the Ministry of Interior as guests at the opening ceremony. The event attracted more than 1,100 visitors. Apart from movie screening, we also reached out to elementary and high schools in Taiwan to tell students about MSF.

In Singapore, the MSF Film Festival was launched for the first time in June, featuring three documentaries and field worker sharing sessions. Over 1,300 audience members turned up over the course of three days. Another event Missing Maps Mapathon was held in December. Participants directly contributed to humanitarian efforts through digitally mapping Niger State in Nigeria, one of the world's most vulnerable places. Organised in collaboration with the National Youth Council, the event mobilised over 200 participants.

A round-table discussion on protection of medical missions in conflict zones was spearheaded by MSF-Hong Kong, in collaboration with the International Committee of the Red Cross and the Indonesian Red Cross Society in Jakarta, Indonesia in August. Key representatives from the Ministries of Foreign Affairs, Health, Social Welfare, and other non-governmental organisations actively participated in it.

In the Philippines, MSF-Hong Kong has increasingly engaged with society. In 2017, film screenings and sharing sessions were held in the major cities of Davao, Cebu and Manila. We also worked closely with the field mission in producing videos and content about reproductive health and cervical cancer screening for our slum project in Tondo and the emergency response for displaced people in the aftermath of the Marawi siege.



MSF staff join a metro-wide drill in preparation for a huge earthquake that may hit Manila, the Philippines.

无国界医生派员参与模拟菲律宾马尼拉发生大地震后的应急演习。

前线人员亦曾获邀到在西安举行的第三届医院评价与质量促进国际高峰论坛,以及在北京不同的医学院,分享救援经历;亦通过中央电视台、《人民日报》和其他媒体平台介绍前线工作。年度活动「我爱 MSF」的重点则是推出《MSF讲述者》节目,向大众道出救援路上的喜怒哀乐。此外,两部纪录片《深入危城》和《历尽苦楚》在中国电影资料馆和北京的西海艺术馆上映。

「无国界医生电影周末」于6月在台北光点华山电影馆举行,邀请到台湾导演杨力州先生和当地卫生福利部及内政部的官员担任开幕嘉宾,吸引了逾1,100名观众。此外,我们亦在台湾多所中、小学向学生介绍无国界医生。

在新加坡,「无国界医生电影节」于6月首度举行,共播放三部记录片,并设有救援人员分享环节,三天的活动共吸引逾1,300名观众。另一项活动「地图松」则于12月举行,参加者通过为亟需援助的尼日利亚尼日尔州绘制电子地图,直接为前线救援工作出一分力。该活动由无国界医生与当地全国青年理事会合办,共有逾200人参加。

由无国界医生主办、红十字国际委员会和印度尼西亚红十字会 合办的圆桌论坛,于8月在印度尼西亚雅加达举行,论坛主题 为在冲突地区保护医疗救援行动。当日,当地外交部、卫生部 和社会福利部以及其他非政府组织的主要代表均踊跃发言。

在菲律宾,无国界医生(香港)与当地社会加强联系,于2017年在达沃、宿雾和马尼拉等主要城市举办电影放映和分享会,并与派驻菲律宾的救援队合作制作影片等,内容讲述在汤都区贫民窟的生殖健康与子宫颈癌普查项目,以及在马拉维事件后,无国界医生协助流离失所者的紧急应对行动。

Acknowledgements

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

APM

Arup

Bank of America Tower

BaoQiao Partners Capital Limited

BB Group Company Limited

Benita Fashion

Bonagua

Centro Design & Furniture Ltd.

Chan Man Chau Fruit Co.

Chong Hing Bank Ltd.

Chung Yuen Electrical Co., Ltd.

Classic Beauté Limited **CNA Holdings Limited**

Collyer Logistics International Ltd.

Consolidated Marketing Group International

Wealth Management

Cosmopolitan

Dah Chong Hong Holdings Limited

Degingyuan (HK) Ltd.

Elite Partners CPA Limited

Festival Walk

Freshman Music Magazine

Fubon Bank (Hong Kong) Ltd.

Gabriel Technology (HK) Limited

Helix System Limited

HK Electric Investments Limited

Hong Kong Disneyland

Human Health Medical Centre

Hysan Development Company Limited

Kimsion Plastic & Metal Manufacturing

Limited

Langham Place

Lifestyle Brands (HK) Limited

Living PLAZA by AEON

Lo Fung Art Gallery Ltd.

Long King Printing HK Company Limited

Media Digital Technologies Corporation

Limited Metro Daily

Mind & Life

New Media Group

NOVA Dynamic Media Co. Ltd.

