

Annual Report 2021 (Unofficial version in English) Läkare Utan Gränser/MSF Sweden

1. MSF CHARTER AND PRINCIPLES

Médecins Sans Frontières (MSF) is an international, independent, medical humanitarian organisation that provides medical assistance to people affected by armed conflict, epidemics, natural disasters, or exclusion from healthcare. Our actions are guided by medical ethics and the principles of impartiality, independence, and neutrality.

Médecins Sans Frontières is a private, international association. The association is made up mainly of doctors and health sector workers and is also open to all other professions which might help in achieving its aims. All of its members agree to honour the following principles:

1) Médecins Sans Frontières provides assistance to populations in distress, to victims of natural or manmade disasters and to victims of armed conflict. They do so irrespective of race, religion, creed or political convictions.

2) Médecins Sans Frontières observes neutrality and impartiality in the name of universal medical ethics and the right to humanitarian assistance and claims full and unhindered freedom in the exercise of its functions.

3) Members undertake to respect their professional code of ethics and maintain complete independence from all political, economic, or religious powers.

4) As volunteers, members understand the risks and dangers of the missions they carry out and make no claim for themselves or their assigns for any form of compensation other than that which the association might be able to afford them.

2. INTRODUCTION

We will never forget our murdered colleagues

When the Taliban seized power in Afghanistan last summer, the whole world held its breath. What would the consequences be for the people, already hit so hard after all the years of war and poverty? For Médecins Sans Frontières, the future of our operations in the country was uncertain. But despite challenges, we managed to continue our work: the network of contacts that we have built during our 40 years in the country proved to hold this time as well. Thanks to our independence and impartiality, we were able to continue to provide mainly trauma care but also care to malnourished children, women with pregnancy-related complications and people with tuberculosis and COVID-19.

As a medical humanitarian organisation, we never take sides in armed conflict, yet we have seen that we too can be a target. In June, three colleagues were murdered in the Tigray region in Ethiopia. We will never forget them. Despite the enormous suffering of the people, the killings forced to pause some of our projects in Tigray. But the killings were not our only challenge in Ethiopia; for three months the Ethiopian authorities also shut down parts of our operations in the country.

The year was inevitably marked by the COVID-19 pandemic. We have been present in countries where resources are insufficient, and we have continued to constantly emphasise the importance of a fair global distribution of COVID-19 vaccines. We have also continued working in several of the world's largest humanitarian crises, including Yemen, DR Congo, South Sudan, and the Central African Republic. We launched a rescue ship in the Mediterranean again and in November the team on-board were able to rescue 99 people at once. But for ten people, who had fled Libya in search of security, it was too late. They were found under deck of the boat they had fled on, having suffocated from petrol fumes. In addition to Libya, our teams were also on site in other places in the world to provide humanitarian aid to refugees and migrants, such as Poland, Belarus and among the Rohingya population in Bangladesh.

So how was the situation for MSF here in Sweden? Even though the pandemic posed a lot of challenges, we achieved our ambitious goals. This applies to both financial goals and the ongoing effort to secure the future of our work. Without our members, employees, donors, and others who support us, this would never have been possible.

Oliver & Peter

3. ABOUT THE ORGANISATION

MEDECINS SANS FRONTIERES (MSF) – AN INTERNATIONAL ORGANISATION

Médecins Sans Frontières (MSF) is an international, independent medical humanitarian organisation that saves lives and alleviates suffering where we are needed the most. For 50 years, we have provided medical assistance to people affected by conflict, epidemics, disasters, or exclusion from healthcare. Our actions are guided by medical ethics and the principles of impartiality, independence, and neutrality.

MSF is a non-profit organisation consisting of 25 national and regional associations. Five operational centres, in France, Belgium, Holland, Spain and Switzerland, manage MSF's humanitarian assistance programmes, deciding when, where and what action is necessary.

MSF annually runs projects in more than 70 countries around the world. The organisation has approximately 45 000 staff, the majority of whom are hired locally in the countries of intervention, and we perform about 10 million outpatient consultations each year.

MSF's annual turnover is more than 20 billion SEK, and it has more than 7 million private donors around the world. More than 97 percent of MSF's income is from private donors and thanks to this large proportion of private donations we can maintain our independence.

MSF's international activity reports and annual reports are available on our website, where we also publish an annual impact report, aiming to show the beneficial effects of what we do: <u>https://lakareutangranser.se/om-oss/ekonomi</u>.

MEDECINS SANS FRONTIERES (MSF) IN SWEDEN AND FINLAND

MSF in Sweden is a non-profit organisation that contributes to MSF's activities in project countries through the recruitment and development of MSF staff, through fundraising, and through communication and advocacy, bear witness about the situation for the patients we meet in our work in the projects. To strengthen the activities in our projects, MSF Sweden has an evaluation unit and an innovation unit.

The average number of employees in the MSF Sweden office during the year was 127, corresponding to approximately 95 full-time employees. In total, 12 people volunteered for the organisation at the office in Stockholm, corresponding to approximately 0,2 full-time employees.

In 2021, MSF in Finland continued to develop and grow with the support of MSF Sweden. It was another successful year as targets were reached with a fundraising income of SEK 27 million and a total of 37 000 donors. MSF in Finland is gaining position and visibility in the Finnish public debate, especially linked to COVID-19 vaccine equity, but also related to other humanitarian news in the media. For more information on MSF in Finland visit: <u>https://laakaritilmanrajoja.fi/</u>.

2021 IN BRIEF

• In total, the revenue of MSF Sweden was SEK 578 million of which 552 million comes from raised funds from the public, foundations, and corporations.

• In total, MSF Sweden deployed 87 international mobile staff to projects, 65 percent of whom belong to the medical and paramedical professions, on a total of 109 assignments in 31 different countries. During 2021, we recruited 16 new international mobile staff.

• MSF Sweden's communication work focused on different issues such as COVID-19, malnutrition, flooding and typhoons, and health consequences of the climate crisis.

• Advocacy in Sweden focused on equal access to COVID-19 vaccines globally, diabetes, mental health and raising awareness of the appalling humanitarian crises affecting the people of Afghanistan, Ethiopia, and Yemen.

