

# CARE WITHOUT JUDGMENT

**ANNUAL REPORT**  
2021-2022





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# DOCTORS OF THE WORLD AT A GLANCE



## A WORD FROM THE PRESIDENT AND FROM THE EXECUTIVE DIRECTOR

A few years ago, the Doctors of the World international movement defined a common vision stating that health should be recognized as a fundamental right. This approach is now central to nearly 200 national projects and as many international projects carried out by the organization's 17 delegations around the world. Beyond these projects, respect for the fundamental right to health remains a constant focus for our team. It drives our reflections, which actively include the people we aim to serve.

People in situations of exclusion and vulnerability are confronted with numerous and complex barriers which prevent access to their fundamental right to health. These obstacles are often social, economic, or political in origin, but they can also be organizational in nature - in other words, they are related to the very structures of health and social services institutions and operations. Doctors of the World is aware of these issues and has therefore decided to act as an influential player in transforming the health system, but also as a group who will continue to offer health care to people in situations of exclusion.

Gabriel, who meets migrants in the streets of Montreal and introduces them to Doctors of the World's services; Kenny, who accompanies a pregnant migrant woman to the hospital and helps her negotiate the fees for her delivery; and Miss Flore, who carries out needs assessments for health kits with populations that have been severely affected by the earthquake in Haiti. The team also developed



**Dr. DAVID-MARTIN MIILOT**  
President



**NADJA POLLAERT**  
Executive Director

the “Care Without Judgment” campaign, allowing people to share their stories, and Chloé, who brings these same voices to the attention of the government. In this way, our day-to-day work feeds into a powerful and humane advocacy that is transforming the way health and social services are delivered by making them responsive and safe.

You are a member of Doctors of the World, and your actions, from donating to volunteering in our organization, are equally important to this mission. Thank you for helping to make the fundamental right to health a reality for everyone.

# DOCTORS OF THE WORLD NETWORK



## DOCTORS OF THE WORLD'S 17 DELEGATIONS

- |             |                 |               |               |
|-------------|-----------------|---------------|---------------|
| › Germany   | › Spain         | › Japan       | › Switzerland |
| › England   | › United States | › Luxembourg  | › Turkey      |
| › Argentina | › France        | › Netherlands |               |
| › Belgium   | › Greece        | › Portugal    |               |
| › Canada    | › Italy         | › Sweden      |               |

## MISSION

Doctors of the World is **an international movement of volunteers working** at the national and international levels. Through innovative **medical programmes** and **evidence-based advocacy**, Doctors of the World empowers excluded people and communities to take action and demand **their right to health while fighting for universal access to care**.

## Board of Directors

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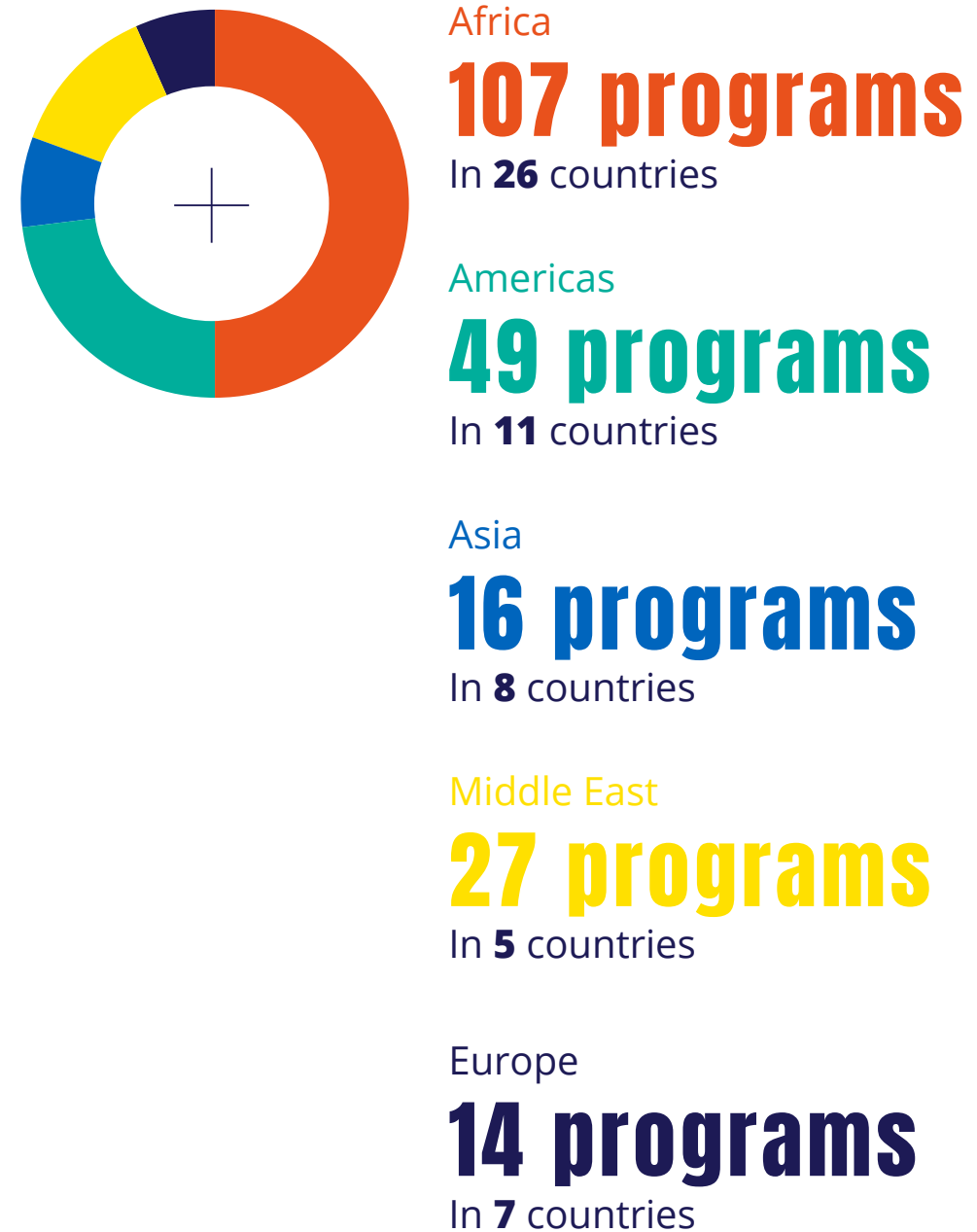
**FRÉDÉRIC MAYRAND**  
Director

**FANNIE GUILBEAULT**  
Director

## KEY FIGURES

In total, the Doctors of the World international network is present in **74** countries with **417** programs.

