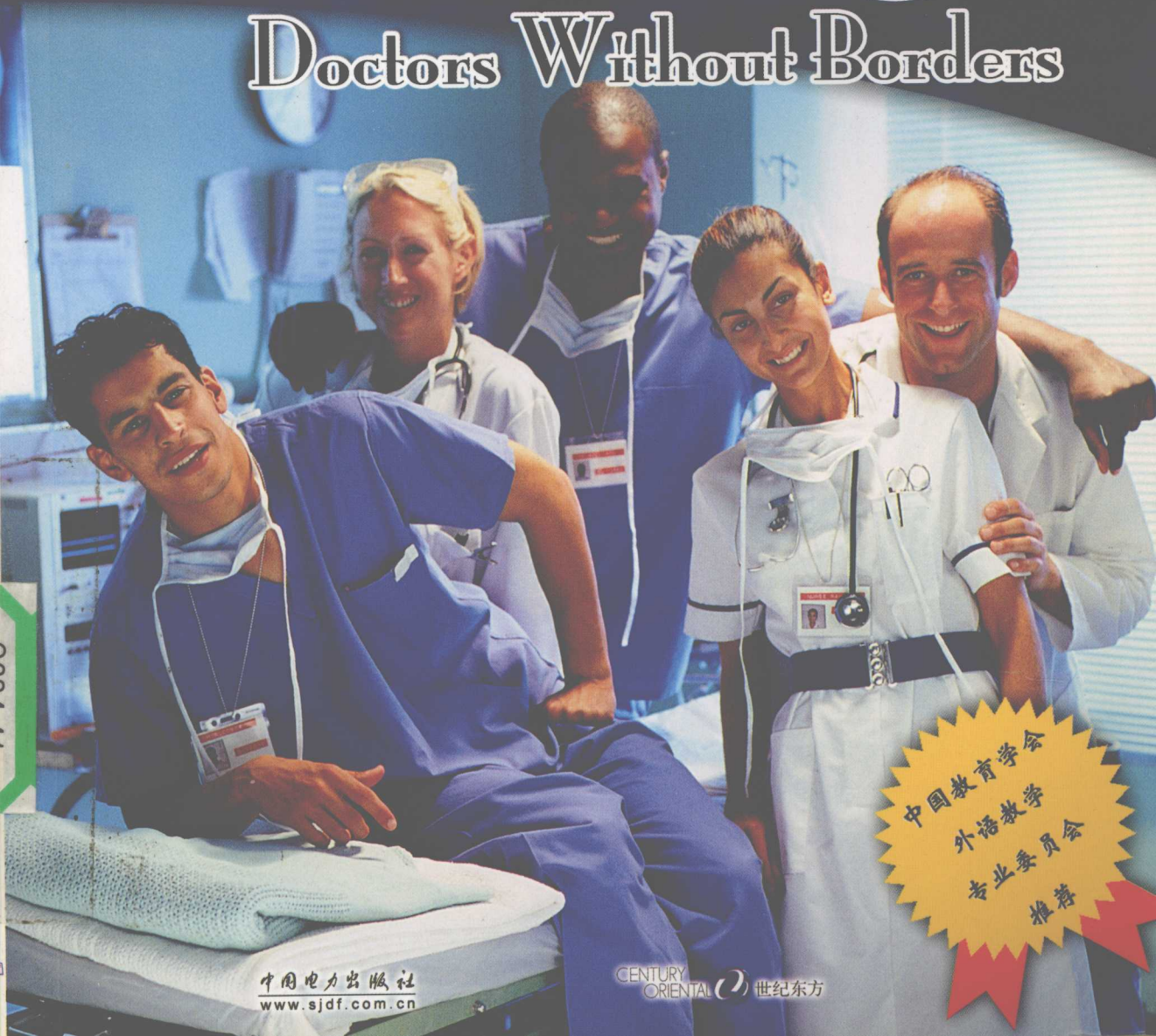


阅读空间 · 英汉双语主题阅读

# 无国界医生

Doctors Without Borders



中国教育学会  
外语教学  
专业委员会  
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CENTURY ORIENTAL 世纪东方

主题阅读

感受深度英语阅读的乐趣!

