

2020

IMPACT REPORT





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WELCOME FROM OUR PRESIDENT



The COVID-19 pandemic dominated the health and social landscape in 2020 and has had a devastating impact globally. Doctors of the World UK, responded to this rapidly changing context by adapting promptly to identify and meet the evolving needs of the people we serve.

At the outset of the pandemic in the UK, we undertook a rapid needs assessment which identified the widening health and social inequalities experienced by people living in vulnerable circumstances as pre-existing barriers to healthcare and mainstream society were exacerbated. This work was highly influential in directing our operations and informing actions of other organisations.

To fulfil an urgent unmet need, our team was at the fore in providing translated COVID-19 guidance and resources which were downloaded extensively and used and signposted by the NHS and multiple organisations.

Our clinical programmes were quickly and successfully adapted to provide services to underserved populations ensuring provision during lockdowns. We scaled up our mobile outreach clinics and provided increased remote care and support to people including those experiencing homelessness. We transitioned from clinic-based care to remote consultations with a national reach. We launched new projects to increase support for people seeking asylum, street sex workers and Traveller communities. Our campaigning and advocacy activity intensified, most notably for 'Hands Up for Our Health', and continues to challenge and to give a voice to people impacted by policy such as NHS charging. The Safe Surgeries initiative continues to grow at pace nationally, contributing to breaking down barriers to accessing healthcare.

Our international network rose to COVID-19 challenges by providing and strengthening programmes in nearly 70 countries, increasing operations in countries where programmes already existed and addressing new areas of need globally.



I'm proud of the impact Doctors of the World have had in both the UK and around the world this year; especially that we have demonstrated that we are a dynamic organisation that does not sit and wait for a crisis to unfold but proactively identifies what needs to be done, delivers and supports others to do similarly.

Thank you to all our staff and volunteers for their tireless work in very challenging circumstances. Thank you to our supporters: we are a collective, and your donations whatever their size, have been fundamental to all that we do.

We have much to do, especially with a continuing pandemic landscape for the foreseeable future and an unfolding migrant crisis in 2021. With our supporters and partners, we will continue to serve those who need us and fight for universal and equitable access to healthcare as a fundamental human right.

Thank you for your support.

FOREWORD FROM OUR DIRECTOR

Whatever your experience of COVID-19 has been, it's undeniable that we and the world we live in have been altered irrevocably. What hasn't changed is Doctors of the World's determination to ensure universal and equitable access to healthcare, both at home and abroad.

In 2020, the pandemic created many challenges, both for Doctors of the World UK and our patients. I'm so proud of the way our staff, volunteers and supporters rose to these challenges to ensure we could continue to help people in vulnerable circumstances access the healthcare they need.

In March, as the UK went into lockdown for the first time, we worked quickly to adapt the advice line and east London clinic to a fully remote, national service. Over the course of the year, the clinic team answered 1,279 calls and provided 1,002 social consultations and 492 medical consultations to support 1,098 people.

Not only did we keep our existing services running throughout COVID-19, but we also launched new projects and widened our reach to support other people in need, such as asylum seekers living in Home Office accommodation, street sex workers and Traveller communities. The launch of our Birmingham pilot project saw us deliver clinic services outside of London for the first time and was a success despite the challenges and uncertainty created by changing COVID-19 restrictions, which necessitated a remote service delivery model.

Doctors of the World UK gained further prominence in 2020 with the launch of our COVID-19 translated guidance, which was downloaded 57,791 times over the course of the year. To stop the spread of COVID-19 and end this pandemic, it is essential that everyone receives accurate information

about the virus and public health measures in place. That's why we've gone on to produce a wide range of translated resources in a variety of formats and in up to 63 languages, and will continue to do so in 2021.

At the start of the pandemic, we carried out a rapid assessment of the circumstances and needs of communities excluded from healthcare services to produce a detailed report that continues to be referenced in journals and research papers.

We grew our Safe Surgeries network, with 387 GP practices across 55 cities and towns now committed to providing inclusive and welcoming healthcare for everyone in their communities. We also launched our first coalition campaign, Hands Up for Our Health, to call for the suspension of NHS charging during the pandemic, an investigation into the impacts of the policy and improved access to all NHS services.

These are just some of the many achievements of 2020, which wouldn't have been possible without our supporters or the hard work and dedication of our staff and volunteers.

For many of us, 2020 was a difficult year and one we'd prefer to forget. But it also showed the strength of the human spirit and what we can achieve when we all come together. Doctors of the World greatly appreciates the kindness and compassion shown by our supporters over the past year. It is thanks to this support that we've been able to adapt and respond to the pandemic, and to continue helping people in vulnerable situations to access healthcare.

Thank you again for your support. Together, we can achieve our vision of a world where everyone can access the healthcare they need and where health is acknowledged as a fundamental right.



FIGHTING

COVID-19

AROUND THE

WORLD

A photograph of a man in a white apron and face mask, holding a green glove, standing in a forest. The man is looking directly at the camera with a serious expression. The background is a dense forest with sunlight filtering through the trees.

Since its inception, Doctors of the World (the Mèdecins du Monde International Network) has been responding to disease outbreaks in low-income countries around the world. From the Ebola crises in Sierra Leone and the Democratic Republic of Congo, to plague in Madagascar and cholera outbreaks in Haiti, Angola and Mozambique, our expert staff and volunteers have been on the ground working to limit the spread of disease and its impact on vulnerable populations.

When the COVID-19 pandemic struck, the network's 16 chapters, including the UK, were suddenly faced with a deadly disease outbreak on their own doorsteps, as well as restrictions on the movement of people and shortages of medical supplies. They overcame these challenges to launch programmes to fight COVID-19 in 67 countries, scaling up operations in countries where programmes already existed and identifying new areas of need.

How you helped

The effects of COVID-19 were felt worldwide but it was the poorest countries that were and continue to be the hardest hit, with factors such as a pre-existing disease burden, conflict, inadequate shelter and sanitation, and political and economic instability contributing to their vulnerability.

Applying decades of experience fighting disease outbreaks, Doctors of the World worked to limit the spread of COVID-19 and reduce its impact on vulnerable populations. We did this through activities such as health promotion and awareness raising, training local health workers in infection prevention and control, supplying personal protective equipment, running mobile clinics, and providing psychosocial support to health workers and COVID-19 patients.

We were also able to adapt many of our existing health programmes to COVID-19, to continue supporting excluded communities and ensuring access to healthcare. As well as responding to COVID-19 at home, Doctors of the World UK fundraised for the network response, with our generous supporters donating £78,173.44 to global efforts to tackle the pandemic.

Supporting people who are street homeless during the COVID-19 pandemic

For people who are street homeless, staying healthy during the pandemic has been harder than ever. Access to hygiene facilities, a place to self-isolate or getting access to the NHS is harder than for everyone else. Whilst some are accommodated in hotels, people with the most complex needs are finding it difficult to access accommodation and are continuing to sleep on the streets. Our outreach nurse team are going out to the streets on an evening to provide healthcare advice and help people access the services they need.