**213 international programs**  
in **57** countries:

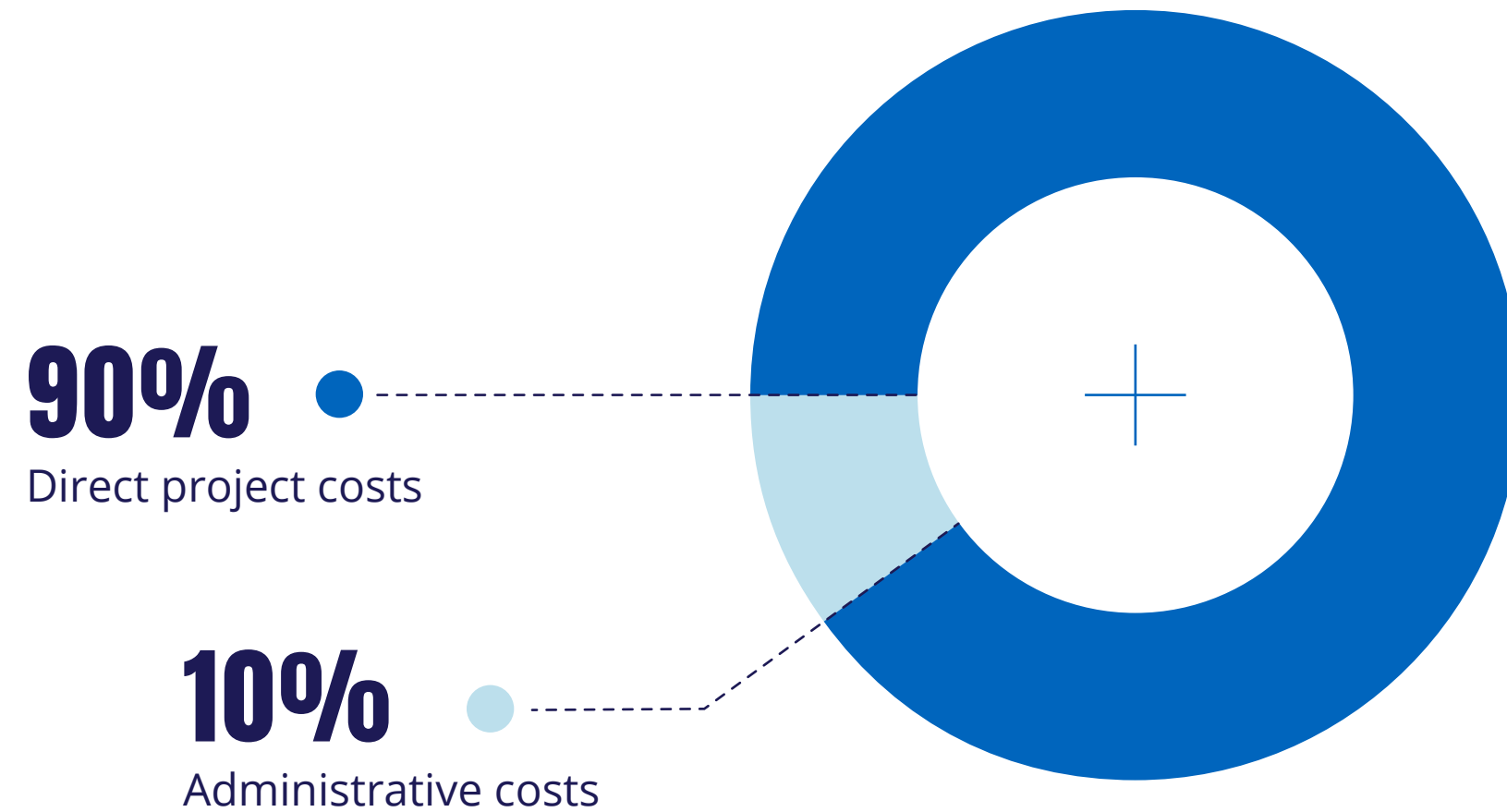


**204 national programs**  
in **17** network countries:



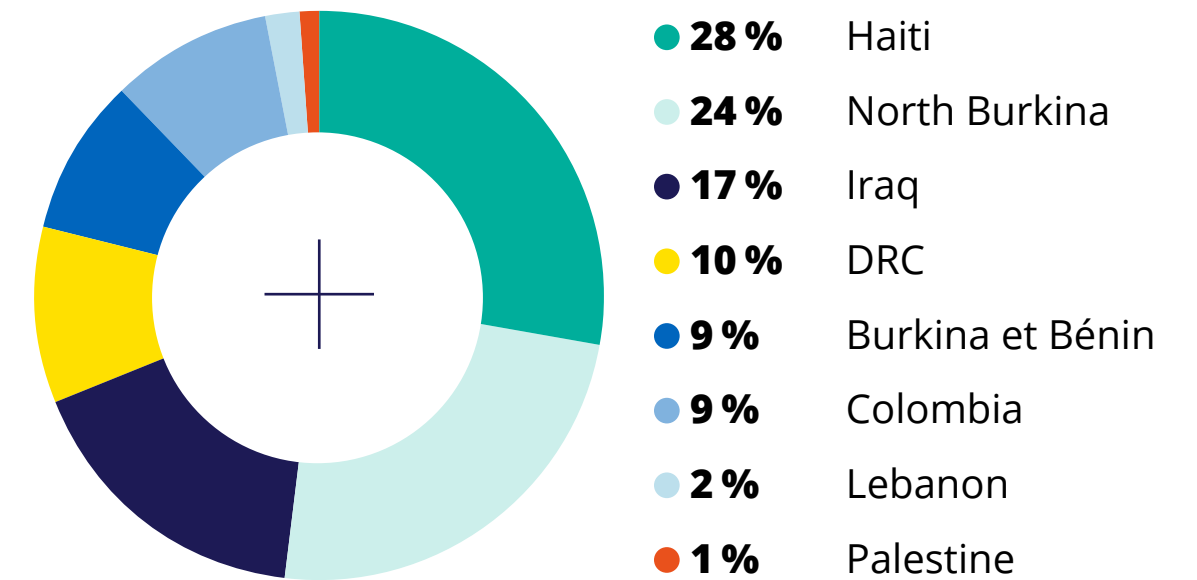
# FINANCIAL STATEMENTS

## ADMINISTRATIVE AND DIRECT PROJECT COSTS

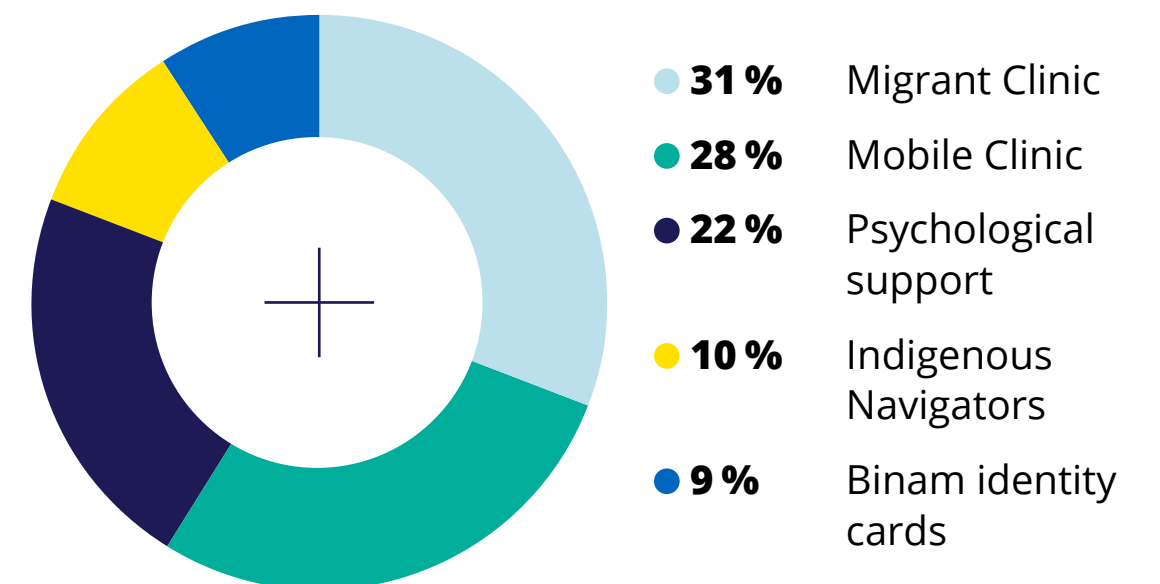


FINANCIAL STATEMENTS

## INTERNATIONAL PROJECTS



## NATIONAL PROJECTS







# NATIONAL ACTIONS



## WHEN SOCIAL TRANSFORMATION BEGINS FROM THE GROUND UP

For over 25 years, Doctors of the World Canada has been working on two fronts: ensuring access to care for people excluded from the system and defending their right to health. All of Doctors of the World's clinical and field interventions share a common goal: to reduce social inequalities in health. By providing care and support to people who are excluded from the health system or those who cannot access care that is adapted to their reality, our team is able to better understand their real needs.

### Our experience in the field allows us to bear witness to injustices.

Over the years, Doctors of the World has developed a solid expertise in outreach work. We reach the most isolated people, right where they live, to offer them the health care and support they need. We also adapt our interventions on a continual basis to ensure that they meet the specific needs of the people who rely on us.

This approach is an essential tool for establishing a trust-based relationship with the people we serve, without discrimination or judgment. This presence in the field, day after day, makes our teams first-hand witnesses to new issues and emerging needs in the various Montreal neighbourhoods targeted by our interventions.



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**PÉNÉLOPE BOUDREAU**  
Director of National Operations, and Nurse

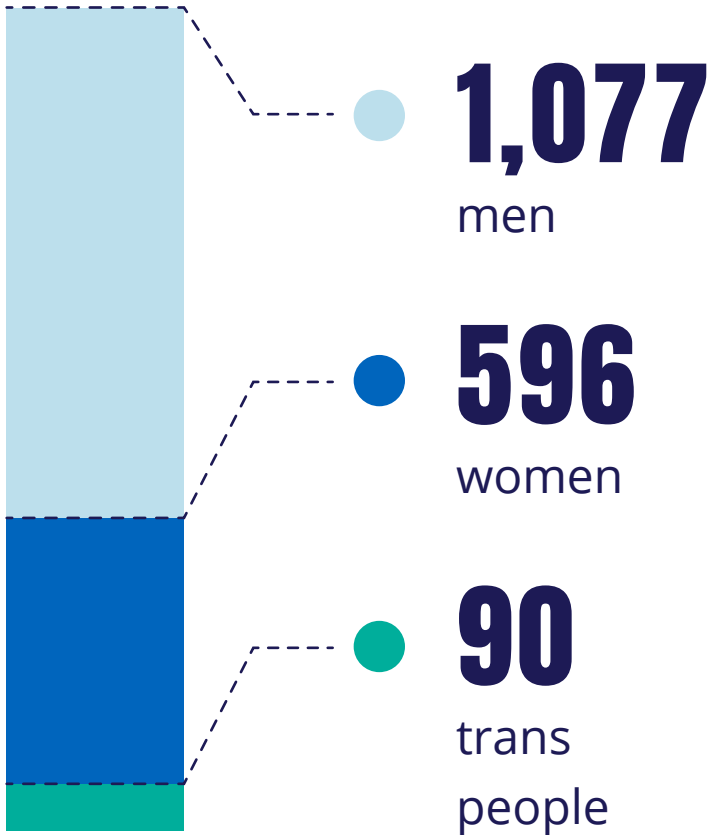
# OUR WORK BY THE NUMBERS

## PEOPLE EXPERIENCING HOMELESSNESS OR AT RISK OF HOMELESSNESS

**1,763**  
people experiencing or at risk of homelessness improved their overall health through the care, listening, interventions and referrals provided on board the Mobile Clinic or during meetings with our teams of Indigenous Navigators and our harm reduction peer