无国界医生组织帮助在最令人绝望的情形中生活的人们，无论他们是什么种族，无论他们在哪里，都重新有尊严地活着。他们出现在最需要的、最痛苦的、最无希望的地方，无论这些是人为造成的还是自然灾害造成的。

无国界医生组织是独一无二的，因为它有着双重使命：提供直接的医疗救护；当人们对缓解病痛和挽救生命没有给予足够的重视时，发起号召……人道主义行为最终归结为一件事：独立的人类个体救助处于困境中的同伴。有时是一块纱布，有时是一次缝合，有时是一次疫苗……，盼望着暴力与毁灭不会永远无尽地循环下去。

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Doctors Without Borders

孙艳洁 译

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1971年，一群法国医生和新闻工作者创建了无国界医生组织(MSF)。当时创立这个组织的目的在于帮助在战争、自然瘟疫中的受害者和医疗设施匮乏地区的人们。除了提供紧急的医疗救助，无国界医生组织长期提供诸如接种疫苗这类计划项目，改善医疗设备，并且培训专门的人员、建立常设的医疗机构。

1999年，无国界医生组织成为为数不多的被授予诺贝尔和平奖的组织之一（这个奖项通常被授予个人）。在宣布被授予这个奖项的时候，诺贝尔奖评委会说：“无国界医生组织坚守着他们的根本宗旨：所有灾难的受害者，无论天灾还是人祸，他们都有权利享受尽可能快的专业医疗服务。”

在本书中，让我们去见见几名无国界医生组织的志愿者，了解他们志愿服务于这个组织的原因，以及服务于这个组织的那些特殊经历如何深刻地影响着他们。得知那些缺医少药的人的生活，无国界医生组织又是如何通过他们的实际行动解决这些问题的。让我们亲身感受难民营，去了解难民们在医疗方面的特殊需要。









# MSF Missions Around the World

无国界医生组织的全球使命

## Europe and the Middle East

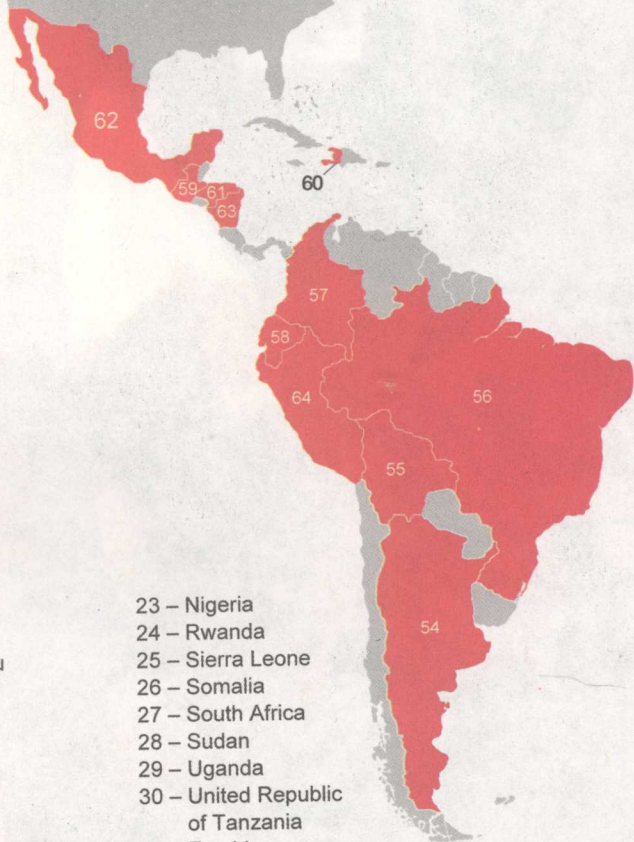
- 65 – Belgium
- 66 – Bulgaria
- 67 – France
- 68 – Italy
- 69 – Luxembourg
- 70 – Romania
- 71 – Russian Federation (North Caucasus)
- 72 – Spain
- 73 – Ukraine
- 74 – Serbia and Montenegro
- 75 – Sweden
- 76 – Switzerland
- 77 – Palestinian Territories

