



MEDECINS SANS FRONTIERES
無國界醫生



MSF
Activity Report
活動報告
2013

From the President and the Executive Director 主席和總幹事的話

Dear Friends,

Médecins Sans Frontières (MSF) was faced with exceptionally difficult decisions and compromises in 2013. In many of the places where we work, we were prevented from delivering all of the help we should have done by various kinds of violence. At the same time, we have witnessed the striking failure of the global humanitarian aid system to respond in some of the most pressing crises.

The issue of incidents targeting MSF and other humanitarian organisations is of significant concern, not only because of security, but also because of the ultimate impact of these events on the health and survival of the people we aim to help. In Somalia, the situation became untenable in 2013 and finally led to our withdrawal from the country with heavy hearts. Our patients have often been targets and staff members were threatened, attacked, abducted or even killed during our time in Somalia. However, when it became apparent that the parties we had to talk to about security agreements were actively involved in violence directed against MSF, we had no choice but to draw the line.

In Syria, where the civil war has come to its third year, nine million people are internally displaced or have fled abroad. The collapsed healthcare system has left countless Syrians in desperate need of basic medical treatment, but the opportunities to reach people and to respond to their needs remained extremely limited because of the insecurity. MSF is struggling to maintain its presence in the country and provide aid to Syrian refugees in Lebanon, Iraq, Turkey and Jordan.

The situation is equally bad in the Central African Republic, if not worse. Over one million people fled their homes after the coup in March 2013 and the subsequent political clashes which inflamed religious divisions. The violence has been affecting healthcare facilities in which our staff were threatened and intimidated. Even so, by the end of the year, nine MSF emergency projects were delivering healthcare in CAR alongside seven ongoing programmes, and over 800,000 medical consultations had been provided to people throughout the country. But the needs are still overwhelming.

In South Sudan, violence in Jonglei early in the year caused displacement, and in December, fighting between different factions of the army quickly spread throughout five states, causing people to flee their homes. It was only the beginning of what has become a horrible civil war creating intense human suffering in South Sudan. In response, MSF opened emergency programmes while maintaining our regular projects in nine states.

各位朋友：

2013年，是無國界醫生救援工作面對艱巨挑戰的一年，我們作出了多項困難的決定及妥協。在很多地方，因各種暴力事件，我們無法向有需要的人提供應有的援助，同時也目睹全球人道救援系統在應付嚴重危機時顯然失效。

我們極度關注針對無國界醫生及其他人道組織的暴力事件，不但因為當中涉及安全考慮，而且事件最終會影響到我們援助對象的健康和性命。於2013年，索馬里的情況愈趨嚴峻，最後我們帶著沉重的心情撤離。在當地工作時，我們的病人被攻擊，員工被威嚇、襲擊、擄走，甚至殺害。當那些與我們商討如何保障安全的組織，明顯地牽涉在針對無國界醫生的暴力事件時，我們不得不劃下撤離的底線。

在敘利亞，內戰進入第三年，900萬人流離失所或逃難到其他國家。醫療系統崩潰令無數敘利亞人急需基本醫療護理，惟局勢不安全，大大限制了我們接觸和援助他們的機會。無國界醫生正努力維持在敘利亞的工作，並為在黎巴嫩、伊拉克、土耳其及約旦的難民提供救援。

中非共和國的情況也同樣惡劣。自2013年3月的政變及其後的政治衝突，令宗教分化加劇以來，該國已有逾100萬人逃離家園。醫療設施受暴力衝突影響，我們的員工更受威脅及恐嚇。雖然如此，但截至年底，無國界醫生已透過9個緊急及7個常設項目，在全國提供超過80萬宗診症。然而，當地的人道需要仍是十分巨大。

南蘇丹瓊萊省於2013年初爆發暴力衝突，導致人民流離失所，及至12月，軍隊內不同派系的戰鬥迅速蔓延至5個省份，人民紛紛逃亡。然而這只不過是一場恐怖內戰引發人道災難的開始。無國界醫生為此開設了緊急項目，同時維持在9個省份的常設項目。

亞洲地區同樣不能倖免於暴力、疫症及天災。在緬甸，我們的救援工作繼續面對重重困難。在若開邦，數以萬計身處危困的人群要倚賴外界的醫療援助，但我們的服務卻自2014年2月起暫停運作。我們期待與緬甸政府進一步對話，確保有需要的人能夠獲得賴以活命的醫療服務。



Filipino doctor Chenery Ann Lim examines a patient in the tented hospital in Guiuan, the Philippines

來自菲律賓的林菁菁醫生，在無國界醫生於菲律賓吉萬的帳篷醫院，為一名病童檢查



Violence, epidemics and natural disasters did not spare the Asian region either. In Myanmar, MSF continued to face challenges when delivering aid. Tens of thousands of vulnerable people in Rakhine state were dependent on outside medical care, but our work there has been suspended since February 2014. We are looking forward to further dialogues with the Union Government to ensure life-saving services reach those in need.

In November 2013, typhoon Haiyan swept across the Philippines causing extensive destruction and injuring many. MSF-Hong Kong took a major role by deploying staff in the first few days to assess and respond to the needs in affected areas, and to lay the groundwork for massive response. We provided medical care and relief supplies in the Visayas Islands and rebuilt healthcare capacity there. In the first two weeks, MSF had a fast-growing team of international and local staff in four hospitals and eight health centres, and was running mobile clinics in 37 locations, despite the numerous logistical challenges encountered.

On the disease front, the spread of drug-resistant malaria in the Southeast Asian region is worrying. MSF has carried out a survey to look at the level of artemisinin resistance in northeastern Cambodia. A project will then be developed focusing on eliminating artemisinin-resistant malaria. At the same time, the dual epidemics of tuberculosis (TB) and HIV are of growing concern in Asia. MSF continues to treat those who are in need of life-saving treatments in India and Myanmar.

MSF is a medical organisation but our work does not stop at the delivery of care; it is also about bearing witness in extreme situations and pushing for access to essential treatments for our patients. MSF's Access Campaign advocated tirelessly for patients whose interests could be affected by the Trans-Pacific Partnership Agreement (TPP) negotiations between the USA and 11 Pacific Rim nations including Singapore and Malaysia. The trade agreement includes proposals to extend drug patents and block access to affordable generic drugs used to treat HIV patients.

In 2014, MSF-Hong Kong marks the 20th Anniversary of its establishment in 1994. We sincerely thank you and all the other supporters who have made our work possible over the past two decades. In the coming years we are still counting on you as we extend our reach in the region, particularly in Taiwan and Singapore. I hope you can continue to be part of the team, and help us to assist those most in need of medical care.

Thank you very much for your support

2013年11月，颱風海燕橫掃菲律賓，造成嚴重破壞及傷亡。無國界醫生（香港）在救援工作上扮演重要角色，在風災發生後的首數天便派出救援人員到災區進行評估及提供援助，亦為其後開展的大型救援奠下基礎。我們在米沙鄺群島提供醫療護理及派發救援物資，協助當地醫療設施重投服務。縱然後勤方面遇上不少挑戰，但我們在首兩星期，已迅速派出多名國際及當地人員，分別在4間醫院及8間醫療中心工作，並在37個地點設立流動診所。

在對抗疾病方面，耐藥瘧疾在東南亞地區的蔓延令人憂慮。無國界醫生在柬埔寨東北部進行了一項關於青蒿素耐藥性情況的調查。我們將開設一個以消滅青蒿素耐藥瘧疾為重點的項目。同時，結核病及愛滋病雙重感染的情況在亞洲也愈來愈值得關注，我們繼續在印度及緬甸為病人提供賴以續命的治療。

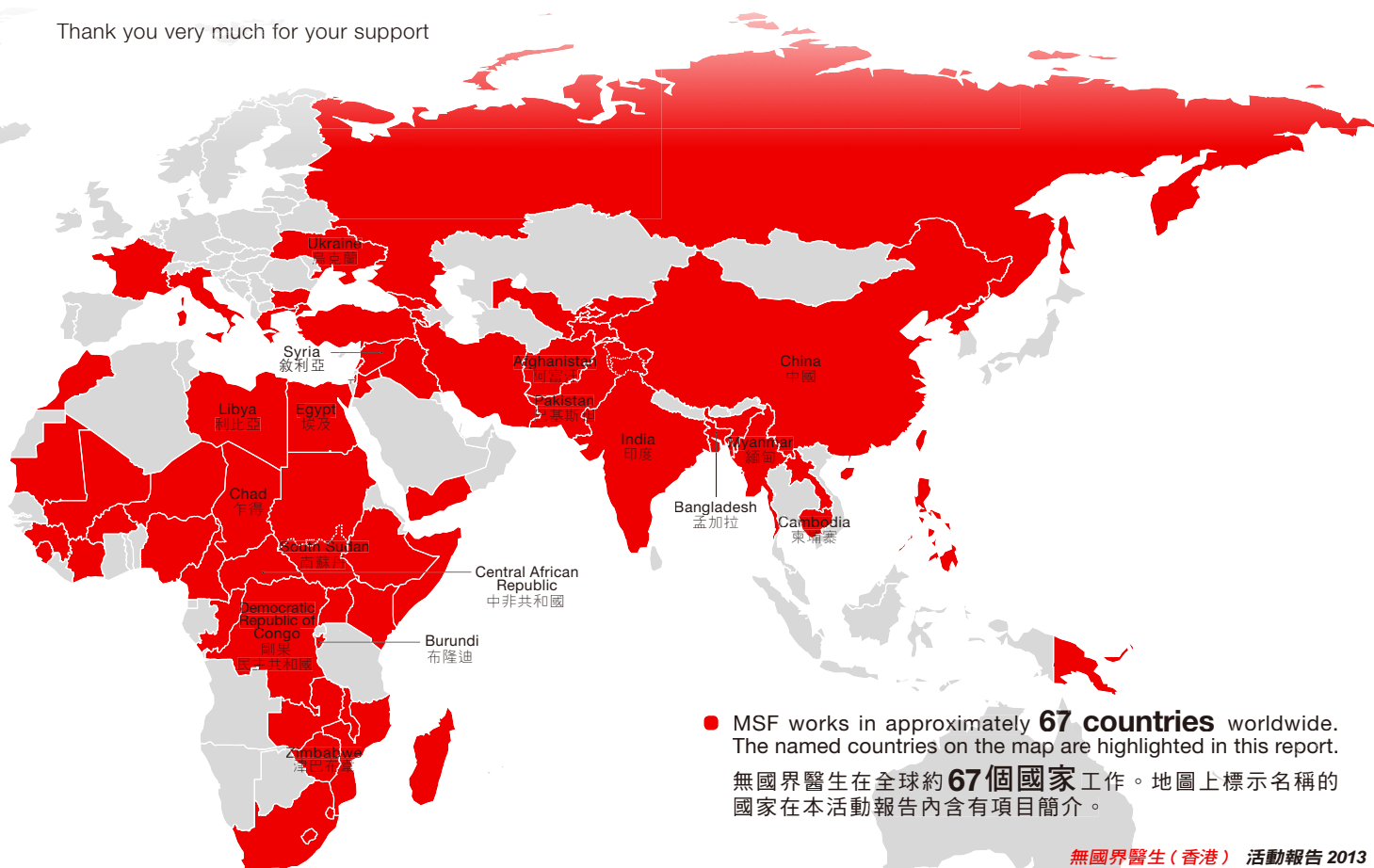
無國界醫生是一個醫療組織，但我們的工作並不限於提供醫療護理，亦包括在極度惡劣的人道危機中作見證，並為我們的病人爭取必要的治療。無國界醫生「病者有其藥」項目持續為受《跨太平洋貿易協定》影響的病人倡議發聲。美國與包括新加坡和馬來西亞在內的11個太平洋周邊國家正就該協定的條款進行談判，當中包括延長藥物專利的建議，令愛滋病人難以得到價格可負擔的仿製藥。

