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DISPATCHES

MSF CANADA MAGAZINE

HOPE IS RADICAL

GRIT AND DETERMINATION IN
THE FACE OF FEAR AND DOUBT



ALSO INSIDE

HOPE IS STRONGER THAN DESPAIR, HATE, FEAR:
MSF staff testimonies

IN THE MIDST OF WAR:
Sudanese colleagues continue to save lives

FROM HARDSHIP TO HOPE:
A survivor's harrowing journey to Europe





Ita Joice meets her baby girl after her caesarean section in Mundari County hospital, the only secondary healthcare facility in Kajo Keji. South Sudan, 2024.

Sana Bég | Executive director | MSF Canada



“The world feels like it’s breaking from the inside out,” says my colleague Mercedes Alarcón, a doctor in Mexico City. “There are days when I think how much easier it would be to turn away.”

Her feelings of overwhelm and helplessness are echoed by many of us here in Canada. We need only open our

phones to see a news cycle dominated by wars, climate emergencies, mass displacement and political unrest. Growing polarization threatens to rip communities apart, while misinformation and AI-generated content run rampant online.

Against this backdrop, it’s easy to see hope as a luxury or even a weakness. Yet, as my colleague Mercedes puts it so well, at a time when some of the most powerful voices have megaphones to spread hatred and division, hope stands as a deliberate, defiant choice. Hope is radical.

The idea of bold, determined hope is the spark that fuels this issue of *Dispatches*. Inside, you will hear from Doctors Without Borders/Médecins Sans Frontières (MSF) staff who persevere against challenging circumstances to provide medical care for communities facing crises. This includes a photo series offering a look into the daily work of three colleagues who carry hope in Haiti, Mexico and Ukraine.

You will also read stories from colleagues in Sudan, who have lived and worked amid more than three years of brutal war. Despite having lost almost everything, they show up every day to provide care for people in circumstances like theirs.

And we will share a testimony from Ismail, who fled his home country to cross continents and the Mediterranean Sea in search of safety. He was rescued by MSF’s search and rescue team, and now works to support migrants, refugees and asylum seekers like himself.

“I RESOLUTELY BELIEVE HOPE IS A DELIBERATE, DEFIANT CHOICE. HOPE IS RADICAL.”

Their stories, and those of so many others, remind me hope is not the absence of fear, doubt or despair. It is instead the relentless determination to show up anyway and to keep paying attention, even when it’s easier to look or scroll away.

Your support helps enable our action. And I hope – with all the significance that word carries – you will continue to stand with us as we reject a status quo of despair and overwhelm. Together, we must hold on to hope. 🙌

DISPATCHES

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MSF Canada aspires to fundraise **\$107 million in 2026 and expects to spend \$16 million** to raise these funds.

Cover photo: An MSF nurse uses a lamp to locate a viable vein for intravenous hydration in a child, in Abyei, South Sudan. For Yan Maper, who fled the conflict in Sudan with her daughter Thiany Chol, this careful clinical procedure represents the first step toward restoring her child's strength after a long period without reliable medical care. South Sudan, 2025.
© Nicolò Filippo Rosso

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At MSF's clinic in Gaza City, MSF physiotherapist Ibtihal (right) fits a 3D mask on Joud, a young boy who sustained severe burns when the school sheltering his family was struck in an Israeli attack in 2024. Palestine, 2026.

IN THE NEWS

MIDDLE EAST:

Doctors Without Borders/Médecins Sans Frontières (MSF) is alarmed by the dramatic escalation in conflict across the Middle East, following strikes by U.S. and Israeli forces in Iran and Iran's subsequent retaliatory actions in several countries. This escalation has brought fear to the lives of millions of people across the region, including in Lebanon, Iran and the Gulf countries. Bombing has continued across multiple cities and villages, often hitting densely populated areas, and casualties have mounted. Hundreds of thousands of people have been displaced. MSF has adapted our programs to respond and has been closely monitoring the rapidly evolving humanitarian needs.