Octal Capital Limited

Okamoto Industries (Hong Kong) Ltd. Oriental Watch Holdings Limited

PITC Home & Garden

Plaza Hollywood

Popwin Giftware Manufacturing Company

Limited

Prince of Peace (Hong Kong) Ltd.

reallyenglish.com Co., Ltd

RockTape Hong Kong

Running Biji

S.F. Express (Hong Kong) Limited

Samily Home Company Limited

SD Hair Collection

Sims Trading Company Limited

STA Pacific Limited

Swiss International Air Lines

Tai Shing Group (Holdings) Co. Ltd.

Tak Lee Machinery Co. Ltd.

The Garden Company Limited

The Hong Kong and China Gas Company

Limited

The Metroplex

The Overlander

The Star Ferry

Thong Sia Watch Co., Ltd.

Tokachi Gyuu Japanese Restaurant

Top Victory Investments Limited

Tsueng Kwan O Plaza

Tuen Mun Town Plaza

Tung Kiu Restaurant

TurboJET

United Italian Corporation (HK) Limited

Williams Lea (Hong Kong) Limited

Wilson Garment Accessories (Int'l) Ltd.

Winga Apparel Group Ltd.

Wiseford Industries Limited

-田百货

建安联合会计师事务所

Professional institutions 专业机构

MDSSC, Queen Elizabeth Hospital

Minter Ellison

Primasia Corporate Services Limited

Prince of Wales Hospital Zhong Lun Law Firm

创越法律事务所

Community groups / associations 小区团体 / 协会

Alliance Française de Hong Kong

Parsons Music Foundation

Volunteers Orienteering Club

Yudan Studio

南极星义工队

同社

新方向定向会

圣约翰救伤队

青进野外定向会

香港定向人有限公司

香港少年领袖团

香港野外定向会

Schools / Tertiary institutions 学校及大专院校

Buddhist Yip Kei Nam Memorial College

Canossa College

Catiline Kindergarten, International Preschool

Cheung Chuk Shan College

Creative Kindergarten (Tuen Mun Branch)

Fukien Secondary School (Siu Sai Wan)

Holy Family Canossian College Students' Association

Kiangsu-Chekiang College (Kwai Chung)

Medici Cantano

Mei Lam Estate To Kwong Kindergarten

Office of Service Learning, Lingnan University

Po Leung Kuk Ma Kam Ming College Student Union 2016-17

Po Leung Kuk Ngan Po Ling College

Salesian School

SKH Mung Yan Primary School

SKH Tsang Shiu Tim Secondary School

St. Joseph's Anglo-Chinese School

St. Stephen's College

Office Volunteers

办公室义工

陈永安 陈淑贤 唐镇浩 刘曼璇 吴少珍 吴少兰 杨浩福 凌怡丽 韩韵芝 何玉薇 周静兰 冯维强 谭安慈 周汉明 梁信彦 罗耀琳 吴皓维

The above office volunteers provided services 36 hours or above in 2017. We are also thankful to have other volunteers contributed their precious help.

上述办事处义工于2017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. Chen Kun Liu 刘镇鲲医生

Vice Presidents 副主席: Dr. Shut Wah Chan 陈述华医生 Dr. Sartini Saman

Treasurer 司库:Kwong Wai Chan 陈广慧

Directors 成员: Dr. Morpheus Causing* Dr. Marlene Lee 李曼宁博士 Dr. Yi Chen Lee 李一辰医生* Dr. Ning Fan 范宁医生 Sau Wai Lee 利秀慧# Dr. Day Seng Tan 陈利晨医生

Dirk Van Der Tak * Appointed on 26 August 2017 2017年8月26日上任

Resigned on 26 August 2017 2017年8月26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, Emily Chan 陈英凝医生 Po Kiu, Francis Fong 方保侨 Lawrence Hui 许卓伦

As of December 2017, the MSF offices in Hong Kong, Guangzhou, Beijing and Taipei had 61 staff and 17 regular office volunteers who helped with office tasks.