## The Americas

- 54 – Argentina
- 55 – Bolivia
- 56 – Brazil
- 57 – Colombia
- 58 – Ecuador
- 59 – Guatemala
- 60 – Haiti
- 61 – Honduras
- 62 – Mexico
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## Africa

- 1 – Angola
- 2 – Benin
- 3 – Burkina Faso
- 4 – Burundi
- 5 – Cameroon
- 6 – Central African Republic
- 7 – Chad
- 8 – Democratic Republic of the Congo
- 9 – Republic of Congo
- 10 – Ivory Coast
- 11 – Ethiopia
- 12 – Guinea
- 13 – Guinea Bissau
- 14 – Kenya
- 15 – Liberia
- 16 – Madagascar
- 17 – Malawi
- 18 – Mali
- 19 – Mauritania
- 20 – Morocco
- 21 – Mozambique
- 22 – Niger
- 23 – Nigeria
- 24 – Rwanda
- 25 – Sierra Leone
- 26 – Somalia
- 27 – South Africa
- 28 – Sudan
- 29 – Uganda
- 30 – United Republic of Tanzania
- 31 – Zambia
- 32 – Zimbabwe







**Asia and the Caucasus**

- |  |                                       |                      |
|--|---------------------------------------|----------------------|
| 34 – Armenia   | 40 – India                            | 48 – Sri Lanka       |
| 35 – Bangladesh  | 41 – Indonesia                        | 49 – Tajikistan      |
| 36 – Cambodia  | 42 – Iran                             | 50 – Thailand        |
| 37 – China   | 44 – Lao People's Democratic Republic | 51 – The Philippines |
| 38 – Democratic People's Republic of Korea and South Korea | 45 – Myanmar (Burma)                  | 52 – Turkmenistan    |
| 39 – Georgia   | 46 – Nepal                            | 53 – Uzbekistan      |
|  | 47 – Pakistan                         |                      |



Only In...



# Art Therapy

by Donna O'Meara

## 独特的心理治疗

## ——艺术疗法

Usually, there is little warning of earthquakes, floods, drought, or war. Your life before these tragedies was happy — you had a home, family, and friends, and lived in a community. When natural disasters or conflict strike, however, life turns upside down and survivors have to deal with more than physical injuries. During the chaos, children and adults witness their homes being destroyed or flee their houses for safety. Many people lose family members, friends, and neighbors. They experience or witness violence being committed, and live in states of terror, starvation, and thirst. These painful memories lead to fear, depression, anger, anxiety, or other psychological reactions, which may remain in people's minds for years, decades,

通常，地震、洪水、干旱与战争几乎都没有什么预警。而在这些悲剧之前，人们的生活一般都是幸福的——拥有一座房子，有家庭，有朋友，居住在和睦的社区里。当自然灾害或者冲突爆发时，人们的生活变得颠沛流离，而留给幸存者的却不仅仅是身体上的创伤。在这一片混乱中，孩子和成年人亲身经历家园被毁或者是为了安全而紧急逃生。许多人失去了他们的家人、朋友和邻居。他们亲眼目睹或经历了破坏过程，并且始终处于一种恐惧、饥饿、缺水的状态。这些痛苦的回忆导致了害怕、忧郁、愤怒、焦虑或是其他的心理反应。这些有





and perhaps even generations. Children, in particular, have difficulties dealing with the trauma.

Doctors Without Borders realized that their patients needed more than medicine and bandages. In 1993, Doctors Without Borders launched its first comprehensive mental health program to address the psychological needs of war-affected people in Bosnia and Croatia. Doctors Without Borders opened counseling centers and trained local counselors to help them break down cultural barriers between the international volunteers and the Bosnians. The program responded to the emotional trauma of thousands of people, including children, affected by the war and atrocities they had witnessed.

“We spent a lot of time with children and their parents,” says child psychiatrist Catherine Bonnet. “It was hard for them to describe what they saw and went through and how they felt about the war.” One method Bonnet employed was art therapy. She realized that to help children make sense of and address the trauma, she first needed to find a real connection with them. Drawing allowed children to communicate their thoughts to her and helped them to work through their anxieties and fears.

Out of these art therapy projects in Bosnia, Doctors Without Borders created an exhibit called *Childhoods Interrupted by War*. One hundred Bosnian and Croatian children, age 6 to 12, were asked to answer three questions through drawing:

What was your life like before the war?