無國界醫生（香港）成立於1994年，2014年適逢為20周年。我們衷心感謝你和其他支持者在過去20年來的支持，令我們的工作變得可行。在未來的日子，我們仍仰賴你的支持，以將工作延伸至區內其他地方，包括台灣及新加坡。希望你能與我們繼續並肩同行，令我們能夠幫助那些最需要醫療護理的人群。

再次感謝你對我們的支持。

Dr. Fan Ning
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無國界醫生（香港）主席
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● MSF works in approximately **67 countries** worldwide. The named countries on the map are highlighted in this report.
無國界醫生在全球約**67個國家**工作。地圖上標示名稱的國家在本活動報告內含有項目簡介。

Projects by Country

各地項目



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In CAR, MSF set up a clinic at the airport in Bangui to treat conflict victims and other patients
無國界醫生在中非共和國的班吉機場設有診所，治療衝突傷者及其他病人

Africa

Central African Republic (CAR)

MSF has been responding to the chronic medical crisis in the country where the mortality rates in some regions were up to five times the emergency threshold. Following the coup by the rebel group Séléka in March, extreme violence escalated, resulting in a massive, acute humanitarian crisis. Despite the arrival of international forces in the capital, there were daily clashes, attacks, lynchings and reprisals. By year's end it was estimated that over 700,000 Central Africans were displaced and 750,000 had crossed into neighbouring countries.

In response, MSF gave free medical care such as emergency surgery to the wounded and the displaced, launched mobile clinics and teams supported government healthcare facilities. Teams regularly treated patients for malaria, respiratory and skin infections, diarrhoea and malnutrition. Additional activities were started to ensure access to clean drinking water and improve hygiene for the displaced.

MSF also repeatedly spoke out, calling for an end to violence against civilians, patients and staff in healthcare facilities, and the deployment of more aid from the United Nations and other aid organisations to respond to the extensive needs.

As of December, MSF had more than 250 international and 2,500 Central African staff providing free medical care to approximately 600,000 people in seven hospitals, two health centres and 40 health posts.

非洲

中非共和國

中非共和國多年來處於醫療危機之中，部分地區死亡率高達緊急門檻的5倍，是以無國界醫生一直在該國工作，對抗危機。然而，叛軍塞雷卡於3月發動政變後，暴力衝突加劇，導致一場大型的緊急人道危機。儘管國際部隊已進駐首都，但每天仍有衝突、襲擊、私刑及報復事件發生。據估計，截至2013年底，已有超過70萬中非共和國人流離失所，另外75萬人逃難到鄰國。

無國界醫生為傷者和流離失所者，提供包括緊急手術的免費醫療護理，並設立流動診所和支援公立醫療設施。醫療隊不時醫治瘧疾、呼吸道和皮膚感染、腹瀉和營養不良病人，同時確保流離失所者獲得清潔飲用水及較佳的衛生環境。

無國界醫生亦多次呼籲中止對平民、醫療設施內的病人和醫護人員的暴力襲擊，並促請聯合國和其他救援組織增加援助，回應該國龐大的需要。

截至12月，無國界醫生有超過250名國際救援人員及2,500名中非共和國員工，於7間醫院、兩間醫療中心及40個醫療站，向約60萬人提供免費醫療護理。



The introduction of emergency obstetric care and a referral system helps drastically reduce maternal mortality rate in Burundi

在布隆迪，緊急產科護理及轉介服務的引入幫助大幅降低產婦死亡率

Burundi

The Centre for Obstetric Emergencies in Kabezi hospital offered free, high-quality emergency and surgical obstetric services to an average of 250 women per month in 2013, reducing maternal deaths by 74 per cent. The team trained and coached Burundian medical staff and handed over the programme to local authorities.

An MSF team continued to provide obstetric fistula treatment at the Urumuri health centre in Gitega. Fistulas, a consequence of birth complications, cause not only pain but incontinence, which in turn often leads to social exclusion and sometimes rejection by friends and family. The package of care at Urumuri includes surgery, physiotherapy and social support.

Chad

Malaria is one of the main causes of death for children under five. MSF has focused on preventing and treating malaria in different regions in Chad. In Mandoul region, a distribution of antimalarials as a prevention strategy was organised and teams recorded an overall reduction in malaria of 60%.

The routine vaccination coverage in Chad is low and hence puts children at greater risk of infection. Thus MSF was involved in delivering nearly 440,000 measles doses and further campaigns against yellow fever and meningitis. Besides, MSF provided assistance to refugees displaced by conflicts in Sudan and Central African Republic.

Democratic Republic of Congo (DRC)

Decades of conflict, lack of investment in the healthcare system and ongoing violence cause extreme hardship for people across DRC. MSF has sustained its substantial presence in the country, particularly in the unsettled eastern provinces. The teams provided medical assistance to people affected by conflicts, as well as outbreaks of malaria, measles, rabies and cholera in provinces of North Kivu, South Kivu, Katanga and Orientale. In South Kivu alone, more than 565,000 outpatient consultations were completed.

The medical work stretches across a range of urgent needs, including surgery, infectious disease prevention and treatment, mother and child healthcare, and support for victims of sexual violence.

In 2013, measles epidemics continued to proliferate. Some health zones were overwhelmed by the number of cases, and MSF launched emergency campaigns, vaccinating more than 1.2 million children aged between six months and 15 years.



MSF provides treatment and vaccination in response to a measles outbreak in DRC

無國界醫生在剛果民主共和國提供麻疹治療及疫苗接種，以應對疫症爆發

布隆迪

2013年，位於加比施醫院的產科急症中心每月平均為250名婦女，提供免費和高質素的急症和外科產科服務，令產婦死亡率降低74%。醫療隊培訓布隆迪醫護人員，並已把項目移交當地衛生部。

一支無國界醫生隊伍繼續在基特加的奧梅利醫療中心提供產科瘻管病治療。瘻管病由妊娠併發症導致，不但帶來痛楚，而且會引致失禁，病人往往因此遭社會歧視，甚至親友排斥。奧梅利中心的護理服務包括外科、物理治療及社交支援。

乍得

瘧疾是5歲以下兒童的主要死因之一。無國界醫生在乍得的不同地區專注於預防和診治瘧疾的工作。在芒杜爾區，無國界醫生透過分發抗瘧疾藥物作為預防策略，令錄得的瘧疾個案整體減少了60%。

乍得的常規疫苗接種覆蓋率低，令兒童特別容易感染一系列傳染病。無國界醫生遂參與接種近44萬劑麻疹疫苗，以及預防黃熱病和腦膜炎的疫苗接種計劃。此外，無國界醫生亦向因蘇丹和中非共和國衝突而逃難至乍得的難民提供援助。

剛果民主共和國

過去數十年的衝突、醫療系統缺乏投資和持續的暴力事件，令剛果民主共和國的人民陷入極度困境之中。無國界醫生在該國繼續大規模的醫療工作，尤其是在局勢動盪的東部省份。醫療隊分別在北基伍省、南基伍省、加丹加省和東部省，向受衝突，以及瘧疾、麻疹、狂犬病和霍亂爆發影響的人士，提供醫療援助。單是在南基伍省，隊伍便進行了56.5萬宗門診診症。

隊伍的醫療工作涵蓋不同的緊急需要，包括外科、預防及治療傳染病、母嬰健康和支援性暴力受害者。

2013年，麻疹疫情持續擴散，部分醫療區錄得的個案繁多，無國界醫生展開緊急疫苗接種運動，為超過120萬名6個月至15歲的兒童接種疫苗。



A hypertension patient is examined by MSF staff in Tripoli, Libya
在利比亞的黎波里，無國界醫生人員正檢查一名高血壓病人



An MSF nurse gives injectable antibiotic treatment for an MDR-TB patient in Zimbabwe
無國界醫生的護士為津巴布韋的一名耐多藥結核病人注射抗生素

Egypt

At Abu Elian clinic, on the outskirts of Cairo, MSF offers healthcare to mothers and children under five. 70 per cent of patients were young children suffering from respiratory tract infections, intestinal parasites, skin diseases and diarrhoea. MSF also provides transport and covers hospital costs for pregnant women through the clinic's 24-hour emergency referral system.

MSF trained a number of volunteer Egyptian doctors in Cairo, including some Egyptian Ministry of Health personnel, so that they could respond quickly and effectively to medical needs on the spot during demonstrations. Training included how to deal with large numbers of wounded.

Libya

Libya's health system is gradually recovering from the 2011 conflict, but the violence has had a lasting effect on many people's mental health. The prevalence of severe post-traumatic stress disorder was estimated at 12.4% and severe depression at 19.8% in 2012.

In August 2013, MSF opened a mental health centre in Tripoli, the country's capital, to treat people who have been affected by any form of violence, be it physical, psychological, sexual or conflict-related. The team also trained doctors from the Ministry of Health and has established a referral system from basic healthcare facilities and from Libyan and international NGOs.

Zimbabwe

Although Zimbabwe has made significant progress, gaps in treatment for HIV/AIDS and tuberculosis (TB), including drug-resistant TB (DR-TB), remain. The needs of children and teenagers are particularly overlooked. MSF supported HIV and TB projects throughout the country in 2013 and is striving to implement modern technology including routine yearly viral load monitoring and new diagnostic techniques.

A team of MSF mental health professionals continued to provide psychiatric support to inmates in 10 prisons, including Harare maximum security prison. They treated 1,880 patients in individual and group counselling sessions. Also, free medical care, counselling and referrals for psychosocial and legal support were provided to sexual violence victims in suburb of Harare.