截至2017年12月,无国界医生在香港、广州、北京和台北的办事处共有61名职员,另有17名义工定期协助处理日常工作。

MSF-Hong Kong Financial Overview 2017 (in Hong Kong dollar)

无国界医生(香港)2017年度财政概览 以港元为单位)

			2017	2016
INCOME 收入				
Donations income 捐款收入			501,633,032	446,511,122
Other income 其他收入			279,940	183,738
-	TOTAL	总数:	501,912,972 (1)	446,694,860
EXPENDITURE 支出		=	=======================================	
Supporting relief operations 救援项目与支援工作				
Emergency and medical programmes 紧急与医疗救援项目			376,727,319 (2)	343,140,542
Programme support and development 项目支援与发展			44,100,511	31,380,530
Public awareness and other campaigns 提高公众关注与倡议			13,257,218	13,977,611
Other humanitarian activities 其他人道救援活动		-	3,096,508	2,745,594
Total supporting relief operations 救援项目工作总理	干支	-	437,181,556 (3)	391,244,277
Management and general administration 行政经费		16,743,032	14,110,084	
Fundraising 筹款经费		-	47,988,384	41,340,499
•	TOTAL	总数:	501,912,972	446,694,860
Statement of Financial Position as at 31st Dece 截至2017年12月31日为止的财务状况表			2017	2016
Fixed Assets 固定资产			1,327,531	1,615,562
Current Assets 流动资产		_		
Debtors 应收账款			36,756	76,864
Deposits and prepayments 押金与预付费用			5,306,802	3,533,172
Amount due from MSF entities 应收其他无国界医生办事处之账款			1,030,378	2,064,529
Cash and bank balances 现金与银行结余		-	36,024,961	
			42,398,897	29,233,564
Current Liebilities		-	,000,001	34,908,129
Current Liabilities 流动负债 Creditors and accrued expenses 应收账款与应计费用		_		34,908,129
Creditors and accrued expenses 应收账款与应计费用		-	6,006,602	34,908,129 5,801,216
***************************************		-		34,908,129
Creditors and accrued expenses 应收账款与应计费用 Deferred income 递延收入		-	6,006,602 1,629,081 (4)	34,908,129 5,801,216 9,549,658
Creditors and accrued expenses 应收账款与应计费用 Deferred income 递延收入		- - -	6,006,602 1,629,081 (4) 36,090,745	34,908,129 5,801,216 9,549,658 21,172,817
Creditors and accrued expenses 应收账款与应计费用 Deferred income 递延收入 Amount due to MSF entities 应付其他无国界医生办事处之账款 Net Current Liabilities 净流动负债		- - -	6,006,602 1,629,081 (4) 36,090,745 43,726,428	34,908,129 5,801,216 9,549,658 21,172,817 36,523,691
Creditors and accrued expenses 应收账款与应计费用 Deferred income 递延收入 Amount due to MSF entities 应付其他无国界医生办事处之账款		- - - -	6,006,602 1,629,081 (4) 36,090,745 43,726,428 (1,327,531)	34,908,129 5,801,216 9,549,658 21,172,817 36,523,691 (1,615,562)

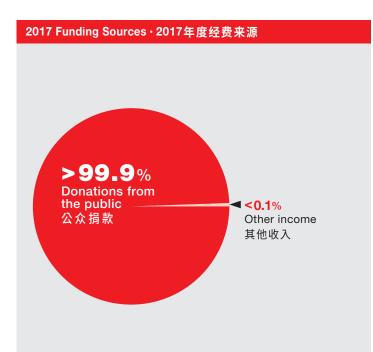
There is a legal obligation to explain that the figures listed above are only partial but not the full set of specified financial statements (i.e. statutory annual financial statements) for the year ended 31 December 2017. Those statements were prepared in accordance with the Hong Kong Financial Reporting 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 2017 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.hk.

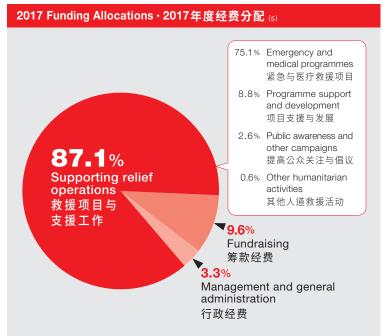
按照法例,谨此声明,以上陈列数据仅为截至2017年12月31日止年度的指明财务报表(即:法定财务报表)的一部分,并不是完整的财务报表。该报表是根据《香港财务报告准则》以及《公司条例》拟备。报表已由无国界医生(香港)董事会认可,并由审计师毕马威会计师事务所审核。审计师在核数报告中,对报表无保留意见,即认为法定财务报表真实而中肯地反映了组织于截至2017年12月31日止的财务状况和该年度的财务表现。审计师亦没有以强调方式提述须予注意的事项,即审计师对报表没有保留。审计报告内也没有任何根据香港《公司条例》第406(2)、407(2)或(3)条的陈述。这些条例列明,若果财务报表与董事报告不吻合;公司没有备存充份的会计记录;财务报表与会计记录不吻合;或审计师没有取得所有对审计工作而言属必需的数据或解释,审计师必须在其报告内述明。完整财务报表可浏览:msf.org.cn

