



Impact Report

2017



Welcome

From our President 2017 – a year of change and celebration of our anniversary year

As we begin celebrating our 20th anniversary in 2018, I look forward to my role as President of Doctors of the World UK, following in the footsteps of Janice Hughes, CBE who was a tireless and inspirational champion for our cause of universal access to healthcare. During her nine years as President, DOTW grew its impact here and abroad.

Our Executive Director, Leigh Daynes, left after five years. He led us through significant growth in both our UK advocacy work and clinic services as well as launching our first UK emergency response in Kenya and our longer term work in the Ukraine.

I would like to thank them both for their immense contribution, dedication and leadership and wish them the best for the future.

Our new leadership team, Ellen Waters and Lucy Jones, will keep the momentum up. It's an exciting time to be at Doctors of the World.

I hope you'll enjoy reading this report.

Dr Tim Dudderidge

President, Doctors of the World UK

Foreword from our Directors, Ellen Waters and Lucy Jones

Change can be exciting and bring fresh approaches to any organisation. It can also be a daunting prospect but in a fast moving and increasingly polarised world, change is an imperative if we are to help more people, sooner. The task of removing barriers to healthcare is far from complete and so we need to work differently to be more effective.

Doctors of the World's values of activism, empowerment, social justice, independence and balance anchor everything we do, whether we are working at home or overseas; on the refugee crises across Europe, the Middle East or Bangladesh; in humanitarian emergencies and following natural disaster, such as in Haiti or Kenya; or our long-term projects in the UK and around the world. We will partner with UK organisations to lobby for policy change, as we did in the #StopSharing campaign. When working together is stronger than working alone, we have not hesitated.

Through our London clinic alone, we have helped around 2,000 people per year to access primary care, but nationwide there are still around 50,000 people who continue to need our support. We will need to expand our services across the UK to get healthcare access to these marginalised communities, who have wrongfully been refused healthcare or are too frightened to even try to access it due to their immigration status.

We have 12 years of experience at our unique London clinic upon which to develop a nationwide service, beginning with Birmingham and Manchester. We will identify partners and new sources of funding that are needed for this ambitious step.

In 2016, a new mobile clinic went from the UK to the refugee camps in Greece but is now back in the UK, helping us extend London services beyond Bethnal Green. There are large communities who cannot make the journey to us, so we can now go to them.



When we come across obstacles, we are reminded of our purpose by the stories of our patients, and by our volunteers who work in the clinic and on the helpline. We are grateful to our staff and volunteers for their commitment.

Our door is always open. If you wish to get in touch, please do. We look forward to hearing from you or welcoming you at our offices.

Lucy and Ellen

Refugee Crisis

Greece remains the doorway to Europe

Three years into the refugee crisis, the camps' temporary status comes into question.

Despite pledges by EU member states to relocate asylum seekers, more than 60,000 refugees remain in camps across Greece.

The EU-Turkey agreement of 2016 has made the journey for refugees even more challenging and potentially dangerous, the camps are still increasing in size, sometimes reporting up to 200 new arrivals daily.

For many refugees in mainland Greece and the surrounding islands, the uncertain months are turning into years without sure knowledge about their future or that of their children. Security is an increasing concern for vulnerable people across the camps. Reports of sexual and gender-based violence are escalating. Levels of depression and other mental health issues continued to rise as people remain living in dangerous environments, worried about what will happen next.

The safety of unaccompanied children remains a high risk and the numbers in the camps are growing. By the end of the year more than 2,200 unaccompanied children were still waiting to be placed in the relative safety of a shelter. Close to 100 were being detained in Police Stations.

The international Médecins du Monde network has continued to respond to the urgent healthcare needs of refugees across Greece.





More than 60,000 refugees remain in camps across Greece

In late 2016 Doctors of the World sent a fully equipped mobile clinic to add resources to the healthcare programmes being carried out in southern Greece, particularly in Malakasa, situated north of Athens – a camp with capacity for 1,300 refugees but which often has many more. We also continued to recruit, train and support a range of volunteers including doctors, nurses and translators, who joined the team in Greece.