• To develop and improve our project operations, the MSF Sweden Innovation Unit worked on numerous assignments during the year, such as digital health, climate- and

environmental health and MSF's ambition to become a more climate smart organisation.

• The Stockholm Evaluation Unit worked on 17 evaluations, examining approaches, results, and co-ordination of the implementation of MSF projects.

4. FUNDRAISING

PRIVATE DONATIONS AND GRANTS

During 2021, donations amounted to a total income of SEK552 million (2020: SEK681 million). The donations came from the public, foundations, and companies.

A stable and predictable income is a prerequisite for us to plan and implement our medical humanitarian activities. The cornerstone of this is monthly donors who contribute not only to financial stability and predictability but also enable us to reduce administrative costs. During 2021, 109 596 monthly donors gave a total of more than SEK 186 million (2020: 188 million).

Besides the monthly donations, MSF was also supported throughout the year by many other types of donations. Our postal mailings, in which staff and patients share their stories from projects around the world, generated over SEK 63 million (2020: 65 million). The revenue from legacies amounted to SEK 137,5 million (2020: 121 million).

The Swedish Postcode Lottery supported MSF Sweden with donations of SEK 24 million (2020: SEK 26,5 million) in annual base grant and the Radiohjälpen Foundation supported us with a total of SEK 13,8 million (2020: 9 million).

Corporate donations amounted to SEK 23,5 million during the year (2020: 30,6 million).

The COVID-19 pandemic has had an impact on our fundraising. It has increased the cost of operations in our projects and forced our fundraising methods and activities to adapt to the unprecedented challenges and uncertain future. During the past two years, donors have continued to show their commitment to our medical humanitarian work, and we have therefore not witnessed a significant decrease in financial contributions from donors. To what extent the pandemic will have an impact on our long-term fundraising remains to be seen.

Out of the total donations during 2021, 90 percent were not earmarked for a specific project or purpose. We aspire to generate donations and grants that are not earmarked for a specific project or purpose. This gives MSF the possibility to decide where and how the funds will be best used, based upon the medical humanitarian needs. In addition, non-earmarked funds reduce the administrative costs, and more funds can thus be used for our social mission around the world.

5. SIGNIFICANT EVENTS DURING THE YEAR

5.1. RECRUITMENT AND DEVELOPMENT OF MSF STAFF

MSF's strengths lie in our dedicated teams, from health staff to logisticians to administrative staff. In 2021, the COVID-19 pandemic continued unabated around the world, as did the work our teams undertook to respond to crises and needs of people we assist.

MSF Sweden deployed 87 international mobile staff to 109 different assignments. These took place in more than 30 countries of which the top four were: Central African Republic, Yemen, South Sudan, and Palestine.

We recruited 16 new international mobile staff during the year. The number of persons going on their first mission is lower than previous years, the reason being a higher demand for a more experienced staff. All introductions, preparatory courses and briefings were held online.

Of the international mobile staff deployed, 65 percent belong to the medical and paramedical professions (doctors, nurses, midwives, psychologists, and biomedical analysts) while the other 35 percent were non-medical staff (logisticians, water and sanitation experts, humanitarian specialists, financial administrators, HR administrators, and interpreters). Many countries where we work are in the middle of volatile situations, including Afghanistan, Haiti, and Ethiopia, which have led to the cancellation of some programmes and/or paused projects.

Despite a challenging year, our mobile international staff have worked closely with their colleagues from the project countries to ensure that MSF bears witness to essential humanitarian needs and provides access to medical care.

5.2. OPERATIVE SUPPORT

To strengthen our international activities and to contribute to improved quality and efficiency in the projects, MSF has an innovation unit and an evaluation unit based in the Stockholm office.

MSF SWEDEN INNOVATION UNIT

To adapt to challenges in a changing world, and at the same time improve our medical humanitarian activities, it is important that we are innovative and seek constant renewal. The MSF Sweden Innovation Unit supports all our operational centres to develop sustainable solutions to both new and recurring challenges and to problems that we face in our operations in the projects and beyond.

This is done by using a systematic approach for innovation as a vehicle for continuous improvement. The unit has developed a methodology based on co-creation, i.e. building a bridge between different stakeholders, both within and outside MSF. This methodology has

proven effective in tackling concrete cases in the projects and helps us to address ethical principles, to align fundamental innovation values with the decision-making process and to evaluate ongoing innovation activities.

In 2021, the unit worked on several cases, mainly in the category of digital health, and climate, environment and health. One example is the digital patient support app for tuberculosis (TB) in India. The app will also be useful for other contexts and morbidities, such as diabetes. Another focus was to promote "democratisation of innovation" between different innovation actors in the organisation. The unit also supported MSF's strive towards becoming a more climate smart organisation by creating better solutions with our solar measuring tool and waste-management case around used batteries.

STOCKHOLM EVALUATION UNIT

The Stockholm Evaluation Unit is part of MSF's international evaluation group that consists of three independent evaluation units located in Vienna, Paris, and Stockholm. The units evaluate our medical humanitarian operations worldwide and work with initiatives for internal reflection and learning processes.

The purpose of the Stockholm Evaluation Unit is to increase the organisational learning and the development of activities through an evaluation of our efforts. The unit worked on 17 evaluations and one monitoring exercise during 2021, examining approaches, results, and co-ordination of the implementation of MSF projects. Most were evaluations of operational projects, though some examined issues related to organisational management and development. With COVID-19 continuing to limit international travel, the unit increased its work with local consultants. An example of an activity conducted during the year was an evaluation day: a half-day workshop exploring synthesis learnings from evaluations completed over the past seven years.

5.3. BEARING WITNESS - COMMUNICATION AND ADVOCACY

Besides the medical work in our projects, MSF raises awareness and initiates debate about humanitarian crises through the act of 'témoignage'. This means that MSF acts as a witness and will speak out, either in private or in public, about the plight of people at risk with whom we work. In doing so, MSF sets out to alleviate human suffering, to protect life and health and to restore human dignity. With our communication and advocacy work in Sweden we aim to increase the knowledge of humanitarian crises amongst the public and decision makers and when needed provoke a change.