Explanatory Notes on Financial Overview 2017

- (1) 99.9% of donations came from public donations.
- (2) A total of HKD376,727,319 was allocated for emergency and medical programmes in 52 countries.
- (3) 87.1% 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 expected to be recognised as donation income upon the fund is spent.
- (5) In 2017, MSF-Hong Kong maintained a "zero reserve" policy: all donations received, after the fundraising, management and general administration expenses, were fully dispensed for supporting relief operations.
- (6) Other countries and regions include Brazil, Ghana, Madagascar, Mali, Côte d'Ivoire, Mexico and Dominican Republic.

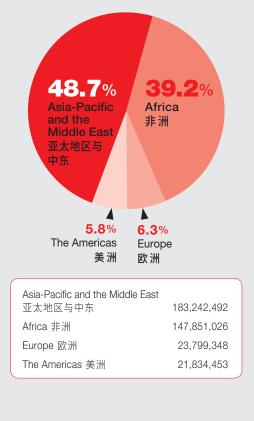
The Hong Kong branch of Médecins Sans Frontières is incorporated under the Companies Ordinance of Hong Kong as Médecins Sans Frontières (HK) Limited, a company limited by guarantee.





2017 Allocation of MSF-Hong Kong Funding for Relief Work by Country(HKD)·2017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
Afghanistan 阿富汗	45,767,564	South Africa 南非	5,585,310
Democratic Republic of Congo		Kenya 肯尼亚	5,451,734
刚果民主共和国	38,253,902	Guinea 几内亚	5,051,827
Lebanon 黎巴嫩	20,696,450	Chad 乍得	4,000,000
Pakistan 巴基斯坦	18,657,856	Niger 尼日尔	3,748,652
Iraq 伊拉克	17,997,104	Malaysia 马来西亚	3,500,000
South Sudan 南苏丹	16,087,561	Libya 利比亚	3,000,000
Nigeria 尼日利亚	15,361,104	Tajikistan 塔吉克斯坦	3,000,000
Yemen 也门	15,037,010	Turkey 土耳其	3,000,000
India 印度	14,977,470	Uzbekistan 乌兹别克斯坦	3,000,000
Haiti 海地	14,058,104	Ukraine 乌克兰	2,928,845
Sierra Leone 塞拉利昂	11,844,220	Zimbabwe津巴布韦	2,806,230
Syria 叙利亚	10,921,644	Belgium 比利时	2,619,982
Mauritania 毛里塔尼亚	10,406,756	Malawi 马拉维	2,030,667
Jordan 约旦	10,343,873	Cambodia 柬埔寨	1,935,875
Italy 意大利	9,279,230	Egypt 埃及	1,880,046
Migrant Support Balkan Route		Mozambique 莫桑比克	1,449,501
巴尔干半岛路线	8,322,924	Tunisia 突尼斯	1,328,122
Central African Republic		Palestine 巴勒斯坦	1,186,057
中非共和国	7,841,382	Indonesia 印度尼西亚	810,802
Venezuela 委内瑞拉	7,312,017	Russia 俄罗斯	648,367
Bangladesh 孟加拉国	6,010,256	Nauru 瑙鲁	550,531
Ethiopia 埃塞俄比亚	6,000,000	Bolivia 玻利维亚	335,450
Myanmar 缅甸	5,850,000	Other countries and regions	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Burundi 布隆迪	5,610,292	其他国家和地区 (6)	242,602



2017年度财政概览说明

- 99.9%经费来自公众捐款。 (1)
- 合计376,727,319港元被拨作于52个国家进行紧急与医疗救援项目的经费。

TOTAL 总数:

- 87.1%收入用于救援项目与支持工作。 (3)
- (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。该笔款项将在使用后被拨为「捐款收入」。

376,727,319

- 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后,全数拨予救援项目与支持工作。 (5)
- 其他国家和地区包括巴西、加纳、马达加斯加、马里、科特迪瓦、墨西哥和多米尼加共和国。

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。

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In the south of Mosul, Iraq, MSF runs a field trauma clinic with emergency room, operating theatre, intensive care unit and in-patient department.

在伊拉克摩苏尔南部,无国 界医生的创伤诊所设有急症 室、手术室、深切治疗部和

内科病房。



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