Kharman's story

Kharman went to the refugee camps in Greece to act as a DOTW translator.

“During the refugee crisis I saw what was happening as I am a refugee myself. I was touched and wanted to help. I’m not a medic, but with my language skills and even just the emotional support I could give, I could help. I especially wanted to help women and children. Translating is so important for these vulnerable people. I can talk on their behalf and express their pain and suffering. And having a female interpreter in the camps makes a big difference as women need help with particular problems.

For pregnant women and newborn babies to live like this is very hard – socially, financially, psychologically, on all levels. These women are a lot more vulnerable.”

Nepal

Restoring health services in Sindhupalchok, Nepal

We have been working in the mountainous region of Sindhupalchok since it was devastated by earthquake in 2015 with a magnitude of 7.8. We sent teams of doctors, nurses, midwives and logisticians, as well as 15 tons of equipment.

In the longer term, we worked on an innovative community-based health programme in 10 Village Development Cooperatives (VDC), which are a key part of rural life and often run by women, as most men are employed away in towns and cities. The programme contributed to a reduction in maternal and new-born child morbidity and mortality (DHO and Doctors of the World data, 2015).

The Government is building a new health post but it's several kilometres away. Patients have to pay for ambulances, so the medical emergency funds available in each of the 16 cooperatives supported by this project made a big difference when urgent care is needed.





Kenya

In Isiolo County, north of Kenya's capital Nairobi, food production suffered severely after a vicious drought when rains failed in late 2016 and spring 2017. The region went into a food crisis.

When young children suffer from malnutrition they must be treated urgently to prevent lifelong effects on physical and cognitive development, but with many villages in Isiolo several days' walk from a hospital, the journey would have been difficult or impossible. Doctors of the World mobilised an emergency operation to respond to the needs.

We provided 1,039 screenings to identify cases of malnutrition in pregnant and lactating women and children under five, which are the highest risk groups. Our outreach teams provided 677 courses of treatment in the community for standard cases (Ready to Use Supplementary Feeding (RUSF) and Ready to Use therapeutic Feeding (RUTF); Vitamin A; CSB/fortified porridge; Iron etc.) Doctors of the World medical volunteers and staff (doctors, nurses, and midwives) worked with MoH staff; Community Health Volunteers (CHVs)/Education Workers (CHEWs); nurses; and nutritionists.



Russia

An estimated 1,000,000 people in Russia are HIV+, double the number in 2010 and the epidemic is growing so quickly that experts expected the figure to be more than 1,300,000 by the end of 2017. It is hard for the country's at-risk groups, such as sex workers, to access healthcare.

Sex work is illegal and stigmatised in Russia, and there is virtually no HIV prevention strategy or targeted healthcare initiative for sex workers. In Moscow, people from outside the city are not entitled to use state health services yet an estimated 80% of the city's 150,000 sex workers come from other areas and are not able to access health care services.

We work in partnership with a sex worker community NGO, Silver Rose, and an advocacy group, Shagui, by piloting HIV/STI services for Moscow's sex worker population. The pilot proved successful, and with the support of the Elton John AIDS Foundation we launched the first year of a two-year project to scale up services.

Oshar's story

Oshar left Tajikistan because, as a gay person, his relatives rejected him. Coping with feelings of shame and guilt, he decided to support them financially and engaged in sex work. He was diagnosed as being HIV+ and, as a migrant in Russia, now faces deportation.

"If my family discover it, they will kill me. I can't go back home, I have to help them. I have to take care of my health because I have to work as long as I can to help my family. But, eventually, I want to change my life."

Social worker, Andrei, accompanied Oshar for enrolment into care and ART in a private centre, a trusted one that does not require ID. Andrei arranged consultations with a psychologist to help Oshar deal with his relationship with his family, helping him to eventually discuss his situation with them.

Ukraine

In Luhansk Oblast, we provided health care for those affected by the ongoing conflict, and strengthened the local health system.