The global pandemic has continued to ravage throughout the world and affect our operations in 2021. As MSF teams responded to the pandemic and its knock-on effects on healthcare systems we continued to communicate about the topic, while advocating strongly for equitable access to vaccines for everyone. This was among the most engaging content on our social media pages throughout the year.

This was also the year when the Talibans once again took power in Afghanistan. A collapsing

bank system and the blocking of international aid led the already struggling country down a difficult path. Despite this very turbulent period following the power shift, MSF has continued to operate in the country without any interruption which has been featured in public communication.

In June, MSF was struck by a tragic incident with the murder of our three colleagues in Tigray, Ethiopia. Their killing remains unclear and the full circumstances of what happened and who is responsible is still unknown. Afterwards, MSF had to take the painful decision to suspend some activities in the Tigray region. This was featured in both communications and bilateral advocacy.

The end of 2021 marks a year with continued humanitarian crises still ongoing in the shadows of the global pandemic, with alarming malnutrition in Yemen and Afghanistan, flooding in South Sudan, a typhoon in the Philippines, gang violence and fuel shortage in Haiti, migrants stuck in Libya and people drowning in the Mediterranean Sea. Apart from these crises that were raised in public communications, we also communicated more and more on the humanitarian health consequences of the climate crisis.

Through social media we raised visibility and created engagement in Sweden about humanitarian medical crises. We have reached about 4 million people with content on our Facebook and Instagram pages, while our tweets have earned almost 700,000 impressions.

Throughout the year, we published twelve opinion pieces that focused on issues like antimicrobial resistance, equal access to COVID-19 vaccines, the humanitarian situation for refugees and migrants as well as diseases like TB and malaria.

The school project "Ett gränslöst skolprojekt" continued successfully with a large number of requests for presentations, most of them facilitated online. Almost 1 000 students in different parts of Sweden were reached. University students have also been engaged in awareness raising activities. In addition, we have continued to use new tools to reach a wider audience, such as podcasts, live streaming events, and creative in-house production.

For most of 2021, access to COVID-19 vaccines remained one important theme for bilateral advocacy and campaigning. Over 7 300 people in Sweden signed our petition for fair distribution of vaccines globally. Another issue that was raised was access to treatment for tuberculosis (TB). At the World TB day, we organised a webinar together with the World Infection Fund (WIF) and Global Fund to Fight AIDS, Tuberculosis and Malaria to highlight the TB situation in different parts of the world in the shadow of the COVID-19 pandemic. We were also active ahead of the UN high-level meeting on HIV/AIDS and provided input to the political declaration on the need for increased mobilisation of resources, mortality reduction, and community-led interventions among other things.

The number of bilateral meetings was on a record level, partly because almost all the work was done online. MSF is very much a top-of-mind humanitarian voice that has easy access to government interlocutors where we could raise first-hand accounts and perspectives from countries where we work. Meetings were held with the Ministry of Foreign Affairs and

Sida to highlight the situation in places like Afghanistan, Yemen, Ethiopia, Libya, Greece, Central African Republic, and Myanmar.

6. A MEMBER ASSOCIATION

MSF is an association, and as such counts on its members to actively contribute to strengthening the organisation's medical identity. To become a member of the association, you must have worked in programmes or have worked or volunteered in the office of MSF for a set number of months, as regulated by the statutes.

On December 31, 2021, we had 411 paying members, which includes international mobile staff, office staff and volunteers. More than 80 percent of all members have worked for MSF in our projects and 58 percent of our members have a medical background.

Our ambition is to have committed members. All paying members have the right to vote at the General Assembly (GA). Voting is done by physical presence, electronically or by proxy. Members can also present motions. Members may also participate in discussion evenings and in international associative events. Regular e-mails and updates on a member-only Facebook page keep members informed of both association activities in Sweden and MSF's activities movement wide.

DISCUSSION EVENINGS

Several discussion evenings took place during 2021:

- Humanitarian challenges in Ethiopia (online), January 14.
- Cabo delgado (online), February 23.
- The conflict in Yemen (online), April 13.
- Gaza/IGA updates (online), June 9.
- Afghanistan/IGA updates (online), Sep 22.
- Reconstructive surgeries (hybrid), October 21.
- Updates from Sudan (hybrid), November 16.

MSF SWEDEN'S GENERAL ASSEMBLY

The General Assembly (GA) took place online on May 8, 2021, with 98 participants, of which 76 were members of the MSF Sweden Association. For the board election 83 votes were cast (the vote was open from April 28). Peter Moberger, Beatrice Wangari Kirubi and Henrik Danielsson were elected as regular Board Members for a three-year mandate with voting rights each, Cecilia Werner Kastensson was elected for a two-year mandate with voting rights (fill-in position) and John Tzanos was elected for a two-year mandate without voting rights. Anna Gyldén Stray was elected as IGA representative with a two-year mandate. For the motions, the vote count varied between 47–72 votes (including proxies).

Three motions were approved: two directed to the international movement: "A common framework for reporting quality of care in MSF" and "Fundamentally transforming MSF's

International Governance" and one directed to MSF Sweden: "The nursing and midwifery motion".

OTHER ASSOCIATION EVENTS DURING THE YEAR

Members of the MSF Sweden Association participated online in international forums such as the OCB (MSF Operational Centre in Brussels) Annual Meeting, the OCA (MSF Operational Centre in Amsterdam) member event and the International General Assembly.

7. ADMINISTRATION

THE MSF SWEDEN BOARD

The MSF Sweden Board met on 13 occasions during 2021, mostly online but with some hybrid meetings. The Board participated in the yearly board training in August. Outside of the board meetings, the Board worked with the Executive through thematically organised strategic platforms with regular meetings. Internationally, MSF Sweden is represented in the OCB Board and we also have an MSF Sweden board member on the OCA Council. Further, the President and a member are representatives in the International General Assembly.

