



From the desk of... Joia Mukherjee

Dear Friends,

In January of this year, I had the great privilege to assume the leadership of the Institute of Health and Social Justice (IHSJ) at Partners In Health. In a sense, this brought me full circle in my involvement with PIH. My initial interest in the organization was sparked by a flyer I saw posted for a lecture on "Women, Poverty and AIDS" hosted by a group with the intriguing name, The Institute for Health and Social Justice. I thought to myself, "Wow! There is a group linking poverty and AIDS health with justice! That is a group I need to find out about." The year was 1998, two years after the publication of Women, Poverty and AIDS.



I called the "Institute." Little did I know it was a room and a person. Carole Mitnick answered the phone. She had just completed a fellowship with the IHSJ. "No," she said, "there are no more fellowships." I persisted. I didn't need support, just a group of like-minded people. The notion of the IHSJ was like a beacon to me. A year later I became a Partners In Health volunteer. I've been here ever since, currently in the dual capacity of Medical Director and head of the IHSJ.

Dr. Paul Farmer initially launched the IHSJ in 1993, using the proceeds of his John D. and Catherine T. MacArthur Award (aka "genius award"). The goal, as I understand it, was to create a home for research and discussion about issues that may not sit well in the academic or medical spheres—oppression, structural violence, social and economic inequality and the like.

As PIH has grown, we have asked ourselves, "Is there still a need and a role for the IHSJ. Or could we now have the impact we want in bringing about justice for the suffering through the force of our clinical work at PIH and our academic work at our other three institutional 'pillars' — the Department of Social Medicine at Harvard Medical School, the Division of Social Medicine and Health Inequalities at the Brigham and Women's Hospital and the Francois Xavier Bagnoud Center at the Harvard School of Public Health?" After careful thought and critical review of the goals and accomplishments of the IHSJ, we decided collectively that there is still a critical need for an independent voice that is not neutral but progressively engaged in making a preferential option of the poor heard in corridors of power—the voice of the IHSJ.

Our goal now, in 2007, is to focus the efforts of the Institute on several key areas that are common to our work across the sites and countries where we work, which now includes three countries in Africa as well as Haiti, Peru, Russia, and Mexico.

The first area of focus the IHSJ in the coming years is the inter-

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20th Anniversary Photo Exhibit

ON THE SAME MAP



PARTNERS IN HEALTH

To mark the 20th anniversary of our founding, Partners In Health has assembled an exhibit of 100 photographs depicting our work and the communities where we have forged partnerships with patients and local health workers to combat epidemics of AIDS, tuberculosis, hunger, poverty and injustice.

The photo exhibit will be on display at two sites in Boston through October. After that it will go on the road. From September 20 to October 19 the exhibit can be seen in the President's Gallery at the Massachusetts College of Art and Design, 621 Huntington Ave.

relationship between food, nutrition and health. To this end, we are currently organizing [a major conference on food and health](#) to take place in October. Its goal is to generate consensus to increase donor and political support for integrating food and nutrition interventions as an essential component of efforts to strengthen health services and combat HIV, TB and other infectious diseases.

The second important area of focus is to improve the quantity, quality and compensation of health workers in resource poor settings. Of paramount importance in this effort is fighting for the recognition of the importance of community health workers—and their just financial compensation. To this end, the IHSJ team worked to draft language about the definition and compensation of community health workers in the African Health Workers Act, a United States Congressional Bill that will be put up for a vote this year. Just this week, I had the honor of representing our team at a Congressional hearing, held by the House Committee on Foreign Affairs, to outline the importance of health systems strengthening in PEPFAR. ([Read my testimony here.](#))

The IHSJ's third area of focus is now, as it has always been, to support the struggle for democracy in Haiti. Haiti is the heart of all our work. It is a country that was once the richest "colony" in the world—but was, more accurately stated, a slave plantation. The people of African descent in Haiti (at the time of the revolution, fully two thirds of the slaves in Haiti were African born) were the first in the world to revolt successfully against the institution of slavery. Victorious against Napoleon in 1804, Haiti became feared by powerful countries like the US, France and England, which still relied on slavery and colonies for their wealth. Once-rich Haiti became progressively impoverished by structural forces imposed upon Haiti by these powerful countries; oppression that continues today. The IHSJ is working with allies at the Robert F. Kennedy Foundation for Human Rights, the Bureau Advocats Internationaux and the Institute for Justice and Democracy in Haiti to ensure that Haiti's fight for liberty is someday complete. This year, the IHSJ warmly welcomes Danny Glover—an actor and outspoken advocate for Haiti and the rights of the poor—as the speaker for the [14th annual Thomas J. White Symposium](#). Danny Glover is currently making a film about Toussaint L'Ouverture, the leader of the Haitian revolution.