**445**  
people experiencing homelessness were treated on board the Mobile Clinic

**688**  
consultations were offered by the nurses on the Mobile Clinic



OF THIS TOTAL:  
**25% (435 people)**  
identified as **Indigenous**

## IN TOTAL

**569**  
people were accompanied by our peers, namely

OR \_\_\_\_\_

**90**  
by our Indigenous Navigators

**214**  
by our harm reduction peer

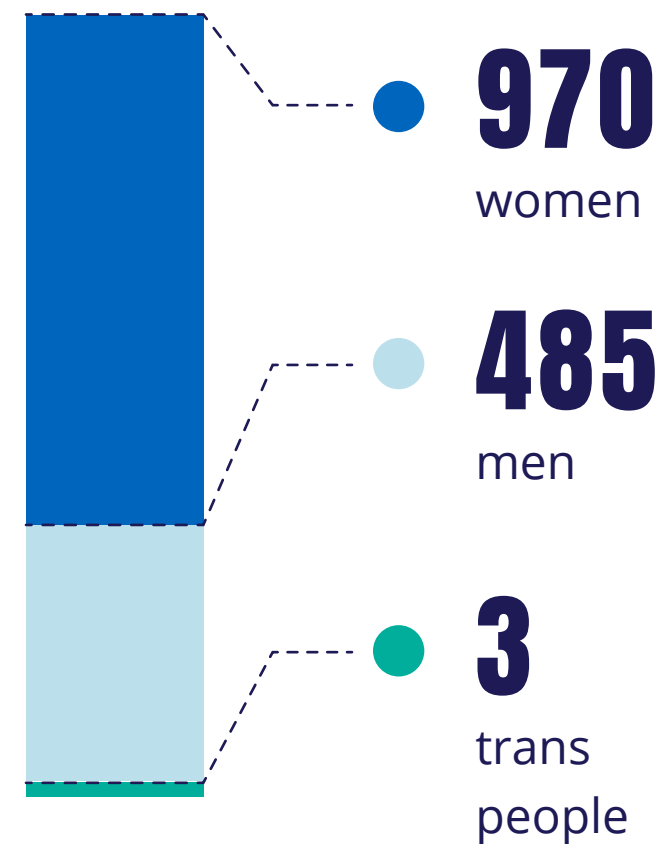


## MIGRANTS WITH PRECARIOUS STATUS

# 1,458

people came to the Clinic for Migrants with Precarious Status for a health consultation or to be accompanied in their health procedures

INCLUDING:



# IN TOTAL

# 234

consultations

# 312

pregnant women were met by the Clinic's triage

AMONG THEM:

# 94

of them received at least one consultation with nurses

# 355

migrants with precarious status

INCLUDING:

# 220

women, were accompanied by our social workers



# THE RECOGNITION OF OUR EXPERTISE: A MUST!

The recognition of our expertise continues to grow among a multitude of actors.

This gives us a certain scope and freedom to develop diversified interventions adapted to the realities and needs identified by the people who use our services. Doctors of the World is thus well positioned to innovate and advocate for the implementation of public services and solutions that remove barriers to care access and better meet the needs of our target populations.

## Institutional and financial partners

- Participation with several community partners in the advisory committee of the Bureau d'intégration des nouveaux arrivants à Montréal (BINAM); this collaboration makes it possible to highlight the various difficulties encountered by migrants with precarious status, particularly regarding the issues of access to health care and city services
- Invited by the team from the Regional Homelessness Service of the CIUSSS du Centre-Sud-de-l'Île-de-Montréal to participate in a consultation on the health component of the future regional action plan on homelessness, which is part of the National Policy to Combat Homelessness

## Academic partners

- Collaboration with McGill University's Department of Nursing and its research program to document different health issues faced by migrants with precarious status

- Collaboration with UQAM's Department of Mental Health to document the impact on health professionals who work with people who experience systemic barriers to care access
- Presence of a research team from the Faculty of Nursing Services at the Université de Montréal onboard the Mobile Clinic for a study on the impact of community care on the homeless population
- Participation in the Université de Montréal's research project on homelessness

## Health care partners

- Collaboration with the Direction régionale de la santé publique de Montréal (DRSP) and the CIUSSS du Nord-de-l'Île-de-Montréal to offer COVID-19 vaccination to clients at our Clinic
- Request from the CIUSSS du Centre-Sud and the DRSP for the Doctors of the World Mobile Clinic team to contribute to the vaccination campaign for people experiencing homelessness and Indigenous populations in the context of the COVID-19 pandemic (partner organizations: The Open Door, Chez Doris, and Resilience Montréal)



## STRONG PARTNERSHIPS FOR A GLOBAL AND ADAPTED INTERVENTION

Doctors of the World does not work alone. In our interventions, wherever services already exist, we collaborate with the teams already in place. Our services are complementary to those offered by the health and social services network. In addition, our close collaboration with the community allows us to adapt our interventions to the real needs and cultural specificities of the people targeted by our programs.

- › On board the Mobile Clinic, we work jointly with teams from community organizations who serve people experiencing homelessness, with urban Indigenous populations, and with people who use injection and inhalable drugs (IDUs).

The Doctors of the World Mobile Clinic team works with the following community organizations, among others Stella, CACTUS Montreal, TRAC, PACT de rue, The Open Door, Plein Milieu, RAP Jeunesse, Projets autochtones du Québec, Chez Doris, Résilience Montreal, Native Friendship Centre of Montreal and Native Women's Shelter of Montreal, Antre-Jeunes, La Maison Benoît Labre, RÉZO, L'Accès-Soir and L'Amour en Action.

In our Clinic for Migrants with Precarious Status, Doctors of the World relies on an impressive number of community and institutional partnerships, including

- **Legal aid:** Justice Pro Bono, the Just Solutions Clinic
- **Health services:** Les Maisons Bleues, Regard collectif, the Montreal Diet Dispensary, Clinique Jeunes de la rue, the CHUM - blood collection center, CDL Laboratories, Montreal Heart Institute
- **Other services:** Centre d'aide aux victimes d'actes criminels (CAVAC), Centre des travailleurs et travailleuses immigrants (CTI)

## ADVOCACY

### CAMPAIGN FOR THE HEALTH OF MIGRANT WOMEN WITH PRECARIOUS STATUS

According to an estimate by the SHERPA University Institute, 50,000 people living in Quebec do not have access to public health insurance coverage because of their precarious immigration status. This includes many women who do not have access to pregnancy-related care and services, as well as the other essential sexual and reproductive health services they need throughout their lives.

In March 2022, Doctors of the World submitted a [brief](#) to the RAMQ working committee recommending that the Quebec government act without delay to ensure that all women living in Quebec have access to public health and drug insurance coverage for pregnancy-related care and other essential sexual and reproductive health services.

This brief comes on the [heels of Bill 83](#), which finally granted access to public health and drug coverage to all children in Quebec, regardless of their parents' immigration status. In 2021, the importance of health coverage for pregnant women was recognized during the parliamentary committee, but the proposal was not retained.

The Minister of Health and Social Services, Christian Dubé, then gave RAMQ the mandate to continue working on this issue with an interdepartmental committee and to submit



a report by the end of June 2022. It was in this context that Doctors of the World took the initiative of submitting a brief with several recommendations.



## THE NEED TO GO BEYOND PREGNANCY

A woman's right to health cannot be limited only to the time she is pregnant.

Solutions must therefore be found to ensure coverage of other essential services that go beyond perinatal care and that women need throughout their lives, such as abortion care, family planning, and services for victims of violence, as well as those related to the prevention, diagnosis, and treatment of sexually transmitted and blood-borne infections (STBBIs) and gynecological cancers.

**“A woman's overall health must be addressed, whether she is carrying a baby or not, whether she decides to keep it or not. Difficulty in accessing abortion and contraception increases the number of unwanted pregnancies. A woman is much more than a uterus and if abortion is a choice, it is also an essential service”**

**Dr. MICHEL WELT**  
OB/GYN and volunteer  
at the Doctors of the World clinic

### **A strong consensus from a broad coalition of organizations and professionals**

The exceptional mobilization of numerous organizations, institutions, and professionals working in the fields of law, immigration, and health and social services demonstrates strong consensus and an urgency to act on the recommendations contained in Doctors of the World's brief. **All agree that these needs are interdependent, and that coverage must be guaranteed for a continuum of essential sexual and reproductive health care and services according to best practices, while respecting ethics and medical deontology.**

The Doctors of the World's brief has received nearly 80 endorsements to date, and renowned institutions in Quebec, such as the Faculties of Medicine at the University of Montreal, Sherbrooke University, Laval University, and McGill University, have expressed their support to the Minister of Health. Professional associations such as the Association of Obstetricians and Gynecologists of Quebec and the Association of Perinatal General Practitioners of Quebec have also voiced their support.