AFTER THE GENERAL ASSEMBLY 2021 THE BOARD COMPOSITION IS AS FOLLOWS:

President: Peter Moberger, medical doctor Vice president: Katrin Kisswani, nurse Secretary: Katrine Konar, recruitment specialist Treasurer: Henrik Danielsson, engineer and economist Regular members: Karin Fischer Liddle, nurse, Adam Thomas, health care director, Laura Granö, medical doctor, Beatrice Wangari Kirubi, medical doctor, Cecilia Werner Kastensson, communication specialist Alternate board members: Pär Norén, project manager, John Tzanos, nurse.

The following were also elected:

Election Committee from May 2021: Jeff Freund, Sofie Graner, Marie Inhammar, Andreas Häggström.

Complementary vote for Auditor and Deputy Auditor: Erik Albenius (Auditor) and Angelica Stööp (Deputy Auditor) from PricewaterhouseCoopers (PwC).

PRESENCE AT BOARD MEETINGS 2021: board members presence /number of possible meetings

Adam Thomas 13/13 Andreas Häggström** 6/6 Anette Uddqvist*** 6/6 Beatrice Kirubi* 5/7 Cecilia Werner Kastensson* 7/7 Erling Larsson** 6/6 Henrik Danielsson* 7/7 John Tzanos****, alternate 2,5/3 Katrin Kisswani 12/13 Katrine Konar 13/13 Karin Fischer Little***** 7/11 Laura Granö 13/13 Peter Moberger, 13/13 Pär Norén, alternate 12/13

*Elected to the Board May 2021 **Term of office ended May 2021 ***Left Board in May 2021 ****Left Board in September 2021 *****Left Board in October 2021

8. SUSTAINABILITY INFORMATION

MSF Sweden have as of May 2021 a Collective Bargain Agreement with the employer federation FREMIA. By being a member of FREMIA, MSF Sweden can obtain continuous and relevant information and training on issues relating to employment, labor law, working environment, occupational pensions, and salary statistics.

MSF Sweden continues to develop the systematic work environment activities through Safety Committee and Safety Officer check-ins and listens to signals for ill-health with guidelines in place. We have clear structures for the reporting of complaints and have concluded several work environment activities during 2021, such as a review of office premises, and an occupational health investigation and risk analysis. A process for reporting and management of incidents, occupational injuries, and accidents was successfully implemented.

During 2021, MSF Sweden carried out two HQ staff surveys on work environment and employee satisfaction and the overall result has been shared with the staff. Due to the ongoing COVID-19 pandemic, MSF Sweden introduced a new "Flexible Workspace" policy allowing employees who have the possibility to work from home or elsewhere on a more regular basis. Goal-oriented contracts were also implemented.

As part of our ambition to become an anti-racist organisation two lectures on racism, together with MSF Inclusion Academy, were held during the year. We have a Diversity & Inclusion team at the office and in 2022, we will have a dedicated resource to solely focus on this. During the year, the team has worked with reviewing our communication among other things.

MSF Sweden is working actively to prevent all forms of corruption and fraud. The Internal Controller performed compliance checks during the year and arranged information sessions with all staff.

The second annual MSF Sweden sustainability report was produced during the year, reporting on 2020. The report is used as an internal tool to structure our sustainability work and to follow and mitigate our environmental footprint. MSF Sweden also has an Environmental Policy in place that regulates the purchase of goods and services, energy consumption and travel.

The COVID-19 pandemic has contributed to substantially reducing the amount of travel during both 2020 and 2021. This has forced us to develop our ways of working and along with the rapid digital development, hopefully enable us to replace travel with digital meetings in the future as well.

In December 2021, MSF International agreed to collectively set a movement-wide carbon reduction target of 50 percent by 2030. It is up to each section to develop an individualised plan. MSF Sweden (MSFSE) will develop this plan in 2022 and formalise the so far informal "MSFSE Green Team" to ensure a continuous progress of environmental sustainability work and engagement in setting ambitions and reporting on progress.

9. EXPECTED FUTURE DEVELOPMENTS AND SIGNIFICANT RISKS AND UNCERTAINTIES

In the past years we have witnessed all our lives turn upside-down. COVID-19 has taught us many important lessons and not only about where we work, where we can travel to or how our medical humanitarian interventions reach our patients worldwide. It has also taught us about how we care about one another and the need to be there on a personal level.

As our activities continue, we will continue to shine the spotlight on underreported needs, such as making vaccination available to everybody. It must never be a luxury to be vaccinated, but today we see this more than ever for COVID-19. Instead of closing borders, we should make vaccination and healthcare available across the globe and share our privileges equitably. The pandemic has also affected the provision of healthcare for other diseases and taken attention away from protracted crises in countries like South Sudan, Mozambique, Yemen, and DRC.

Our efforts around the globe and in Sweden encompasses a range of risks by the nature of our work. As the whole concept of our organisation is based on trust, recognition, and our reputation as medical humanitarian organisation, we mitigate risks by establishing, valuing, and securing the trust-relationship we have with our supporters.

Our international mobile staff faces risks when active in project countries and to manage those risks, we work closely with our colleagues who manage operations to uphold our duty

of care. We will continue to provide support despite the risks, since our patients and their surroundings need it.

With a new Strategic Plan starting in 2022, we look at joint efforts with our supporters, within and outside of our organisation and we thank our supporters in advance for their amazing generosity and engagement. Without you, none of this would be possible. Given the hardship and economic constraints due to the pandemic, it is even more commendable how you give support, and we hope it continues into 2022 and beyond.

Together, we will learn from the past years and build a stronger future. To care for people and to help people care.

10. THANKS FOR YOUR SUPPORT

MSF Sweden would like to deeply thank all of you who in different ways have contributed to our work during 2021. Many thanks to all our fantastic donors, pledgers and volunteers who have supported us during this challenging year. Together we are Médecins Sans Frontières!