Our mobile units delivered 18,982 medical consultations, 3,399 mental health consultations and 2,396 sexual and reproductive health consultations in 18 locations close to the Contact Line.

The same teams also conducted 1,123 awareness sessions on medical issues, sexual and reproductive health, gender based violence, and mental health and psychosocial support.

Formal training was provided to 257 Ukrainian health staff on emergency care, chronic diseases, paediatrics, sexual and reproductive health and vaccination, 14 nurses were trained as community counsellors. Medical equipment was donated to over 60 health facilities (including 5 health facilities located in non-governmental-controlled areas) and 14 community focal points were established to identify and provide support to gender-based violence survivors.

Doctors of the World also participated in several advocacy events to raise awareness on the humanitarian issues related to the ongoing conflict in Eastern Ukraine.





Grenfell

In the immediate aftermath of the Grenfell Fire on 14th June 2017, we received reports from doctors volunteering in the nearby relief centre that they had treated people injured whilst escaping the fire who had been too scared to go to A+E because of their immigration status. We responded immediately, sending volunteers to carry out daily outreach in the area. Visiting local community groups, they raised awareness of patients' rights to care, and set up a drop-in clinic at the North Kensington Law Centre.

The patients seen by Doctors of the World had rarely accessed legal advice (despite the government's amnesty) or any healthcare. Some were suffering from mental health issues that they attributed to surviving the fire. Some had lost friends or family and several had already survived significant high stress events in their lives. The fire, for a short time, focused the nation's attention on the stark inequity that exists in London.



#Stop Sharing

In January 2017, the UK government and NHS Digital, which stores NHS patient data, signed an agreement to give the Home Office easier access to patients' personal information. It meant that immigration officials could get hold of confidential details, such as addresses, in order to track down, detain and deport migrants who had sought healthcare.

In April, we responded to this by launching our #StopSharing campaign. We asked people across the UK to tell the government to stop using NHS patient records to track down migrants and to protect our confidential health service. The petition quickly received over 5,000 signatures, including medical professionals.

Articles about the campaign were featured in numerous high-profile media outlets, including The Guardian, the BMJ and the Lancet.

MPs are paying attention too. Doctors of the World were invited to give evidence to a Health Select Committee inquiry into the deal in early 2018.



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20 years
fighting for
access to
health for all

In 2018, Doctors of the World UK will celebrate 20 years since its foundation.

Since opening in 1998, Doctors of the World has directly helped more than 15,000 people in the UK and many more overseas.

This work would not have been possible without our volunteer GPs, nurses, and caseworkers. Their expertise, time and support is at the heart of Doctors of the World.



**Mai, caseworker
at the London Clinic**

"I see people who are often very sick and need to be registered with a GP to see a doctor. Some have been in the UK for 10 years or more without seeing a doctor, but then a health problem they couldn't ignore comes up. The most common health issues are people suffering from anxiety due to bad experiences in the country they've fled, high blood pressure, and pregnant women who need antenatal care."

**Belinda, caseworker
at the London Clinic**

"I believe that the service provided here is one of a kind. There was a gentleman diagnosed with brain tumour and was denied access to chemotherapy and surgery because of his immigration status. We all get sick, and who are we to deny someone access to healthcare just because of their background, where they are from, or the situation in which they find themselves, which in many cases is not by choice."

**Aaminah, GP volunteer
in Slovenia and Greece**

"We saw asthma, diabetes and other chronic conditions and also injuries that people sustained during their journey. Having a doctor is a normal part of life, and being able to go to someone even if it's just for a cough and a cold. By being reassured and told it's okay they gain strength to carry on with their journey. It's very important, it is vital."