## LEARN MORE ABOUT THE CAMPAIGN'S IMPACT:



**EXECUTIVE SUMMARY**



**BRIEF**



**LEGAL ANALYSIS**

# THANK YOU

**to the many people and organizations who mobilized!**

## 1

working group  
of 25 volunteers with  
expertise in law, health,  
social services, and  
immigration

## 50

partners

## 17

letters of support

## 78

organizations  
and professionals  
who endorsed the brief

### Op-eds

- [“Invisible” women require access to health care](#), Montreal Gazette, May 3, 2022
- [Pour un véritable libre-choix : une santé sexuelle et reproductive épanouie pour toutes](#), La Tribune, May 14, 2022
- [Accoucher au Québec : une épreuve d'accueil ?](#), Le Journal de Montréal et Le Journal de Québec, May 13, 2022
- [Plaidoyer pour un suivi de grossesse pour toutes](#), Le Devoir, May 2, 2022
- [Statut d'immigration précaire, santé précaire](#), La Presse +, May 18, 2022
- [Soutenons les femmes enceintes migrantes à statut précaire](#), Le Journal de Montréal et Le Journal de Québec, June 11, 2022

### Reports

- [« Tu ne dois pas laisser une personne sans soins »,](#) La Presse +, April 30, 2022
- [Femmes enceintes et migrantes : plus de 10 000 \\$ pour accoucher](#), Le Journal de Montréal, May 13, 2022
- [Entrevue radio du Dr Welt](#), QUB radio, May 13, 2022



## ONLINE TRAININGS

For more than 20 years, Doctors of the World's team has been sharing its expertise in providing outreach care to vulnerable populations. We have set up a specialized training program for health care workers and professionals who wish to develop new skills and improve their approach to people who do not have access to care or face barriers when seeking adapted care.

Disseminating this knowledge is key to supporting health care professionals and community workers to better care for marginalized populations.

In the context of the COVID-19 pandemic, we have adapted and digitized our training courses on interventions with migrants in precarious situations. Doctors of the World volunteers also have access to this training as soon as they begin their work.



**Training “Status and care” and “How to intervene with migrants with precarious status”**



**160**  
**PEOPLE RECEIVED**  
**ONLINE TRAINING**

# GIVING A VOICE AND RECOGNIZING EXPERIENTIAL KNOWLEDGE

## THE “BY AND FOR” APPROACH: PEER SUPPORT

Throughout its many operations, the Doctors of the World team is constantly striving to include and mobilize the people impacted to give them a say and acknowledge the expertise they have developed through their life experiences.

For years, Doctors of the World has integrated the “by and for” approach and has offered daily peer support. Peers are professionals recognized for their experiential knowledge and are an integral part of the clinical team, while also contributing to the overall improvement of the health services offered to our target populations.

### **Overall, peer involvement makes it possible to:**

- › Foster thoughtful practices
- › Develop a more inclusive offer of care
- › Ensure that primary care is tailored to the population’s real needs
- › Establish a climate of trust and a safe space for clients
- › Facilitate contact with healthcare professionals





# A MULTIDISCIPLINARY AND LOCAL TEAM

## A MULTIDISCIPLINARY AND LOCAL TEAM

In September 2018, Doctors of the World launched the Indigenous Navigators project, which was initially conceived in collaboration with the Montreal Indigenous Community NETWORK as a response to the Viens Commission report.

The Indigenous Navigators project facilitates safe and culturally appropriate access to health and social services for Indigenous people who are experiencing homelessness or are at risk of becoming homeless in Montreal.

In 2021-2022, Doctors of the World strengthened this project and its link with Indigenous community partners. Their endorsement of this approach has allowed us to join the MIHAC (Montreal Indigenous Health Advisory Circle), where we evaluate and collectively reflect on Indigenous health projects, and to become a member of the Montreal Indigenous Community NETWORK.

- › We were welcomed by the NETWORK to share our expertise and to participate, with its members, in the training of new Indigenous Navigators, both in institutional and community settings.

The Doctors of the World team shared the experience and knowledge gained through this program with:

- The Atikamekw Nation Council, to contribute and participate in advocacy actions related to Joyce's Principle
- The CIUSSS Centre-Ouest-de-l'Île-de-Montréal and the CLSC Métro, for the hiring of an Indigenous liaison agent in the context of their cultural safety approach within the health and social services network
- The public health teams of the CIUSSS Centre-Ouest-de-l'Île-de-Montréal (CCOMTL), to share best practices within the framework of the project "Co-construction of an inclusive partnership approach: to better understand each other and act with sensitivity"
- The Centre hospitalier universitaire de Québec, to share our experiences with the program

## HARM REDUCTION PEER

In 2020, Doctors of the World implemented the Harm Reduction Peer project, which offers people who use drugs and alcohol a safe space and interventions adapted to their needs. The peer takes the time to establish a relationship of trust with the client.

The peer distributes harm reduction material, offers a space for listening and exchange, and provides accompaniment to specialized services (treatment of sexually transmitted and blood-borne infectious diseases, opiate substitution treatment, detoxification services, etc.), as needed.

- › The peer has also participated in various roundtables and events aimed at improving and developing services adapted to the specific realities of people who use drugs and/or alcohol (e.g.: Table des organismes communautaires montréalais de lutte contre le sida (TOMS), Congrès de l'Association des intervenants en dépendance du Québec (AIDQ), pan-Canadian exchanges for the civil society platform for drug decriminalization)

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**“The street is rough, and it scars you for life. I now use my life experiences to help and guide people experiencing homelessness.”**

**FARIN SHORE**  
Homelessness peer





# MIGRANT PEERS

**NEW**

## AN OUTREACH TEAM TO BETTER CONNECT WITH MIGRANTS IN PRECARIOUS SITUATIONS

A team of migrant peers has joined the Doctors of the World clinical team over the past year in order to better reach and accompany migrants with precarious status.

Their presence in the field and the fact that they have experienced migration in their personal lives allows them to identify needs more effectively, adapt interventions, develop service corridors, establish partnerships, forge bonds, and create spaces for dialogue that empower migrants with precarious status.

This project is part of our collaborative efforts with the Direction régionale

de santé publique de Montréal (DRSP) as well as the Bureau d'intégration des nouveaux arrivants à Montréal (BINAM) and is part of a broader vision of access and inclusion, which aims to provide support and information to people who are excluded by existing services.


Since 2019, Doctors of the World has been collaborating with the City of Montreal's Bureau d'intégration des nouveaux arrivants à Montréal (BINAM) [to offer identification and residency cards for migrants with precarious status](#).

Over the past year, the project has evolved to engage with migrants directly where they live, work, and socialize. A team of outreach workers and migrant peers provides information and helps orient them to facilitate their access to municipal services, community resources in their neighbourhoods, and health and social services in Montreal.

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**“I help people navigate their way through the available services. The strength of outreach work, in the field, is to accompany people directly in their next steps.”**

**GABRIEL BARRERA-CAYER**  
Outreach Worker



**“I came to Canada with my mother when I was 13 years old. At the time, I didn’t know that we were going to stay here forever. I lived for six years without status. These situations make people very vulnerable. It is difficult to use the resources that the system offers, because by exposing yourself, you risk deportation. That’s why I work at Doctors of the World, to change what doesn’t make sense, injustices I myself have experienced and which shouldn’t happen anymore.”**

**KENNY**  
Migrant peer



## RESPONDING TO HUMANITARIAN EMERGENCIES IN MONTREAL: NEW LOCATIONS FOR THE MOBILE CLINIC

To address the “humanitarian crisis” in the Milton-Parc sector, community organizations, including Doctors of the World, have set up a crisis unit. The Ombudsman of Montreal even [reported](#) on this crisis in May 2022, which particularly affects Indigenous people and Inuit experiencing homelessness, and has called on the City of Montreal to act.

Our Mobile Clinic team has observed, alongside our partners, that clients in this neighborhood are becoming increasingly vulnerable to poor health. In collaboration with municipal and community partners, Doctors of the World has therefore increased its support by adding a new Mobile Clinic outing in this area.

There are disturbing reports of sexual assaults against homeless Indigenous women that occurred in and around downtown Montreal in the summer of 2020. The Indigenous Navigators team mobilized several community organizations to address the safety of Indigenous women experiencing homelessness in the city. This led to the creation of the Frontline Workers Committee in 2021, under the leadership of Doctors of the World. The housing crisis, the overdose

crisis, and the ever-increasing financial insecurity have a direct impact on the worsening health situation for people experiencing homelessness. This distressing fact has translated into more interventions in several areas: care, prevention, training, distribution of material, and accompaniment by our Indigenous Navigators. Thus, additional resources are now in place to operate the Mobile Clinic near Milton Park, at the Mont-Royal metro station, as well as in other areas of downtown Montreal.