CORPORATE PARTNERS

Svenska Postkodföreningen Alfvén och Didrikson Swedbank Robur Rusta Interflora Swedavia Byggnadsfirman Viktor Hanson Idun Industrier Wallenius Lines Once Upon Publishing Apotea

FOUNDATIONS WHICH HAVE DONATED ABOVE 100 000 SEK

Stiftelsen Radiohjälpen Axel F o Vilna Lindmarkers Stiftelse Stiftelsen IH Stiftelsen Bertil Strömberg Stiftelsen till minne av Märta och Runo Ahlqvist Per & Helen Dreijers Stiftelse Stiftelsen Infinity Märta Christina och Magnus Vahlquists Stiftelse Claes August Kugelbergs Stiftelse John-Arvid Järnfelts Stiftelse Stiftelsen Barn i nöd Stiftelsen Familjen Lerches Elsa & Harry Gabrielssons Stiftelse Hans & Marit Rausing Charitable Trust Marcus Edlunds Stiftelse Tuscana (MEST)

CORPORATIONS AND ORGANISATIONS WHICH HAVE DONATED ABOVE 100 000 SEK

SCA Forest Products Raceone SAS Bonava Depona New Moon Förvaltning Philips Öhrlings PricewaterhouseCoopers Elnath Investments Ltd. Monterro Services Advokatfirman Monica Petersson Supékort Sweden Storytel Sweden Sweco Sverige Volati Hiss-Mekano i Täby Alin & Hedenlund Fastighetsförvaltning Lindéngruppen The Boston Consulting Group Nordic Essve Produkter Arla Plast Avanza Bank

Axis Communications Centiro Solutions Elanders Sverige EM3 FCG Holding Sverige HiQ Lindinvent Sweco Rail Vekst

PRIVATE DONATIONS ABOVE 100 000 SEK

Bengt Andersson Berndt Eriksson Bertil Sigra Britt-Karin Alsheden Claes-Henrik, Thea, Hedvig and Siri Julander Elisabeth and Fredrik Strömholm Ellis Wohlner Erik Norman Erland Sommarskog Eva and Ragnar Sjögren Johan Qviberg Karl Otto Bonnier Kerstin Solén Lennart Peck Maj Johansson Mikael Larsson Patrik Engberg

PRO BONO SUPPORT EQUAL TO THE VALUE OF 100 000 SEK OR MORE

Arup Advokatfirman Delphi Bird and Bird Advokat Farbror Per Design Insulander Lindh Advokatbyrå MarketDirection Sweden Mindset Wallenius Lines and StudioS19

Accounting and valuation principles

MSF Sweden's (Läkare Utan Gränser) accounting and valuation principles comply with the Swedish Annual Accounts Act, BFNAR 2012:1 (K3), Giva Sverige's Guidelines for Annual Report and BFNAR 2020:1 (Specific accounting issues in relation to Covid19). The annual report also includes some information required by Swedish Fundraising Council.

Financial accounting and valuation principles are unchanged compared with the previous year.

Operating income

Income is valued to actual value realised or to be realised.

Donations and grants

A transaction where MSF Sweden receives an asset that has a value without returning the equivalent value in exchange is a donation or grant. If the asset is obtained because MSF Sweden met or will meet certain conditions and has an obligation to repay to the counterpart if the conditions are not met, it is a grant. If it is not a grant, it is a donation.

Donations

Generally, donations are reported as income when received according to cash flow principle. Payment documents ordered by closing day are recorded as income on closing day, hence an exemption from cash flow principle. Insofar there are other contractual but not yet received donations on the closing day, hence are reported as income based upon individual examination. Received gifts from the general public, legacies and bequests, companies, organisations, trusts and foundations are included in donations. Donations from companies that have committed to donate a certain percentage of its sales to MSF Sweden are also counted here. Donations in the form of securities and real estates are sold as soon as these are registered in the name of MSF Sweden. Donations consisting of other than cash is valued to market value. Donations in form of pro bono-services are not reported as income.

Grants

Grants are recognised as income when the condition for their receipt have been fulfilled. Grants received are reported as debts until the conditions for their receipt have been fulfilled. Grants received to cover certain costs (e.g. administration) are reported in the same financial year as the cost the grant is intended to cover.

Membership fees

Membership fees concern payments made for membership in MSF Sweden and are reported in the time period they refer to.

Other income

Costs for International Mobile Staff with Swedish employment contracts are invoiced to the operational center responsible for the project. Income for this are reported under other income.

Operating expenses

Common costs, such as IT, reception, office rent and other office related costs, are distributed over administration costs, fundraising costs and social mission costs. The allocation is made according to an allocation k number of staff to reflect actual use.

Social mission costs

Social mission costs are costs that MSF Sweden incurs to implement its task in accordance with its by-laws. Included here are raised funds allocated to other MSF sections to be used in projects and to cover direct or administration. Funds allocated to other MSF sections are recorded as costs when they have been transferred to receiving section or agreement of transferring has been set up. How this year's allocated funds have t specified in note 7.

All expenses, including salaries and social insurance costs, related to International Mobile Staff and recruitment of International Mobile Staff, communication and advocacy work and to operative support are also inclu Distributed overhead costs are also counted as social mission costs.

Fundraising costs

Fundraising costs are all costs that occur in order to generate contributions from the public. These include salaries, social insurance charges, costs to produce and distribute letters and direct mailings, advertising and activities. Distributed overhead costs are also included here.

Administration costs

Administration costs are the costs necessary to administer the organisation. The administration constitutes a guarantee of quality for the social mission and the donor. Included in these costs are salaries and social in the secretary general, finance and administrative staff, costs concerning the board and the distributed overhead costs.

Leasing

All the organisation's leasing agreements are reported as operative, i.e. the leasing charge (including the first elevated rent) are reported linear during the leasing period.

Employee benefits

Ongoing remunerations to staff such as salaries, social insurance charges and similar are reported as costs as the staff perform services. As all pension costs are classified as defined charges these costs are recogn expense in the year which they are incurred.

Taxes

MSF Sweden is an NGO and hence tax exempted.

Assets

Tangible non-current assets

Tangible and intangible non-current assets are valued at acquisition value less depreciation according to plan. Depreciation is linear across the asset's estimated lifetime. The depreciation period used for inventory is 3-5 years. Computer software with an estimated longer lifetime are depreciated over the estimated lifetime (7 years for CRM system). Assets are removed from balance sheet when sold or disposed.

Receivables

Receivables are valued to the amount estimated to be paid, based upon individual examination

Debts

Debts are valued to nominal value.