Our outreach team met Paul who was rough sleeping in the city of London. He was new to the area and had not been approached by local services yet.

He reported feeling completely well with no symptoms of COVID-19, but we examined him and found he had very low oxygen levels so have arranged for him to go into temporary accommodation and have testing for thought Find and treat.

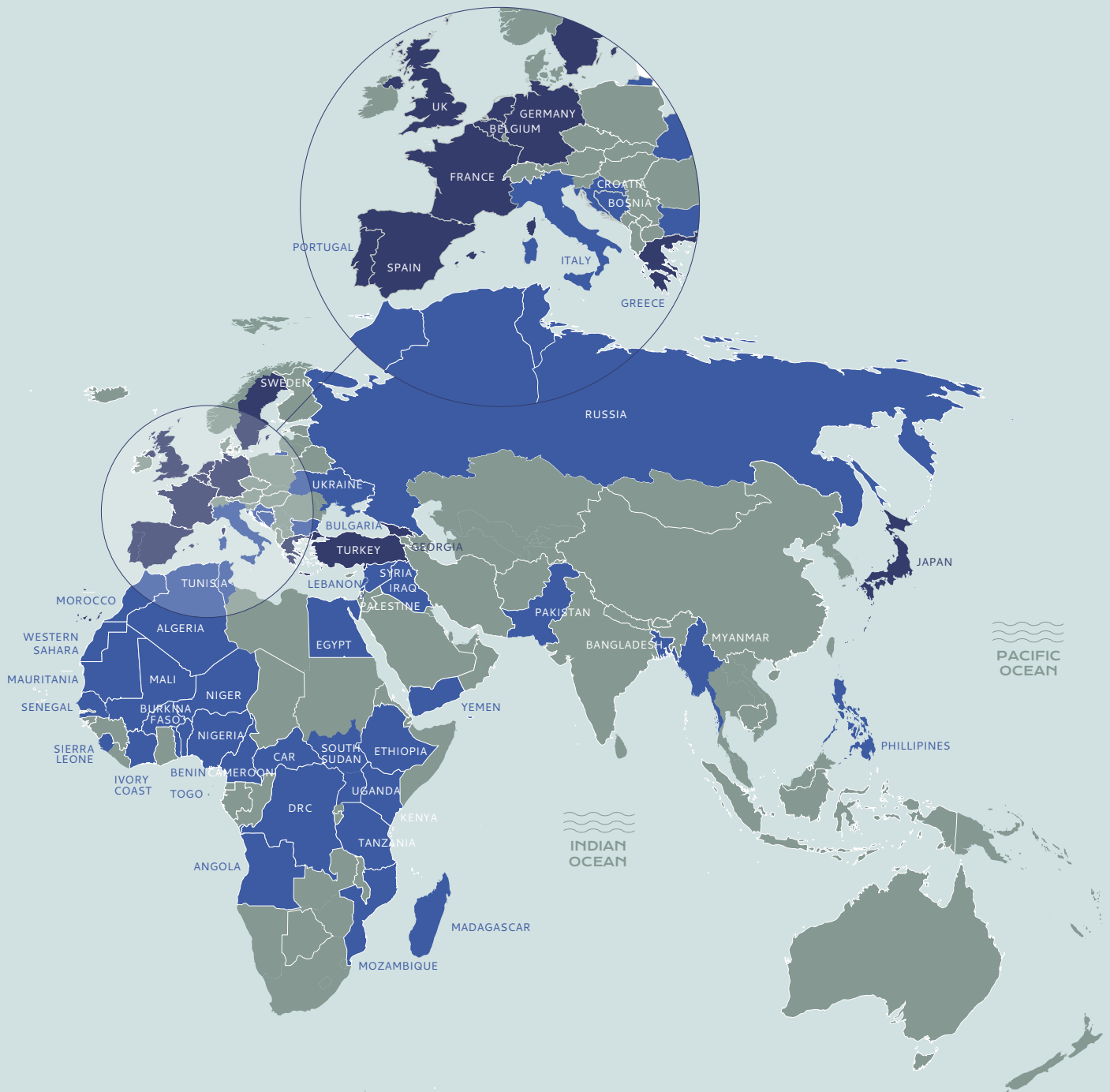
Samir is a 28yr old man from Algeria who was street homeless and only speaks Arabic. We used DOTW translated resources to explained COVID-19 to explain to him its seriousness and convince him to come into temporary accommodation for effective isolation.

We found Lukas, originally from Lithuania sleeping rough in London, he was experiencing severe mental health symptoms and symptoms of Covid-19. Through regular visits and building a rapport we arranged testing (through Find and Treat) and accommodation for him.

GLOBAL COVID-19 RESPONSE MAP

- INTERNATIONAL OPERATIONS
- DOMESTIC OPERATIONS







RESPONDING TO EMERGENCIES



Lebanon

On 4 August 2020, a huge explosion ripped through Lebanon's capital, Beirut. In a matter of seconds, a large part of the city was destroyed and hundreds of thousands of people were left without shelter and in dire need of humanitarian assistance.



Doctors of the World has been working in Lebanon since 1990 and was among the first humanitarian actors on the ground in the aftermath of the Beirut explosion, which killed over 200 people and injured thousands more.

Our initial response was focused on helping people process the trauma of the explosion and the years of conflict and instability that have plagued Lebanon.

Doctors of the World teams visited homes and streets in Karantina, one of the most deprived and worst affected areas, to provide psychological first aid to victims and later mental health and psychosocial support. From August to December, they delivered 942 consultations, psychoeducation sessions, and family interventions and supported 282 men, women and children. They also ran 163 awareness sessions and 16 support groups, which reached over 500 people.

Drug and medical supply warehouses were badly damaged in the blast. In addition to the on the ground response, Doctors of the World sent two emergency health kits to Lebanon, each kit containing medicines, disposables and equipment to meet the needs of 10,000 people for three months. These were distributed through the Ministry of Public Health to 75 health facilities throughout Lebanon.

Doctors of the World UK launched an emergency appeal to support the network's response to the Beirut explosion, raising £16,438.

Dalal's story

Survivor of the Beirut blast, Dalal, recalls the explosion in her shattered home where she lives with her husband, near the port. Sitting before what was once a window, Dalal relives the moment of the explosion: "I was screaming. My husband's nephew was stuck under a door. There's no way I can get this scene out of my head."

More than a month after the explosion, she still experiences eating and sleep disorder, "each time I'm about to eat, I remember all of the people who have lost their hands and legs...how can I eat while many others are not able to have a single bite?" In the past three weeks, Dalal hasn't left her house, nor has she accepted to stay or sleep alone.

Dany, Psychologist at Doctors of the World has been visiting Dalal and her husband to provide Mental Health and Psycho-social Support sessions in the past weeks. Following these sessions and with the support of her husband, Dalal managed recently, for the first time after the explosion, to go out and even to stay alone at home. "I even went to the port, where there's total destruction. I stood there and observed the scene", she says.

She adds: "At the beginning I was afraid to express my fear until Dany explained to me that it's totally fine to express how I feel...he told me that it is normal to feel afraid after the blast. They gave me strength! I felt that someone was helping me."

