

# Impact Report 2016





“Our patients are human beings, not migrants.”



When people come to us it's often because they have an immediate health problem but haven't been able to register with a GP. They can see a doctor or nurse at the clinic that day and we refer them to A&E if it's urgent. We also help people register with a GP for the future.

What's striking about what Doctors of the World does is the in-depth support, sometimes spending hours with a patient, including signposting to other services.

I spend a lot of time talking to people finding out their story. That often reveals traumas that they haven't spoken about to anyone else. We give them the chance to talk about these experiences but it can be very hard for them. Sometimes people tell us about violence or being trafficked. They are human beings, not migrants, and for me it's a real privilege to talk to people in the clinic.”

**Dr Thelma Thomas**  
Doctors of the World London clinic volunteer

## Foreword

### 2016 was a tumultuous year.

The shock referendum result that paves the UK's exit from the European Union and the equally surprising American presidential election result caused us to redouble our commitment to human rights. We hope the standards and principles that assure us all a safe, dignified life will weather the storm.

As a global movement of healthcare activists, we believe in outward-looking societies which value diversity as a strength not a threat, where everyone can fulfil their potential. We unequivocally support equal rights for women and girls, the right to seek refugee status, and International Humanitarian Law, including the right to provide and to receive healthcare in armed conflicts.

Yet the humanitarian catastrophe caused by Syria's seemingly endless, senseless conflict continued unabated. Healthcare workers and facilities were targeted, illegally. Civilians were forced to flee in droves as the horrors of life in besieged areas hit our television screens. We asked the Prime Minister to do more to protect them, delivering our message in an unusual twist on the traditional Christmas card that gained widespread media coverage.

The plight of those who made perilous journeys by sea to Greece and Italy was further compounded as European country after country sought to stop refugees moving across the continent. This culminated in a deal between the EU and Turkey that warehoused refugees in camps with not much more than a crippling anxiety about the future to keep them company.

Barriers to healthcare also increased in the UK. Ten years on from our first humanitarian medical intervention in east London, we learned of a deal between the Home Office and the NHS to share patient information for immigration enforcement purposes. A visit to the doctor is no longer private. We will vigorously campaign against this deplorable intrusion into the consulting room whilst continuing to meet our patients' medical needs.

Thanks to a grant from ECHO, British doctors, nurses and translators were able to deliver over 30,000 medical consultations in Greece.

Further afield, a new two-year grant from the Big Lottery Fund enabled us to provide vital healthcare in Nepal and continue to rebuild health centres devastated by the earthquake.

In 2016, our central government grants ended as planned. In a challenging fundraising environment, we worked hard to diversify sustainable income and, for the first time, achieved a 36% growth in income from individuals, putting us on a firm footing for the future. Indeed, we've launched an ambitious new strategy to grow our impact over the next three years.

We won't rest until everyone, everywhere gets the healthcare they need.

This isn't possible without the generosity of our donors, or our remarkable volunteers who give their time and talent to enable excluded people to claim their right to health.

### Thank you for your support.



**Janice Hughes**  
President



**Leigh Daynes**  
Executive Director

## Refugee crisis: Greece in focus

Greece is at the heart of Europe's refugee crisis, which gathered momentum in 2014 and remains a pressing humanitarian emergency.

At the end of 2016, more than 60,000 refugees were stranded in Greece, placing an immense strain on a country still struggling after the economic downturn.

In 2016, Doctors of the World continued identifying and treating refugees in camps on the islands and across mainland Greece. In the first quarter of the year refugees were still travelling through the country to reach western Europe. With funding from UK AID, our mobile teams provided primary healthcare clinics along the refugee route out of specially-equipped vans, in heated tents and on ferries.

By the time the project ended on 31 March, the teams had held 16,658 medical consultations and distributed 5,069 hygiene or baby kits.

Then at the end of March, the EU struck a deal to return many of the refugees arriving in Greece to Turkey. This led to several large-scale refugee camps being set up to accommodate people waiting to be assessed and possibly returned.