In 2017 our service users were

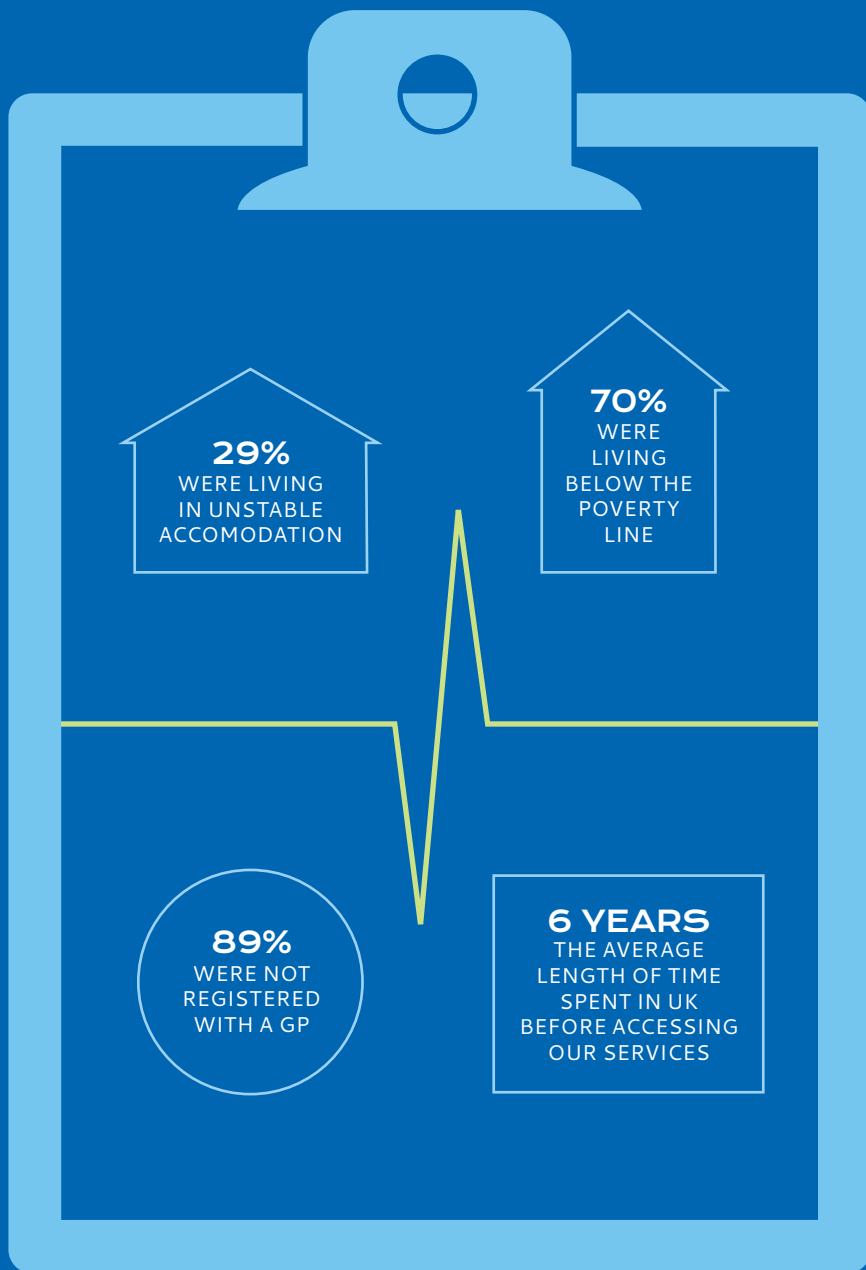

11%
ASYLUM
SEEKERS


60%
UNDOCUMENTED
MIGRANTS


29%
UNDEFINED

COUNTRY OF ORIGIN





1071
PATIENTS OFFERED
STI SCREENING

1617

SERVICE USERS WERE SEEN (SOCIAL
CONSULTS PLUS RE-CONSULTS)



UK Programme



London Clinic

Everyone in the UK has the right to see a GP for free, regardless of immigration status, yet 89% of the patients we saw at our London clinic were not registered with a GP, despite having lived in the UK six years on average. 70% were living below the poverty line. Often they have been too afraid to visit a doctor because of a fear of immigration controls.