*Names have been changed to maintain confidentiality.



Greece

On 9 September 2020, a fire broke out at world's largest refugee camp, Moria, on the Greek island of Lesbos. The blaze destroyed the camp and left more than 12,000 men, women and children without shelter and in dire need of medical and humanitarian assistance.

Doctors of the World has been working on Lesbos since 2011, running healthcare programmes at Kara Tepe camp, the overflow site for Moria.

In the immediate aftermath of the fire, our staff were on the ground assessing the damage and needs of those affected to provide urgent medical care and humanitarian aid, while the team in Athens prepared emergency shipments of medicines, medical consumables and non-food items, such as tents, sleeping bags, COVID-19 protective equipment and hygiene kits.

In the weeks and months after the blaze, Doctors of the World continued to ensure access to healthcare for the thousands of vulnerable migrants and refugees on Lesbos. This included setting up medical mobile units at the new refugee camp built to house those displaced by the fires. Through these mobile units, we provided:

- Primary healthcare, including sexual and reproductive healthcare, with pregnant women among those displaced by the fires at Moria camp.
- Infection prevention and control, distributing PPE to health workers and other staff, and hygiene kits with reusable masks to refugees and migrants to stop the spread of COVID-19.
- Mental health and psychosocial support, including psychological first aid.
- Non-food items distributions, including dignity kits for women, which contain essentials like sanitary napkins, soap and toothbrushes.

Similar to the Beirut explosion, Doctors of the World UK launched an emergency appeal to support those affected by the Moria fires, raising £21,494.26.

Erminia's story

Doctors of the World is delivering vital medical care and humanitarian aid on the Greek island of Lesbos, where thousands of vulnerable men, women, and children live in refugee camps. In November 2020, the Doctors of the World team were called to a medical emergency...

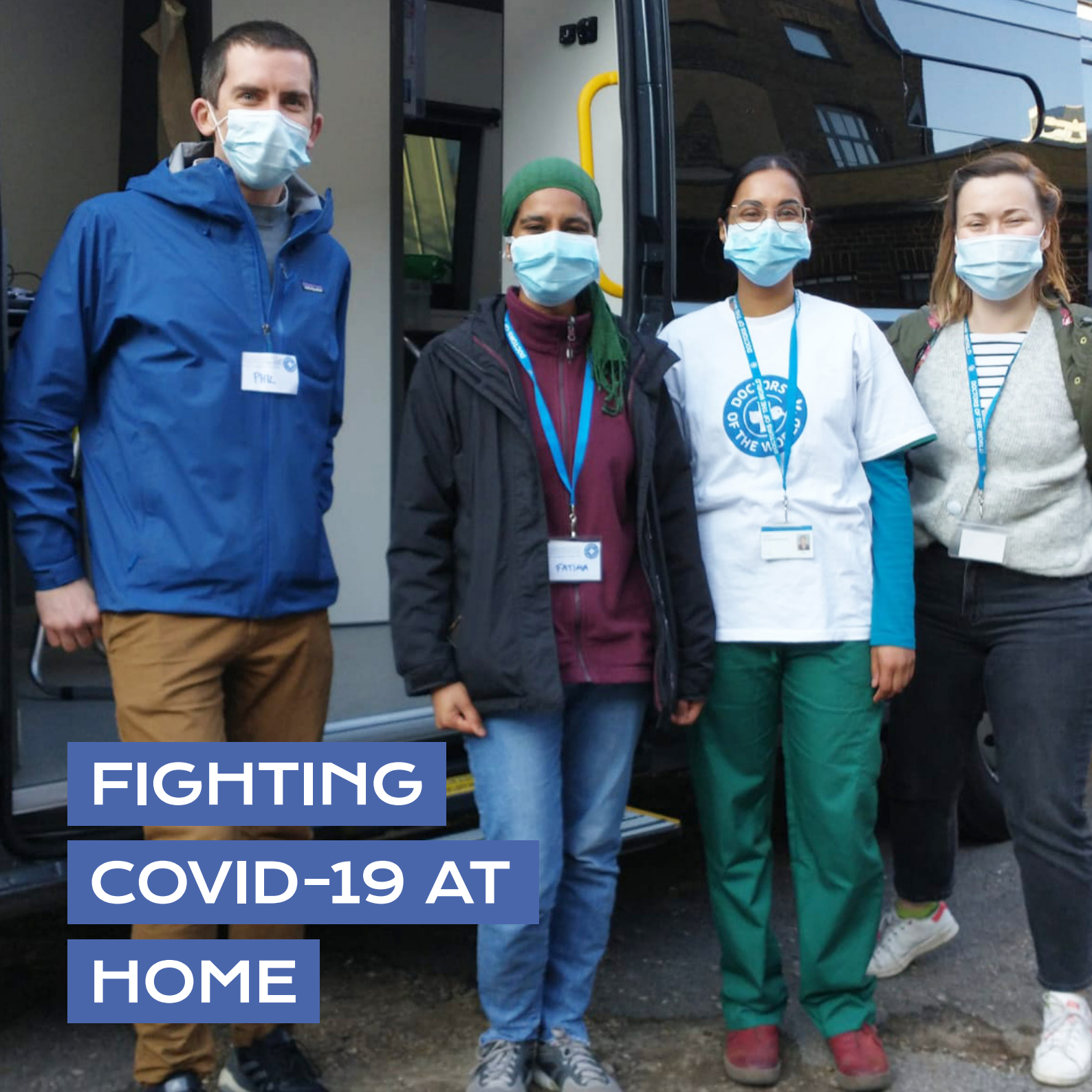
There were dramatic scenes on Lesbos as a woman started going into labour in the new refugee camp built in the wake of September's wildfires.

The medical facilities in the camp are far from sophisticated but as the umbilical cord was wrapped around the baby, there was no time to wait for an ambulance to take the mother to the hospital.

Fortunately, our highly trained and experienced medical staff were on hand, and gynaecologist, Erminia Dalakli, leapt into action, helping the mother safely deliver this beautiful baby girl.

Erminia explained she didn't have a minute to waste when the baby was about to make her entrance: "The mother's dilation was perfect. We called an ambulance from the National Center for Emergency Assistance in order for her to be transferred to the hospital, but I had noticed that there were many umbilical cord wraps, so she had to give birth right there. "But it was okay, I have delivered many babies before."

The baby was born weighing a healthy six pounds eight ounces, with a shock of dark hair and rosebud lips. She doesn't have a name yet, but she has no shortage of admirers.



**FIGHTING
COVID-19 AT
HOME**



The COVID-19 pandemic provided challenges ever experienced before by Doctors of the World. Such times called for innovative action to ensure that we could continue to support as many people who needed us as possible.

We had to close our East London clinic and begin to provide services remotely. This was done through phone consultations and virtual appointments. In addition, our helpline services supported hundreds of people per month throughout the pandemic, and continue to do so even as restrictions begin to ease.

Doctors of the World, in partnership with the British Red Cross, produced translated COVID-19 vaccine guidance for migrant and other excluded communities in England, Scotland, and Wales, to ensure everyone can access essential information about the coronavirus vaccines.