Cash flow statement

The cash flow statement has been established using the indirect method i.e. starts from the organisation's net income. The reported cash flow only includes transactions that brings payments or disbursements. Cash is in its entirety constituted of bank deposits.

Estimations and assessments

Donated assets

Assets, especially real estate, stocks and other securities donated to MSF Sweden are reported in the post funds raised from the general public as the asset is sold. Received but not yet sold assets are reported in th at the estimated market value under other receivables.

NOTES ON STATEMENT OF FINANCIAL ACTIVITIES AND BALANCE SHEET

Note 1	Donations The income from the public comes from the following sources:	2021	2020
	General public	482 108 132	448 430 114
	Companies	23 492 168	30 548 930
	External trusts and foundations	8 446 893	166 278 922
	The Swedish Postcode Lottery base grant	24 000 000	24 000 000
	Total funds raised (donations)	538 047 193	669 257 966

The decrease of donations from foundations is due to the large donation of 160,7 million SEK that was received from Akelius Foundation in 2020.

The table below presents the breakdown of donor-designated/restricted donations (for country/region/context) and unrestricted donations.

Distribution	2021	2020
Access campaign		
Afghanistan	2 166 379	17 560
Africa	7 432 879	43 715
Bangladesh	2 600	3 250
Bangladesh, Balukhali	250 000 -	5 2 5 0
Central African Republic	1 100	400
Children and youths	88 740	284 233
Cholera	00140	204 200
COVID-19	1 204 219	6 882 103
Clean water	100 -	0 002 105
Democratic Republic of the Congo	9 340	3 600
Democratic Republic of the Congo, Baraka	3 340	2 603 257
Ebola	-	2 003 237
Emergency Fund*	- 781 968	979 960
Ethiopia	17 550	2 700
Equador	300 -	2700
Gaza	25 930 -	
Guinea	500 -	
Haiti	114 530 -	
Indien	12 575 -	
Indien, COVID-19	21 455 -	
Indonesia	100 -	
Innovations	100 -	20 000
Innovations	- 5 000 -	20 000
	5 000 -	500
Jordan Kenya	- 200 -	500
Lebanon	3 200	190 042
Liberia		190 042
Liberia Malaria	500 - 1 470	135
Indialia	1470	155
Malnutrition	500	6 612
Measels	9 460	1 100
Migration, Lesbos	300	48 028
Mozambique	900	300
Nigeria, noma	700 000	700 000
Nigeria, Zamfara	272 480 -	
Noma	300 -	
Pakistan	2 000 -	
Palestine	8 255	6 000
Refugees**	1 676 704	162 050 033
South	1 959 515	214 346
Sudan	2 500	4 550
Syria	46 079	56 618
Tetanus vaccine	215 -	
Tuberculosis		
Tuberculosis, clinical trials	500 000	500 000
Uganda	100 -	
Women and children	1 800	9 440
Women's health	6 900	5 000
Vaccinations	28 700	12 745
Yemen	162 450	141 780
Subtotal	17 519 794	174 788 007
	17 515 754	114 / 00 00/
Unrestricted donations	520 527 399	494 469 960
Total	520 527 399 538 047 193	494 469 960 669 257 967
וטנמו	538 047 193	003 231 961

*The funds raised through the Emergency Fund 2021 was used for Ebola project in Guinea (2020 they were used for COVID-19). ** The decrease compared to last year is due to the large donation from Akelius Foundation earmarked refugees received in 2020.

Note 2 Sales revenue

Sales of MSF T-shirts produced for MSF Sweden, total SEK 9 916.

Note 3	Private Grants The Swedish Postcode Lottery Covid addition	2 021	2 020 2 400 000
	Radiohjälpen	13 857 066	9 008 960
	Total funds raised (private grants)	13 857 066	11 408 960

From Radiohjälpen we received grants of SEK 5,5 million for Khost in Afghanistan, SEK 4 million to Balukhali in Bangladesh and and SEK 4,4 million for South Sudan.

Note 4	Funds raised	2 021	2 020
	Private donations recognised in Statement of financial activities	538 047 193	669 257 967
	Private grants recognised in Statement of financial activities	13 857 066	11 408 960
	Total funds raised	551 904 259	680 666 927

Other income Note 5

This item consists of income from other MSF sections for International Mobile Staff sent out by MSF Sweden.

Note 6	Staff	2021	2020
	Average number of employees*		
	Swedish office:		
	Women	69	59
	Men	25	23
	International Mobile Staff**:		
	Women	19	22
	Men	10	11
	Total	123	115

*total worked hours recalculated to equivalent full time employments **We comply to the requirement of ARL to report distribution by sex divided into men and women. The reported distribution is based on national registration (from the last figures of the personal identity nu There can be other identities than men and women.

Board members Women Men	6 5	5 6
Management Team and Secretary General Women Men	6 2	5 3
Salaries and remuneration Board* Secretary General** Other employees International Mobile Staff	305 348 819 726 43 233 600 14 128 095 58 486 769	307 450 793 804 36 175 463 11 673 938 48 950 655

* Remuneration for the president according to decision taken at General Assembly (2020 and 2021). Other than that, no remunerations have been paid, only reimbursement of expenses

for direct costs related to board work.

**In the Secretary General's contract of employment there is no right to severance pay included other than normal notice according to law.

Social insurance charges		
Pension costs for Secretary General and		
Board	151 934	132 903
Pension costs other employees	2 941 606	3 312 463
Pension costs International Mobile Staff	741 533	707 409
Other social insurance charges	14 424 761	12 010 440
Other social insurance charges, International Mobile Staff	4 523 215	4 063 380
Total	22 783 049	20 226 595

In other social insurance charges costs for staff insurances, wage tax and general payroll tax are included.

During the year approximately 12 persons have worked on a voluntarily basis in the Stockholm office. The value of these voluntarily contributions has not been reported in the income statement, but amou approximately 326 hours, corresponding to approximately 0,167 FTEs. During the year SEK 183 534 in wage subsidies and SEK 47 130 in contribution from the labor office have been received .