The goalposts had shifted significantly and so we developed a more comprehensive and longer-term health response to meet these changed circumstances. We provided 26 British staff, including doctors, nurses and interpreters, to a project in 19 sites across Greece that provided 24,856 medical consultations between 1 April and 31 December, as well as mental health services, dentistry and sexual and reproductive health to vulnerable refugees. We also contributed 11 staff to a project at two Greek camps that were set up in Diavata and Oreokastro in February, where more than 15,000 medical consultations have been provided.



### Idomeni border closure

Greece's northern border with the Former Yugoslav Republic of Macedonia, at Idomeni, was a major informal crossing point for hundreds of thousands of refugees travelling to the rest of Europe. The border was closed in March 2016. In May, thousands of refugees who remained at the border were removed and bussed to camps around Greece. Doctors of the World provided healthcare at the camp right up until it was cleared. In March, Dr Sarah Collis and Dr David Garley (pictured below) from our medical team in Idomeni helped a Syrian woman give birth to a baby girl in a tent. They arranged for an ambulance to take them to hospital and both mother and baby were fine.



## Nepal

When Nepal was hit by a huge earthquake in April 2015, Sindhupalchok was one of the worst-hit areas.

Thanks to a grant from the Big Lottery Fund and working with our network partners, in 2016 we built a series of health posts in Sindhupalchok's villages and a birthing centre in Thokarpa. We also repaired water supply systems in 39 different locations and trained 23 village councils on how to prepare for and respond to natural disasters.

The programme included sexual health education, training of health workers and implementing an SMS alert system. This system warns district health authorities, other villages and emergency responders if any one of 24 symptoms that could signal disease outbreak is detected. This was brought into action in July 2016 when a glacial lake high up in the Himalayas flooded causing river levels to quickly rise, washing away the main access to one of the health posts. Thanks to the surveillance system and the rapid response teams, immediate support was provided and potential disaster averted.

We have also purchased £15,000 worth of emergency medical supplies to stock four key locations in Sindhupalchok and are training rapid-response teams in these facilities.



**In Nepal we repaired water supply systems in 39 different locations and trained 23 village councils on how to prepare for and respond to natural disasters**

## Ukraine

The humanitarian situation in Ukraine has deteriorated drastically since 2014, when Russia annexed the country's Crimea region.

Fighting between the Ukrainian government and pro-Russian separatists has led to large areas of east Ukraine becoming unreachable for the health service.

In January 2016, around 2.7 million people needed humanitarian assistance in the non-government controlled parts of Donetsk and Luhansk provinces. Around 215,000 people were displaced in the government-controlled areas of Luhansk.

Along with our French counterparts, Doctors of the World has been jointly managing a project in Luhansk province, in both government-controlled and non-government controlled areas, since April 2015.

This project delivered quality healthcare to more than 60,000 people in 2016.

Services responding to mental health, sexual and reproductive health and gender-based violence needs are provided from our mobile clinics. Our doctors and midwives held 24,367 consultations, while psychologists carried out 2,789 consultations.

## Sierra Leone

**We stayed in Sierra Leone well beyond the Ebola outbreak in 2014, to help rebuild the country's healthcare infrastructure.**

In 2016, with UK AID funding, Doctors of the World delivered a project for Ebola survivors in the districts of Moyamba and Koinadugu.

The Comprehensive Package for Ebola Survivors (CPES) provides improved access to healthcare for all Ebola survivors, while also providing training at local health facilities to help staff provide care. The project has reduced the risk of a fresh Ebola outbreak due to sexual transmission, an area where the virus has been shown to be more persistent.

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**In Sierra Leone, we stayed well beyond the Ebola outbreak in 2014 to help rebuild the country's healthcare infrastructure**

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## Kenya

**Many rural Kenyans have to walk for several days to reach a doctor or hospital. In Lamu County on the northern coast, the threat of Al Shabaab also obstructs people's movements and the government's ability to provide health services.**

We partnered with Safari Doctors who run clinics on boats for remote and threatened populations along the northern coast. Since June 2016, we have been providing them with specialist medical and financial support. This has helped to improve their clinic management and data collection, leading to better health outcomes and patient follow-up. We also accompanied two floating clinic trips in July and September.