In 2017 their fears became real with NHS Digital signing an agreement which allowed the Home Office to access their information, breaking doctor-patient confidentiality.

As a result, we have had to spend many hours in the clinic persuading people who are very sick or heavily pregnant that the risk of not accessing the healthcare they need outweighs their fears about this data breach. It routinely causes great distress to people who were already in a vulnerable situation.

Our Bethnal Green clinic in east London continued to work at capacity and conducted social and medical consultations for 1,617 people. 1,074 people had a sexually transmitted infection (STI) test on the day they visited, and 163 were screened for tuberculosis through a partnership with the NHS Find and Treat team.

Pop Up Clinics

We worked with allied organisations to run monthly outreaches at their locations, reaching people who can't make it to Bethnal Green, either due to fear, cost of transport or timings. We work closely with The Voice of Domestic Workers, the Notre Dame Refugee Centre, the Latin American Women's Rights Service, and with funding from Hackney CCG, with Hackney Migrant Centre.

89% of the patients we saw were not registered with a GP — despite having lived in the UK for an average of 6 years

Women and Children's Clinic

Our Women and Children's Clinic provides a vital service to hundreds of women, including 124 pregnant women, who came to visit us in Bethnal Green. The clinic offers obstetric checks, health assessments and STI screenings. Volunteers also help with antenatal referrals and ensure women know their rights around accessing care.

Every pregnant woman must be provided with antenatal care, but most of the women we see will be charged for the care (normally at least £5,000) and if they cannot pay this debt off, are reported to immigration authorities. This results in late presentation for care, and missed appointments, both of which increase the health risk to the mother and the pregnancy. This was exemplified when a woman came to our Bethnal Green clinic in labour, having never accessed antenatal care out of fear. She was rushed to hospital and gave birth to a healthy baby a few hours later.

Advocacy

Advocating for practice and policy change is central to our work. Guided by patient stories and clinic data, we work locally and nationally for equitable access to healthcare for everyone living in the UK, regardless of immigration status.

Extensions to NHS charging

In addition to sharing patient records with the Home Office (page 11), the government introduced major changes to NHS charging rules.

The changes led to people being refused treatment because they couldn't afford to pay. Doctors of the World published research demonstrating that charging deters vulnerable people from healthcare, including pregnant women.

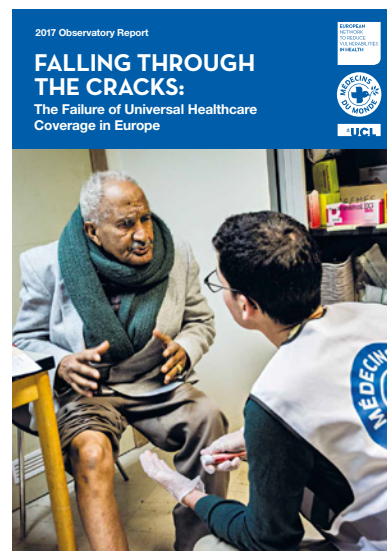
In response to the changes, we joined with partner organisations to send an open letter to Jeremy Hunt, the health secretary, signed by the former chief executive of NHS England and over 1,000 individuals. Our concerns were raised with parliamentarians, resulting in a debate in the House of Lords.

While the changes went ahead, we secured the exclusion of health visitors and school nurses from charging, and a government commitment to review the impact of the rules on vulnerable groups.

The Mdm European Observatory

In November 2017 we launched the Médecins du Monde's annual Observatory Report at the European Parliament with MEP Enrique Guerrero and MEP Patricia Lalonde.

Produced by Doctors of the World and the Institute of Global Health at University College London, the report collates data and testimony from 43,286 people supported by Médecins du Monde programmes and partner organisations across Europe, and evidences the systematic failure of European health systems.



Safe Surgeries

Safe Surgeries was formerly called Right to Care and is our training programme which reached over 750 medical students and NHS professionals in 2017, including junior doctors and GP practice staff.

Almost everyone who completed a training evaluation said they felt more confident in advocating for their migrant patients' rights to healthcare as a result.