SOUTH SUDAN:

A humanitarian disaster has hit Nyatim, a village in Jongeli state, where 30,000 people have fled after violence surged in Lankien and Pieri earlier this year. Conditions are brutal, as people face abductions by armed groups, a lack of food, shelter, clean water or means to leave for safer locations. As of early April, humanitarian access to the area has been blocked. MSF teams have treated people who managed to reach the town of Chuil by foot, walking for days without water or medical care and exposed to further violence. We are also scaling up support for displaced people in Chuil and Ulang counties, providing emergency care, treatment for malnutrition and water and sanitation services. More than 70 MSF staff who were displaced from Lankien – where our hospital was bombed on Feb. 3 – are supporting this response. 🇸🇩

HOPE IS RADICAL

Through our **Hope is Radical** campaign, we're sharing the testimonies of three of our Doctors Without Borders/ Médecins Sans Frontières (MSF) health worker colleagues who refuse to surrender to despair, hate and fear in Haiti, Mexico and Ukraine. We invite you to take a look into their daily work. Read intimate stories from Naomie, Mercedes and Khassan and learn more at hopeisradical.ca.

HOPE IS STRONGER THAN DESPAIR: SPOTLIGHT ON MSF MIDWIFE NAOMIE LUBIN IN HAITI

Naomie works with women and girls at the Isaïe Jeanty maternity, located in one of the most dangerous neighbourhoods of Port-au-Prince.



“I work in the same maternity ward where I was born. It’s now located at the intersection of Cité Soleil’s most dangerous neighbourhoods. Heavily armed people move about freely. I hear gunshots. Explosions. But I’ve gotten used to it.”



© Marx Stanley Léveillé/MSF

“Every birth is an opportunity to achieve something different. To reject the unacceptable. To open a path to the future.”



© Marx Stanley Léveillé/MSF

“Whenever Haiti is mentioned, poverty, unsanitary conditions and crime are all that are shown. But there is also the countryside, full of streams, hills and birds; we are not just a poor country. We must break this cycle that imprisons us in violence.”

HOPE IS STRONGER THAN HATE: SPOTLIGHT ON MSF PHYSICIAN MERCEDES ALARCÓN IN MEXICO

Mercedes works alongside the team at the Comprehensive Care Centre in Mexico City, where MSF provides medical support to survivors of extreme violence and torture. Expression through art is part of some people's therapy.



“I refuse to stop caring. I know in this moment of global upheaval, the care and compassion I carry with me is anything but soft or gentle.”



“My colleagues help carry me through the hard days. Through small daily actions, we see how our collective hope can be a more powerful force than hate.”

HOPE IS STRONGER THAN FEAR: SPOTLIGHT ON MSF SURGEON KHASSAN EL-KAFARNA IN UKRAINE

Khassan leads teams supporting local hospitals near the front lines in the eastern part of the country.



“Inside the operating room, I am in the middle of surgery when the lights flicker, then go out. For a moment, the only light is the beam of my headlamp, which I always keep switched on for situations like this... Surgery continues uninterrupted. We are used to this.”



“Despite the pain and sadness, we keep going. We know the next hospital needs our support. We wipe our tears and start again. We always start again. This is our act of defiance.” 🇺🇦

IN THE MIDST OF WAR:

HOW SUDANESE COLLEAGUES CONTINUE TO SAVE LIVES

Natalia Romero Peñuela | Communications manager

In April 2026, Sudan marked three years of a war that has devastated cities, collapsed essential services and forced millions of people to flee. Among them are our Doctors Without Borders/ Médecins Sans Frontières (MSF) colleagues, who make daily efforts to sustain hope.

Each of our Sudanese colleagues has lost something because of the war. From the most evident losses — their loved ones, relatives and friends — to those that may seem small at first glance, like their routines, their sense of achievement and their peace of mind.

“DO NOT LOSE HOPE. ONE DAY, WE WILL BE UNITED ONCE AGAIN IN THIS HOMELAND.”
— AL DOURI, MSF EPIDEMIOLOGIST

Yet every single day they wake up and step outside their homes to reach MSF facilities and offices. They do so to help others whose lives have also been stripped of almost everything dear to them.

We asked our colleagues to tell us what the war has taken from them and what motivates them to continue working despite their losses.