Doctors of the World has also formed a relationship with another Kenyan organisation, the Northern Rangelands Trust. We are partnering to provide healthcare for up to 450,000 people in the remote areas of the country where they operate. Failing rains caused by El Nino have caused a major drought, leading to high rates of malnutrition.

## Haiti

**Hurricane Matthew struck Haiti on 3 October 2016, leaving more than 1.4 million people in urgent need of humanitarian aid and more than 175,500 people displaced.**

Boats, planes and helicopters were the only way to reach some remote areas, and many people in these areas had to wait several days to receive aid. As a result, cholera, due to unclean water supplies, and tetanus, due to untreated wounds, were major threats.

In the UK we launched a fundraising appeal that raised £32,515. These funds meant we could support the 52 mobile clinics our network sent to Haiti's most remote areas. These clinics treated people with cholera and distributed much-needed medical equipment and medicines.



## UK clinics

### London clinics

As the government continues its policy of using healthcare to create a 'hostile environment' for undocumented migrants by making further plans for ID checks and stricter charging at hospitals, our UK clinics are a lifeline for pregnant women, the vulnerable and the sick.

At our clinics in Bethnal Green, Hackney and Brighton we saw first-hand how this climate affects destitute people afraid to attend healthcare services.

In 2016, 170 volunteers at these clinics provided help to 1,924 people – a 20 per cent increase from 2015.

Our volunteer doctors and nurses provide consultations on the day for our service-users, while our caseworkers help them register to see a GP so that they have future access to a doctor. Everyone in the UK has the right to see a GP for free, regardless of immigration status.

In 2016, 89 per cent of our service-users were not registered with a GP when they first came to us, even though they had been in the UK for 5.9 years on average. In addition, 87 per cent were living in poverty. After coming to our clinic, 91 per cent of those service-users are now accessing healthcare. Of those we asked, 9 out of 10 felt more confident about going to their GP and 7 out of 10 had seen an improvement in their health.

### Women and Children's Clinic

We saw 132 pregnant women in 2016, most of them at our fortnightly women and children's clinic, which is also in Bethnal Green. Many only come to the clinic for the first time in the late stages of pregnancy. Fear of being asked for immigration papers or being charged huge sums of money prevents many vulnerable women from seeking antenatal care earlier.

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.

#### Case study: Mariam

In spring 2016, Mariam from Eritrea came to our clinic in east London. She was approximately five weeks pregnant and living on the streets.

During the fortnight before she came to see us, she had gone to A&E with abdominal pain – the hospital diagnosed her as pregnant which came as a shock to her. After she was discharged, she slept in a bus shelter as she had nowhere else to go.

Mariam had tried to register with a GP but was wrongly turned away because she didn't have proof-of-address documents. We helped her register with a GP and access the abortion services she wanted. She later found a place to live with a female friend and now has leave to remain in the UK until 2019.



### Hackney clinic

In Hackney we held a weekly clinic until July 2016, which saw 101 patients. This was supported by City and Hackney Clinical and Commissioning Group until April and our own funds for a further three months. We have successfully proposed a new community-led structure for this project and funding will be awarded from April 2017.

### Brighton clinic

Our weekly Brighton clinic became an established voice on healthcare access for the city's vulnerable groups in 2016. We conducted social and medical consultations for 91 people and our referral networks to the service grew significantly. We established pathways with social services, local sexual and reproductive health services, homelessness organisations and gypsy/traveller groups, as well as the already strong relationships with refugee and migrant support groups.