Your support



Runners, student groups and communities

People raised more than £7,500 in 2017, by doing the London Marathon, the Santa Run, and other fundraisers, much of which went to support our refugee crisis work.

We receive donations from schools, churches and universities who create their own challenges to raise vital funds, as well as from kind individuals who run marathons, enter cycle competitions, or dress up as Santa to run around London's Victoria Park.



Kenya crisis

Isiolo County, north of Kenya's capital Nairobi, was caught in the grip of a vicious drought after rains failed in late 2016 and spring 2017. Marsabit's malnutrition rate reached 30% and Isiolo's 19%, both far above the emergency threshold of 15%. We wrote to our supporters and almost £160,000 (£142,000 via DOTW Germany) which enabled our medical team to conduct outreach visits to several remote villages every week, where we could screen and treat pregnant women, new mothers, and children under five for malnutrition.

How you can help

Make a donation

Please visit www.doctorsoftheworld.org.uk/donate to find out more about the many ways you can donate.

You can also give £10 right now by texting **DOCTOR** to **70660**.

Sponsor a Doctor

In the UK and across the globe, there are volunteer doctors and nurses giving their time to help the most vulnerable access healthcare.

Whether it be the aftermath of a disaster, a warzone, a country facing famine, a refugee camp or wherever people are suffering or dying unnecessarily – they are there helping and providing care.

- **£24 per month** contributes to the costs of sending volunteers to projects and the medical supplies they will need whilst they are there.
- **£16 per month** contributes towards the recruiting, training, travel and living costs of a medical professional volunteering at one of our projects.
- **£8 per month** covers the costs of essential vaccines, drugs and medical equipment for our doctors to use.

By sponsoring a doctor with a monthly gift, you will join a movement people who are committed to a world where no-one suffers or dies because they can't access medical care.

If you are considering a major gift, a dedicated member of the team is available to advise you on how you can make the biggest impact and provide you with regular updates on your investment.

Fundraise for us

If you're feeling adventurous, sporty or celebrating a special occasion then you can use this to make a real difference. Simply decide whether you want to run a marathon, climb a mountain or host a cake sale, set up your personalised fundraising page, and share it with your loved ones. Please do get in touch for some inspiration, advice or support on your fundraising effort.

At university

Our university programme, In Residence, offers you the opportunity to hear from people who have been on the frontline of humanitarian aid and healthcare, engage with like-minded health professionals and students, and become an advocate for equal access to healthcare at your university. It's a unique platform for discussion, debate and direct engagement with Doctors of the World's vital work at home and abroad through a series of talks and fundraising activities.

Volunteer

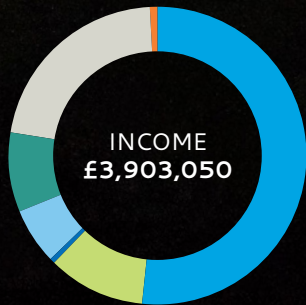
Our work would simply not be possible without our amazing volunteers. We're frequently offering International and UK volunteer opportunities, both medical and non-medical, to help us provide care, support and advocacy for some of society's most excluded people. You can find out more in the Jobs and Volunteers area of our website.