## DEDICATED VOLUNTEERS ESSENTIAL TO OUR OPERATIONS IN THE MIDST OF THE PANDEMIC

From day one of the pandemic, Doctors of the World never stopped providing services to people experiencing homelessness and to migrants with precarious status. We needed to continue to reach out to people in vulnerable situations, who faced many challenges due to service closures and public health measures.

Over the past year, our Medical Clinic team was even able to reopen the walk-in clinic service in hybrid mode to provide access to as many people as possible.

While the medical community was stretched to the limit, health care professionals continued to give of their time to care for those who use our services and have no where else to turn. Even when the collective fear of the virus was still very much present, volunteers continued to support Doctors of the World's operations, despite their fears and fatigue.



**162**  
**BÉVÉVOLES**



Discover the portraits of committed doctors, including **Dr. Delphine Boury-Simoes and Dr. Louis-Christophe Juteau, volunteers at Doctors of the World**



**TRYING TO CHANGE THE WORLD,  
THE CONTRIBUTION OF COMMITTED DOCTORS**



## MENTAL HEALTH PROGRAM

### GROWING NEEDS MEET A SHORTAGE OF SERVICES

As the pandemic upended life for many, we have come to realize how important it is to take care of our mental health and that mental health is one of the foundations of well-being, along with our physical health.


**Yet, in parallel with this collective awareness, our public health care system is experiencing a shortage of psychologists, which affects the entire population. Even psychologists who practice in the private sector are overwhelmed!**

Moreover, these private services are out of reach for a large part of the population who do not have the financial resources to afford them. This is true for the marginalized people we work with, who also face additional obstacles when they try to obtain help. In this context, Doctors of the World has

received an increased volume of requests for its mental health services. Responding to all these requests in a timely manner is a challenge for our team, and we are harnessing all of our resources to meet this demand.







**“We can lose our connection to society, to others, and even with ourselves. Some people experiencing homelessness live in groups and are well surrounded. Others live in apartments and are alone. When they come in for counselling, we create a connection. It can feel scary to reconnect, but I try to accompany them on this journey.”**

**ANNE-MARIE ÉMARD**  
Psychologist



## **“REACHING PEOPLE FOR REAL”: OUR PSYCHOLOGISTS AT THE HEART OF COMMUNITIES**

**In the wake of the COVID-19 pandemic, service disruptions, curfew, and the housing crisis, poverty has increased and has taken on different faces. Those who were already marginalized or on low incomes became more precarious, and general psychological distress increased.**

While people experiencing homelessness often live with mental health problems, socio-economic and health conditions also affect their psychological health. Their vulnerable circumstances affect their well-being and create specific needs for health services and psychosocial support. In addition, a variety of factors impede their access to care in the public health system: a long and complex process, no fixed phone number or address, successive unsuccessful applications for assistance, etc. While access to care is a central issue, the quality and adaptability of care are equally fundamental and are at the heart of our outreach approach.

For all these reasons, our psychologists continue to meet people experiencing homelessness where they are and in the community organizations they already use and where they feel comfortable. Our psychological services are accessible, free of charge, and adapted to the person's needs and lifestyle. The services are always founded on a non-discriminatory and non-judgmental approach.

### **Supporting community workers: helping people who help people**

The pandemic highlighted the fundamental role of community

organizations in protecting our social fabric. While virtually all services were closed or paused, community organizations answered the call and remained present throughout the crisis. Despite the sector's strong capacity for adaptation, the pandemic has profoundly affected the workplace realities of front-line workers, who are stretched to the limit by increased levels of distress. We can attest to this fact, as we have seen a significant increase in requests for our services.

Thanks to the financial support of our partners, we have been able to offer individual counselling sessions to community workers in the homelessness, substance use, and sex work sectors free of charge, whereas previously there was a \$20 fee per session. Offering these services free of charge in the context of the pandemic was our small way of recognizing their vital contribution. This initiative, made possible by the support of CoVivre, was appreciated by everyone we served.

Finally, Doctors of the World has emerged as a key player in the global response to the problem of homelessness through its development of innovative, supportive mental health activities that are rooted in the communities they serve.

## HIGHLIGHTS

### Research

Doctors of the World believes in the need to cultivate knowledge related to the complex fields of intervention, homelessness, and marginalization.

- A study of our mental health services for community workers has been underway for two years and will be completed this year. The study is being conducted jointly by the Université du Québec à Montréal (UQAM) and the TÉLUQ. The results will allow us to improve our services using the testimonies of the people directly impacted.
- We are also preparing a research project to be implemented in the coming year. It will document the experiences and mental health needs of people experiencing homelessness and social exclusion. These populations often find themselves voiceless when faced with problems accessing the care that is available to them. The purpose of this study is to consult them directly and develop knowledge based on their input. It will allow us to build our advocacy and social change strategy in line with their priorities and their reality.

### Training at the Ordre des psychologues du Québec

On November 13, two members of the Doctors of the World mental health team - Catherine Ethier and Mylène Demarbre - offered a professional training session entitled **La précarité psychique et ses implications cliniques** (Psychological precariousness and its clinical implications) at the Rendez-vous de la formation 2021 of the Ordre des psychologues du Québec. The training remains available online for psychologists and psychotherapists who wish to take it. This activity is part of Doctors of the World's intention to contribute to knowledge advancement and guidance for health professionals who work with marginalized people.





## HIGHLIGHTS

### Podcast *Histoires à coucher dehors* on Télé-Québec

Mylène Demarbre, psychologist, and Coordinator of the Mental Health Program at Doctors of the World, participated in the Télé-Québec podcast project on homelessness “without taboo,” hosted by comedian Jo Cormier. Featuring the words of people who have lived on the street, the podcast also interviews various professionals who work in the field.



### Clinical support for peers in the Doctors of the World team

The mental health team is pleased to provide clinical support to peers working at Doctors of the World. We offer them a space for reflective clinical exchange and a chance to discuss their work experiences in a trust-based space of active listening.

### Mental Health and Homelessness Learning Community (CASMI)

New cohort this year! Building on its success, CASMI continues. Once again this year, Doctors of the World is bringing together stakeholders and key actors from various backgrounds to create a community for knowledge sharing, promote continuing education, and ensure the development of best practices throughout the community.



## RESULTS

**96**

people experiencing homelessness or at risk of becoming homeless have consulted our psychologists

**1 147**

sessions were offered

**72**

new consultation requests have been received

**44**

sessions were offered to community workers

**180**

group support meetings were held

**234**

community workers participated in the group sessions

**39**

**groups** were accompanied

AT:

**27**

**community organizations**

INCLUDING:

**7**

**new requests** for group support

## COMMUNITY PARTNERS

- **Maison Benoît Labre**
- **Mission Bon Accueil**



# INTERNATIONAL ACTIONS





## EMPOWERING YOUTH

### RESPECT for youth's sexual and reproductive rights

**What if we gave young people a chance to express their needs, their challenges, and how they want to receive sexual and reproductive health services?**

The RESPECT project, launched by Doctors of the World in partnership with the Government of Canada over the past year, proposes to do just that. Even though access to dignified, appropriate, and respectful sexual and reproductive health services is

a fundamental right, certain countries like Burkina Faso, Benin, and Haiti are still struggling to guarantee it for their youngest citizens. We know that no one is better placed than the youth themselves to speak out about the barriers they face in accessing health care, and more importantly, how they want to receive that care. For this reason, the strategies deployed throughout this project will include adolescent girls and boys and young women aged 10 to 24 in the decision-making processes that affect them.

In Haiti, only 56% of women make autonomous, informed decisions about sex, contraception, and sexual and reproductive health (SRH). The situation is even more difficult in Benin, where the rate drops to 38%, and to 20% in Burkina Faso. This is due to a significant lack of information on sexual and reproductive health and rights, as well as economic, geographic, and security constraints on adolescent girls and young women's access to these services, and gender inequalities that affect their power to make health-related



**CATHERINE D'AVIGNON**  
International Project Manager

decisions. The low rate of informed decision-making on sexual and reproductive health issues and the high degree of unmet need for family planning reflect the persistence of legislative, structural, social, cultural, and economic barriers to the full implementation of sexual and reproductive rights in the three RESPECT countries, despite their fundamental differences. These barriers are most concretely manifested in the lack of accessible, quality information and adolescent-friendly health services.

The RESPECT project begins with a participatory assessment, by and for youth, to better understand the issues they face in their daily lives when it comes to sexual and reproductive health rights. The youth's voice and expectations will then guide the activities that will be carried out in the field.



# WAR IN UKRAINE

## SUPPORTING THE LOCAL HEALTH SYSTEMS

Conflicts and crises always have a direct impact on the health of civilian populations and healthcare workers. Since hostilities began in Ukraine on the night of February 22-23, 2022, Doctors of the World teams have supported the extremely fragile health system by supplying hospitals and opening a humanitarian corridor to transport medical equipment and medicines. Physical and mental health services were also provided to nearly 80,000 internally displaced people.