What is it like now, during the war?

How do you picture the future?

The images created by these survivors of war are heartbreaking, moving, and ultimately inspirational. “There are common themes in all of the ‘before’ pictures: Life was bright and happy, with illustrations in bold colors of nice

可能很多年甚至在几代人的心理上挥之不去，尤其是孩子们很难处理这种精神创伤。

无国界医生组织意识到，他们的病人需要的不只是药品与纱布。1993年，无国界医生组织发起了他们的第一个辐射许多地区的心理健康计划，用以满足饱受战争创伤影响的波斯尼亚和克罗地亚人民的心理要求。他们开设了咨询中心，并且培训当地的咨询师协助无国界医生组织打破国际志愿者与波斯尼亚人之间的文化障碍。这项计划回应了成千上万人，包括儿童的感情伤痛，他们见证了战争与暴行。

“我们花费了大量时间与孩子们和他们的家长在一起，”儿童心理专家凯瑟琳·伯耐特说，“让孩子来描述他们所经历过的战争和对战争的感受是十分困难的。”凯瑟琳·伯耐特推荐的一种方法是“艺术疗法”。她意识到要帮助孩子们理解并表述他们的伤痛，首先需要找到与他们心灵真正相联系的东西。绘画可以使孩子们把他们的想法传递给他，并且帮助他们自己克服焦虑和恐惧。

除了在波斯尼亚的“艺术疗法”，无国界医生组织还创立了一项名为“受战争搅扰的童年”画展。100名6至12岁的波斯尼亚和克罗地亚的儿童通过图画来回答三个问题：

战争之前你的生活是怎样的？

战争中你的生活是怎样的？

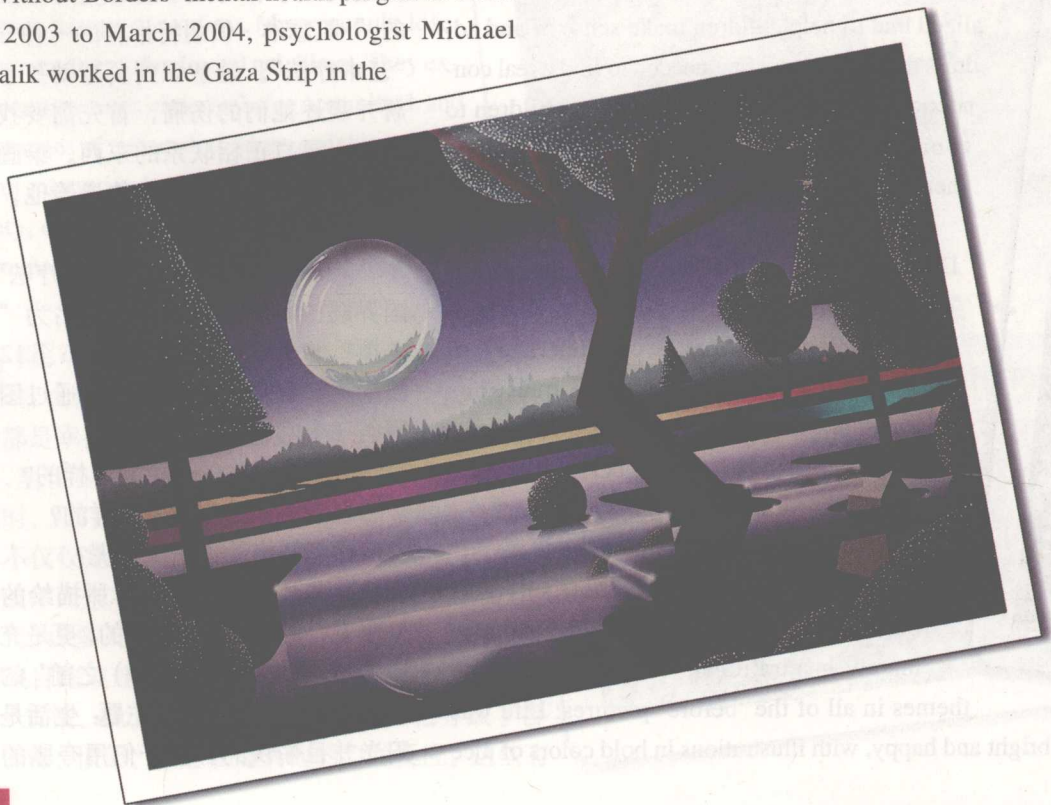
你怎样描绘你的未来呢？

这些战争中的幸存者所描绘的景象是令人心碎的，令人感动的，更是充满创造力的。“在所有‘(战争)之前’的图片里，它们都有着共同的主题：生活是充满阳光并且愉快的。孩子们用夸张的颜色