The guidance included advice on who can get the coronavirus vaccine and how to get it, as well as information on the safety, effectiveness, side effects, and ingredients of the vaccine.

It was made available in English, Albanian, Amharic, Arabic, Bengali, Dari, Farsi, Filipino, French, Gujarati, Hindi, Indonesian, Kurdish Sorani, Malayalam, Pashto, Polish, Portuguese, Punjabi, Romanian, Russian, Simplified Chinese, Spanish, Somali, Tamil, Tigrinya, Traditional Chinese, Turkish, Twi, Ukrainian, Urdu, and Vietnamese.

Marilyn's story

Marilyn used to be a domestic worker in Saudi Arabia before coming to the UK with her employer on a working visa in 2016. Upon arrival, her passport was taken from her, and she was told she was not allowed to leave the house.

She experienced abuse but was very afraid to leave without documents or a valid visa. In 2019, she managed to finally escape and to seek help in a church.

Marilyn had been living without documents and without access to healthcare since arriving in the UK. A friend she met in the church told her about the Doctors of the World east London clinic after she complained of constant pain in her back. She came to the clinic in January 2020 where the volunteers helped her to register with a GP and to access legal advice.

As the lockdown for COVID-19 started in March 2020, Marilyn had no time to apply for asylum. She is currently living with a group of ex-domestic workers she met through the church: "Living with people who speak my language and understand what I went through made a huge difference in my life. I was a prisoner and a slave. Now, despite being poor and having no job, I have high hopes for the future after Covid."

Marilyn struggled to access information on COVID-19 and the lockdown rules. As a result of the pandemic, many charities and services including churches had to close. This left Marilyn and her flatmates in a difficult position where they did not know what was happening and how to protect themselves. She finally managed to find translated information in her language on the Doctors of the World Facebook page. The translated and regularly updated information was helpful not only on being informed about the pandemic, but also to access local services.



East London clinic

The east London clinic is at the heart of what we do in the UK. At the end of March 2020, as the UK went into lockdown due to COVID-19, we temporarily closed the clinic and put the necessary measures in place to begin remote GP consultations. Despite the many challenges the pandemic presented, we were able to quickly and safely adapt our clinic services to remotely support 1,098 people through 1,002 social consultations and 492 medical consultations.

Meeting the specific needs of our service users and ensuring their safety, along with the safety of our volunteers and staff, remains at the centre of our operations as our response to COVID-19 continues. In September 2020, we were able to trial reopening the clinic with COVID-19 safety measures in place before lockdown restrictions came into force and we returned to remote consulting.

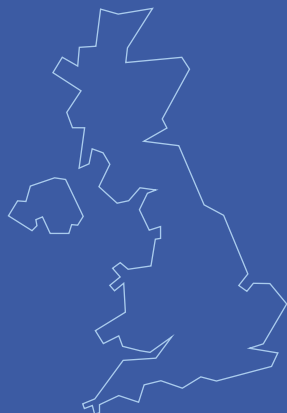
As well as providing medical care, advice and practical support remotely, our doctors, nurses and caseworkers screened patients for COVID-19, offered information on government guidance in the service user's language, and explained how to access COVID-19 services through the NHS. Working remotely, the advice line team answered 1,279 calls and arranged remote consultations with our doctors, who provided 149 prescriptions.

The clinic and advice line team also helped patients access food as the first lockdown led to job losses and plunged already vulnerable people into further poverty and destitution. In response to the increased number of queries from service users who had lost their jobs and could not buy food, a destitution caseworker role was created to support people to connect with foodbanks and mutual aid groups for emergency food parcels.



UK service users

2020



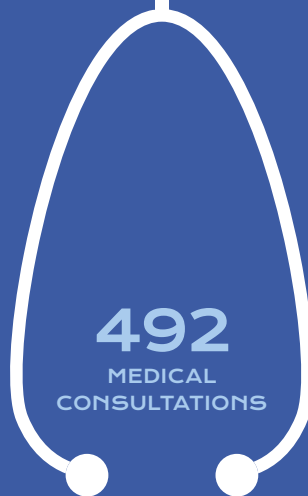
1,098

PEOPLE SUPPORTED



1,002

SOCIAL
CONSULTATIONS



492

MEDICAL
CONSULTATIONS



149

PRESCRIPTIONS
PROVIDED



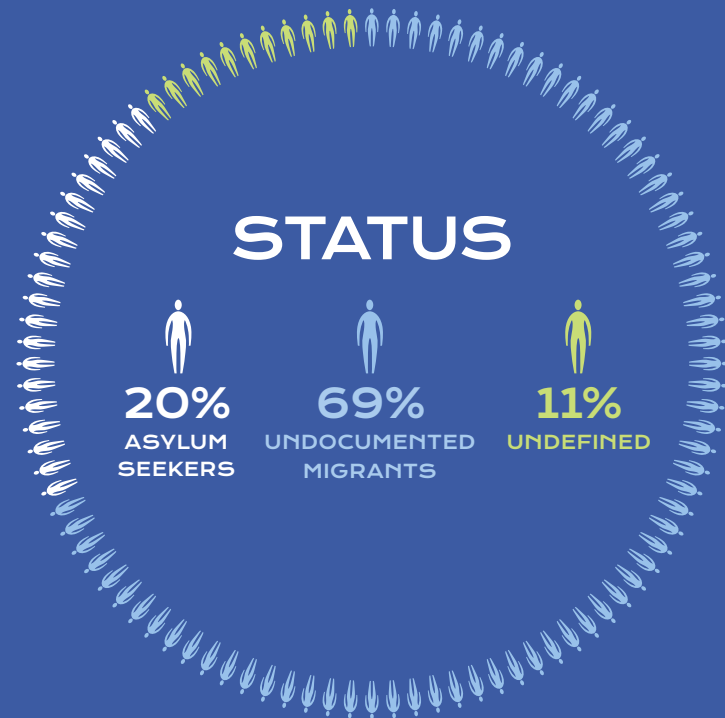
77%

OF PATIENTS NOT
REGISTERED WITH A GP



73

DISCLOSURES
OF VIOLENCE OR
ABUSE BY PATIENTS



1,279

CALLS TO THE
ADVICE LINE
ANSWERED



19

ADVICE LINE
CALLERS WERE
NOT AWARE OF
THE CURRENT
COVID-19 ADVICE

16

ADVICE LINE
CALLERS WERE
EXPERIENCING
SYMPTOMS OF
COVID-19



84%

OF PATIENTS WERE LIVING
BELOW THE POVERTY LINE



9 YEARS

THE AVERAGE
LENGTH OF TIME
PATIENTS HAD BEEN
LIVING IN THE UK
BEFORE ACCESSING
OUR SERVICES



65%

OF PATIENTS WERE HOMELESS
OR STAYING IN TEMPORARY
ACCOMMODATION

Mobile clinic

In 2019, we launched the mobile clinic, a purpose-built vehicle that provides everything a GP or nurse might need for primary care consultations, as well as a private space for caseworkers to provide in-depth support to our patients.