SONDOS, MATERNITY WARD STAFF IN WEST DARFUR

In El Geneina, West Darfur, the first thing the war took away from Sondos was the chance to graduate. “I was in my final year, but my university closed and never reopened,” she says. “The war took away my greatest achievement.”

Without a certificate, she cannot work as a nurse, so she works as a medical interpreter at El Geneina teaching hospital with MSF. The conflict also forced some of her family members to flee the city. When they returned, she discovered that her brother, her aunt and several other relatives had died.

“It became the most difficult year of my life,” she says. But with the strength she had left, she joined a group of volunteers who reopened the hospital’s emergency room. “We just wanted to help our community because they were suffering and had no facilities,” Sondos says.

© Natalia Romero Peñuela/MSF



Sondos, MSF medical interpreter.
Sudan, 2025.



Al Douri, MSF epidemiologist.
Sudan, 2025.

AL DOURI, EPIDEMIOLOGIST IN KHARTOUM

When the war erupted, Al Douri was forcibly displaced from Khartoum, his home city. When he returned, he found his home in ruins and himself among the millions of Sudanese who had lost everything.

Now, at Bashair teaching hospital, he says he sees “pain and despair” in every patient. Working also in camps for displaced people, Al Douri meets families who have travelled for days in search of safety.

He describes the ongoing crisis as a staggering blow to a “peaceful and very welcoming” people. “We found ourselves in a war that took everything from us,” he says.

Yet he refuses to surrender to bitterness. He carries a defiant message for his fellow Sudanese: “Do not lose hope. One day, we will be united once again in this homeland.” But for that to happen, he says the world cannot remain silent. “Don’t stop talking about Sudan and the suffering of the Sudanese people.”

ALTAYEB, MSF SURGEON IN TAWILA

Altayeb, an orthopedic surgeon in North Darfur, fled El Fasher and arrived at the MSF-supported Tawila hospital one week before the city was fully taken over by the Rapid Support Forces. Together with his pregnant wife, he left behind the comfortable life they had built for themselves.

His first task as a surgeon at the Tawila hospital was to clean and suture the wound of a patient who had lost part of his leg during the capture of El Fasher. The patient was Altayeb’s distant cousin, who had travelled three days by donkey cart with an open wound from a stray bullet before reaching the hospital.

Altayeb’s initial motivation for fleeing was to find a safe place for his pregnant wife to give birth. His motivation for continuing to provide care, however, comes from the patients he cares for. “Some of my patients from there are now here,” he says. 🇸🇩



Altayeb, MSF orthopedic surgeon.
Sudan, 2025.

© Natalia Romero Peñuela/MSF

CAN A CHILD WITH A CRAYON HEAL A COMMUNITY?

Glykeria Koukoulia | Mental health activity manager

During a community discussion in Baalbek-Hermel with Lebanese and Syrian families about their health needs, a child hovered timidly at the edge of the conversation and asked, “Can we draw? We just want to draw.”

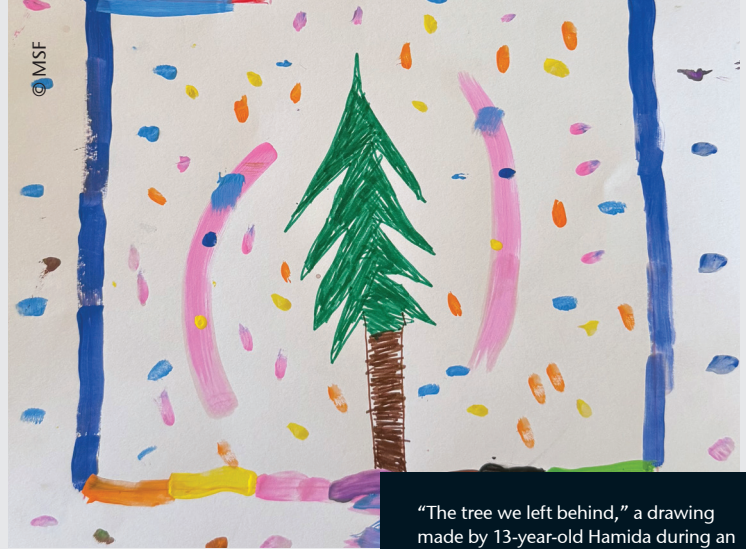
In northeastern Lebanon, children from both refugee and host communities are growing up under immense pressure. Sleep disturbances, anxiety, withdrawal and difficulty concentrating are a few of the conditions Doctors Without Borders/ Médecins Sans Frontières (MSF) mental health teams see among children. Many struggle to articulate fear, grief and longing, especially in environments where adults themselves are overwhelmed and focused on day-to-day survival and coping.