houses surrounded by trees, flowers, and family members all smiling,” observes Bonnet. “The colors used by the children in the pictures ‘during the war’ were mostly red and black. Red for blood and fire. Bright suns, clouds, and blue skies disappeared, making way for smoke, fire, and the weapons of the enemy: aircraft, missiles, bombs, exploding grenades, and shrapnel. One child left the palette entirely blank. But after children, like children all over the world, dream of a bright future. In their ‘future’ images you see the glimmer of hope. The children returned to using colors and themes of being a soccer player or living in a castle. Yet, many are skeptical of imagining a normal future after the violence they had witnessed, and often in the ‘future’ picture, their rebuilt home is smaller, a little less beautiful, sad . . . and the village itself has shrunk.”

Today, art therapy continues to be used in Doctors Without Borders’ mental health programs. From June 2003 to March 2004, psychologist Michael Michalik worked in the Gaza Strip in the

来描绘一切——花朵、绿树环绕的房子，家人们全都在微笑。”凯瑟琳·伯耐特说道，“孩子们对于‘战争期间’描绘的颜色大多是红色和黑色的。而红色代表的则是鲜血和火焰。明亮的太阳、云彩、蓝天都消失了，取而代之的是烟火、敌人的武器、飞机、导弹、炸弹、催泪瓦斯和流弹。一个孩子的调色板上最后留下一片空白。虽然如此，他们仍旧像世界上所有其他的孩子一样，憧憬着光明的未来。在他们‘未来’的图片里，你会看到朦胧的希望。孩子们又开始使用各种色彩，而且主题开始变成：成为一名足球运动员或者是居住在城堡里。毕竟遭遇了这一场暴行，许多孩子对自己所‘幻想的未来’也抱有怀疑的态度，这一点表现在他们的图画中：重建的房子更小了，没有之前那么美，而村庄也缩小了。”





Palestinian Territories, where children and families have grown up in armed conflict most or all of their lives. “The most common symptom of the children was fear that either they or their parents would get shot or killed,” says Dr. Michalik. “Most children had witnessed someone being shot — some saw classmates being shot and killed in the classroom or on the way to or from school. As a result, they feel very vulnerable and insecure daily.”

Doctors Without Borders has opened mental health programs in 30 countries around the world. In Colombia, mental health specialists work with displaced populations where two to three million Colombians have been living in a 39-year civil war.

直到今天，“艺术疗法”仍在被无国界医生组织在心理健康计划中继续使用。从2003年6月到2004年3月，心理医生迈克尔·麦考利克在巴勒斯坦领土的加沙走廊工作，那里的儿童和家庭几乎一直生活在武装冲突中。“孩子们最常见的症状就是害怕自己或者父母会被枪击或者被杀。”麦考利克医生说，“大多数孩子都见过别人被枪杀的场景。有些还看见自己的同学被打死在教室里、上学或者放学的路上，所以孩子们很脆弱，每天都没有什么安全感。”

无国界医生组织已经在全球30个国家开始了心理健康计划。在哥伦比亚，心理健康专家与难民们一起工作，在那里，二三百万的哥伦比亚人在内战中生活了39年。

**Epidemic:** An outbreak of an infectious disease, such as the flu, that spreads quickly and affects a large number of people.

**传染病:** 传染性疾病的爆发，比如流感。特征是传播速度很快并且会影响一大群人。

**Internally Displaced Person (IDP):** Person who is forced to flee his or her home for the same reasons as a refugee (see below), but who has not crossed any international boundaries.