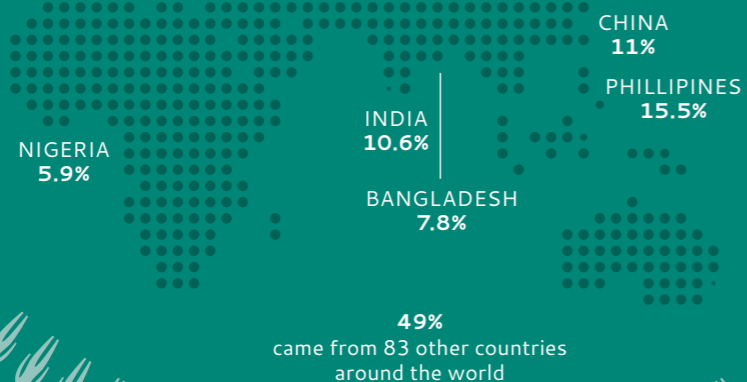
### Pop-up clinics

To reach excluded people who don't or can't come to our clinics, we extended our pop-up clinic pilot in different sites across London throughout 2016, providing social and medical consultations to 81 people. We partnered with the Latin American Women's Rights Service, Notre Dame Refugee Centre, and Justice for Domestic Workers to hold monthly sessions that help us reach their service-users.

In 2016 we provided social and medical consultations to **1758** people across our UK clinics



COUNTRY OF ORIGIN



87% WERE LIVING IN POVERTY

35% WERE LIVING IN UNSTABLE ACCOMODATION

89% WERE NOT REGISTERED WITH A GP



**2 in 5** were refused GP registration due to:  
 lack of ID **39%**  
 lack of proof of address **36%**  
 lack of immigration status **13%**

**5.9 YEARS** the average length of time spent in UK before accessing our services

## Advocacy work

Advocacy is at the heart of Doctors of the World's work. Using patient's stories and data collected in our clinics, we campaign for policies and practices that assure universal healthcare coverage for everyone living in the UK, regardless of immigration status or income.

We have engaged with the Department of Health on how government policies are having a negative impact on vulnerable people. We submitted evidence to its consultation on extending NHS charges for migrant patients and we briefed parliamentarians on how the Immigration Act 2015 affects refused asylum seekers. We also gave evidence to a parliamentary inquiry 'Refugees Welcome?' and spoke at a parliamentary screening of the film Everyday Borders.

### Registration Refused

In April we published Registration Refused: A study on access to GP registration in England which covered Doctors of the World's attempts to register patients with GPs. The report found 39 per cent of people were wrongly refused registration, with the biggest barriers being lack of proof of ID (39 per cent) and lack of proof of address (36 per cent). The report findings got extensive media coverage on Sky News, The Guardian, The Independent and BuzzFeed.

### Right to Care

Now in its second year, our Right to Care project, funded by Trust for London, works to improve access to healthcare for vulnerable migrants in the UK. The project has trained over 800 medical students in refugee and migrant healthcare rights at five universities. Three quarters of those who did the training said they felt more confident to advocate on behalf of patients to ensure they receive healthcare. We have also delivered training and talks for healthcare professionals, GP receptionists, migrant support groups, and health and wellbeing boards across London. We also worked in partnership with commissioners and providers to develop guidance.

## Ten-year clinic anniversary exhibition

In October we marked a decade of our pioneering east London clinic for vulnerable refugees and migrants with a photography exhibition *Undocumented: Healthcare for the Hidden*.

Eight well-known photographers – including Julian Anderson, Toby Coulson, and Katie Peters – collaborated with us to create a series of unique portraits to show just some of the thousands of people helped by the clinic since 2006, alongside the dedicated staff and volunteers.

The exhibition at the Four Corners gallery in Bethnal Green included a portrait of young Sri Lankan, Tavish, by photographer Jenny Lewis. Tavish was forced to leave his country after being tortured due to suspected links to the Tamil Tigers.

Brought to London by a people smuggler his physical and mental health deteriorated, yet despite being in need of urgent medical help, no GP surgery would register him.

The east London clinic has been filling a gap in the NHS for 10 years and the demand for its services is increasing. Since the clinic first opened in 2006, the number of people using the service has increased three-fold.

Speaking at the exhibition launch Leigh Daynes, our Executive Director, said: “Ten years on, our Bethnal Green clinic is needed now more than ever as successive governments make it harder for vulnerable, destitute migrants to get the healthcare they are entitled to. This exhibition speaks not just of their plight but also of the power of many acts of compassion.”

The week-long exhibition was the gallery’s most visited and received widespread media coverage including *The Guardian*, *BMJ*, *Lancet* and several features throughout launch day on BBC London.