Note 7

Social mission costs The item consists of funds allocated abroad (SEK 410 105 922), consisting of

private funds allocated abroad, and all costs, including salaries

and social insurance charges related to the recruitment of Intenational Mobile Staff (SEK 8 252 316), and staff costs for International Mobile Staff (SEK 18 651 310), other project related costs (SEK 6 624 support and advocacy (SEK 11 647 349) and communication and public opinion (SEK 9 346 772).

Pie chart with the same layout as previous year: Distribution of total costs

	2021		2020	
Funds allocated to projects	255 761 716	44,19%	467 498 088	66,58%
Indirect operating costs in OCB	41 915 810	7,24%	41 986 787	5,98%
Surplus in OCB for future operations	103 902 629	17,95%	29 988 900	4,27%
International Mobile Staff with Swedish emp	18 651 310	3,22%	16 054 576	2,29%
Operative support and advocacy	11 647 349	2,01%	9 732 293	1,39%
Recruitment of International Mobile Staff	8 252 316	1,43%	7 117 356	1,01%
Communication and public opinion	9 346 772	1,61%	8 297 146	1,18%
Other project related costs	6 624 673	1,14%	4 114 980	0,59%
Contribution to MSF International Office	3 843 274	0,66%	3 486 301	0,50%
Contribution to Access to essential medecin	1 779 227	0,31%	1 917 434	0,27%
Contribution to DNDI**	1 479 058	0,26%	1 613 568	0,23%
Contribution to Transformational Investment	1 424 208	0,25%	1 209 598	0,17%
	464 628 342	80,28%	593 017 027	84,45%
Administration costs	21 699 834	3,75%	19 096 015	2,72%
Fundraising costs	92 462 762	15,98%	90 061 269	12,83%
Total costs	578 790 938	100,00%	702 174 311	100,00%

In the category funds allocated to projects, costs for International Mobile Staff, national staff, medical equipment, drugs, nutrition, transport, freight, warehouse, running project administration, logistics, wa training and support to local organisations are included.

*Drugs for Neglected Diseases initiative

Donations from the public has been allocated as follows (in SEK):

	2021	2020		2021	2020
Country	Amount		Country	Amount	
Afghanistan	20 394 381	24 450 143		11 948 314	50 552 698
			Liberia	450 -	
Balkans	213 227	8 598 143		9 669 021	3 000 000
Bangladesh	11 024 468	15 101 782	Madagascar	-	45 927
	_		Malawi	-	5 033 530
Belgium (refugees/migrants)	2 666 323	6 734 205	Mali	4 084 040	8 991 215
Benin	93 344 -				
	_		Mauretania	-	0
Bolivia	1 295 466	2 427 084		-	817 443
Brazil	1 669 149	1 020 204	Mozambique	2 292 732	1 572 640
Burundi	3 643 991	11 043 525	MSF Academy	1 035 930	986 759
Cambodia	-		Myanmar (Burma)		0
Cameroon	867 370	2 231 724			
Central African Republic	13 942 499	7 643 356	Nauru, the Republic of	-	164 579
China		128 045	Nicaragua	-	0
Congo, Democratic Republic of the*	25 715 901	37 893 289	Niger	-	0
Ecuador	265		Nigeria	22 317 163	22 339 711
Egypt	4 154 683	4 454 730	Pakistan	4 316 088	3 734 262
Eritrea	91 762	78 811	Palestine territory/Gaza	4 192 337	4 168 885
Ethiopia	6 666 286	5 056 122			
			Sierra Leone	3 192 183	5 923 377
Europe (refugees/migrants)	-	36 932 212	Somalia	-	14 000 000
			South Africa	3 023 847	2 965 732
			South Sudan*	20 649 737	73 135 602
Greece	4340953 -		Sudan	12 858 757	55 299
Guinea	3 510 869	6 275 011			
Haiti	8 683 069	5 331 027		_	
Honduras		8 677		_	
Hong Kong	56 476	155 539			
India	3 089 071	9 388 154		_	
Indonesia	1 078 688	1 216 579	Svria	10 159 814	40 221 980
indenteeld		1210 010	oyna		10 22 1 000
Iran				_	
Iraq	6 356 276	4 897 896			
				_	
Italy	1 830 401	1 382 931		_	
Ivory Coast	133 407	407 047		_	
Jordan		450			
boldan		400			
Kenya	2 957 797	3 800 052	Llaanda	100 -	
Kenya Supply Unit	1 518 278	1 840 446		5 453 967	4 628 722
nonya cuppiy onic	1010210	1 0-10 440	Uzbekistan	1 000 000	5 000 000
			Venezuela	5 857 413	7 942 864
			Yemen	6 200 209	10 850 622
			Zimbabwe	1 515 215	2 869 058
			Linibabwe	1 313 213	2 009 000

*Included in the funds allocated to following countries are grants from Radiohjälpen: Afghanistan - MSEK 5,5, Bangladesh - MSEK 4, South Sudan - MSEK 4,4

Indirect operating expenses (Cost in the operational center in Brussels (OCB), operative and medical support, logistics and communication from projects etc. Surplus in OCB for future operations Contribution to the campaign Access to Essential Medicines Contribution to MSF International Office Contribution to research initiative DNDi (<i>Drugs for Neglected Diseases initiative</i>) Contribution to <i>Transformational Investment Capacity</i>	2 021 41 915 810 103 902 629 1 779 227 3 843 274 1 479 058 1 424 208	2020 41 986 787 29 988 900 1 917 434 3 486 301 1 613 568 1 209 598
Total funds allocated abroad	410 105 922	547 700 675
Communication and public opinion	9 346 772	8 297 146
Operative support and advocacy	11 647 349	9 732 293
Recrutiment of International Mobile Staff	8 252 316	7 117 356
Salaries and social fees for International Mobile Staff	18 651 310	16 054 576
Other project related costs	6 624 673	4 114 980
Total social mission costs	464 628 342	593 017 027

255 761 716

Summa

467 498 087

Note 8 Support to Médecins Sans Frontières in Finland

The expenditure includes SEK 13 530 396 SEK of support to MSF Finland.