When COVID-19 arrived in early 2020 and the van became too risky, our doctors and nurses donned PPE and hit the streets to deliver weekly medical outreach to people experiencing homelessness in the City of London on foot. In June, after a successful six-month pilot project, we secured new funding to continue this vital work for another 12 months.

We also ran a four-week pilot project focused on improving access to healthcare for Traveller communities camped in the London Borough of Enfield and started supporting asylum seekers housed in Home Office accommodation, including twice weekly outreach at a hotel in Hackney.

In 2020, we received a generous donation for a second, purpose-built mobile clinic, which was delivered in early 2021.



Translated resources

The UK is a multilingual society. In England and Wales, over four million people speak a main language other than English with 864,000 speaking little to no English.

When the UK first went into lockdown in March 2020, it quickly became clear to Doctors of the World that many people didn't have access to information on COVID-19 and the public health measures in place in their language.

We worked with our partners to translate UK-wide coronavirus guidance into over 60 languages. Over the course of the year, these resources were downloaded 57,791 times.

We also joined with around 20 local authorities, public health bodies and non-profit organisations to call on the UK government to produce and maintain accessible COVID-19 guidance in languages that reflected our multilingual communities.

Since then, we've seen a marked improvement in the availability of government public health information in other languages.

Thanks to our partners and supporters, we've continued to produce new translated resources on a wide range of health topics in a variety of formats and in up to 63 languages.

Homeless outreach

During the pandemic, Doctors of the World has been working to improve rough sleepers' access to healthcare in the City of London.

We have secured new funding from the City of London Corporation to run weekly outreach sessions until July 2021, in partnership with homeless charity St Mungo's.

The service is being led by our mobile clinic coordinator Dr Durga Sivasathiaseelan and follows a successful six-month pilot project.

Durga shares her experience returning to the streets of London to support this vulnerable population: "The city feels like it's changed. Pubs, bars and restaurants are open again, and everyone is hanging outside drinking and eating."

The first rough sleepers we come across is a couple living in a tent. They both have medical issues.

The man, who's in his 40s, has COPD (chronic obstructive pulmonary disease), which is a chronic lung condition. That means he's one of the people who ideally when there was shielding, should have shielded during COVID-19. "I ask everyone we see on outreach... Have you had a high temperature or a new, continuous cough? Has your sense of smell or taste changed at all?"

His partner has mental health issues as well as asthma, but she isn't registered with a GP in London. We talk to her about the importance of being registered with a GP and explain that they will be able to prescribe her medication for her asthma if she needs it and that it won't matter if she doesn't have a fixed address – she says these are the kinds of things that put her off going to a doctor.

She also thinks that because of COVID-19, GPs won't be seeing anybody, so they won't be able to help her. I explain that because she has a mobile phone, the practice will be able to call her and potentially deal with her issues over the phone and arrange prescriptions that she can go and pick up.

Her partner says he will go with her to his GP practice the day afterward to help her to register. I will try to visit them again next week so I can check whether she's managed to register.

Rapid needs assessment

In April 2020, Doctors of the World carried out a rapid assessment of the circumstances and needs of communities excluded from healthcare services during the COVID-19 pandemic.

Working with service providers and people with lived experience, our researchers looked at the pandemic's effect on a wide range of groups: refugees; people seeking asylum, including unaccompanied asylum-seeking children; undocumented migrants, including survivors of trafficking; people in and recently released from immigration detention; people experiencing homelessness; Gypsy, Roma and Traveller communities; sex workers; and people recently released from prison.

They found COVID-19 and UK control measures had amplified existing inequalities and created additional barriers, further reducing these groups' access to healthcare and services. The key findings of the COVID-19 Rapid Needs Assessment (RNA) were:

- Excluded people are at higher risk of being exposed to the virus because they struggle to access and follow public health advice for reasons including language barriers and their financial and living circumstances.
- Excluded people struggle to see a doctor amid barriers such as digital exclusion and fear and mistrust of NHS services.
- Excluded people are at the sharp end of the pandemic. For example, some are at risk of being evicted from their homes or are already sleeping on the streets.
- Excluded people's mental health is suffering with some having existing mental health problems and many reporting loneliness, increased fear and anxiety, depression and sleeplessness.

The RNA made 12 recommendations for the UK government, the NHS, local authorities, charities, and health service providers on how to mitigate the impact of COVID-19 on these communities.

Alone and abandoned

Asylum Seekers Being Denied Help – Erick started to feel ill with symptoms of COVID-19 and was worried about his wife and six-year-old daughter. "We didn't know how to get food or buy medicines for the symptoms. I had thousands of questions, like what kind of things am I able to take for the continuous dry cough that I have. The struggling to breathe is the thing that most worried me because that is what kills you. I called NHS 111 and they told me they were going to call me again...they never did."

Refugees Crammed In Shared Accommodation – Amanda is living in cramped accommodation with her young daughter. It is impossible to social distance from the other mothers and children. When her daughter needed a secondary care service, she was unable to get the information she needed from her GP: "I have been calling the GP all week, but no one can help me."

Sex Workers Inequalities Amplified – Sarah is struggling financially due to coronavirus and worries about how vital services have been disrupted within her community: "Those who aren't getting or able to get state help are facing criminalisation for working. Street-based workers are facing a near impossible situation, and those who are able to see clients aren't able to access sexual health services. All of these situations put workers into the path of this virus."

Traveller Communities Turned Away From GP Surgeries – Rose is British Romani Gypsy and lives with her daughter who has a number of health conditions. Rose has learned accessing healthcare isn't straightforward: "If you get symptoms, first you have to find a place to stop and then find a GP that will accept you. The chances of finding those two things? You've got no chance."



Hands Up for Our Health

In October 2020, we launched our first coalition campaign in partnership with the Faculty of Public Health and Lancet Migration.

Hands Up for Our Health is a coalition of organisations fighting for everyone in the UK to have the chance to access healthcare, during COVID-19 and beyond.

We have three asks for the UK government:

1. Suspend NHS charging during the pandemic
2. Investigate the impact of charging on patient and public health
3. Improve access to all NHS services

Hands Up for Our Health has grown to over 60 organisations and hundreds of individuals.

COVID-19 vaccine project

At the end of 2020, as the UK's COVID-19 vaccination programme got underway, Doctors of the World UK secured funding for a project that aims to ensure equal access to COVID-19 vaccines.