Get in touch

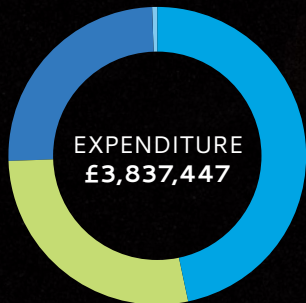
info@doctorsoftheworld.org.uk

020 7167 5789

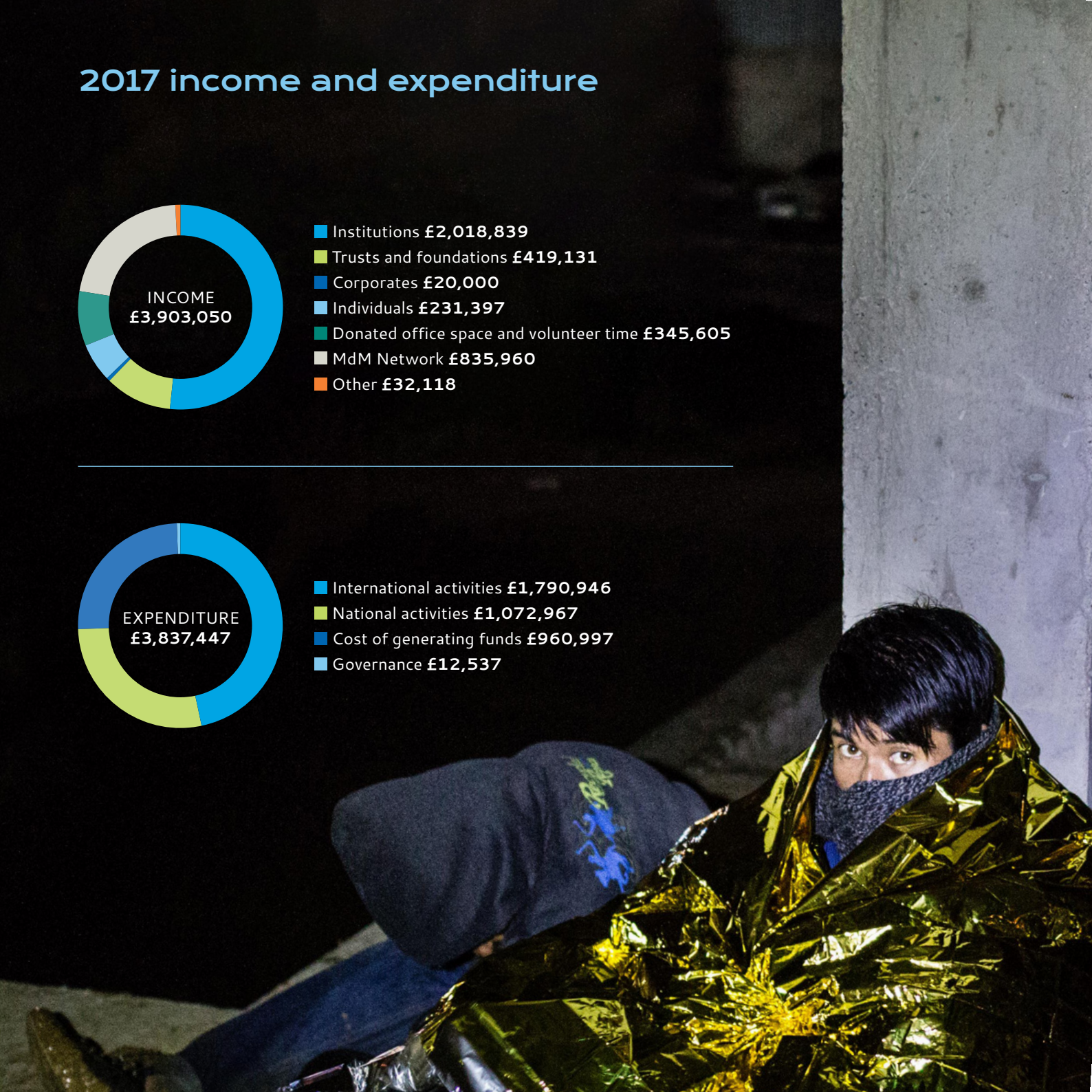
2017 income and expenditure



- Institutions **£2,018,839**
- Trusts and foundations **£419,131**
- Corporates **£20,000**
- Individuals **£231,397**
- Donated office space and volunteer time **£345,605**
- MdM Network **£835,960**
- Other **£32,118**



- International activities **£1,790,946**
- National activities **£1,072,967**
- Cost of generating funds **£960,997**
- Governance **£12,537**



Thank you

We would not be able to work without the help of our generous partners.

We'd especially like to thank the following for their support in 2017...



To support us please contact a member of our fundraising team on 020 7167 5789

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