

Doctors Worldwide  
**IMPACT REPORT**  
2024-2025



Doctors  
Worldwide



# What We Do

Health Access

Health Emergencies

Health Improvement

***Serving communities in need so that they can build healthier and happier futures.***

At Doctors Worldwide, we believe that good health enables people and communities to define their own future. Without good health, a parent cannot take care of their family, nor can a child meet their full potential. As a result, communities miss out on a chance to grow and contribute to their collective wellbeing. Access to quality healthcare is not a privilege, it is a human right, and we work towards making that a reality, especially for the most vulnerable communities.



**With your help:**

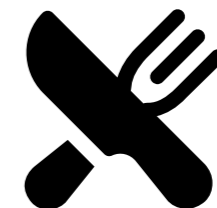
**233,027** lives impacted



**160,055** people received medical treatment



**3,381** safe births & antenatal/postnatal care



**72,264** people received nutrition support



**136** medical/healthcare workers trained



A young patient receiving care at one of our medical tents in Gaza.

# Palestine

## Medical Care

We are providing ongoing support to a grassroots nonprofit organisation to run five medical tents in the middle of the Gaza Strip (Deir Al-Balah, Al-Zawayda and Khan Younis). In total, the **medical tents support around 5,000 patients a month** via the work of family doctors and nurses, taking a comprehensive and biopsychosocial approach with patients. Areas of care covered include mental health care for adults and children, treatment of acute and chronic illnesses, and early detection of common diseases e.g diabetes.

In addition, the tents offer medical distribution and wound dressings, as well as health education sessions for surrounding communities. A **mental health support tent** [the 'hope clinic'] was opened to provide psychosocial support for patients and for children who have lost a family member.

## Mothers & Babies

In times of disaster, access to formula, clean water, and sanitation for safe preparation is very limited. Breastfeeding is therefore the safest way to feed babies and prevent illness, yet more than 95% of pregnant and lactating women in Gaza are experiencing food insecurity and malnourishment.

In response to this challenge, we partnered with the Gaza Infant Nutrition Alliance to provide **lactation consultants and breastfeeding support for three hospitals, a community medical tent, and two neonatal units**. This work is currently supporting 500 mothers and their children per month. We have also started **providing food packs** (£80 per pack) twice a month for malnourished pregnant and breast-feeding mothers. This is essential to prevent harm to the foetus **and reduce the risk of significant complications or death for the mother**.

## Food & Other Aid

We provided **dry food packs, water, hygiene kits, blankets, nappies and other aid** for the besieged population of Gaza. In 2024 this included a cooked food programme, providing nutritious meals to the displaced population.



**1** mental health support tent set up



**33,259** patients treated



**1** breastfeeding consultation tent set up



**2,000+** patients with mental health supported



**3** medical tents set up



**2,880** pregnant and breastfeeding mothers supported



**50** mothers provided with vital food packs



**20,254** cooked meals



**1,000** dry monthly family food packs



**22** tonnes of flour to make 37,000 loaves of bread



**1,050** blankets distributed



**1,000** hygiene packs distributed



Community Day at the Pakistan hospital.

## Syria

Since the devastating earthquakes in Feb 2023, we have been actively supporting the day-to-day running of the Jindires Medical Clinic in North West Syria, due to its rapidly increasing patient needs as a result of surrounding destruction and high refugee population. **Through our work we continue to offer care and support for approximately 2,750 patients per month.**

**We are the only clinic in the Jindires IDP (Internally Displaced Persons) camps** and over the past year we have provided a psychologist and case worker, dedicated child psychologist and a specific PSS (psychosocial support) tent. We have also increased the capacity of the Outpatient Department by adding an additional nurse, case worker and a Psychosocial Support Tent Assistant and supplemented the salaries of further healthcare staff.

In addition, after the change in government in December 2024, the **Jindires team began mobile health clinics 3-4 days a week in Aleppo** and surrounding areas, providing a range of primary care treatments as well as psychological support and play sessions for children run by our mental health team.



**28,373** medical consultations conducted in Jindires



**6,877** patients treated via pop up mobile clinics in Aleppo



**1,310** children receiving psychological support in Jindires

## Pakistan

This year, we **formed a new health collaborative** to oversee the governance of our hospital and to help improve and expand more services and community outreach work through our facility. This includes a further **increase in medical staff, full computerisation, increased solar panels and an improved laboratory testing facility as well as better services**, especially in critical areas such as the emergency room and pharmacy.

In the first few months of launching this new collective, the newly titled 'Sehat Center' introduced **Asthma and COPD (Spirometry), EPI (Rabies and other Immunization), Malnutrition Services and Community Outreach Services** in surrounding villages screening for health problems in adults and children and running health education services.



**9** new staff recruited



**1,830** community outreach sessions undertaken



**12,243** patients received medical consultations



One of our Palliative Care patients in Rwanda.