埃及

在開羅市郊的阿布埃利安診所，無國界醫生向母親及5歲以下兒童提供醫療護理。診所7成病人是患上呼吸道感染、腸道寄生蟲、皮膚病和腹瀉的幼童。診所亦為孕婦提供24小時緊急轉介服務，由無國界醫生安排交通和提供住院費用。

組織亦在開羅培訓了一批義務的埃及醫生（包括埃及衛生部人員），讓他們能在示威期間迅速及有效地應對現場的醫療需要。培訓內容包括如何處理大批傷者。

利比亞

利比亞的醫療系統正逐漸從2011年的衝突中恢復過來，但暴力對於很多人的精神健康仍然帶來長遠影響。據估計，於2012年，當地嚴重創傷後壓力症的患病率為12.4%，嚴重抑鬱症的患病率更達19.8%。

無國界醫生於2013年8月在首都的黎波里開設一所精神健康中心，治療暴力受害者，包括身體或心理受創的病人、性暴力受害者，以及衝突傷者。隊伍亦培訓來自衛生部的醫生，並設立了轉介系統，把來自基本醫療設施，以及利比亞和國際非政府組織的病人，轉介到中心。

津巴布韋

雖然津巴布韋的醫療系統有明顯改善，但是愛滋病及結核病（包括耐多藥結核病）的護理服務仍有所不足，兒童及青少年的需要尤其被忽略。2013年，無國界醫生在全國多處支援愛滋病和結核病項目，並致力使用現代科技，包括每年例行監測病毒載量，以及採用全新的診斷技術。

無國界醫生一支精神健康專家隊伍繼續在10座監獄，包括哈拉雷的高度設防監獄，為犯人提供精神病支援，透過個人及小組輔導治療了1,880名病人。此外，醫療隊亦在哈拉雷市郊為性暴力受害者，提供免費醫療和輔導，以及心理社交和法律支援的轉介服務。



In South Sudan, an MSF surgeon treats a patient with a gunshot wound and open fractures
在南蘇丹，無國界醫生的外科醫生正治理一名有開放性骨折的槍傷病人

South Sudan

Escalating violence in South Sudan increased the need for emergency medical aid in 2013. During clashes between the government and militia in Jonglei in May the MSF hospital in Pibor was looted and severely damaged. The fighting caused people to flee into the bush or hide in malaria-infested swamps without access to safe water or food. As the MSF hospital was the only one in the county, 100,000 people were deprived of healthcare.

Over the six-month emergency period, MSF ran two clinics and a surgical unit in Gumuruk and Dorein. More than 26,500 consultations were provided across Pibor.

In December, fighting broke out in Juba between different army factions and violence spread quickly through several states causing displacement. MSF has been struggling to respond to the huge and urgent needs created by the new conflicts.

Throughout the country, MSF teams continued to offer a full range of services at clinics and hospitals, including surgery, maternal and child healthcare, vaccinations, emergency obstetric services, and treatment for malnutrition, kala azar, HIV and TB. They also responded to outbreaks of diseases.

南蘇丹

2013年，南蘇丹的暴力事件升級令緊急醫療需要增加。政府和民兵組織於5月在瓊萊省爆發衝突期間，無國界醫生在皮博爾縣的醫院被搶掠及嚴重破壞。衝突迫使人們逃進叢林或瘴疾肆虐的沼澤，無法獲得清潔飲用水或食物。由於無國界醫生的醫院是該縣唯一的醫院，約10萬人因此嚴重缺乏醫療護理。

於6個月的緊急狀況期間，無國界醫生在古穆魯克及杜賴恩設有兩間診所及一個外科部門，並在皮博爾縣進行了超過26,500宗診症。

於12月，不同武裝派系在朱巴爆發衝突，暴力迅速蔓延至其他幾個州份，導致人民流徙。無國界醫生正奮力應對新一輪衝突帶來的龐大緊急需要。

在全國不同地方，無國界醫生隊伍繼續在診所和醫院，提供一系列服務，包括外科、母嬰健康、疫苗接種、緊急婦產科護理，以及營養不良、黑熱病、愛滋病和結核病的治療，並對抗疾病爆發。

Europe

Ukraine

The dual DR-TB and HIV epidemics in the Ukrainian penitentiary system are an urgent public health problem. Overcrowded prison environments and the inadequate healthcare provided to inmates exacerbate the spread of DR-TB. Since 2012, MSF has provided DR-TB treatment to prisoners and ex-prisoners in eastern Ukraine's Donetsk region. Antiretroviral (ARV) therapy is given to DR-TB patients co-infected with HIV. MSF also provides laboratory services for rapid, accurate TB diagnosis, adverse effects diagnosis and management, and guarantees an uninterrupted quality-assured drugs supply is available.

歐洲

烏克蘭

烏克蘭監獄內的耐藥結核病及愛滋病雙重疫情是一個緊急公共衛生問題。囚室環境過於擠迫，加上提供予犯人的醫療護理不足，加劇了耐藥結核病的擴散。自2012年起，無國界醫生在烏克蘭東部的頓涅茨克地區，為犯人及釋囚提供耐藥結核病治療，並為同時感染愛滋病的耐藥結核病人提供抗愛滋病毒治療。無國界醫生亦提供化驗室服務，以進行快速而準確的結核病診斷，以及副作用診斷和管理，並確保質素有保證的藥物能持續供應。



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A 5-year-old girl whose right arm was amputated plays with an MSF physiotherapist in Kunduz, Afghanistan
在阿富汗的昆都士，一名切除了右臂的女孩正和無國界醫生的物理治療師玩耍

Asia

Afghanistan

The number of people receiving critical medical care at MSF hospitals has nearly doubled over the last two years, a clear indication of the medical needs in the country.

In eastern Kabul, MSF has been upgrading Ahmad Shah Baba hospital and has trained Afghan staff to provide emergency and maternity services around the clock. There were approximately 1,000 births every month. MSF also launched mobile clinics to assist displaced people in six camps.

In the northern province of Kunduz, the MSF trauma centre continued to provide free surgical care to victims of general trauma such as traffic accidents, as well as conflict-related injuries like gunshot wounds. Staff treated a total of 17,000 people and performed 4,500 surgical procedures, three times more than in 2012. Mental health programme was launched to provide psychological support to patients and families coping with traumatic events and bereavement.

The MSF maternity hospital in Khost, the only specialised maternity hospital in the area, assisted in the delivery of 12,000 babies and helped more than 2,000 women who had complications during pregnancy or labour in 2013. In Helmand province in the south, with MSF support, the Boost hospital treated a total of 66,000 patients in the emergency room, performed 5,600 surgical procedures, and treated 3,200 malnourished children.

亞洲

阿富汗

在無國界醫生醫院接受緊急醫療護理的人數，在過去兩年幾乎增加一倍，清楚顯示阿富汗龐大的醫療護理需要。

在喀布爾東部，無國界醫生將艾哈邁沙巴巴醫院升級，並培訓阿富汗員工，以便可24小時提供緊急和婦產護理。醫院每月平均有1,000宗分娩個案。無國界醫生同時派出流動診所到6個流離失所者營地，提供醫療護理。

在北部省份昆都士，無國界醫生的創傷中心繼續為交通意外等一般創傷的傷者，以及因衝突受傷（如中槍）的傷者，提供免費外科護理，治療了1.7萬名病人及進行4,500宗外科手術，比2012年上升3倍。中心更增設精神健康項目，為有痛苦經歷的病人或喪親的病人家屬，提供心理支援。

無國界醫生在霍斯特的產科醫院是區內唯一提供專門產科護理的設施，於2013年接生了1.2萬名嬰兒，並協助超過2,000名於懷孕或分娩期間有併發症的孕婦。在南部的赫爾曼德省，在無國界醫生支援下，布斯醫院醫治了6.6萬名急症病人，進行5,600宗手術，並治療了3,200名營養不良兒童。



In Bangladesh, an MSF staff weighs a child to help determine its level of malnutrition

在孟加拉，無國界醫生人員量度一名小孩體重以助判斷其營養不良水平

Bangladesh

More than 200,000 people of Rohingya ethnic and religious minority have escaped to Bangladesh from Myanmar over the past four decades and are losing hope of ever returning home. At Cox's Bazar, MSF continues to provide comprehensive medical assistance for both the host community and the 30,000 unregistered Rohingya in the makeshift camp at Kutupalong.

In the capital, Dhaka, half a million people live on the bank of the Buriganga River in the city's largest slum, with very little access to the healthcare system. An MSF team runs a health centre there, providing free, basic healthcare, and sexual and reproductive health services to young women. MSF also provided mental health support to survivors and rescuers of a collapsed factory building in subdistrict of Dhaka in April.

Cambodia

The prevalence of TB in Cambodia is the one of the highest in the world. In 2013, the MSF-supported TB department of Kampong Cham provincial hospital became fully operational, offering detection, diagnosis and comprehensive care for patients. MSF also supports the DR-TB treatment in Phnom Penh and Kandal provinces.

The other issue MSF is working on is malaria. A baseline survey was completed looking at the percentage of inhabitants in Preah Vihear district with artemisinin resistance. A specific treatment protocol will be developed to demonstrate that resistant malaria can be eliminated.

The TB and HIV projects in two Phnom Penh prisons were handed over to national programmes and local partners in June as a result of improvements in care.

China

In China, some regions and departments are not sufficiently concerned with HIV, and there is still widespread discrimination and stigma. A Chinese NGO, Aids Care China, is developing quality care and treatment through private clinics. In September, MSF started supporting one of them near the China-Myanmar border in Jiegao, Yunnan province, where there are high numbers of Chinese and Burmese injecting drug users with HIV or HIV-TB and HIV-hepatitis C co-infection.

In August, more than 127,000 people were affected by flooding and a landslide in Guangxi province. MSF distributed hygiene kits, buckets, plastic sheeting and mosquito nets to 950 households.



MSF takes blood samples in Preah Vihear district, Cambodia, for a survey on the population's resistance to artemisinin

無國界醫生在柬埔寨柏威夏區收集居民血液樣本，研究他們對青蒿素的耐藥性

孟加拉

過去40年間，超過20萬名族裔和宗教上屬少數的羅興亞人，從緬甸逃到孟加拉，對歸家已不抱希望。在科克斯巴扎爾區，無國界醫生繼續在庫圖巴朗的臨時營地，為當地社群及3萬名沒有登記的羅興亞人，提供全面醫療援助。

在首都達卡最大的貧民窟內，有50萬人居住在布里甘加河邊，難以獲得醫療護理。一支無國界醫生隊伍在當地管理一所醫療中心，提供免費及基本醫療護理，以及為年輕婦女提供性健康及生育健康服務。4月，達卡市一座工廠大樓倒塌，無國界醫生為倖存者和拯救人員提供精神健康支援。

柬埔寨

柬埔寨的結核病感染率是全球最高之一。2013年，由無國界醫生支援的磅湛地區醫院結核病部門全面投入運作，並向結核病人提供檢測、診斷及全面的護理。隊伍亦支援在金邊和干丹省的耐藥結核病治療服務。

針對瘧疾，無國界醫生在柏威夏區完成了一項初步調查，了解居民對青蒿素呈耐藥性的百分比。下一步工作是制訂特定治療方案，證明耐藥瘧疾是可以消滅的。

設於金邊兩間監獄的結核病和愛滋病治療項目護理質素已改善，無國界醫生遂於6月把工作移交予國家治療項目和當地組織負責。

中國

在中國，一些地區和部門對愛滋病的關注仍然不足，感染者仍廣泛受到歧視和被標籤。中國的非政府組織「中國愛之關懷」正透過私家診所提供具質素的護理及治療，無國界醫生於9月開始，為其中一所位於中緬邊境附近、雲南省姐告鎮的診所提供支援。當地有很多來自中、緬兩地的注射吸毒者，患上愛滋病、愛滋病及結核病雙重感染，或愛滋病及丙型肝炎雙重感染。

8月，廣西省發生水災及山泥傾瀉，超過12.7萬人受災。無國界醫生向950戶家庭派發衛生套裝、水桶、塑料帆布及蚊帳。



A DR-TB patient receives treatment at MSF's clinic in Shan state, Myanmar
緬甸撣邦一名耐藥結核病人於無國界醫生診所接受治療



A health promotion session for patients in an MSF clinic in Chhattisgarh, India

無國界醫生在印度切蒂斯格爾邦診所內向病人進行健康推廣工作

India

Healthcare remains difficult to access for India's most isolated and marginalised populations. Longstanding, low-intensity conflict in Chhattisgarh and Andhra Pradesh has led to displacement and reduced access to healthcare. MSF is running clinics there. While in Mumbai, MSF continued to provide treatment for patients with HIV and co-infections who have been excluded from government health services. DR-TB is also a target.

