

# doctors Without Borders Canada

Aid for the suffering, whoever and wherever they are

In 1971, a small group of French doctors were winding up their work in Biafra, the devastated and famine-stricken scene of the bloody Nigerian civil war. Providing medical relief there had sometimes been a tragically frustrating job. The experience left the doctors determined to find a better way to respond to health emergencies. What they wanted was a way for physicians to minister to suffering victims, unhampered by political, economic and religious factors.

Out of that resolve came Médecins sans frontières (MSF), known in English as Doctors Without Borders. Today, this is the world's largest independent, international medical relief organization. MSF maintains 5 operational centres in Europe and 14 national sections throughout the world, including 1 in Canada. A Canadian, Dr. James Orbinski, is currently president of the MSF International Council, which has its headquarters in Brussels, Belgium.

The organization has a threefold mission. First, it supplies emergency relief in places where medical infrastructure does not exist or is unable to cope with the crisis. Second, it conducts medical research, mass vaccination and other public health programs in developing countries. Third, it serves as the voice of the afflicted, speaking out about the plight of the people it helps.

MSF's operating principle is to provide help to all who need it regardless of race, religion, politics or gender. Fulfilling that pledge requires a measure of sturdy independence. This is why MSF seeks donations from international agencies, private foundations and the general public.

The Canadian section of MSF has its headquarters in Toronto and regional offices in Ottawa, Montréal, Vancouver and Halifax. MSF Canada recruits physicians, nurses and support personnel for missions overseas. It also raises funds and works to keep the Canadian public aware of the situation of health crisis victims throughout the world.

Since 1991, over 500 Canadian MSF volunteers have served in Rwanda, Bosnia, Afghanistan, Cambodia, Liberia, Angola, Sudan, Sri Lanka, Colombia and elsewhere. They have responded to human-caused and natural disasters—everything from shooting wars and the collapse of civil order to epidemics, famines and floods. The Kosovo crisis brought the organization into action again. An MSF Canada team was on the ground in Pristina before the conflict broke out. As of May, the organization had dispatched three Canadian physicians to refugee camps in the Former Yugoslav Republic of Macedonia for tours ranging from six weeks to six months. ●

To volunteer for service, make a donation or learn more about the work of MSF, visit its Web site ([www.msf.ca](http://www.msf.ca)) or contact the national office:

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photo: MSF CANADA

## Jonathan Brock, M.D.

When 33-year-old Dr. Jonathan Brock arrived in the Balkans last April, technically speaking he was still a resident in family medicine at a Vancouver hospital. But in fact he was a veteran in the delivery of emergency medical services, thanks to six years of voluntary work with Doctors Without Borders Canada.

Between 1993 and 1998—before and after graduating from medical school—Jonathan Brock served overseas as a volunteer in five major crises in Mali, Somalia, Rwanda, Sierra Leone and Afghanistan. The tasks assigned to him were far from light. In Rwanda, he was involved in establishing a 200-bed hospital and helped with surgery. In 1996, after he received his M.D. from Queen's University, his first mission was to Sierra Leone to minister to the terribly mutilated victims of a civil war.

Now he was in the field again. Only weeks before the end of his residency, he was co-ordinating an international team of 45 MSF physicians at Brazde, also known as Stenkovec 1, the largest refugee camp in the Former Yugoslav Republic of Macedonia. Their mission was to help Kosovar refugees.

At one point, he and his team had to provide care to more than 30 000 refugees ranging in age from newborns on up, with 10- to 40-year-olds constituting the largest group. The medical problems, he reported, were mainly upper respiratory tract infections plus high blood pressure, heart and lung disease, and other chronic ailments. Many refugees were also emotionally traumatized. It was a challenging assignment, said Dr. Brock in a recent interview, but he would not have changed places with anyone else.