# Rwanda

## Medical Debt Relief Project

When a health emergency occurs such as a road traffic collision, an internal bleed, or a c-section from a complicated birth, getting access to healthcare saves lives. But what if you could not afford the care? What if you ended up in hospital during an emergency, only to find you cannot afford to cover your treatment, or something to keep your newborn baby warm? **Our programme identified and covered the cost of the poorest patients trapped in hospitals who could not afford healthcare**, in addition to supporting vulnerable mothers, children and newborn babies who could not afford nappies, milk, and other social needs.



**195** people received medical insurance to cover future costs to prevent future debt



**65** newborn babies, children and vulnerable supported



**145** patients had their medical debts cleared

## Malnutrition Programme

We continued to provide **milk for malnourished babies, children and adults** to help them on their journey to recovery from malnutrition. This included **food packs for the families** of the patient who were also suffering from chronic hunger needs.



**56** children with malnutrition treated until recovery

## Palliative Care Project

Our palliative care programme identifies destitute and dying patients resulting from a terminal illness such as cancer, **by providing a team of local carers and nurses** who look after them in the community so that they are not suffering alone or without pain relief. We also provide **food for under-nourishment, medication and physical aids, access to education for children if the breadwinner is the dying patient, psycho-social support, a place to live and transport for medical treatment.**



**1,271** home based visits conducted



**2,124** people supported with medical support or food, shelter and other economic support



**116** end-of-life/chronically ill patients provided with holistic care



A young mother who received a free check-up and medications at our pop-up clinic in the Chinsinga Village, Malawi.

# 📍 Malawi

## Health System Strengthening

As part of our core health system strengthening approach, we are **supporting 23 clinics including rural health clinics and mobile clinics through training, service development, clinic rehabilitation, medication, provision of nurses/midwives/medical officers and more.**

## Maternal Care

Since 2016 we have been focusing on building and scaling up the provision of maternal care services by addressing some of the key barriers in accessing maternity care in rural areas of Malawi, including the **development of transport links through the introduction of Ambu Bikes, rehabilitation of maternity clinics, access to free maternity packs to enable mothers to give birth in clinics, and increased training of maternity healthcare workers.**



**491** pregnant women received antenatal and postnatal care



**272** safe births conducted



**74,791** patients treated



**42** healthcare workers trained



**22** clinics, hospitals and mobile clinics supported





## Prince's Story:

“Imagine knowing you are unable to afford the treatment required to improve the quality of life of your own child.”

When we meet 2 year old Prince, he is mischievous and smiley, busy playing with his friends and next door neighbours. As the youngest of three siblings, he is clearly the life of the party, posing for photos and watching on curiously as one of our staff resets her camera.

Diagnosed with Bilateral Wilms tumor (a rare childhood kidney cancer that affects both kidneys) shortly after birth, his family's dynamic has changed forever. Prior to his illness, both of his parents worked hard to provide a good life for their children. Yet Prince's condition has caused significant financial strain on the family, with his mother having to leave her job to care for him full-time.

When Prince joined our Palliative Care Programme, he was malnourished. Thanks to the monthly nutritional support, including food packages and nutrition counselling

provided through our holistic approach to care, he is now healthier and no longer malnourished. In addition, Prince receives assistance with transport costs for his chemotherapy treatments at the local hospital and regular home visits from our staff to continually assess him and his family's needs

However Prince's story is not an isolated experience. **86% of the world population do not have access to palliative care** and many are unable to afford it. Patients therefore often die alone, or are supported as much as possible by family members who struggle to afford the care needed or give the full time support required due to facing their own levels of poverty and hardship.

# Project Snapshots



One of the initial medical tents set up in Gaza in summer 2024



Children playing outside the 'Hope Clinic' mental health support tent in Gaza



One of our maternal care patients in Malawi



A palliative care patient and family with one of our staff members in Rwanda



Our children's psychosocial support tent at the Jindires Clinic in Syria



Medical consultation at our Pakistan hospital



# To date, over the last 24 years:



**106,230 mothers and babies** received ANC, PNC, safe births and operations



**17** emergency crises responded to



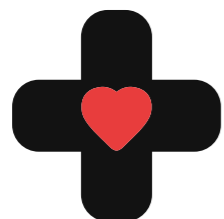
**140** medical projects delivered



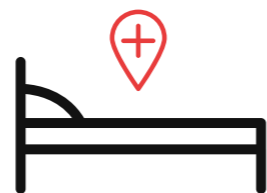
**234** clinics and hospitals benefited to date



**84** local and international partners benefited to date



**84 clinics** built or rehabilitated including **6 maternity clinics**



**7 hospitals** built or rehabilitated including **1 Children's Hospital**



Our work benefited **31 countries**



**UN Partnerships** undertaken



**Peace Prize** nomination



With a total of

**4,287,537**

lives saved or impacted

**Save a Life.  
Change a Life.**



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