For children, feelings and experiences they don’t fully understand often surface indirectly. Art-based psychosocial support allows them to express what they cannot yet name. That’s why we began organizing regular art-based sessions at our mobile and fixed clinics in Hermel and Arsa. The effects were immediate.

WHAT DRAWINGS REVEAL ABOUT CHILDREN’S PSYCHOLOGY

Many children drew homes they no longer live in. Others drew trees, gardens, animals and open skies. Drawing familiar scenes allows them to reconnect with memories of care, family and stability, all of which are essential elements for emotional regulation and resilience.

Other drawings included imagery associated with fear: drones in the sky, men carrying guns, dark clouds. These images often appeared alongside peaceful scenes, showing how trauma and hope




“The tree we left behind,” a drawing made by 13-year-old Hamida during an art-based therapy session in Baalbek-Hermel, Lebanon, 2025.

coexist in a child’s internal world. This duality is common in children affected by conflict — they are not only “victims” of fear, but also actively making sense of overwhelming experiences and trying to integrate those experiences.

THE IMPACTS OF ART THERAPY

We have seen the positive impact of these drawing sessions. Parents tell us their children sleep better, speak more openly or show fewer behavioural outbursts.

Baalbek-Hermel is a region of striking beauty, but also one that has absorbed years of hardship. People are generous and welcoming, yet pain is often kept private. Many people seek help only when distress becomes unbearable.

Here, these drawings are more than images on paper. They are evidence that even in the aftermath of loss, children continue to imagine, remember and hope. 



An MSF team and patients during an art-based activity session in Baalbek, Lebanon, 2024.

ATTACKS ON HUMANITY: WHEN MEDICAL CARE IS UNDER FIRE

MSF's hospital in Lankien, Jonglei state, was hit in an airstrike by government forces in February, South Sudan, 2026.

Sara Cheriyan | Content officer

“I ran for my safety once I heard the shooting,” says Albert*. “I am separated from my family, my wife and my children. I do not know where they are. I do not know if they are still alive or not.”

Albert was working as a nurse for Doctors Without Borders/Médecins Sans Frontières (MSF) in Lankien, Jonglei state when South Sudan's government forces attacked the city on Feb. 3. Large parts of the MSF hospital were damaged during the bombardment and later burned down. Medicines, vaccines and blood supplies were destroyed or looted.

As the violence intensified in the days that followed, healthcare workers fled alongside the residents. Albert was among them.

On the day of the airstrike, Albert had already followed instructions to evacuate the city amid rising tensions. As the bombardment intensified, his house was burned and his belongings looted. He fled into the forest carrying only a small bag containing fortified peanut paste, biscuits and his documents.

Albert walked for five days through remote areas, avoiding armed men, before reaching safety. He is now temporarily staying with a friend in Juba, the capital. His experience reflects that of many South Sudanese and other locally recruited healthcare

workers living and working in conflict zones around the world.

VIOLATIONS OF INTERNATIONAL HUMANITARIAN LAW

Intentional attacks on hospitals and humanitarian workers are prohibited under International Humanitarian Law and are considered war crimes. However, in recent years, there have been many such attacks in global conflict zones by organized armed groups and government forces alike – in Haiti, Palestine, South Sudan, Sudan, Ukraine and beyond.

When healthcare is attacked, hospitals close. Humanitarian organizations withdraw. And communities – already affected by violence – become deprived of essential care. Beyond the destruction of medical infrastructure, these attacks deeply affect the very people providing vital assistance.