**国内难民:** 与外逃难民的原因一样，被迫离开自己的家园，但是惟一不同的是他们没有穿越任何国境线逃到别的国家去。

**Refugee:** A person who is forced to leave his or her homeland because it is unsafe due to war or political oppression or natural disaster.

**难民:** 由于战争、政治迫害或者自然疾病而被迫离开自己祖国的人。

**World Health Organization (WHO):** Part of the United Nations, WHO promotes the sharing of medical knowledge among nations, carries out programs to control and eradicate (wipe out) disease, and strives to improve the quality of human life.

**世界卫生组织:** 联合国的一部分，旨在推动国家之间共享医疗知识，实现各种计划以控制并消灭疾病，共同致力于提高人们的生活质量。



## Through Time 大事年表

**1971** A group of French doctors and journalists creates Doctors Without Borders

1971年 一群法国医生和记者创立了无国界医生组织。

**1972** Responds to its first natural disaster, an earthquake in Nicaragua

1972年 应对处理了第一场自然灾害——尼加拉瓜大地震。

**1975** Provides medical care in its first large-scale intervention to help Cambodian refugees

1975年 为柬埔寨难民提供医疗帮助，首次大规模地介入当地的难民事件。

**1976** First major intervention in a war zone, Lebanon

1976年 第一次介入黎巴嫩战争地区的救援。

**1980** Programs offer medical care to civilians during Soviet Union invasion of Afghanistan

1980年 为遭到苏联侵略阿富汗过程中受伤的平民提供医疗援助计划。

**1984** Starts programs to fight malnutrition in response to famine in Ethiopia

1984年 应对埃塞俄比亚的饥荒事件，启动消除营养不良计划。

**1986** Organizes mobile clinics and hospitals to aid victims of civil war in Sri Lanka; opens offices in Spain and Luxembourg

1986年 组织流动诊所和医院为斯里兰卡内战中的受害者提供帮助，并且在西班牙和卢森堡开设了分部。

**1990** Opens office in United States

1990年 在美国开设了分部。

**1991** Runs largest emergency operation to date providing care in Turkey, Iran, and Jordan to Kurdish refugees

1991年 开展了到目前为止最大规模的紧急援助：为在土耳其、伊朗、约旦的库尔德难民提供医疗帮助。

**1992** Informs international community of famine in Somalia; opens nutritional programs in Somalia

1992年 向国际组织通报索马里的饥荒，在索马里开展“营养计划”。

**1993** Provides aid to victims of civil war in Burundi

1993年 为在布隆迪内战中的受害者提供帮助。

**1994** Calls for military intervention in genocide in Rwanda

1994年 呼吁对卢旺达实行的种族灭绝进行军事干预。

**1995** Brings medical aid to civilians in Chechnya and nearby refugee camps

1995年 为在车臣的平民和附近的难民营提供医疗帮助。



**1996** Launches massive vaccination and treatment program to combat meningitis epidemic in Nigeria  
**1996年** 开展针对在尼日利亚爆发的流行性脑膜炎而进行的接种疫苗和相关的治疗计划。

**1997** Expands programs to help children in Madagascar, Brazil, and the Philippines  
**1997年** 扩大计划以帮助马达加斯加、巴西以及菲律宾的儿童。

**1998** Fights to help women in Afghanistan get health care  
**1998年** 开展帮助阿富汗妇女得到健康治疗的斗争。

**1998** Responds to famine in southern Sudan, civil war in Republic of Congo; assists victims of Hurricane Mitch in Honduras, Nicaragua, Guatemala, and El Salvador  
**1998年** 针对在南部苏丹爆发的饥荒和刚果共和国的内战而提供帮助；帮助洪都拉斯、尼加拉瓜、危地马拉、萨尔瓦多 Mitch 飓风的受害者。

**1999** Launches Campaign for Access to Essential Medicines; provides care in Kosovo, Albania, Macedonia, Montenegro, and Serbia  
**1999年** 开展“普及基础医疗”运动；在科索沃、阿尔巴尼亚、马其顿、黑山共和国和塞尔维亚提供医疗服务。

**1999** Awarded Nobel Peace Prize  
**1999年** 获得诺贝尔和平奖。

**2000** Treats victims of civil war in Sierra Leone; expands programs for asylum seekers and undocumented immigrants in France, Italy, Spain, and Belgium