Decades of conflict in Kashmir have taken a toll on people's mental health, and needs persist for psychological support. A well-established MSF mental health programme continued at five fixed locations. And in Bihar state, the parasitic disease kala azar is being tackled with newly developed combination drugs.

Myanmar

While violence and segregation continue in Rakhine state, more than 100,000 people remain displaced, living in appalling conditions in camps. MSF is striving to overcome significant obstacles to provide free, high-quality medical assistance to those most in need. Throughout 2013, MSF continued to urge the government and the communities of Rakhine to work together with international organisations to ensure that all patients could access the necessary care, regardless of their background or ethnicity.

MSF runs HIV and TB programme in Yangon, in Kachin and Shan states and in Tanintharyi region. It is the largest provider of HIV/AIDS care in Myanmar, treating over 33,000 patients in a country where fewer than one in three people who need antiretrovirals receive them.

Pakistan

MSF runs projects in north-western tribal areas which are exposed to violence due to government military operations against Taliban. MSF supports the local health facilities, providing medical care to the affected communities in Kurram and Bajaur agencies, as well as nearby Hangu district.

In Lower Dir, there was a dramatic increase in patient numbers in the emergency and resuscitation rooms at Timergara district hospital. More than 100,000 patients came to the emergency room, an increase of 33 per cent over 2012, with more than 20,000 patients treated in the resuscitation room. In Karachi, MSF provides emergency obstetric services and mental health support to undocumented migrants in a slum. A range of medical care is also provided in Balochistan province which hosts many Afghan refugees and has some of the country's worst healthcare indicators.

印度

印度最孤立和被邊緣化的人群仍然難以獲得醫療護理。在切蒂斯格爾邦和安得拉邦，持續而低度的衝突導致人民流離失所，醫療護理更為短缺，無國界醫生在當地設有診所服務。在孟買，無國界醫生繼續為被排拒於公立醫療服務外的愛滋病及雙重感染病人提供治療。醫治耐藥結核病亦是工作重點之一。

在克什米爾，數十年來的衝突嚴重影響人們的精神健康，他們持續需要心理支援，是以無國界醫生繼續在5個地點設有完善的精神健康項目。在比哈爾邦，隊伍以全新研發的結合藥物治療黑熱病這種寄生蟲疾病。

緬甸

在若開邦，暴力及社群隔離的情況持續，超過10萬人仍然流離失所，居住在環境惡劣的營地內。無國界醫生正奮力克服各種巨大障礙，以提供免費和高質素的醫療援助予最需要的人。於2013年，無國界醫生繼續促請政府和若開邦各社群與國際組織合作，確保所有病人能不分背景或族群地獲得必要的護理。

無國界醫生分別在仰光、克欽邦、撣邦和德林達依地區設有愛滋病和結核病治療項目，是緬甸最大的愛滋病護理提供者，治療超過3.3萬名病人。在緬甸，每3名需要抗病毒治療的病人，只有少於一人獲得治療。

巴基斯坦

巴基斯坦西北部的部落區飽受政府攻打塔利班的軍事行動影響，無國界醫生在古勒姆特區、巴焦爾特區，以及在鄰近的亨古，支援當地醫療設施，向受影響社群提供醫療護理。

在下迪爾區，蒂默加拉地區醫院急症室及搶救室的病人數目大幅上升，超過10萬名病人到急症室，較2012年增加33%，並有超過2萬人在搶救室獲救治。無國界醫生亦在卡拉奇一個貧民窟，向無證入境者提供免費的緊急產科服務以及精神健康支援，並在俾路支省提供一系列醫療護理。該省有不少阿富汗難民棲身，省內部分醫療指標是全國最差。



In Syria, MSF maintains its medical activities in hospitals and clinics to cope with the increasing needs despite multiple challenges
在敘利亞，儘管面對多重挑戰，但無國界醫生繼續在醫院和診所工作，以應對不斷增加的需要

Middle East

中東

Syria

The conflict in Syria has decimated the well-functioning healthcare system. With regions of the country inaccessible to humanitarian organisations, the huge medical needs that are indirect consequences of the conflict remain largely unreported and unseen. In 2013, MSF made what difference it could in delivering surgical projects, general clinics, maternity care, mental health care and vaccinations in Idlib, Aleppo, Ar-Raqqa and Al Hasakah governorates in the north. An average of three tons of medical and non-medical materials were donated daily to a network of 40 hospitals and 60 health posts across seven governorates. But restrictions on access and concerns about security are major obstacles to delivering medical-humanitarian assistance in Syria.

By the end of the year it was estimated that more than four million Syrians were displaced inside the country, and two million had crossed into neighbouring countries. MSF also provided emergency medical aid to Syrians in Lebanon, Iraq, Jordan and Turkey.

敘利亞

在敘利亞，衝突令本來運作良好的醫療系統毀於一旦。由於人道救援組織無法前往當地多個地區，因衝突而間接造成的龐大醫療需要，大多未被報道和鮮為人知。於2013年，無國界醫生盡其所能展開工作，在北部伊德利卜省、阿勒頗省、拉卡省和哈塞克省，設立外科項目和診所，提供產科、精神健康護理和疫苗接種，另向7個省份共40間醫院和60個醫療站，平均每日捐助3噸醫療和非醫療物資。不過，進出限制和局勢不安全是在敘利亞提供醫療人道援助的主要障礙。

截至2013年底，據估計有超過400萬名敘利亞人在國內流離失所，另有200萬人逃往鄰國。無國界醫生在黎巴嫩、伊拉克、約旦及土耳其，為敘利亞人提供緊急醫療援助。

The Americas

美洲

Haiti

More than three years after Haiti's devastating earthquake, the few public medical facilities in the country do not have the resources to meet the needs of most Haitians. Emergency services are particularly lacking. In the capital, Port-au-Prince, MSF's 130-bed hospital, which provides free 24-hour obstetric care for pregnant women with complications, assisted 5,450 births in 2013. MSF also provides trauma care in the Drouillard hospital, and basic and specialist services in a container hospital in Léogâne.

One of the sharper threats comes from cholera. MSF runs treatment centres in two locations in Port-au-Prince, treating 9,913 cholera patients. The teams also implements preventive measures including distribution of hygiene kits, water chlorination points and educational activities.

海地

海地大地震至今已超過3年，國內僅有的公立醫療設施仍缺乏資源應對大部分海地人民的需要，緊急服務尤其不足。在首都太子港，無國界醫生醫院設有130張病床，為患上妊娠併發症的孕婦提供24小時免費產科護理，並於2013年協助了5,450宗分娩。無國界醫生亦在德魯拉德醫院提供創傷護理，並在萊奧甘的貨櫃醫院提供基本及專科服務。

當地其中一個最嚴重的威脅是霍亂。無國界醫生在太子港兩個地點設有霍亂治療中心，在年內治療了9,913名霍亂病人，同時進行預防措施，包括派發衛生套裝、設立食水氯化處理站及加強衛生教育。

In the eye of Typhoon Haiyan 處身風眼之中

Typhoon Haiyan ripped through the central Philippines on 8 November 2013 and caused a disaster of a scale unprecedented. Whole communities were flattened, most of the outlying islands were isolated from aid in the early weeks, while a tsunami-like storm surge claimed thousands of lives. Some 16 million people lost either their homes or livelihoods, and more than 6,200 people were killed. In response, MSF launched one of its largest emergency interventions for a natural disaster in 2013.

2013年11月8日，颱風海燕橫掃菲律賓中部，造成前所未有的災難。當地多個社區被夷為平地，大部分島嶼在風災後數星期，仍然孤立無援，而像海嘯般巨大的風暴潮更奪走數以千計生命。風災導致約1,600萬人失去家園或生計，超過6,200人死亡。無國界醫生因而展開了2013年其中一個最大型的天災緊急救援項目。

The wrath of Haiyan 海燕的怒吼

The coastal areas south of Tacloban were totally flooded by the storm surge, which was over 10 meters high and left behind massive devastation. Many areas were inaccessible, power and communications were cut off, and fuel was in short supply. Partially damaged schools, stadiums and churches were turned into evacuation centres, where survivors crammed together waiting for help to come.

塔克洛班南部的沿岸地區，遭超過10米高的風暴潮來襲而被淹浸，造成大量傷亡和破壞。很多地區對外交通斷絕，電力和通訊中斷，燃料短缺。有部分受損的學校、體育館和教堂變成疏散中心，擠滿等待救援的倖存者。



Early weeks of the disaster 災後首數周



Elsa Ragasa, an MSF doctor from the Philippines, vaccinates a child against tetanus at Guiuan's Rural Health Unit

來自菲律賓的無國界醫生拉加莎在吉萬的村鎮醫療中心為兒童注射破傷風疫苗

Most of the local health facilities were damaged or destroyed. Medicines, supplies and equipment were washed away or quickly depleted in the early days. MSF rapidly scaled up the provision of medical services to restore the capacity of the local health system, in collaboration with the local authorities.

災區裡大部分的醫療設施都受到破壞甚或被摧毀，藥物、醫療物資和設備被沖走，又或是在災後初期已迅即耗盡。無國界醫生與當地衛生部門及其他組織合作，快速擴大醫療服務，以恢復當地受損的醫療系統。

Setting up healthcare facilities 設立醫療設施

The MSF logistics team quickly erected temporary healthcare structures, such as a tented hospital in Guiuan and an inflatable hospital in Tacloban, and cleaned up and repaired surviving facilities in the affected areas.

風災後，無國界醫生的後勤隊伍迅速動員，在不同災區設置臨時醫療設施，例如在吉萬的帳篷醫院和塔克洛班的吹氣帳篷醫院，又協助當地醫院、醫療中心、診所等，清理瓦礫和修復損毀部分。



Romy was the first baby born in MSF's inflatable hospital in Tacloban, the epicenter of the disaster

無國界醫生在重災區塔克洛班設立了一所吹氣帳篷醫院，經剖腹出生的男嬰羅米是第一個在該院出生的嬰兒

Reaching isolated communities 接觸被隔絕的災民



MSF mobile teams reached 133 locations within the first three months, providing primary healthcare services and referrals for further care.