The support is distributed: Support to fundraising: 10 250 300

Support to administration: 3 280 096

Note 9 Leasing

MSF Sweden holds leasing agreements for office premises and copying machines. Leasing charges entered as costs amount to SEK 3 918 090 (2020: 3 863 499).		
Future leases come due as follows:	2021	2020
Within 1 year	3 445 000	3 075 732
1-5 years	10 541 700	12 548 987
After 5 years	0	0
Total	13 986 700	15 624 719

The contract for rental of premises lasts to 2025-12-31.

Intangible assets Note 10

Balanced expenses for computer	2021-12-31	2020-12-31
Opening acquisition value	0	0
This year's purchase	3 681 908	0
Sales and disposals	0	0
Closing accumulated acquisition value	3 681 908	0
Opening depreciation	0	0
Sales and disposals	0	0
This year's depreciation	0	0
Closing accumulated depreciation value	0	0
Closing residual value according to plan	3 681 908	0

Balanced expenses for computer software is assessed to have an estimated lifetime of 7 years, depreciations are made linear over that period. The software will be used from 2022, hence no depreciation is made in 2021 closing. Depreciations will be classified as fundraising costs.

Note 11 Tangible assets

Inventory	2021-12-31	2020-12-31
Opening acquisition value	3 870 837	7 509 390
This year's purchase	0	0
Sales and disposals	0	-3 638 553
Closing accumulated acquisition value	3 870 837	3 870 837
Opening depreciation	-3 870 837	-7 393 465
Sales and disposals	0	3 638 553
This year's depreciation	0	-115 925
Closing accumulated depreciation value	-3 870 837	-3 870 837

0

0

2020-12-31 954 025 880 776 5 990 639

7 825 440

Closing residual value according to plan

Tangible non-current assets are depreciated linear accross the asset's estimated lifetime. The depreciation period used for inventory is 3-7 years. The depreciations are distributed between the administration, fundraising, communication and the recruitment departments according to the number of employees in the respective department.

Note 12

Other receivables This item mainly refers to receivables from other MSF sections, especially travel and vaccination costs for expatriates paid for in Sweden and invoiced to corresponding operative centre. The item also includes real estates in the process of being sold at the end of the year: SEK 15 981 711 (2020: 7 430 000). Receivables are valued to the amount estimated to be paid, based upon individual examination

Note 13	Prepaid expenses and accrued income		
	Freparie expenses and accided income	2021-12-31	
	Prepaid rent	954 025	
	Other prepaid expenses	235 086	
	Funds raised in 2020 received by MSF Sweden 2021	6 383 092	
	Total	7 572 203	

Note 14 Equity

The Belgian section of Médecins Sans Frontières has issued a capital adequacy guarantee where the organization undertakes to cover costs up to SEK 65 million for Médecins Sans Frontières in Sweden. The warranty extends to March 31, 2026.

Note 15

Debts MSF projects Refers to funds allocated to projects in 2021 but not yet transferred by 2021-12-31. The allocated funds were transferred in the beginning of 2022.

Note 16 Other debts		2021-12-31	2020-12-31
Withholding tax		1 197 022	1 022 019
Wage tax		1 888 888	2 061 564
Other entries		2 137 041	272 144
Total		5 222 951	3 355 727
Note 17			
Accrued expenses and prepa	id income	2021-12-31	2020-12-31
Accrued vacation pay		2 481 177	1 930 984
Accrued social insurances char	ges	1 473 233	1 513 924
Other entries		3 824 158	1 914 107
Total		7 778 568	5 359 015

Pledges and contingent liabilities Note 18

The organisation has no pledges. According to the Board's estimation the

organisation has no contingent liabilities.

STATEMENT OF FINANCIAL ACTIVITIES

	Note	2021		2020
INCOME				
Donations	1, 4	538 047 193		669 257 967
Sales revenue	2	9 616		4 430
Total income from the public		538 056 809		669 262 397
Private grants	3, 4	13 857 066		11 408 960
Total income from organisations		13 857 066		11 408 960
Membership fees		126 117		132 486
Other income	5	26 226 707		21 100 873
Total other income		26 352 824		21 233 359
Total income		578 266 699		701 904 716
EXPENDITURE				
Social mission costs	7 -	464 628 342	-	593 017 027
Fundraising costs	-	92 462 762	-	90 061 269
Administration costs	-	21 699 834	-	19 096 015
Total expenditure	6, 8, 9 -	578 790 938	-	702 174 311
Net income	-	524 239	-	269 595
Result from financial investments				
Interest income and similar items		362 501		271 245
Interest costs and similar items	-	9 288	-	1 650
Total result from financial investments		353 213		269 595
Surplus/deficit	-	171 026		0

BALANCE SHEET

ASSETS	Note	31 dec. 2021	31 dec. 2020
NON-CURRENT ASSETS			
Intangible assets			
Balanced expenses for computer software	10	3 681 908	0
Tangible assets			
Inventory	11	0	0
Total non-current assets		3 681 908	0
CURRENT ASSETS			
Current receivables			
Other receivables	12	25 078 550	13 445 723
Prepaid expenses and accrued income	13	7 572 203	7 825 440
		32 650 753	21 271 163
Cash and cash equivalents		89 591 518	66 757 335
Total current assets		122 242 271	88 028 498
TOTAL ASSETS		125 924 179	88 028 498
EQUITY AND LIABILITIES			
EQUITY			
Accumulated balance		505 658	505 658
Surplus/deficit	-	171 026	0
Total Equity	14	334 632	505 658
CURRENT LIABILITIES			
Accounts payable		3 371 897	1 841 137
Liabilities MSF projects	15	109 216 130	76 966 960
Other current liabilities	16	5 222 951	3 355 727
Accrued expenses and prepaid income	17	7 778 568	5 359 016
Total current liabilities		125 589 546	87 522 840
		125 024 170	88 020 400
TOTAL EQUITY AND LIABILITIES		125 924 179	88 028 498

CHANGES TO EQUITY

	Accumulated balance	Surplus/deficit	Total equity
Opening balance	505 658		505 658
Surplus/deficit		-171 026	0
Closing balance	505 658	-171 026	334 632