**2000年** 治疗塞拉利昂内战中的受害者。把计划的受益人群扩大到寻求政治避难的人士和在法国、意大利、西班牙和比利时的非法移民。

**2001** Starts providing medicine to people with AIDS in seven countries; expands mental health programs  
**2001年** 开始在七个国家为艾滋病人提供药物；扩大心理健康计划的范围。

**2002** Runs largest operation to date to aid famine victims in Angola  
**2002年** 进行了历史上最大的援助安哥拉饥荒受害者的行动。

**2002** Arjan Erkel, member of Doctors Without Borders, abducted in North Caucasus  
**2002年** 阿坚·艾尔克，一名无国界医生组织成员在北高加索被绑架。

**2003** Provides care during U.S. invasion of Iraq and to victims of fighting in Liberia and Democratic Republic of Congo  
**2003年** 为美伊战争、利比亚和刚果共和国战争中的受害者提供医疗救助。

**2003** Becomes partner in new organization to develop medicines for neglected diseases; raises over \$50 million  
**2003年** 同开发被忽略疾病的药物的新组织合作；筹集经费超过5000万美元。

**2004** Runs feeding centers, clinics, and vaccination campaigns in Sudan  
**2004年** 运作食物救助中心，开办诊所；在苏丹开展群众性接种疫苗。





# Meet the **Volunteer Aid Workers**

by Peg Lopata

## 专访 志愿医疗 救护人员

**T**hink you have what it takes to volunteer someday for Doctors Without Borders? Would you like to know what it is really like to work around the world for this medical group? Come meet Cindy, Brigg, Jennifer, and Jonathan, four volunteers who've worked with Doctors Without Borders. All agree that volunteering for this organization is a life-changing experience. Without exception, they would all do it again.

After Cindy Huang completed her Master of Public Administration degree at Princeton University, she wanted to help people who are most in need of care. She applied to Doctors Without Borders and was selected to volunteer as an administrator and finance manager in Sudan and Kenya. Cindy feels that she is lucky to have enough food and live comfortably in the United States. She believes with that privilege comes

**想**一下,某一天你会给无国界医生组织的志愿者带去些什么呢?你愿意知道在世界各地为这个医疗组织工作的生活情形吗?来见见辛迪、布里格、詹妮弗和乔纳森吧,他们四个是为无国界医生组织工作的志愿者。他们都一致认为:为这个组织提供志愿服务是一次改变生活的经历。毫无例外地,他们都愿意再次为无国界医生组织提供志愿服务。

辛迪·黄在普林斯顿大学得到公共管理硕士学位之后,她想要帮助一些最急需关怀的人们。她申请参加无国界医生组织,并且被选为志愿者,担任苏丹和肯尼亚地





区的该组织的行政与财务方面的负责人。辛迪认为她能够舒适地生活在美国，有足够的食物，是十分幸运的。她相信这种享受的权利意味着有责任去帮助那些没有她那么幸运的人。

布里格·雷利是一名流行病学家。他从图莱恩大学获得了公共健康硕士学位，已经在无国界医生组织做了五年的志愿者，负责监控疫病的爆发并且在卢旺达、洪都拉斯、蒙古、俄罗斯、斯里兰卡和乌克兰推行相关的计划。“我想在医疗设施相对不足的地区工作，”布里格说，“这就是人们学习公共卫生和上医学院的原因。”

詹妮弗·维高是一名已经被派遣完成了七次任务的护士（包括去苏丹、斯里兰卡、利比亚和塞拉利昂），非常想向无国界医生组织大笔捐款，但是光依靠做护士工作的薪酬，她无法捐赠那么多。然而，她

the responsibility to help others less fortunate than herself.

Brigg Reilley is an epidemiologist. He earned a Master of Public Health degree from Tulane University and then volunteered with Doctors Without Borders for five years, monitoring outbreaks of diseases and managing projects in Rwanda, Honduras, Mongolia, Russia, Sri Lanka, and Ukraine. “I wanted to work with underserved populations,” says Brigg. “This is why you go to public health or medical school.”

Jennifer Vago, a nurse who has been sent on seven assignments (including to