災後首3個月，無國界醫生的流動醫療隊到訪了133個地點，提供基層醫療護理和進一步護理的轉介服務。

The mobile team consisting of a medical doctor, nurses, a psychologist and a logistician travelled by boat to remote coastal villages which could not be reached by road and had yet to receive any medical and humanitarian aid

一支由醫生、護士、心理學家和後勤人員組成的流動隊伍，乘小艇前往無陸路接通、未獲任何醫療和人道援助的偏遠沿岸村落

Distributing shelters and reconstruction kits 分發帳篷及重建物料

In the first two weeks of the disaster, many families were either living in crowded evacuation centres or makeshift shelters. They wanted to rebuild their homes but didn't have basic reconstruction materials such as hammers, nails, wood and galvanized iron sheets. MSF distributed over 27,400 shelter and reconstruction kits, and nearly 72,000 relief items such as hygiene kits, mosquito nets and cooking utensils.

在風災後兩星期，很多家庭仍居住在擠迫的疏散中心或臨時棲身處。他們希望重建家園，但缺乏基本物資如鎚、釘、木板和鋅鐵板。無國界醫生遂分發了超過27,400套帳篷搭建及重建物資，以及近7.2萬套救援物資如衛生套裝、蚊帳及煮食工具等。

MSF staff unloaded non-food items on North Gigante island of Panay

無國界醫生工作人員正卸載非糧食物資，以分發予班乃北希甘特群島的居民



Preventing disease outbreaks 預防疾病散播

Natural disasters do not necessarily lead to epidemics. However, unhygienic and overcrowded living conditions can increase the risk of diseases spreading. In the aftermath of a disaster of this scale, it is imperative that prevention measures are taken to mitigate the risks.

天災不一定會導致疫症爆發，但不衛生和擠迫的居住環境會增加疾病散播的機會。在如此大型的災難之後，落實預防措施以減低疾病爆發的機會是必要的。



© Florian Lems

MSF teams provided clean water, rehabilitated water points, carried out waste management and constructed latrines

無國界醫生隊伍在災區提供清潔飲用水、復修供水站，以及進行污水和醫療廢物處理，並興建廁所

Mental Health support 精神健康支援

MSF provided a broad range of mental health support and care integrated into its medical activities. The severity of the crisis tested many people's resilience, as many of them suffered anxiety and psychological distress while they struggled with loss and bereavement.

無國界醫生提供一系列的精神健康支援和護理服務，並納入為醫療工作一部分。是次災難考驗了災民的堅忍程度，很多人因為人命和財物損失而陷入焦慮和心理受困。



© Julie Remy

Kids were asked to draw their experience of the typhoon during a psycho-social activity for children. It offered simple ways for children to express their feeling and deal with their emotional struggles and needs

孩子們在一次心理社交活動中，畫出他們在風災期間的經歷。這個簡單的方法讓他們能表達感受，處理他們的情緒鬱結和需要

To know more about MSF's response to Typhoon Haiyan :

了解更多無國界醫生應對海燕風災的工作：



Worldwide Operations Highlights

全球前線工作概要

Below are the highlights of MSF activities around the world in 2013:

以下是無國界醫生於2013年在全球進行救援工作的概要：

Conducted 進行 **9,029,100** outpatient consultations 次門診診症

Treated 治療 **1,871,200** malaria cases 宗瘧疾個案

Admitted 接收 **477,670** inpatients 人次入院治療



Sierra Leone 塞拉利昂 © Lam Yik Fei



Admitted 接收 **233,800** severely malnourished children to inpatient or outpatient feeding programmes
名嚴重營養不良兒童入院或到門診營養治療項目

Admitted 接收 **17,100** moderately malnourished children to supplementary feeding centres
名中度營養不良兒童到補充營養中心

Mali 馬里 © Aurelie Baumel / MSF

Registered 登記 **341,600** HIV patients under care at end 2013
名愛滋病毒感染者接受護理(至2013年底)

Treated 給予 **325,500** HIV patients with first-line antiretroviral treatment at end 2013
名病人抗愛滋病毒第一線藥物治療(至2013年底)

Treated 給予 **5,470** patients of first-line failure with second-line antiretroviral treatment at end 2013
名第一線治療失敗的病人抗愛滋病毒第二線藥物治療(至2013年底)

Provided 為 **18,500** HIV-positive pregnant women with prevention of mother-to-child transmission (PMTCT) treatment
名感染愛滋病毒的孕婦提供預防母嬰傳染的治療

Provided 為 **16,800** eligible babies born in 2013 with PMTCT treatment
名在2013年出生的嬰兒，提供預防感染愛滋病的治療

Assisted 協助 **182,200** women to deliver babies, including caesarean sections
名婦女分娩，包括剖腹生產

Performed 進行 **77,350** major surgical interventions, including obstetric surgery, under general or spinal anaesthesia
宗涉及全身麻醉或脊髓麻醉的大手術，包括產科手術

Medically treated 醫治 **11,060** patients for sexual violence
名性暴力受害者



Democratic Republic of Congo 剛果民主共和國 © Andre Quillien / MSF

Admitted 接收 **29,900** patients to tuberculosis first-line treatment
名病人在2013年開始接受結核病第一線治療

Admitted 接收 **1,950** patients to multidrug-resistant tuberculosis treatment with second-line drugs
名病人在2013年開始以第二線藥物進行耐多藥結核病治療



Kyrgyzstan 吉爾吉斯 © Vincent Tremeau



Iraq 伊拉克 © Pierre-Yves Bernard / MSF

Conducted 進行 **141,100** individual mental health consultations
次個人精神健康輔導

Conducted 進行 **14,200** group counselling or mental health sessions
次小組輔導或精神健康支援



S Sudan 南蘇丹 © Nick Owen

Vaccinated 為 **2,497,250** people against measles in response to an outbreak
人接種麻疹疫苗以應對疫症爆發

Treated 醫治 **129,870** people for measles
名麻疹病人

Vaccinated 為 **162,400** people against meningitis in response to an outbreak
人接種腦膜炎疫苗以應對疫症爆發

Treated 治療 **27,900** people for cholera
名霍亂病人

Treated 醫治 **1,750** people for meningitis
名腦膜炎病人

Admitted 接收 **4,500** new patients to Chagas treatment programmes
名新病人進行美洲錐蟲病治療

Treated 醫治 **5,300** patients for visceral leishmaniasis (kala azar)
名內臟利什曼病(黑熱病)病人

Admitted 接收 **1,800** Admitted 1,800 new patients for human African trypanosomiasis (sleeping sickness) treatment
名新病人進行非洲人類錐蟲病(昏睡病)治療



India 印度 © Angel Navarrete

To the Field

香港派出的前線救援人員



Medical Doctors

醫生

Name 姓名 # Country of Residence 來自

- 1 Rey Anicete **PH**
- 2 * Gemma Arellano **PH**
- 3 Ryan Azcueta **PH**
- 4 Lukman Hakim Bauty **ID**
- 5 Honorita Bernasor **VN**
- 6 Jay Buensuceso **PH**
- 7 Marve Duka **PH**
- 8 Roderick Embuido **PH**
- 9 Virginia Garcia **PH**
- 10 Mira Jimenez **PH**
- 11 Lim Chin-siah 林振錫 **SG**
- 12 * Cicilia Gita Parwati **ID**
- 13 Sartini Saman **ID**
- 14 Maria C. Juan Sarte **PH**
- 15 Husni Mubarak Zainal **ID**
- 16 Zou Wei 鄒緯 **CN**

Surgeons

外科醫生

- 17 Lynn Sarah Agdeppa **PH**
- 18 Au Yiu Kai, Paul 歐耀佳 **HK**
- 19 Jasmin Batara **PH**
- 20 Marie Jeanne Bertol **PH**
- 21 Chan Kin-wah 陳健華 **HK**
- 22 Choi Chi-yee 蔡自怡 **HK**
- 23 Martin John Jarmin III **PH**
- 24 Ko Chi-cheong, Ryan 高志昌 **HK**
- 25 Damayanti Zahar **PH**



Anaesthetists

麻醉科醫生

- 26** Karina Marie Aguilar **PH**
- 27** Deborrah Castillo **PH**
- 28** Marjorie Ann Ladion **PH**
- 29** Dennis Lagunay **PH**
- 30** Lee Yi-chen 李一辰 **TW**
- 31** Margarita Quilala **PH**
- 32** Reynaldo Soria Jr. **PH**
- 33** Zhao Yifan 趙一凡 **CN**



Obstetricians / Gynaecologists

婦產科醫生

- 34** An Na 安娜 **CN**
- 35** Heidi Cruz **PH**
- 36** Hu Mingjing 胡明晶 **CN**
- 37** Jiang Li 蔣勵 **CN**
- 38** Yennz Crysyensen Tah **ID**



Interested to join MSF?

MSF is always looking for motivated and skilled medical and non-medical staff for its projects all over the world. To learn more, please visit www.msf.org.hk/fieldwork

Operating Theatre Nurses

手術室護士

- 39** Benny Bosang **PH**
- 40** Judy Amor Eban **PH**



Nurses

護士

- 41** Joseph Azeem **PK**
- 42** Chiu Cheuk-pong 趙卓邦 **HK**
- 43** Regidor Esguerra **PH**
- 44** Mathina Bee Gulam Mydin **MY**
- 45** Imee Jaleco Japitana **PH**
- 46** Janoa Manganar **PH**
- 47** Carmelita Manaois **PH**
- 48** Maheswari Malathi R. Murugayia **MY**
- 49** *Romell Nalitan **PH**
- 50** *Sara Nunes de Carvalho Teles Palhinha **MC**
- 51** Honney Maymor Panes **PH**
- 52** Pau Chun-yu 鮑雋宇 **HK**
- 53** Teresita Baltazar Sabio **PH**





Midwives 助產士

54 * Lee Hi-yeen 李海燕 **MY**

Laboratory Technicians 化驗室技術員

55 Genevieve Cervantes **PH**

56 Jericho Glenn Lopez **PH**

57 Julius Ceazar Papango **PH**

Pharmacists 藥劑師

58 Chee Hiu-fung, Rachel 池曉楓 **HK**

59 Alvin Teo 張國靖 **MY**

有興趣 加入無國界醫生行列？

無國界醫生經常招募積極並具有專業能力的醫療或非醫療人員，
派他們到全球不同的項目進行救援工作。

詳情請瀏覽

www.msf.org.hk/fieldwork

Psychologists 心理學家

60 Lee Soak-mun 李淑敏 **SG**



Logisticians 後勤人員

61 Uriel Aboim **MC**

62 Radoslav Antonov **MY**

63 Novri Asmi **ID**

64 Thimotius SP Benu **ID**

65 John Arthur Bunnell **ID**

66 Mohammad Iqbal Firdiansjah **ID**

67 Ho On-K, Angel 何安琪 **HK**

68 Lau Hiu-ching, Lucy 劉曉靜 **HK**

69 Leung Hon-zoen, Eric 梁瀚臻 **HK**

70 Raffy Matutino **PH**

71 Hans Olijve **SG**

72 Jonathan Pillejera **PH**

73 May Sarah **ID**

74 Hasbi Shiddiqi **ID**

75 Tan Kiak-li, Marie 陳杰俐 **MY**

76 Farman Ullah **PK**

77 Vanvisa Warachit **TH**

78 Wen Yunjie 溫蘊潔 **CN**



Administrators / Financial Controllers

行政 / 財務人員

- 79 Karmina Marie Aguilar **PH**
- 80 Maria Roselle Cadorna **PH**
- 81 Chai Xi 柴溪 **CN**
- 82 Andres Joaquin Hagad **PH**
- 83 Sajjad Hussain Khan **PK**
- 84 * Lee Beng-kwang **SG**
- 85 Ezequiela Macaranas **PH**
- 86 * Kazi Shafi Zaman Mahmood **HK**
- 87 Beverly Molina **PH**
- 88 Sumit Punnakari **TH**
- 89 Pratiwi Sutowo **ID**
- 90 Julie-Anna Wan-Min-Kee 溫蘭麗 **MU**
- 91 Karolina Rita Wulandari **ID**