### Running towards healing

More than a quarter of the Ukrainian population has been forced to flee their homes. In the most affected areas, the destruction of civilian infrastructure, the constant threat of bombing, and the lack of access to essential services have made life unbearable for millions of people.

More than 100 members of the Doctors of the World team in Ukraine have fled their homes and continued to work with the organization in support of their country. They too are part of the 8 million internally displaced people who have left a part of their lives behind.



**WATCH THE VIDEO “RUNNING TOWARDS HEALING”  
ABOUT DOCTORS OF THE WORLD’S HUMANITARIAN  
PERSONNEL IN UKRAINE.**



## INVISIBLE WOUNDS

Invisible wounds in conflict zones can sometimes be the most painful, which is why mental health support is now our priority in Ukraine. Displaced people and those who have experienced combat first-hand can suffer deep emotional distress with serious consequences. This psychological pain can affect an entire community.

Doctors of the World teams carry out group interventions to develop a sense of mutual support. The most serious cases are treated in a clinic.

**Your donations made the following possible:**

**936**

displaced people received care from our mobile unit

**979**

people received treatment from our response group

**24**

health centers were supported

**38**

tons of medicines and health equipment were delivered

**266,881**

people benefited from our response

**“The health system has collapsed. The population’s health needs have increased because of the war and supply lines have been cut. Let’s not forget that this is a siege war on the cities, leaving hospitals without access to medical supplies.”**

**JESÚS CRUZ**  
Emergency Coordinator  
for Doctors of the World in Ukraine



# RIGHT AND ACCESS TO HEALTH IN NORTHERN BURKINA FASO



**REGION  
KONGOUSSI**  
(NORTH CENTRAL REGION  
OF BURKINA FASO)

Burkina Faso has been in a major crisis since 2015, as attacks intensified across most of the country.

These conflicts have led to a humanitarian crisis affecting more than two million people, mainly in the North, North-Central, East, Boucle du Mouhoun, and Sahel

regions. In an effort to flee the conflict zones, the population is constantly on the move. As of March 31, 2022, there were nearly **1.85 million internally displaced persons (IDPs)**. The Centre-Nord region is the most seriously affected, with more than 600,000 displaced persons. Increasing insecurity has had a serious impact on the already fragile health system, forcing the closure of health institutions and reducing services, which greatly limits access to primary health care. **499 health institutions have been affected by the insecurity in these regions, 160 of which are completely closed, depriving more than 1,956,781 people of access to health care.** In this extremely insecure context, women and girls are particularly affected and become the target of physical, sexual, and psychological violence. Doctors of the World's project thus aims to promote and ensure the health, particularly sexual and reproductive health (SRH), of conflict-affected populations in the districts of Kongoussi.





## RESULTS

During the first year of project implementation, the Doctors of the World mobile clinic reached

**19,047**

people in **157** days of deployment. The massive influx of displaced people into the project area has made the mobile clinic a focal point during the past year.

**541**

patients were referred and treated for life-threatening emergencies, despite disruptions in the road network and the limited functioning of certain health care facilities

**4**

training sessions were offered to strengthen the skills of

**139**

providers on the following topics:

- › management of acute malnutrition cases
- › hospital hygiene and biomedical waste management
- › case management for gender-based sexual violence
- › stress management



# ADVOCACY

## CRISIS IN THE SAHEL: LISTENING TO CIVIL SOCIETY

Every year, the Sahel sinks deeper into a spiral of violence, where civilians are the first victims. As a member of the Citizens' Coalition for the Sahel (an alliance of 55 civil society organizations), Doctors of the World spoke at the UN Security Council on January 10th, 2022.

As the strategies deployed since 2013 have failed to bring stability to the region, this Coalition insists on the need to listen to the population, to prioritize civilian protection, and to fight against the root causes of the crisis. **Cécile Thiombiano Yougbaré, in charge of Doctors of the World's advocacy** for sexual and reproductive health rights in Africa, presented on her experience with the Coalition's teams in the field, particularly in Burkina Faso.

**“Our medical teams report an increase in rapes during their mobile clinic outings,” she explained. “We have seen so many cases of depression, suicidal ideation, and insomnia that our colleagues have lost count.”**



**She concluded:**

**“Ladies and gentlemen, the people of the Sahel need the Security Council to hear the voice of Sahelian civil society and put their voice at the heart of its response to the crisis.”**



**TO LEARN MORE,  
READ OUR REPORT**



# LEBANON EMERGENCY



**REGION**  
**BEIRUT**

On August 4, 2020, a devastating explosion in the port of Beirut killed more than 200 people, injured 6,500, and left an estimated 300,000 people homeless, leaving an entire population traumatized. Shortages of medicines, the destruction of 6 hospitals and 11 health centers, as well as the increase in cases of COVID-19 have considerably weakened the health system in country already in the midst of an economic crisis and struggling with multi-faceted trauma.

A few hours after the tragedy, Doctors of the World set up a shelter and began home visits in the Karantina neighborhood to provide psychosocial support to victims devastated by the explosion. Thanks to the generosity of the public, Doctors of the World teams were able to maintain access to health services, both physical and psychological, first in tents (with a mobile clinic), then at a walk-in clinic, and finally with a telephone hotline service during the confinement.

The socio-economic crisis, however, has exacerbated this already difficult situation, resulting in the interruption of various government subsidies, and causing medication shortages throughout the country. Today, the most vulnerable populations are still paying the price, especially the elderly. The local association Beit El Baraka has noted the increased need for access to treatment, especially for people with chronic conditions. Over the past year, Doctors of the World has also supported this organization's initiatives to help and restore dignity to elderly people who are deprived of their retirement pensions or social security.



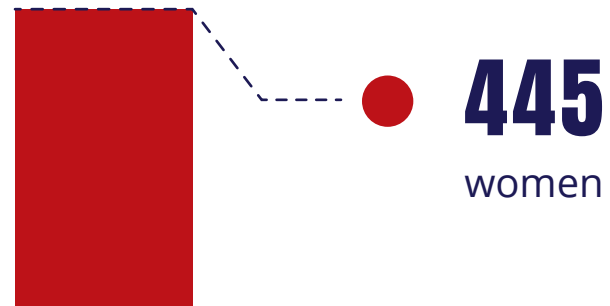


## What your donations allowed us to accomplish:

# 1,475

people were educated  
on COVID-19 preventive  
measures in schools  
and homes

INCLUDING:



# 629

home visits were made  
to assist families

# 1,299

individual psychological  
consultations were offered  
to help the most traumatized  
individuals

# 688

consultations were provided  
by the Mobile Clinic nurses

# MORE THAN 20,000

people received donations of medicines,  
tents, and medical equipment

# MORE THAN 23,000

people were treated and supported  
after the Beirut explosion



**WHAT YOUR DONATIONS ALLOWED  
US TO ACCOMPLISH**

# COLOMBIA

## STRENGTHENING ACCESS TO HEALTH SERVICES FOR VENEZUELAN MIGRANTS AND VULNERABLE HOST POPULATIONS



**REGION**  
**BOGOTA**  
**CALI, AND IPIALES**

In Colombia, internal conflicts, particularly between the army and the FARC, have been impacting human rights for many years.

In 2020, the global pandemic and increased migration from Venezuela to Colombia have only amplified these difficulties, especially in the regions

of Bogotá, Cali, and Ipiales where humanitarian access is restricted. In the past year, Colombia has also faced months of protests motivated by the country's deep economic and social inequalities. All of these events have had a negative impact on the quality of life for Colombian citizens and migrant populations, **particularly for girls and women**, who have difficulty meeting their basic needs. In Colombia, it is estimated that **70% of the legal migrant population is still not included on the health insurance system** that provides access to medical care. The difficulties in accessing health care are all the more worrying for these populations, who are often victims of forced labor, sexual and gender-based violence, rape, etc. On the migration routes and in isolated regions (Narino, Valle del Cauca, etc.), access to health services is extremely perilous, as it involves several hours of walking in uncertain and dangerous conditions.





Faced with this reality, Doctors of the World's mission in Colombia is based on several pillars: from defending rights to establishing a medical aid plan to compensate for the lack of care. **Mobile clinics traveling along the migration routes** in the Tunja-Ipiales corridor provide effective and safe first aid to migrants traveling from Venezuela and other countries. Doctors of the World also provides community-based services and **psychological first aid for migrants** - particularly women, adolescents, and LGBTIQIA2+ people - that include specialized services for victims of gender-based violence.

## RESULTS

Doctors of the World provided immediate and equitable access to primary health care, sexual and reproductive health, and mental health services to nearly

**62,000**

people in the project's target areas, particularly women, adolescent girls and boys, LGBTQ2I+ people, and vulnerable host communities

**343**

survivors of sexual gender-based violence (SGBV) accessed legal support services

**NEARLY 8,000**

women and girls accessed sexual and reproductive health services

**4,119**

people accessed mental health services in health centers or via mobile clinics

# HAITI

## A COMMUNITY-BASED APPROACH TO COMBAT MALNUTRITION



REGION  
NORTH WEST  
DEPARTMENT

In Haiti, nearly 6 million people live below the poverty line (revenue less than US\$2.41 per day; among this group, 2.5 million live on less than US\$1.23 per day and are therefore below the extreme poverty line).