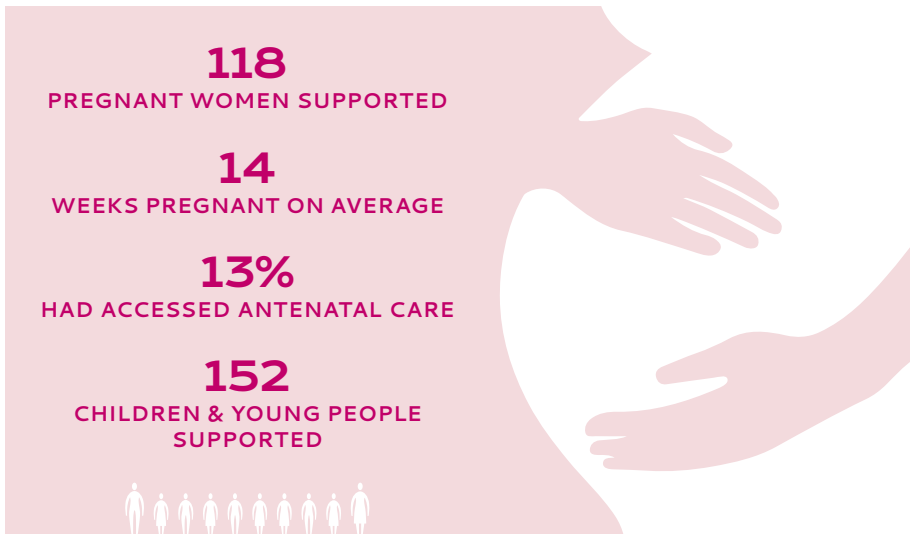
Under the COVID-19 Vaccine Advocacy Project, we will produce new translated resources to promote uptake of the vaccines and to ensure migrant communities know their rights to healthcare, including vaccination services, in the UK.

We will also play a proactive advocacy and coordination role in the roll-out, drawing on the experience of our patients and our links with clinicians and migrant and health organisations to influence the vaccination programme and ensure everyone in the UK can access vaccines, regardless of immigration status.



IX66 BTY

**ENSURING
ACCESS TO
HEALTHCARE
IN THE UK**



Women and children's project

Doctors of the World's female patients are among the most marginalised women in country and our Women and Children's Project supports hundreds of women and their families each year. In 2020, nearly half (48%) of our 1,098 service users were women, of whom 118 were pregnant, on average 14 weeks.

Our staff and volunteers provide vital services to these patients, including health assessments, STI screenings, and information and advice on accessing NHS services. They also spend time informing pregnant women about NHS charges for antenatal care and signpost them to organisations that can help them to negotiate a payment plan. For those who are ineligible for free NHS care, it costs around £7,000 for an uncomplicated pregnancy.

The NHS charging regime makes the situation very complex for women in vulnerable circumstances, who might struggle financially and have often survived traumatic experiences at home and in the UK. We therefore work to reassure and support them to access antenatal care, in the best interests of themselves and their child.

In 2020, we also supported 152 children aged between 0 and 19 years. We try to ensure the children are safe and are adequately cared for. We help their families to register with a GP and support them to participate in the UK's childhood immunisation programme by signposting and providing information about the process.

Young people leaflets and webinars

For the past two years, Doctors of the World UK and the British Red Cross have collaborated on a young people wellbeing project. The project supports young refugees and unaccompanied asylum-seeking children aged 18 and under to improve their health and wellbeing through increased knowledge, improved confidence, and greater access to health support services.

In 2020, we worked with our partners and project participants to develop a series of educational leaflets on health and wellbeing topics relevant to young people. The leaflets cover healthy living, mental health, the NHS, and sexual health and are available in 21 languages.



The launch of these translated resources was complemented by a series of free webinars on topics of interest relating to the health and wellbeing of young people and featuring experts in these areas, including Doctors of the World volunteers.

Birmingham pilot project

In November 2020, Doctors of the World launched a pilot project in Birmingham, a city that has a large, established migrant community, with over 22 percent of the population born overseas and more than 40 percent of residents belonging to black and minority ethnic groups.

This was our first time delivering clinic services outside of London, to a patient group identified as having significant healthcare access issues. Due to the risks and uncertainty posed by COVID-19, the Birmingham clinic was launched remotely and operated on a weekly basis.

Similar to the east London clinic, Birmingham staff and volunteers provided support and expert advice to patients and allied organisations with healthcare access issues. They provided social and medical consultations, prescriptions, GP registration advocacy and advice on accessing other NHS services, such as COVID-19 testing, treatment and vaccination.

Funding for the pilot project ended in April 2021 and we are seeking funding to secure a future Birmingham clinic service.

HIV and STI project

In 2020, Doctors of the World launched a project to deliver a new approach to HIV testing and STI screening in our east London and mobile clinics, as part of efforts by UNAIDS to eliminate HIV transmission in London by 2030.

The project provides patients with information and advice on HIV and STI transmission and treatment, as well as services including HIV point of care testing, STI screening, and initial counselling following a positive test result. It was initially launched as a remote testing service due to COVID-19.

While the remote service was being implemented, patients were supported to access STI home testing kits through NHS services.

Initial accommodation

When asylum seekers first arrive in the UK, the Home Office houses them in initial accommodation. Access to healthcare is typically very poor because the Home Office does not require accommodation providers to link residents with health services, meaning asylum seekers, who are often very vulnerable, can go for long periods cut out of the NHS.

Between April 2020 and 2021, the advice line received calls for help from 42 people who were housed at initial accommodation centres and hotels. None had a GP and reported difficulty accessing healthcare, despite being in hotels for several weeks. Clinical concerns raised included mental health needs, regular medications that had run out, including cases of interruption to antiretroviral treatment for HIV, and suspected cancers referrals.

For six months in 2020, we ran clinic sessions at a hotel in London used as temporary initial accommodation, carrying out initial health checks and supporting residents to register with a local GP practice. Of the 170 residents we supported, over 80% had no access to primary care, while more than 70% had received no healthcare since arriving at the hotel.

Sex workers outreach

In 2019, Doctors of the World commissioned research to gain a better understanding of the health and service needs of street sex workers in the London Borough of Newham, following the closure of a long-standing specialist support service.



The extreme unmet health and service needs of street sex workers in East London before and during the COVID-19 pandemic

EXECUTIVE SUMMARY

In October 2020, a researcher and a Doctors of the World nurse conducted outreach with women selling sex on street, to assess how their needs had changed since the COVID-19 pandemic had begun and to offer them an opportunity to engage with Doctors of the World's services.

The research was published in May 2021 with a series of recommendations for addressing the extreme unmet physical and mental health needs of street sex workers in Newham.



Baby boxes

Many of our pregnant service users experience extreme hardship. That's why, in 2020, we partnered with PramDepot, an arts-led recycling project, to provide these women with many of the things they need to welcome a baby into their home.

Baby boxes contain high-quality recycled baby clothes and equipment, all packed into a box, which can be used as a bed for the baby.

Baby boxes are commonplace in Scandinavian countries, such as a Finland, where a government-

funded maternity package is available to expectant mothers to give all children, no matter what background they're from, an equal start to life.

They are also provided universally in Scotland and supported by the Royal College of Midwives as a way to reduce the risks associated with unsafe co-sleeping.

If a Doctors of the World patient is identified as extremely vulnerable or as having no financial support, they are referred to PramDepot, which arranges delivery of a baby box.



Safe Surgeries

September 2020 marked two years since the launch of our Safe Surgeries initiative, which aims to remove barriers to GP registration by providing clinical and non-clinical staff with free training, advice, and resources on how to make their practice inclusive and welcoming for everyone.