Coordinators

統籌人員

- 92 Sweet C Alipon **PH**
- 93 John Patrick F. Almeida **PH**
- 94 Nardos Belay **KH**
- 95 Yvonne Biyo **PH**
- 96 Morpheus Causing **PH**
- 97 Roy Anthony Cosico **PH**
- 98 Maria Cristina N. De Costo **PH**
- 99 * Denis Dupuis **ID**
- 100 Rita Endrawati **ID**
- 101 Erwin Lloyd Guillergan **PH**
- 102 * Dorian Job **ID**
- 103 Adeela Khan **PK**
- 104 Lau Tin-wai, Beatrice 柳天蕙 **HK**
- 105 * Marianni Peggy Layzanda **ID**
- 106 Leung Sin-man, Gloria 梁倩雯 **HK**
- 107 Yones Mangiri **ID**
- 108 * Sadiq Syed Muhammad **PK**
- 109 Hemanathan Nagarathnam **MY**
- 110 Imelda Palacay **PH**
- 111 Michael Parker **TH**
- 112 Yan Debry Dominico Syauta **ID**
- 113 * Xu Weibing 徐衛兵 **CN**

The above field workers departed to the following countries/areas in 2013 for missions: Afghanistan, Bangladesh, Burundi, Cambodia, Chad, Democratic Republic of Congo, Egypt, Ethiopia, Haiti, India, Kenya, Laos, Libya, Malawi, Myanmar, Pakistan, Papua New Guinea, the Philippines, Russia, Sierra Leone, Somalia, South Africa, South Sudan, Sudan, Swaziland, Syria, Tajikistan, Turkey, Ukraine, Uzbekistan, Yemen and Zimbabwe.

Coordinators include field coordinators, financial coordinators, human resources coordinators, logistical coordinators, medical coordinators, supply coordinators and deputy head of mission.

#Abbreviations 縮寫

| **CN** China 中國 | **HK** Hong Kong 香港 | **ID** Indonesia 印尼 | **KH** Cambodia 柬埔寨 | **MC** Macau 澳門 | **MU** Mauritius 毛里求斯 | **MY** Malaysia 馬來西亞 | **PH** Philippines 菲律賓 | **PK** Pakistan 巴基斯坦 | **SG** Singapore 新加坡 | **TH** Thailand 泰國 | **TW** Taiwan 台灣 |

* 沒有照片 No photo

上述救援人員於2013年出發，前往以下國家或地區參與救援工作：阿富汗、孟加拉、布隆迪、柬埔寨、乍得、剛果民主共和國、埃及、埃塞俄比亞、海地、印度、肯尼亞、老撾、利比亞、馬拉維、緬甸、巴基斯坦、巴布亞新幾內亞、菲律賓、俄羅斯、塞拉利昂、索馬里、南非、南蘇丹、蘇丹、斯威士蘭、敘利亞、塔吉克斯坦、土耳其、烏克蘭、烏茲別克、也門及津巴布韋。

以上的統籌人員包括項目統籌、財務統籌、人力事務統籌、後勤統籌、醫療統籌、物資供應統籌及副項目總管。

Activities Overview in Hong Kong, Mainland China and Asia

香港、中國內地及亞洲活動概覽



In the event centre of the MSF Orienteering Competition, a simulation of armed conflict settings was set up to give participants a glimpse of challenges that field workers face on the front line

「無國界醫生野外定向 2013」的賽事中心內設有模擬武裝衝突場景，讓參賽者更了解救援人員在前線面對的挑戰

The emergency created by super Typhoon Haiyan hitting the Philippines in November 2013 allowed MSF-Hong Kong to make a very significant direct contribution towards operational support. Our proximity to the affected area, the local contacts and knowledge of the Philippines' healthcare and disaster response systems, as well as the fast mobilization of different departments to support operations, meant that MSF-Hong Kong was at the leading edge of the medical response.

The Emergency Response Support Unit (ERSU) had been monitoring the typhoon and updating the operational centres in Europe days before it made landfall. MSF-Hong Kong staff made up the first MSF team arriving Cebu to set the groundwork for the massive response. A total of 38 field workers from the Philippines and the region were deployed by the Hong Kong office for this emergency. Thanks to the generous donations of people in Hong Kong and in the region, a total of more than HK\$10 million were given within one month to support MSF's relief work in the Philippines.

In the Asian region, ERUSU and the Programme Development Unit of MSF-Hong Kong are now linked with the Regional Humanitarian Representative of the MSF International Office to form the Operational Support Team. This aims to strengthen support to MSF operations through defining and implementing strategic humanitarian and medical diplomacy towards ASEAN and key state and non-state stakeholders in East and Southeast Asia.

超級颱風海燕於2013年11月吹襲菲律賓，無國界醫生香港辦事處在此緊急救援行動中，作出了重要及直接的支援。由於香港鄰近受災地區，加上我們在菲律賓的人脈網絡和對當地醫療、災難應變系統的認識，以及能快速動員辦事處不同部門作出支援，令香港辦事處是在是次醫療救援行動中走在最前線。

緊急救援應變組早於海燕登陸前數天，已一直觀察著颱風情況，並向歐洲的行動中心匯報。香港辦事處更組成了首支無國界醫生救援隊伍抵達宿霧，為其後的大型救援行動作準備。辦事處亦從菲律賓及亞洲區先後派出了共38名人員參與救援。我們感謝來自香港及亞洲地區的支持，讓我們在一個月內已收集到逾一千萬港元的捐款，用以支援菲律賓的救災工作。

香港辦事處的緊急救援應變組及項目發展組，加強了與國際辦事處亞洲地區人道事務代表的協作，合組成為行動支援組，以便制定策略，和向東南亞國家聯盟，以及東亞和東南亞主要國家和民間各方進行策略性的人道醫療外交，增強對前線行動的支援。



MSF held photo exhibition and film screening in Malaysia to engage its supporters

無國界醫生於馬來西亞舉行圖片展及電影放映會，以加強與當地支持者的聯繫



MSF Day Finale 2013 Principal Guest Vivian Chow (2nd from left) appealed to the public to support MSF by donating a day's income.

「無國界醫生日 2013」救援大使周慧敏（左二）呼籲公眾捐出一日人工，支持無國界醫生

To support the operations worldwide, a total of 147 mission departures were carried out by MSF-Hong Kong in 2013. Among them, 27 were first missionaries and 32 were deployed in the capacity of coordinating or medical team leader positions. 36 new professionals were also recruited from the region during the year. The 6th annual surgical training was also successfully held in Hong Kong with participants from all over the world.

In 2013, continuous fighting in Syria, escalating conflicts in South Sudan and the Central African Republic, amid other ongoing medical humanitarian crises, stretched MSF's capacity to the limit. Thanks to generous support from the public, the private donations from individuals help MSF to have financially independence and access to many politically charged areas. Hong Kong made a significant contribution towards that overall effort. Throughout the year, over HK\$290 million was raised, of which over 99% came from private sources.

Through effective solicitation channels such as street fundraising, multi-media fundraising advertisements and direct mailings, around 17,000 new "MSF Field Partners" who were committed to supporting MSF via monthly donations were recruited in 2013. Regular donations from the public help provide MSF with a stable and sustainable income, so that our teams can respond to emergencies rapidly.

The public also showed their support by joining MSF's public events. The 12th MSF Orienteering Competition was held in Sha Tau Kok on 10 March. More than HKD4.8 million was raised by 3,000 participants and their sponsors to support MSF's worldwide work. A simulation of medical action in armed conflict settings was set up in the event centre to give participants a glimpse of life-saving work on the front line and a better understanding of the plight of conflict victims.

Another annual fundraising event, MSF Day, was held on 7 July. The Honorary Campaign Leader, Mr. Eason Chan, called on the public's support to volunteer for MSF by giving a day's income. More than HKD3.7 million was raised through the campaign.

MSF-Hong Kong's online platform was enhanced with a multi-currency capability, and a "Fundraise for MSF" feature was launched so that our supporters can easily raise funds online by initiating their own events.

2013年，香港辦事處共派出了救援人員147人次，參與全球各地的人道救援任務。其中，有27人次為首次參與救援行動的人員，另有32人被派出任統籌或醫療隊長的崗位，我們又在亞洲區招募了36名專業人員，投身人道救援工作。第6屆外科訓練亦在香港順利舉行，為來自世界各地的參加者提供培訓。

這一年，敘利亞戰事持續，南蘇丹、中非共和國的暴力衝突加劇，加上其他地區的醫療人道危機，令無國界醫生也面對資源緊絀的考驗。有賴市民大眾的慷慨支持，他們的私人捐款令無國界醫生保持財政獨立，在有政治爭議的地區也能展開救援。香港辦事處於年內共籌得超過2.9億港元，其中超過99%的捐款都是來自私人捐款。

透過街頭籌款、多媒體籌款廣告及直接郵件等有效的籌款渠道，香港辦事處於年內共招募了近1.7萬名新加入的「無國界醫生救援伙伴」，每月定期捐款支持我們的工作。來自公眾的定期捐款為無國界醫生提供穩定及持續的收入，讓我們的救援隊伍可迅速地應對各類緊急救援。

市民大眾也透過參與無國界醫生大型籌款活動來支持我們。無國界醫生於3月10日假沙頭角舉辦了第十二屆無國界醫生野外定向比賽，3,000名賽員及他們的贊助人合共為無國界醫生籌得超過480萬港元，支持我們在全球的工作。當日賽事中心設置了在衝突環境中的醫療設施，讓賽員仿如身處救援現場，體驗無國界醫生救助生命的工作及加深了解受衝突影響人民的苦況。

另一項年度籌款活動「無國界醫生日」亦於7月7日舉行。榮譽行動大使陳奕迅先生呼籲市民以捐出一日人工的形式，為無國界醫生當一天義工。是項活動共為無國界醫生籌得超過370萬港元。

我們加強了無國界醫生網上捐款平台的功能，捐款人現可選擇以不同貨幣捐款，亦可使用「為我們籌款」的新增功能，更方便地透過自己舉辦的活動，為無國界醫生於網上籌款。



Jérôme Oberreit (6th from right), Secretary General of MSF, was invited by Tsinghua University to give a speech

無國界醫生秘書長奧伯賴（右六）應清華大學邀請作演講



In August 2013, Guangzhou anaesthetist Zhao Yifan shared his field experience with the public at Sun Yat-Sen Library of Guangdong Province

2013年8月，廣州的麻醉科醫生趙一凡在廣東省立中山圖書館與公眾分享救援經驗

MSF continued developing its engagement with mainland China. The Hong Kong office and its Beijing representative conducted meetings with authorities in Beijing and Chinese embassies based in Bangladesh, Indonesia, Laos, Myanmar, the Philippines and Vietnam to exchange views on health-related aid to Africa and Asia, as well as medical and humanitarian issues. We also facilitated the field team to exchange views with Chinese embassy officials in Lebanon. Contacts with academics in the mainland China were strengthened. Mr. Jérôme Oberreit, Secretary General of MSF, was invited by Tsinghua University to give a speech on the theme “Medical Care Under Fire”. Ms. Katrien Coppens, Delegate Director of MSF-Holland, shared MSF’s concepts of humanitarian principles and its challenges in practice in the China University of Political Science and Law.