## ‘Twas the Season to Give a Damn

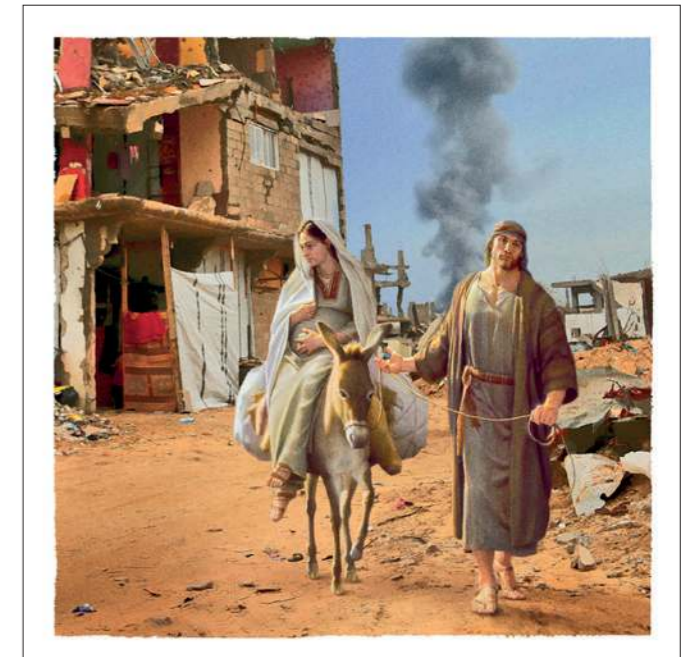
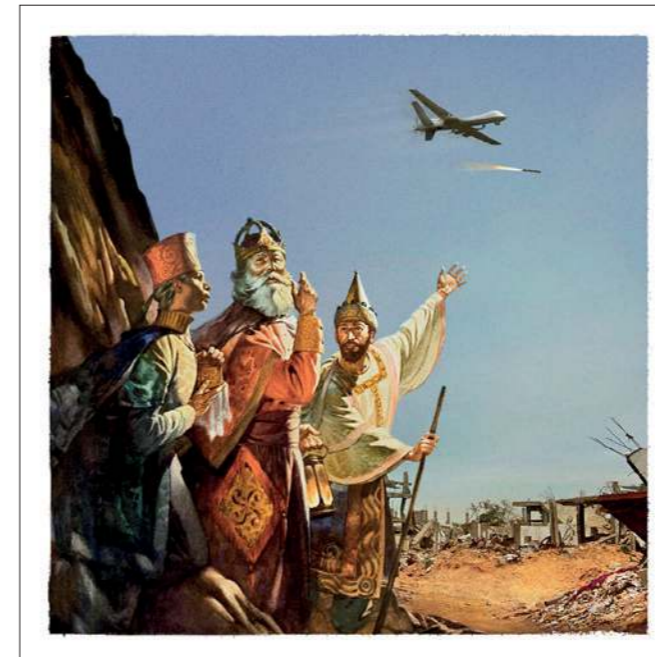
In late November we launched our 2016 Christmas cards that starkly juxtaposed vintage biblical nativity scenes with modern-day photographs of conflict zones across the Middle East.

The cards, with names including ‘Not So Silent Night’ and ‘The Star of Bedlam’, were designed pro bono by marketing agency McCann London and featured photojournalism from Associated Press. Rather than making a religious statement, these images sought to remind the public that war has forced millions of civilians from their homes, and they really need our help.

“Every Christmas a romanticised picture is presented of the holy land of the past, featuring peaceful pastoral images that are shared in homes, churches and high streets across the country,” Leigh Daynes said at the launch. “This is completely at odds with the humanitarian crisis that the region faces today.”

The campaign was a huge success. There was an enormous amount of media coverage in most national newspapers across the UK – including *The Mirror*, *The Sun*, *The People*, *The Daily Mail* and *The Telegraph* – as well as on web pages across the world including BBC online, *TIME* magazine, and the *Huffington Post*.

Amazingly, the cards also featured on CNN’s flagship global interview programme, *Amanpour*. The total media reach was up to 200 million people, including half a million people on social media, which helped drive more than 28,000 people to our website.