Safe Surgeries has been endorsed by the Royal College of General Practitioners and the Royal College of Nursing. The initiative gained greater prominence in 2020 as COVID-19 put health and access to healthcare at the forefront of people's minds, while creating new barriers to GP registration as health services moved online and those without the means or ability to access them were cut off from care.

Towards the end of the year, as the UK's COVID-19 vaccination programme got underway, the need to make practices safe places became more urgent than ever amid a government-led push for GP registration.

The Safe Surgeries team overcame the challenges of the pandemic to deliver 50 Safe Surgeries online training sessions to 1,334 healthcare professionals, with support from eight Clinical Commissioning Groups (CCGs) who promoted the initiative in their areas. They also launched a COVID-19 response toolkit and issued nine e-newsletters to maintain engagement.

By the end of 2020, 100 new GP practices had joined the rapidly growing Safe Surgeries network. In total, there are 387 GP practices across 55 cities and towns that are committed to providing inclusive and welcoming healthcare for everyone in their communities. They represent 75 CCGs, stretching from Kernow CCG for Cornwall and the Isles of Scilly to Scotland.

Hospital Access Project

At Doctors of the World, we are committed to ensuring that healthcare is never wrongly denied for the patients we serve and that patients with serious health conditions are able to access the care they need. In June 2018, we launched the Hospital Access Project to provide specialist casework support and legal advice to people refused NHS hospital care or non-primary care related NHS services in the community due to their immigration status in the UK and as a result of the NHS Charging Regulations (2015 and 2017).

The Hospital Access Project is dedicated to advocating consistently and powerfully on behalf of our patients to hospitals and NHS trusts where immediately necessary or urgent care has been denied and has built an established track record of successful outcomes for our patients.

In October 2020, we published a report highlighting the lengthy treatment delays and high levels of destitution faced by our patients who had care withheld as a result of the charging regulations. Titled: Delays and Destitution, the report presents the findings of an audit of patient data collected by caseworkers delivering the Hospital Access Project between July 2018 and July 2020.

The audit found our patients were denied treatment for an average of 37 weeks, despite suffering from conditions such as cancer, heart problems or kidney failure. It also found that the NHS charging policy is being applied to destitute individuals with no realistic prospects of being able to pay for the NHS services they receive.

The report makes three recommendations to reform the healthcare entitlement policy to prevent unnecessary treatment delays and patient suffering.

Barracks

In September 2020, the UK Government commissioned two previously disused Ministry of Defence sites as accommodation for people who are seeking asylum in the UK. By November, 665 people were being housed across both sites.

We worked with our partners to provide remote support to residents, who would otherwise have had little to no access to healthcare, despite the high prevalence of complex physical and mental health needs among the asylum-seeking population.

Together with Freedom from Torture and the Helen Bamber Foundation, we coordinated a joint letter to the Health and Home Secretaries to urge them to close the barracks due to the lack of access to adequate and appropriate healthcare services, the public health risks resulting from a lack of compliance with the COVID-19 regulations, and the risk of re-traumatisation triggered by accommodation in former military barracks. The letter was signed by key medical organisations, including the British Medical Association and a number of royal medical colleges.

In the months that followed, we continued to provide remote support to people housed in the barracks and to call for their closure. We also submitted evidence to a parliamentary inquiry into conditions at the barracks.



Challenging the hostile environment

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

We coordinate the Expert Consortium on Refugee and Migrant Health, which brings together UK health research and policy experts to facilitate collaboration, learning, and evidence-based decision-making in the field of migrant health and healthcare. The consortium met remotely four times in 2020.

We also continued to shine a light on the impact of hostile environment policies on access to healthcare. In April 2020, with more than 30 other medical and non-profit organisations, we wrote to the Home and Health secretaries urging them to suspend the NHS charging regime and all associated immigration checks and data sharing to ensure no one in the UK was prevented from seeking care due to fear of immigration enforcement.

We also published new research and reports, such as the COVID-19 Rapid Needs Assessment, demonstrating the harmful impact of hostile environment policies on patient and public health.

National Health Advisors

In 2020, we launched a co-production project to ensure migrants have greater influence over Doctors of the World's services and policy work. Migrants with lived experience of healthcare exclusion know best the impact of policies and services that affect and are available to them. Their insights should be at the centre of changing attitudes among the general public, making well-informed decisions, ensuring services are inclusive, and driving sustainable policy change in healthcare.

The launch of the National Health Advisors aligns with our strategic objective to "strengthen our movement with greater numbers of healthcare professionals, activists and service users who together support and set the direction of the organisation". In line with this objective, our approach will be to "work hand-in-hand with those benefiting from our services, advocacy or activism".

National Health Advisors work as an equal partner in the project, bringing their voices, views and insights to Doctors of the World's services, policy influencing and strategic engagement work, media, and campaigns.

Meet our National Health Advisors...

Adeola*

Adeola is a mother, an asylum seeker and a survivor of human trafficking. Since arriving in the UK, she has struggled to access a GP, medication and mental health support, which has made it hard for her to manage her mental illness. Adeola was also wrongly sent a bill for hospital care after giving birth to her son but was able to advocate for herself and defend the charges. She is one of DOTW's National Health Advisers, a steering group made up of people with lived experience of healthcare exclusion.

"We are currently in a pandemic and the government should be protecting everyone in this country, but people with no status or visa are not protected, even though we are here. This is discrimination, and unsafe for everyone. Many frontline workers have worked hard to protect this country from COVID-19 and yet many of them cannot access support. BAME [Black, Asian and Minority Ethnic] communities are two to three times more likely to die from COVID-19. They have to work more, are exposed more [and] have to live in cramped conditions because they can't get any help from the government.

"Don't let people die in silence, don't let people die because they're scared of the immigration, the way the system is... We need this campaign to just help, to make things easier for asylum seekers, refugees and people that don't have documents, yet... Healthcare should be one of the most important things, to look after our health... It shouldn't be something you need to fight for."

Kemi



Kemi is a mother-of-four and refugee living in London. Originally from Nigeria, she has been in the UK for six years and was recently granted refugee status after a four-year wait. Kemi first came to Doctors of the World after being wrongly refused GP registration.

She was diagnosed with depression and supported to register with a GP and get the care she needed. Kemi is one of DOTW's National Health Advisers, a steering group made up of people with lived experience of healthcare exclusion.

She explains why she supports the Hands Up for our Health campaign: "I have been in their shoes. I know how it feels when you can't access doctors, the damage it can do to people. If not for Doctors of the World, I now would be dead and leaving my four children alone... I want to be on this campaign to enable them [the government] to know how it feels, to let them know the impacts they're having if people don't access good health services.

And I want to join so they will know how to better the services for migrants and refugees... Not just refugees and migrants – I know of many people that don't know their rights when it comes to health issues. To make sure everything is improved for everybody, so everybody has access to good quality health services, that's why I've joined the Hands Up for our Health campaign."

*Name changed for privacy reasons.