This situation has a direct impact on health, and particularly on malnutrition. The causes of malnutrition are multiple: repeated infections, poor health, inadequate food intake, etc. But other causes contribute in an underlying way, such as gender inequality, insecurity, and inadequate hygiene and sanitation. **In 2021, acute malnutrition in children under 5 years of age increased by 61%, affecting nearly 217,000 Haitian children, up from 134,000 the previous year.** The prevailing food insecurity in the country, combined with the shortage of nutritional food, is exacerbating an already very uncertain humanitarian situation. Indeed, malnutrition is not the only cause for concern in Haiti: the rise in violence, political instability, and the lack of access to drinking water and fuel are all factors that weigh heavily on Haitians in their everyday lives.





Doctors of the World, through the FORSNUT project, worked directly with the most vulnerable communities and community relays in ten communities to help reduce malnutrition in the North-West department of Haiti.

This community-based approach was made possible **thanks to mothers' clubs, town criers, religious leaders, local authorities, and community radio stations**, who allowed us to reach the most remote and marginalized populations, and particularly families who normally do not or only rarely visit healthcare institutions. Community health workers also carried out activities and home visits where they could organize screening sessions for children showing signs of malnutrition.

At the institutional level, Doctors of the World strengthened healthcare provider knowledge around the community's needs, particularly in terms of reception, GBV, and the fight against malnutrition, and helped establish links between the different actors involved in the fight against malnutrition throughout the department.

## RESULTS

**207,085**

home visits were carried out and

REACHED:

**213,480**

women (ages 15 to 49)

**90,130**

women and adolescents benefited from community health and nutrition monitoring, between 2019 and 2022

**301**

community outreach workers received support from the project; these outreach workers worked with the community leads to promote good nutrition practices. This resulted in the creation of

**47**

mothers' clubs (**32 in Doctors of the World intervention areas**) and collaboration with **13 community radio stations** (including 1 in Doctors of the World intervention areas)

# HAITI

## MENTAL HEALTH



REGION  
NIPPES

Mental health is still a taboo subject in many communities in Haiti. Even in hospitals, mental health is not well integrated.

More specifically, going to see a specialist (psychologist), talking about one's emotions, fears, and traumas is not yet recognized and accepted by the population, including medical personnel. In addition, **only 4.3% of**

**the Ministry of Public Health and Population's national budget is allocated to mental health** (as opposed to the 15% recommended by the WHO), which fails to meet the needs and requirements of population who is largely concentrated in cities or in areas that are difficult to access. In addition, ongoing political and social crises and the risk of health crises related to COVID-19 affect the social climate and increase the vulnerability of a large part of the population, which is already marginalized and lacks access to health care. All these aspects exacerbate the need for mental health care. **On August 14, 2021, the 7.2 magnitude earthquake that struck the south of Haiti created many psychological needs** in the Nippes department. Following this disaster, Doctors of the World redirected its operations to implement numerous psychological support sessions and create discussion groups for remote populations, but also to provide mental health support for healthcare staff in health institutions.







## RESULTS

# 2,043

people were reached indirectly through the psychological support activities implemented

- In total, between September 2021 and April 2022, nearly 700 people in Nippes (health care providers, students, faculty members, parents, CHWs, community members, etc.) were reached through trainings, talk workshops, focus groups, etc.
- Discussion groups have been created for earthquake victims
- Tools and training modules on psychological distress have been developed



# EARTHQUAKE EMERGENCY IN HAITI

On August 14, 2021, a magnitude 7.2 earthquake devastated the Grand Sud of Haiti, affecting thousands of people. In the remote areas of Nippes, the earthquake took more than 2,000 lives, injured 12,000 people, and destroyed 60,000 buildings, including homes, schools and hospitals.



**VIEW THE VIDEO “SIX MONTHS AFTER THE EARTHQUAKE IN NIPPES”**



**READ THE REPORT HERE**

## **Your generosity and solidarity have enabled us to accomplish the following:**

- Support for **32 community health agents who work in the most isolated areas** and act as a bridge between the communities and the health institutions
- Raised awareness by circulating **9 trucks and town criers** who inform populations in the **9 communes supported by the project**
- Provided consultations to **495 people for trauma-related injuries**
- Promoted outpatient consultations to **78,961 people**
- Distributed **1,106 basic health kits** to the most vulnerable populations





## PALESTINE (GAZA)

Palestinians have been living under Israeli occupation for more than 50 years, after being forced to leave their land more than 70 years ago. And for the past 14 years, the Gaza Strip has been under a suffocating blockade, imposed by the Israeli authorities, which has impacted the social, economic, and humanitarian conditions.

Despite the ceasefire between Palestine and Israel that went into effect on May 21, 2021, Gaza's humanitarian needs remain immense. The ongoing hostilities between Israeli forces and armed groups in Gaza have resulted in further displacement, bringing the number of internally displaced persons to 75,000.

Nearly 2 million people are living in confinement in one of the most densely populated areas in the world. With the health system already fragile after fourteen years of blockade, this new flare-up has worsened an already disastrous situation: **Gaza is in its most critical humanitarian crisis since the 2014 bombings.**

Doctors of the World has been active in Palestine for 25 years working to ensure access to health care for the population, while supporting health care structures and bearing witness to a situation of permanent tension.



## FRONT-LINE WORKERS ALSO AFFECTED

The mental health of front-line workers has also been severely affected. We carried out the “Support for Caregivers” training program to help build their psychological resilience and ensure the sustainability of their work.

### Your generosity has enabled us to:

- Reduce morbidity and mortality by funding the purchase and installation of medical equipment in **4 health centers**
- Purchase medicines to meet the needs of **600 people**
- Conduct a psychological support program for **282 front-line workers**
- Provide psychological support to **7191 people traumatized** by the crisis via a hotline
- Distribute **625 kits to the most vulnerable families**, with essential hygiene and women’s health items, as well as COVID-19 protective items

**“Gaza’s health system was already on the verge of collapse even before this recent escalation of the conflict. The COVID-19 pandemic is still very present in the area, and the health system is now facing a shortage of medicines, water, and electricity. Add to that the mental health issues, and we must work hard and fast to help the people of Gaza recover.”**

**WILLY BERGOGNE**  
General Coordinator  
of Doctors of the World in Gaza



# DEMOCRATIC REPUBLIC OF CONGO (DRC)

## THE IMPACT OF INTER-COMMUNAL VIOLENCE AND CONFLICT ON THE HEALTH OF DISPLACED PERSONS



**REGION**  
**NYUNZU**  
**TANGANYIKA**  
**PROVINCE, DRC**

Tanganyika Province in the eastern part of the Democratic Republic of the Congo (DRC) is plagued by chronic insecurity and large population movements as a result of numerous inter-communal conflicts and the presence of armed militias.

Over the past two years, Tanganyika has hosted **471,440 internally displaced persons (IDPs) and 280,005 people returning to the province with urgent humanitarian needs for food, access to water, and protection.** Humanitarian aid is underfunded in this region of the world, and the number of people in need continues to grow, from 12.9 million in 2019 to 15.6 million in 2020 and 19.6 million in 2021. Doctors of the World is focusing on the Nyunzu zone in the northeast of the province, which has been the scene of violence between the Twa and Bantu communities for more than a decade now. Nyunzu is, according to the World Food Program (WFP), in a critical food emergency, where the level of chronic malnutrition exceeds 40% of the population.





Displacement, poor shelter conditions, and lack of access to health care services have resulted in an under-five mortality rate higher than the national average. In Tanganyika province, 60% of women between the ages of 15 and 49 give birth at home due to inadequate security and lack of access to health facilities. As women and girls attempt to flee their homes, they become targets of widespread sexual violence within communities.

The continued presence of internally displaced persons (IDPs), with no immediate prospect to leave, combined with an influx of returning populations, perpetuates this permanently precarious situation. In this context, **Doctors of the World works with remote populations in areas where no other international medical organization is present.** Over the past year, in addition to screening cases of malnutrition and treating cases of gender-based violence, the mobile clinic has also made it possible to combat the outbreak of measles.







# COMMUNICATION AND MOBILIZATION



# “CARE WITHOUT JUDGMENT”, THE NEW DOCTORS OF THE WORLD CAMPAIGN

## TELLING THEIR OWN STORY

In October 2021, Doctors of the World launched a public awareness campaign entitled “Care without judgment” in collaboration with the agency TUX. The campaign aims to introduce Doctors of the World’s mission to the public, but above all to highlight the reality of life for people who too often fall between the cracks in our public health services.

This campaign strove to centre their voices and encourage people to listen to them, support them, and honour their experiences. Other than being supported by media sponsorship, the campaign is more documentary than advertising.