## Your support



### Refugee crisis

When the refugee crisis in Greece worsened sharply at the beginning of the year, we launched an urgent appeal online. In two weeks you raised more than £30,000 which provided tents and mattresses for refugees and essential kits for babies, which included milk powder, nappies, and lotion. We were also able to equip mobile medics with backpacks containing vital medical supplies. With help from our friends at Help Refugees we bought a bespoke mobile clinic, allowing us to travel to where we were most needed.

### Runners

Our runners raised more than £22,000 in 2016, by doing the Royal Parks Foundation Half Marathon, the Santa Run, and the British 10k, much of which went to support our refugee crisis work.

Some of our supporters created their own 'challenge adventures' to raise vital funds for Doctors of the World, such as a cycle from London to Calais or a Bird Watching challenge for Calais.

### Haiti

In the UK we raised more than £30,000 to help people affected by the Haiti earthquake.

With these funds we were able to distribute medical supplies in the worst-affected areas and send healthcare professionals to conduct consultations and distribute oral rehydration solutions and water purification tablets, all of which allowed us to spearhead the fight against the cholera epidemic.

## How you can help

### Make a donation

We depend on volunteers to work in our programmes but we need funds for training, equipment, clinics and travel to get them to the places where they are most needed. Regular donations enable us to make long-term plans and react quickly to send clinicians, psychologists, interpreters and other staff to where the priorities are greatest. Your donation will make a big difference.

**£25** could fund a nurse and equipment to care for a newborn in its first hours of life

**£75** could mobilise a volunteer doctor or nurse in a remote area following a natural disaster

**£135** could provide a medical backpack for mobile doctors to reach people living far from a clinic

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. Please visit

[www.doctorsoftheworld.org.uk/donate](http://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.**

### Get in touch

[donations@doctorsoftheworld.org.uk](mailto:donations@doctorsoftheworld.org.uk)

020 7167 5789

 [DoctorsoftheWorldUK](https://www.facebook.com/DoctorsoftheWorldUK)  [@DOTW\\_UK](https://twitter.com/DOTW_UK)

### 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.

### Fundraise for us

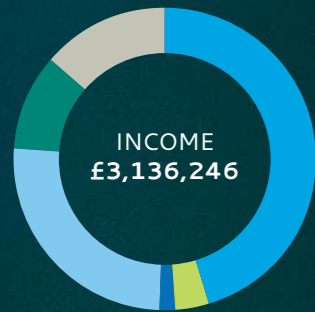
Fundraising is about being creative with your time, skills and contacts. There are plenty of simple ways you can fundraise, such as asking your friends to donate instead of buying presents at Christmas, or baking some cakes and selling them at work.

You could nominate us at your workplace to become their charity of the year, run a marathon for us or share one of our regular fundraising campaigns. Get in touch and we can help you get inspired to do something fun, exciting and life-changing for the vulnerable people we support.

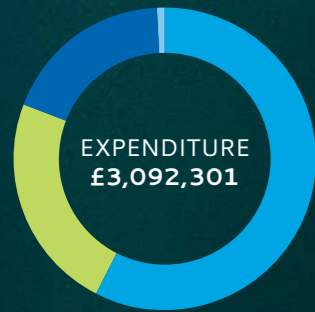
### Volunteer

Our work would simply not be possible without our amazing volunteers. You can help us change lives right now and develop valuable skills and friendships along the way. International and UK volunteers, both medical and non-medical, help us provide care, support and advocacy for some of society's most excluded people. You can find out more about these roles in the jobs and volunteers area of our website.

# 2016 income and expenditure



- Institutions **£1,423,574**
- Trusts and foundations **£115,024**
- Corporates **£49,967**
- Individuals **£802,621**
- Donated office space and volunteer time **£319,289**
- Other **£425,772**



- International activities **£1,786,384**
- National activities **£715,726**
- Cost of generating funds **£569,925**
- Governance **£20,266**



# 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 2016:

As well as:  
**Hackney and City CCG**  
**Brighton and Hove CCG**  
**The Pickwell Manor Foundation**

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

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