Medical care, humanitarian workers and civilians must never be a target. People deserve safety and access to healthcare: free from airstrikes on hospitals, shots fired on ambulances and fear in places meant to provide lifesaving care. 🚑

**Name changed to protect identity.*



Ismail, MSF community health worker. Belgium, 2024.

FROM HARDSHIP TO HOPE: A SURVIVOR'S HARROWING JOURNEY TO EUROPE

Ismail | Community health worker

In 2015, I was studying engineering at university when a beloved family member died. I took a break from my studies, but in Eritrea, if you are not a student or government worker, you will be forced into the military with no option to leave.

I had no choice but to go. Seeking asylum in neighbouring Sudan was not a good option – there are around two million Eritrean refugees there, many of them living in difficult conditions in refugee camps. My only option was to travel on to Libya.

A DANGEROUS JOURNEY

There's no legal route from Sudan to Libya for someone in my situation. On several occasions, I was detained or beaten by people smugglers until I could pay them. They

forced us to sleep in windowless rooms. They fed us very little and when people grew sick – as I did – there was no possibility of seeing a doctor.

"I NOW SPEAK EIGHT LANGUAGES, WHICH I USE IN MY JOB AS AN MSF COMMUNITY HEALTH WORKER, SUPPORTING REFUGEES AND MIGRANTS."

The final stage of my journey was a 12-hour drive hidden in an empty water tanker. There were 50 of us inside. It was easily 45 C. People were vomiting and fainting, burning every time they touched the hot metal walls of the tank.

The first time I attempted the crossing from Tripoli to Italy, our boat was intercepted by a kidnapping gang. They brought us back to Libya and said we'd have to pay \$1,500 to be released. Those who couldn't were starved, tortured, beaten or shot at.

When I was released, I went back to the original smuggler, who allowed me on the boat again. I was in the cargo hold, in the dark. It was so full people around me were fainting.

RESCUE

We used the satellite phone to call for rescue and, at last, we saw a ship approaching us. It was Doctors Without Borders/ Médecins Sans Frontières (MSF).

When we got on the MSF boat, there were doctors and nurses. We got clothes, medication, food and water. It's hard to explain how great the relief was. That was Sept. 2, 2015.

I did not stay in Italy. I knew people who had stayed there and were suffering. By chance, I met an Italian family who helped refugees – I will never forget their kindness.

I went to Germany first, where my uncle lived. He helped me buy a ticket to Belgium, where I met my aunt and entered a claim for asylum.

GIVING BACK

I've been living in Belgium since then. I now speak eight languages, which I use in my job as an MSF community health worker, supporting refugees and migrants to access healthcare.

There are many stereotypes about migrants. But I know thousands of people like me. Since I got here, I've worked hard to support my family. Refugees and migrants contribute to the economy and development of the country in which they live. We just want to build a future.

Sometimes I think back to a moment on the MSF ship, when we were rescued. I spoke to

the cultural mediator, an Iraqi man. I asked him what qualifications I would need to do a job like his one day. He told me there was

"REFUGEES AND MIGRANTS CONTRIBUTE TO THE ECONOMY AND DEVELOPMENT OF THE COUNTRY IN WHICH THEY LIVE."

no special degree needed, just strong communication skills and a humanitarian heart. All these years later, here I am. 🚶



THE STORY OF ISMAIL

"IN ERITREA, IF YOU ARE NOT A STUDENT OR GOVERNMENT WORKER, YOU WILL BE FORCED INTO THE MILITARY, WITH NO OPTION TO LEAVE. I HAD NO CHOICE BUT TO GO."

I DIDN'T NEED IT. BUT I COULD MAKE IT COUNT.

JoAnn Dionne | MSF supporter



JoAnn Dionne, MSF supporter.

I first began to think about legacy giving because of a practical question: what do I do with something I don't need?

This 'something' was my life insurance policy. I'd taken it out in my twenties, thinking it might be useful someday. But over time, it began to feel unnecessary. I didn't have a partner or children to leave it to. But getting rid of it also felt like a missed opportunity. I wanted it to go somewhere it could make a difference.