Discover the stories of Gail, Katerine, Emmanuel, Shane, Bobette, Dahiana, Janet and Sylvain, who unfortunately left us too soon. Doctors of the World pays tribute to all those who have shared their stories with us.



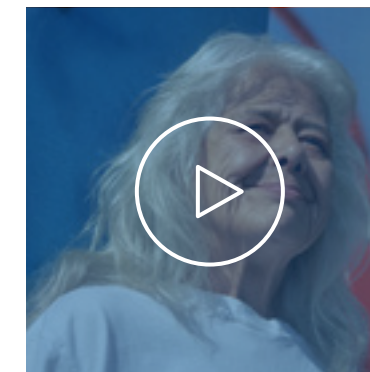
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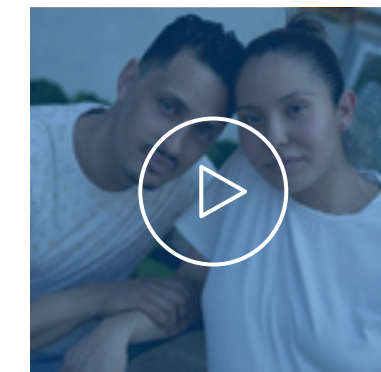
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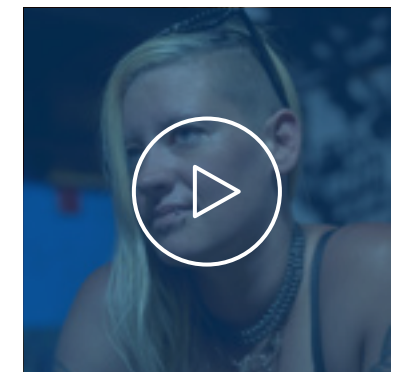
**CARE WITHOUT JUDGEMENT**



**PORTRAIT OF GAIL**



**PORTRAIT OF KATERINE AND EMMANUEL**



**PORTRAIT OF BOBETTE**

**Thank you to our media partners!**

**QUEBECOR**

**PUBLICITÉ  
sauvage**



## TITLE: 25TH ANNIVERSARY OF DOCTORS OF THE WORLD CANADA

Doctors of the World Canada has been reaching out to people in situations of great vulnerability, marginality, or exclusion wherever they are, without judgment, for 25 years.

We know that our mission to provide and promote access to health care will only have an impact if it targets structural changes. And, for 25 years, we have been supporting individuals and communities to access their rights, thanks to the many health professionals and volunteers who are committed to our common vision of the right to health.

To celebrate Doctors of the World Canada's 25th anniversary, we organized a series of panels on issues related to health and social change.

**JUNE 10TH, 2021**

### **"Humanitarians Here and Around the World"**

What new standards should define our health systems to better respond to future health crises?

[Watch the panel](#) · [Learn more](#)

**NOVEMBER 17TH, 2021**

### **"The role of community health in a crisis context: the experience of Haiti"**

Can the community health approach become a solution in a crisis context like Haiti?

[Watch the panel](#) · [Learn more](#)

**MAY 5, 2022**

### **"Mental health and marginalized people: beyond access, how to reach them for real?"**

#### **Maison du développement durable**

Drawing on their respective expertise (sociology, psychiatry, psychology, homelessness), the panelists shared their vision

and their experiences on the concept of marginalization in our society, on the barriers to access to care for people in marginalized situations, and on their innovative approaches for reaching these people... "for real." Several community workers and stakeholders also participated in this panel.

[Watch the panel](#) · [Learn more](#)



## Special thanks to:

- Dr. Nicolas Bergeron
- Dr. Réjean Thomas
- Dr. Amal Abdel-Baki
- Pr. Marcelo Otero
- Dr. Shelley-Rose Hyppolite
- Valérie Borde
- Caroline Leblanc
- Marie Flaire G.Janvier
- Dr. David-Martin Milot
- Mylène Demarbre
- Nicolas Demers-Labrousse

## More events:

**OCTOBER 13, 2021**

### Duo Milot-Tétreault

**Maison culturelle et communautaire de Montréal-Nord**

**OCTOBER 27, 2021**

### Psychological first aid training

#### Maison d'Haïti

With the participation of Dr. Nicolas Bergeron,  
President of Doctors of the World Canada (2006-2020)

Psychiatrist, CHUM Medical Psychiatry Service  
and Assistant Clinical Professor, Department of Psychiatry,  
Université de Montréal

**MARCH 22, 2022**

### Social Determinants of Health Conference

Invited by the MEDLIFE Local Initiatives Committee  
from McGill University

With the participation of Pénélope Boudreault,  
Director of National Operations at Doctors of the World





A

COTE-DES-NEIGES

5316

**OUR SUPPORTERS**





# THANK YOU!

Doctors of the World Canada is extremely fortunate to be able to count on the on the continued support of many individuals and organizations. We would particularly like to thank the religious congregations who, year after year, continue to trust us with their precious contributions.

Doctors of the World Canada also wishes to thank the foundations, unions, businesses, and private donors for their commitment and generosity, which are essential to the success of our national and international operations.

Philanthropy is first and foremost a gesture of the heart, and we see this everyday thanks to your support, which allows us to offer not only health care but also compassion and empathy to the most marginalized and excluded people in our society. Your commitment to Doctors of the World is truly a beacon of hope!

We would also like to acknowledge all those who have left us and those who have passed away and who have left us a who have left us a legacy in their wills for to Doctors of the World:

- **MR. RAOUL BUSER**
- **MRS. CAMILLE FRÉCHETTE**
- **MR. GERVAIS TARDIF**

## DONATING SHARES

**“A few years ago, when I was looking for an organization to donate to, a good friend suggested Doctors of the World. After looking into it, I was impressed by their work with migrants with precarious status. I come from an immigrant family, and I know how difficult it can be to arrive in a new country. That’s why I decided to contribute to Doctors of the World. The financial columns I read often discuss the benefits of donating stock. In my case, I can give almost 35% more by donating stock than by selling stock and donating the money from the sale - and I still get the tax benefit. This is the third year I’ve donated to Doctors of the World in this way.”**

**JOHN VANDEN ELZEN**  
Donor





**Thank you to our **5,000** donors who have made one or more donations this year, including nearly **1,600** monthly donors.**

**Did you know that our monthly donation program “Care without judgement” is one of the best ways to support Doctors of the World?**

Monthly donations allow you to:

- › Better plan your budget by distributing your annual donation over 12 months, which gives us greater revenue stability and allows us to be responsive to the needs of those we care for and accompany
- › Maximize your contribution, since the administrative costs are lower than for other than for other types of donations

## **MONTHLY DONATIONS**

**“What I like about Doctors of the World is that its actions encompass three spheres, all equally important: providing care, promoting people’s empowerment, but also influencing decision-makers. As a infectious disease physician, I have particular appreciation for the work done by Doctors of the World’s Mobile Clinic team with marginalized people. I was immediately attracted by the monthly donation, which ensures predictability for Doctors of the World while simplifying things on my side (automatic payments that are easy to budget). I know that this type of donation gives the organization the flexibility it needs to do its important fundraising work. And, even though my initial choice to give to Doctors of the World comes from the heart, the monthly donation brings me the more rational side that I particularly like as a physician and a devotee of rigour.”**

**DR. MARYSE CAYOUE**  
Monthly donor



A close-up portrait of a woman with dark, wavy hair, smiling warmly at the camera. She is wearing a dark blue top and a small pearl earring. The background is a soft, out-of-focus grey.

**“Our commitment to making Quebec a more inclusive, egalitarian, and supportive society for the most vulnerable is a fundamental mission for us. Doctors of the World ensures and defends access to health care for people experiencing exclusion, notably through its mobile clinic that travels the streets of Montreal. It was therefore natural for us to support their outreach work and their mission.”**

**SYLVIE CORDEAU**

Vice President Philanthropy and Sponsorships  
Quebecor



**“In line with our social responsibility beliefs and values, Christie Innomed is pleased to support Doctors of the World by providing a state-of-the-art ultrasound system. Our goal is to enable the specialists at Doctors of the World to provide the best possible care. Without this partnership, some patients would not have the same access as the rest of Quebec citizens to a proper diagnosis. We are therefore extremely proud to contribute and support Doctors of the World in its mission to provide emergency and long-term medical care to people in vulnerable situations in the greater Montreal area.”**



Un monde où  
la santé  
est réellement  
un droit

MEDECINS DUMONDE.CA

SUIVEZ-NOUS



**MARTIN ROY**  
President and Chief Executive Officer  
Christie Innomed





# THANK YOU TO OUR PARTNERS



## A HEARTFELT THANK YOU TO OUR FUNDERS



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- › Fondation Emmanuel



**“What attracts me to medicine is helping and being close to people. At the Mobile Clinic, I learn how to work with people who are in difficult situations. I am surrounded by professionals who are very knowledgeable about the intervention environments. Above all, you have to be able to listen.”**

**JEANNE PEYROCHE**  
Volunteer at the Mobile Clinic







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