YOUR

SUPPORT



Community fundraising

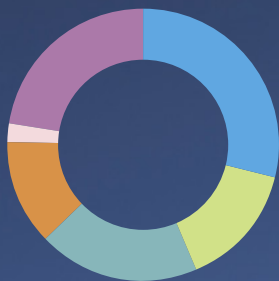
As a non-profit organisation that doesn't receive any government funding, we rely on donations to keep our clinics and helpline running. In 2020, many sporting and charitable events were postponed or cancelled due to COVID-19. Despite the challenges that the pandemic presented, our wonderful supporters raised tens of thousands of pounds for Doctors of the World UK. They did this through events such as the virtual London Marathon, JustGiving and Facebook fundraisers, and birthday pledges.



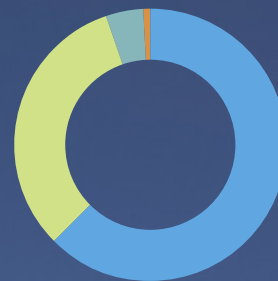
Responding to emergencies

From the COVID-19 pandemic to the catastrophic explosion in Beirut, there were many humanitarian emergencies in 2020. Whenever a disaster happened, our supporters rallied to support those affected, raising over £116,000 through appeals. These funds helped us to provide emergency medical and humanitarian aid, and to ensure access to healthcare, both at home and abroad.

Income & expenditure



- Trusts and foundations **£506,206**
- Donated office space and volunteer time **£257,730**
- Individuals **£338,056**
- Mdm Network **£216,947**
- Other **£39,614**
- Institutions **£391,780**



- National activities **£905,286**
- Cost of generating funds **£466,747**
- International activities **£62,775**
- Governance **£10,336**



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

Whether it be in a disaster or war zone, a refugee camp or our London clinic, in the UK and across the globe, our volunteer doctors and nurses are giving their time to help the most vulnerable to access healthcare.

By sponsoring a doctor with a monthly gift, you will join a movement of people who are committed to a world where no one suffers or dies because they can't access medical care. Just £8 per month could cover the cost of essential vaccines, drugs and medical equipment for our doctors to use in the field.

Fundraise for us

If you're feeling adventurous, athletic or celebrating a special occasion then you can use this to make a real difference. Simply decide what it is that you want to do – whether it's run a marathon or host a bake sale – then set up your personalised fundraising page and share it with your networks. Please do get in touch for inspiration, advice, and support with your fundraising effort.

Volunteer

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

Get in touch

donations@doctorsoftheworld.org.uk • 020 7167 5789

HOW YOU CAN HELP: VOLUNTEER SPOTLIGHT

Fourteen years ago, midwife Bettina Wanninkhof picked up a newspaper article that would kickstart a long and fulfilling career volunteering with Doctors of the World. We spoke with Bettina, so she could tell you her story in her own words.

How long have you been a midwife?

I commenced my midwifery training in 1990 after five years working as a paediatric nurse. I went on to work full-time as a hospital midwife in southwest London until the end of 2004 when I enrolled on a Master of Science in Medical Anthropology. I have continued to intermittently work as a Bank midwife since then, mainly in the antenatal clinic of St. Helier Hospital, Carshalton.

How did you come to volunteer with Doctors of the World?

In 2006, while on the tube on my way home, I found an Evening Standard, which contained an article about Project London in Bethnal Green – the forerunner of today's DOTW clinic in Stratford. The project sounded novel and worthwhile, and there was mention of a shortage of volunteers, so I applied (and was accepted) to work as a volunteer nurse at the new clinic. I have been involved with DOTW for 14 years now – some years more intensely than others. I found my personal niche within the charity when the Women and Children's Clinic started in 2014.

What drives you to volunteer after all these years?

I believe strongly that healthcare is a human right and while there are still health inequalities in the UK, feel privileged to be able to help to alleviate them in a small way.

How has Doctors of the World evolved since you first joined?

The principles of delivering clinical and advocacy support to vulnerable migrants and other people who have been unable to access mainstream NHS services has remained unchanged.

However, DOTW has grown in size and resources, and become a more established organisation since the early days in Bethnal Green. There is now an amazing purpose-built clinic, more advanced technology and multiple clinic supervisors to support and advise volunteers in the clinic and DOTW office.

I stopped working as a health professional volunteer in the late 1990s as my nursing qualification had lapsed. Since then, I have been a support worker and used my midwifery knowledge in an advisory capacity. I enjoy the support worker's role immensely as I am curious as to how people tick.

How often do you volunteer? How has your role been impacted by COVID-19?

For some years now, Tuesdays and Thursdays have been my DOTW days. I spend Tuesdays in the Women and Children's Clinic and Thursdays doing follow-ups. Follow-ups can, for example, involve checking that a woman has received her first antenatal care appointment, alerting a safeguarding midwife to a woman who is particularly vulnerable or finding a charity who can offer a destitute family baby equipment and a clothes bundle.

COVID-19 has not changed the spirit of how DOTW works although the face-to-face sessions have been replaced by remote phone consultations. We are assisting fewer service users but have had to spend more time on the phone with those who have approached us for help. COVID-19

has made destitution worse for our client group who are already in dire straits!

What does a typical day in the Women and Children's clinic look like for you?

Clinic days involves drinking a lot of coffee whilst seeing female service users (and to a lesser extent children), most of whom are new to the clinic. Many women are pregnant and need to be registered with a GP and be given information on how to access maternity services. They often also need information about maternity charges and signposting to charities who can help with food, immigration and housing.

We also see women who want to be referred for a termination of pregnancy and encourage all women to have STI testing and, if appropriate, take up the offer of contraception and free sanitary products. Older women also present to the clinic – many with chronic conditions, which they have self-managed but are at the point where health professional input is required.

What has been the highlight of your volunteer career with Doctors of the World so far?

Hearing British psychotherapist and human rights activist, Helen Bamber, speak at an early volunteer training day remains a highlight, along with being part of the DOTW family.

Having interactions with amazingly strong women who have survived and continue to survive in challenging circumstances has also been truly inspirational. The unfortunate truth is that it is the most traumatic cases (pregnancy after gang rape, for example) that are the most memorable (for the wrong reasons).

A case that had a happier outcome is that of an undocumented Bangladeshi lady with a triplet pregnancy who was abandoned by her boyfriend soon after conception. Because this service user's case was so unusual it was easy to find organisations willing to assist her.

She had early social services input, excellent antenatal care and access to a good (free) immigration lawyer who handled her asylum claim. She was allocated housing in London close to family members and when I last spoke to her, she and the babies were healthy and happy. I never did manage to source a triplet buggy for her though!

Would you recommend volunteering with us? If so, why?

Anyone with an interest in migrant health or who wants to experience working with a service that strives to give holistic care to everyone walking through the clinic door should consider volunteering with DOTW.

Why would you encourage someone to support Doctors of the World?

COVID-19 has put health and the importance of the NHS to the forefront of people's minds. It has also highlighted health inequalities among groups such as Black, Asian and Minority Ethnic communities, people experiencing homelessness and the elderly.

There is a sense that the world has become kinder and more tolerant. This sentiment should not be forgotten and DOTW will need to tap into this spirit to increase funding for UK projects, such as the Women and Children's Clinic, which can transform lives.



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