It was easy for me to choose Doctors Without Borders/Médecins Sans Frontières (MSF). I've spent much of my life living and working in different places – Japan, Mexico, China and Hong Kong. I've made many friends who have shared their culture and way of life with me. I value this human connection and that's what I believe MSF provides. It's people helping people, even in the most difficult circumstances.

I first started giving to MSF over 20 years ago. I'd written textbooks that became popular and for the first time in my life, I had a bit of extra money. It felt natural to start giving back.

The 2004 Indian Ocean tsunami had recently happened. I learned about the work MSF was doing to help, supporting local government relief efforts to provide people with medical

care, food, water and shelter. I wanted to be part of it.

Since then, I've kept supporting MSF and paying attention to the work their teams are doing around the world. I like that they speak out – not just about big crises, but about the healthcare challenges people are facing in places typically out of the spotlight.

When I decided to make MSF the beneficiary of my life insurance policy, it turned out to be easier than expected. I spoke with my financial advisor, filled in a bit of paperwork and it was done.

I feel a real sense of peace knowing my money will help people. Being a healthcare worker is hard – providing care in a humanitarian crisis must be even harder. But MSF staff continue to show up to support people in some of the most difficult circumstances, and I'm happy that with my gift, I will be helping this vital work continue. 🚑

Do you have questions about making MSF the beneficiary of your life insurance or will?

Contact mathangi.ketheeswaran@toronto.msf.org to learn more.

WHO ARE **MSF** CANADA STAFF ON ASSIGNMENT?

At any given moment, there are more than a hundred people working abroad on Doctors Without Borders/ Médecins Sans Frontières (MSF) Canada contracts, helping provide care to people caught in crisis. They are doctors, nurses, engineers, coordinators, administrators, surgeons, logisticians and more. They are drawn from all parts of Canada by the critical humanitarian needs that exist in places affected by conflict, disease, healthcare exclusion or disasters.

They help MSF provide essential care to people in more than 70 countries around the world. We thank them for their compassion, skills and dedication. 🇺🇳

107 STAFF WORKING OVERSEAS WITH MSF AS OF APRIL 2026:



49

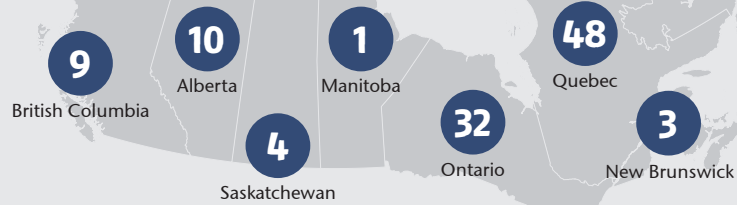
Medical personnel:
Doctors, nurses,
midwives, specialists
(including 19
paramedical)



58

Non-medical personnel:
Administrators, engineers,
logisticians, coordinators

THEIR HOME PROVINCES ARE:



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THIS
COULD
BE YOU

MSF deputy flight coordinator Stella Mwikali, centre, working in Juba. South Sudan, 2022.

WE ARE
RECRUITING

Anesthesiologists, **ENGINEERS, CONSTRUCTION MANAGERS**, Gynecologists, **HR AND FINANCE MANAGERS**, Nurses, Surgeons, **REMOTE CAMP SUPERVISORS**, Physicians, **SUPPLY CHAIN SPECIALISTS, WATER AND SANITATION EXPERTS**

Due to operational needs, applicants who speak both English **and French** will be prioritized.

Contact us for more information
applications@toronto.msf.org

FOR MORE THAN 50 YEARS, Doctors Without Borders/Médecins Sans Frontières (MSF) has been providing emergency medical care to people who need it most. From protracted wars to deepening displacement crises and brutal funding cuts that have reshaped the humanitarian landscape, our teams are responding to some of the most challenging emergencies of our time. Your solidarity with people facing crises and dedication to uphold humanity help fuel our independent medical action. Thank you.

HOW YOU CAN SUPPORT



MONTHLY DONATION



WORKPLACE GIVING



GIFT IN YOUR WILL



FUNDRAISER OR ONLINE STREAM



GIFT OF STOCKS



SYMBOLIC GIVING: THE MSF WAREHOUSE

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