The Medical Representative team was established in China in 2013 to enhance medical information exchange with Chinese stakeholders. It had exchanges with the world’s only manufacturer of vaccine and diagnostic tests for hepatitis E. The Representative also attended the Ministerial Forum of China-Africa Health Development and HOSPEQ, the hospital-medical trade fair in Beijing. Dr. Unni Karunakara, the then International President of MSF, was invited to give a speech on “vaccine adaptation” in the 2013 China Health Forum, organised by the National Health and Family Planning Commission.

As part of its efforts to deepen the public’s understanding of the challenges of delivering humanitarian aid in armed conflicts, MSF screened the documentary *Access to the Danger Zone*, together with field worker sharing and the MSF exhibition *Humanitarian Aid Without Borders* in Beijing and Guangzhou.

MSF field workers were also invited to share their experience in the talk show *Philanthropy in China*, produced by Phoenix Television. The MSF documentary *The Positive Ladies Soccer Club* was awarded “Jury Prize” in the 2013 One Foundation Video Festival.

The Hong Kong office also continued its effort to engage neighbouring societies in the region. MSF’s first public event in Malaysia, “Behind the Scenes: The Journey of Doctors Without Borders”, was held in Kuala Lumpur in June.

無國界醫生繼續發展內地的工作。無國界醫生（香港）及其北京代表與北京有關當局，以及孟加拉、印尼、老撾、緬甸、菲律賓和越南的駐華大使館會面，就非洲和亞洲地區的醫療援助情況，以及醫療和人道議題交流意見，並協助安排了前線隊伍，與黎巴嫩的中國大使館官員見面。我們亦與內地學術界加強了聯繫。應清華大學邀請，無國界醫生秘書長奧伯賴就「衝突中的醫療護理」作專題演講。無國界醫生（荷蘭）總幹事科龐亦在中國政法大學深入介紹組織的人道原則，及其在實踐中的挑戰。

我們於2013年成立了中國醫療駐華代表小組，增進與中國持份者的醫學交流。小組曾多次與全球唯一的戊型肝炎測試和疫苗生產商交流，以及出席中非部長級衛生合作發展會議和中國國際醫用儀器設備展覽會暨技術交流會。無國界醫生（國際）主席卡雲勒卡亞醫生獲邀出席由國家衛生和計劃生育委員會舉辦的中國衛生論壇，就「疫苗創新」分享見解。

為讓公眾更認識在武裝衝突中提供人道救援的挑戰，無國界醫生先後在北京和廣州放映紀錄片《深入危城》，並舉行救援人員分享會和無國界醫生圖片展「救援·無疆」。

組織獲邀參與鳳凰衛視清談節目《公益中國》，分享救援任務的苦與樂，而無國界醫生紀錄片《陽光女足》則在「2013壹基金公益映像節」中獲得評委會大獎。

香港辦事處繼續致力與鄰近地區的支持者聯繫，並於去年六月在馬來西亞吉隆坡舉行了在當地首個公眾活動——《救援背後》圖片展及電影放映會。

Acknowledgements

鳴謝

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

無國界醫生衷心感謝所有捐款人以及下列機構、團體、學校、大專院校和辦事處義工對我們的支持。

Corporations

機構

4M Industrial Development Ltd.
7-Eleven Hong Kong
Adventure Base Consultancy
AIA
Associated International Hotels Ltd.
Atkinson Group
Centro Design & Furniture Ltd.
Chan Tsang Wong Chu & Mee
Collyer Logistics International Ltd.
Communium W Ltd.
Dah Chong Hong Holdings Ltd.
DLA Piper Hong Kong
DLA Piper UK LLP
Beijing Representative Office
Eggshell Creative Consultancy
Fleurs florist shop
Global Call Ltd.
Global Education Network Ltd.
Hay Fever Floral & Gifts
Hotels.com
iGPSD Ltd.
Jelly Belly Candy Company
Jenny Bakery
Jones Day Solicitors and International
Lawyers
KeePer Pro Shop
KPMG
Langham Place
LeSportsac (Carsac Ltd.)
Man Hong Medical Clinic
Many Way (HK) Ltd.
Metro City Plaza
Milky Cow Frozen Yogurt
Morn Creations Ltd.
New Balance Athletic Shoes (HK) Ltd.
New Plaza Garment Factory Co. Ltd.
New World Department Store China Ltd.
New World Telecommunications Ltd.
OKIA Optical Co., Ltd.
Omron Electronics Asia Ltd.
Opus Two Entertainment Ltd.
Oriental Watch Holdings Ltd.
Plaza Hollywood
Popwin Giftware Manufacturing Co. Ltd.
Rayform Ltd.
Reallyenglish.com Co., Ltd.
Sha Tau Kok Farm (Organic) Co., Ltd.
Shatin Plaza
Sino Land Company Ltd.
SmarTone Mobile Communications Ltd.
Sum Kee Construction Ltd.
SunShine City Plaza
Tai Shing Group (Holdings) Co. Ltd.
The Body Shop

The Overlander
The Peak Tower Limited &
Peak Tramways Co., Ltd.
The "Star" Ferry Co., Ltd.
TPV Technology Ltd.
Twincity (Far East) Ltd.
YATA Limited
Yue Tak Vegetarian
千絲紡
水動樂
北京麥合設計公司
北京藝術雕刻時光咖啡有限責任公司
君合律師事務所
岡本（香港）有限公司
香港卓爾食品公司
陳文洲水果有限公司
通城鐘錶有限公司
瑞士國際航空公司
德青源（香港）有限公司
德國羅德律師事務所駐廣州代表處

Foundations / Funding bodies

資助基金

Chan Hoi Sow Charitable Foundation Ltd.
Speech & Music Recital Development
Foundation

Government / Public Organisations

政府及公營機構

廣東省立中山圖書館

Media

傳媒

Dchome.net
Dreamer-HK.com
Fail Forum
Homegrown Productions Sdn Bhd
Intrasia.com
LiteFM, Astro Radio Sdn Bhd
Motion Media Group Ltd.
Motion Power Media Ltd.
Yahoo! Asia Pacific Pte. Ltd.
香港高登
親子王國有限公司

Medical institutions

醫療機構

Collaborating Centre for Oxford University
and CUHK for Disaster and Medical
Humanitarian Response
Faculty of Medicine, University of Malaya
Family Medical Practice Vietnam
FV Hospital, Vietnam
Hanoi Medical University
Medical Society,
Hong Kong University Students' Union
Office of Director MCH department,
Ministry of Health, Vietnam
Office of Director of International Co-operation,
Ho Chi Minh University of Medicine and
Pharmacy

Philippine College of Surgeons
Post-Baccalaureate Medicine Student Council,
Kaohsiung Medical University
Queen Elizabeth Hospital, Hong Kong
The Nethersole School of Nursing,
The Chinese University of Hong Kong
Tu Du Obstetrics Hospital, Vietnam
Vietnamese Association of Midwives

Community Groups & Associations

社區團體及協會

Alliance Française de Hong Kong
Dragon Overtime
Inland Revenue Department
Sports Association
Sha Tau Kok District Rural Committee
The Outstanding Givers Association Ltd.
The Volunteers Orienteering Club
同社
青進野外定向會
香港少年領袖團
香港定向人有限公司
香港家庭定向會
香港野外定向會
香港聖約翰救護機構
香港懲教署愛群義工團
新方向定向會

Schools / Tertiary Institutions

學校及大專院校

Catiline Kindergarten International
Preschool
Creative Primary School
Hong Kong Taoist Association
Tang Hin Memorial Secondary School
Kowloon True Light School
National Tainan Girls' Senior High School
Our Lady's Primary School
Po Leung Kuk
Chong Kee Ting Primary School
Shun Sang Anglo-Chinese Kindergarten
SKH Holy Trinity Church Secondary School
The Community College of City University
天主教南華中學

Office Volunteers

辦事處義工

Asli Bagchi	周漢明	蔡奕玲
Anika Karrim	唐鎮浩	劉曼璇
Paul Khiatami	陳永安	劉鳳珍
Julien Zhuang	陳淑賢	龍鎮華
王 嵩	梁信彥	羅小璐
吳少蘭	馮維強	
何榮德	葉麗梅	

The above office volunteers provided services 36 hours or above in 2013. We are also thankful to have other volunteers contribute their precious help.

上述辦事處義工於2013年服務36小時或以上，我們亦感謝其他義工於過去一年提供的寶貴協助。

We Need Your Support!

To help us save more lives, you can consider the following actions:

- Be our field worker or office volunteer
- Make a donation / Be a monthly donor
- Bequeath to MSF
- Create online fundraising page to raise fund for MSF
- Line up MSF philanthropy talks at your workplace

我們需要你的支持！

若想幫助我們救助更多生命，你可考慮以下方法：

- 成為前線救護人員或辦事處義工
- 單次捐款 / 成為每月捐款者
- 捐贈保單及遺產
- 開設網上籌款專頁為無國界醫生籌款
- 鼓勵企業舉辦無國界醫生講座

MSF-Hong Kong Financial Overview 2013

無國界醫生香港辦事處2013年度財政概覽⁽¹⁾

2013

2012

INCOME 收入

Donations from the public 公眾捐款	292,154,290	247,779,431
Other income 其他收入	31,293	13,412
TOTAL 總數:	292,185,583⁽²⁾	247,792,843

EXPENDITURE 支出

Supporting relief operations 救援項目及支援工作		
Emergency and medical programmes 緊急及醫療救援項目	217,897,008 ⁽³⁾	179,971,151
Programme support and development 項目支援及發展	26,940,168	27,101,882
Advocacy 倡議及教育	9,134,932	8,222,577
Other humanitarian activities 其他人道救援活動	2,225,657	1,879,297
Total supporting relief operations 救援項目工作總開支	256,197,765⁽⁴⁾	217,174,907
Management, general and administration 行政經費	9,676,554	9,089,885
Fundraising 籌款經費	26,311,264	21,528,051
TOTAL 總數:	292,185,583	247,792,843

Balance Sheet as at 31st December 2013

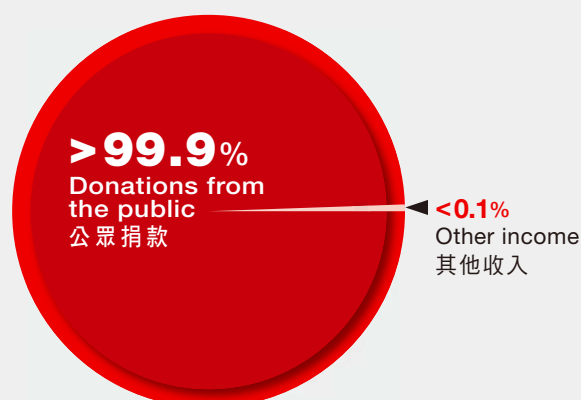
截至2013年12月31日止年度的資產負債表

Fixed Assets 固定資產	114,019	139,261
Current Assets 流動資產		
Sundry debtors and receivables 雜項應收帳款及應收費用	69,946	143,727
Prepayments and deposits 預付費用及押金	1,590,540	1,196,773
Amount due from other MSF offices 應收其他無國界醫生辦事處之帳款	2,486,888	1,579,243
Cash and bank balances 現金及銀行結餘	32,293,466	19,314,829
	36,440,840	22,234,572
Current Liabilities 流動負債		
Sundry creditors and accruals 應付帳款及應計費用	4,125,433	1,697,135
Deferred income 遞延收入	5,726,973 ⁽⁵⁾	-
Amount due to other MSF offices 應付其他無國界醫生辦事處之帳款	26,702,453	20,676,698
	36,554,859	22,373,833
Net Current Liabilities 淨流動負債	(114,019)	(139,261)
	0	0
Fund Balances 資金餘額		
Accumulated funds 累積資金	0⁽⁶⁾	0

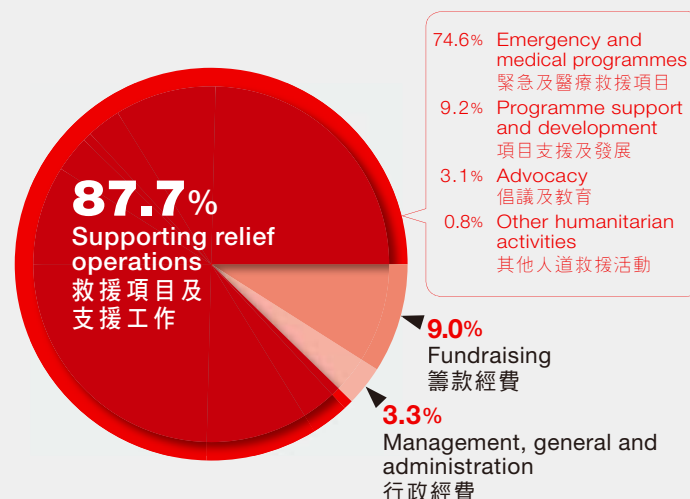
The financial statements of Médecins Sans Frontières - Hong Kong for the year ended 31st December 2013 were audited by KPMG, and approved by the Board of Médecins Sans Frontières-Hong Kong. The full financial statements are available at www.msf.org.hk.

無國界醫生（香港）於2013年12月31日止年度之財政報告，經畢馬威會計師事務所核數師審核及無國界醫生（香港）董事會認可。有關報告全文已上載網站www.msf.org.hk，歡迎查閱。

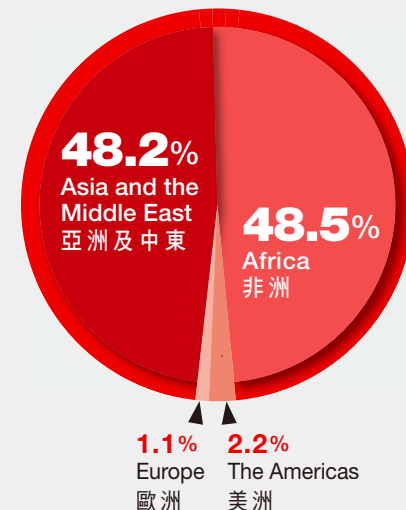
2013 Funding Sources · 2013年度經費來源



2013 Funding Allocations · 2013年度經費分配



Country 國家	Funding 撥款	Country 國家	Funding 撥款
Myanmar 緬甸	20,788,634	Malawi 馬拉維	3,054,554
Afghanistan 阿富汗	18,907,140	Kenya 肯尼亞	3,050,934
Democratic Republic of Congo 剛果民主共和國	14,871,379	Niger 尼日爾	2,900,392
Pakistan 巴基斯坦	13,223,742	Sierra Leone 塞拉利昂	2,826,641
Syria 敘利亞	12,124,611	Central African Republic 中非共和國	2,378,021
Zimbabwe 津巴布韋	10,070,039	Mauritania 毛里塔尼亞	2,343,001
Bangladesh 孟加拉	10,004,685	Libya 利比亞	2,325,475
South Sudan 南蘇丹	8,682,491	Iraq 伊拉克	2,089,310
India 印度	8,124,191	Sudan 蘇丹	1,640,192
Chad 乍得	7,312,585	Papua New Guinea 巴布亞新幾內亞	1,550,416
Nigeria 尼日利亞	5,223,275	Egypt 埃及	1,466,084
Burundi 布隆迪	5,027,180	Ukraine 烏克蘭	1,199,965
Somalia 索馬里	5,019,206	Ethiopia 埃塞俄比亞	1,085,794
South Africa 南非	4,306,713	Cambodia 柬埔寨	473,280
Haiti 海地	4,233,381	Mali 馬里	460,767
Mozambique 莫桑比克	4,078,756	Italy 意大利	438,214
Philippines 菲律賓	3,861,276	Greece 希臘	290,894
Guinea 幾內亞	3,603,829	Other countries 其他國家 (7)	618,947
TOTAL 總數:		189,655,994	



Africa 非洲	91,921,801
Asia and the Middle East 亞洲及中東	91,343,073
The Americas 美洲	4,233,381
Europe 歐洲	2,157,739

Explanatory Notes on Financial Overview 2013

- (1) All the amount is expressed in Hong Kong dollar.
- (2) 99.9% of donations came from public donations.
- (3) A total of HKD189,655,994 was allocated for emergency and medical programmes in 40 countries. HK\$28,005,200 of funding is transferred to Operational Centre Brussels and then set aside as an operational reserve to cover relief expenses in unforeseeable emergencies, and to ensure that projects treating HIV/AIDS patients where adhesiveness is critical can be sustained. Also, HKD235,814 of funding is set aside as international fund for operational research and innovation.
- (4) 87.7% of donations in total went to supporting relief operations.
- (5) Deferred income represents donation fund received and designated for the typhoon Haiyan emergency in the Philippines which is unspent as at 31 December 2013 and is expected to be recognised as donation income upon the fund is spent.
- (6) As of 2013, MSF-Hong Kong maintains a "zero reserve" policy: all donations received, after the fundraising and administration expenses, are fully dispensed for supporting relief operations.
- (7) Other countries included Côte d'Ivoire, Bulgaria, Tajikistan, Balkans and Bahrain.

2013年度財政概覽說明

- (1) 所有匯算以港元為單位。
- (2) 99.9%經費來自公眾捐款。
- (3) 合計189,655,994港元被撥作於40個國家進行緊急及醫療救援項目的經費。28,005,200港元在呈交至比利時行動中心後被劃為救援撥備，為無法預計的緊急災禍作迅速回應的準備，及確保治療愛滋病人等需要持續進行的項目能得以繼續。此外，235,814港元作為支持救援項目研究及創新之國際撥款。
- (4) 87.7%捐款用於救援項目及支援工作。
- (5) 「遞延收入」是指因應菲律賓海燕風災而收到、但截至2013年12月31日為止尚未被使用的指定捐款。該筆款項將在使用後被撥為「公眾捐款收入」。
- (6) 截至2013年，無國界醫生香港採取「零儲備」政策：所有籌得的捐款，扣除籌款及行政經費後，全數撥予救援項目及支援工作。
- (7) 其他國家包括科特迪瓦、保加利亞、塔吉克斯坦、巴爾幹半島和巴林。

Board of Directors of MSF-Hong Kong · 無國界醫生 (香港) 董事會

President 主席: Dr. Fan Ning 范寧醫生

Vice Presidents 副主席: Dr. Wilson Li 李威儀醫生

Dr. Liu Chen Kun 劉鎮鯤醫生

Treasurer 司庫: Lee Seung Ngai 李湘霓

Directors 成員: Malik Allaoua-Moreau ^
Dr. Chan Wai Chi 陳慧芝醫生 *
Hu Yuan Qiong 胡元琼
Jean-Michel Piedagnel *

Johann Annuar ◇
Catherina Coppens *
Martin John Jarmin III ◇
Dr. Tu Zheng 屠錚醫生 *

Adrio Bacchetta ◇
Brice de le Vingne @ *
Pan Yuan 潘淵
Dick Van Der Tak ◇

^ Resigned on 25 May 2013 於2013年5月25日離任

* Resigned on 31 August 2013 於2013年8月31日離任

@ Appointed on 30 May 2013 於2013年5月30日上任

◇ Appointed on 31 August 2013 於2013年8月31日上任

Advisory Committee of MSF-Hong Kong · 無國界醫生 (香港) 顧問委員會

Members 成員: Dr. Emily Chan Ying Yang 陳英凝醫生 Francis Fong Po Kiu 方保僑 Lawrence Hui 許卓倫

As of December 2013, the MSF offices in Hong Kong, Guangzhou and Beijing have 46 staff and 19 regular office volunteers who help with office tasks. 截至2013年12月，無國界醫生在香港、廣州和北京的辦事處共有46名職員，另有19名義工定期協助處理日常工作。

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

無國界醫生在香港的組織是一家根據香港公司條例設立的擔保有限公司，名為無國界醫生組織 (香港) 有限公司。

The Médecins Sans Frontières Charter

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

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

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

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

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

無國界醫生憲章

無國界醫生是一個國際的非政府組織，其成員主要為醫生和其他醫務人員，也歡迎有助於組織完成自身使命的其他專業人員參與。全體成員同意遵循以下準則：

無國界醫生不分種族、宗教、信仰和政治立場，為身處困境的人們以及天災人禍和武裝衝突的受害者提供援助。

無國界醫生遵循國際醫療守則，堅持人道援助的權利，恪守中立和不偏不倚的立場，並要求在其行動中不受任何阻撓。

全體成員嚴格遵循其職業規範，並且完全獨立於任何政治、經濟和宗教勢力之外。

作為志願者，全體成員深諳執行組織的使命所面臨的風險和困難，並且不會要求組織向其本人或受益人作出超乎該組織所能提供的賠償。

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Dr. Zou Wei from China examines a young patient in an MSF hospital in Sierra Leone

來自中國的醫生鄒緯於塞拉利昂的一間無國界醫生醫院裡檢查病人