The Institute for Health and Social Justice plays an active role in advocating for policies and programs that foster a preferential option for the poor. Central to our mission is the knowledge that we must view health as an integral human right, and affirm that the lives of all people whether they are born in the mountains of Lesotho or the now flooded Artibonite valley of Haiti are worthy of justice. The IHSJ seeks to insure that disparities in health are addressed and eliminated; believing that health should not be a privilege of wealthy but be the inalienable right of all human beings.

We invite all of those who are interested in helping the Institute achieve this immodest goal in the years to come. La lucha continua!

In solidarity,
Joia

(Joia Mukherjee, Medical Director and Director of the Institute for Health and Social Justice)

From October 22-30, a scaled-down version of the exhibit will be presented to a scaled-up audience in the concourse at the Prudential Center in Boston. At the end of its run in Boston, PIH plans to send the exhibit to other cities, including New York, Chicago, and San Francisco.

From Students for PIH

What kinds of topics are being discussed on the new Students for PIH listserv? Here is a selection of excerpts from recent posts. To read responses to any of these posts, or to join the discussion, please click [here](#).

I am a senior at a high school outside of Philadelphia. This year I am the all-school community service head. I have read many books and articles published by Paul Farmer and my goal for this year is to bring what I have learned to the rest of my school's student body, and educate them on the importance of health and human rights. Does anybody know any service opportunities in the Philadelphia area or things that I can bring up that people could participate in over vacations?

I just thought I would let you know that I am putting together a trip in collaboration with the service organization ProWorld. The trip will be in Cusco, Peru from December 27th to January 9th. We will be working with the community to do healthcare outreach and awareness... It will be an awesome week of public health advocacy, rural health outreach campaigns, development work, and fun!

I am trying to help get a clinic in Cazale, Haiti hooked up with some grant prospects. They work with a preferential option for the poor model and achieve good health outcomes regularly. Basically we are looking for any funding sources that are taking applications from organizations serving the poor in all areas on health (social etc.). Any leads... would be doing a great service.



PIH

Action Alert

Fast and lobby to cancel Haiti's debt

Partners In Health is calling on friends and supporters of Haiti to join Paul Farmer and other PIH staff in skipping meals and taking action to cancel Haiti's crippling debt.

Jubilee USA Network has organized a 40-day rolling fast to educate the public about debt and to mobilize grassroots pressure on Congress for debt cancellation for Haiti and other countries requiring immediate debt cancellation to address extreme poverty. Find out more and learn how you can help the effort by clicking [here](#).

Annual Partners In Health Symposium - Saturday, October 13

Partners In Health

Boston Haiti Lesotho Malawi Mexico Russia Peru Rwanda

If We Fail to Act:
The Future of Global Health

The 14th Annual Thomas J. White Symposium
Saturday, October 13, 2007

The 14th annual Thomas J. White Symposium will take place on Saturday, October 13 from 3:00 to 5:00 pm in Cambridge, MA. The theme this year is "If We Fail to Act: The Future of Global Health." Speakers will include PIH co-founders Paul Farmer and Ophelia Dahl, and Danny Glover, renowned both as an actor and an activist on behalf of Haiti and social justice.

This event is free and open to the public, but tickets are required and will be available on or after September 29, 2007 at the Harvard Box Office 1350 Mass. Ave., Cambridge, or by phone (617.496.2222). [Click here for more information.](#)

The Students for PIH listserv provides a forum for students who are committed to raising awareness about inequalities, pursuing careers in global health, and promoting social justice. It's a space to ask questions, share ideas, exchange information, and motivate others. Click [here](#) to join.

Quick Links

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A focus on women's health at Haiti's 13th annual forum on health and human rights

With an emphasis on women's health, the 13th annual forum on health and human rights, "Sante ak Dwa Moun," was attended by thousands of people from the Zanmi Lasante family—patients and their families, accompanateurs, teachers, cleaners, nurses, doctors and students. Panels and discussions during the two



Participants in a Zanmi Lasante women's health class

day forum focused on women's issues, including the challenges of increasing family planning coverage across Haiti's Central Plateau, and reducing maternal mortality by improving emergency obstetrical services. Other topics included barriers to access to care for women—particularly in regard to transportation and hospital fees; and domestic violence.

Several officials from the Haitian government announced that they would support the expansion of ZL's model of solidarity, human rights, and healthcare throughout Haiti. In his keynote speech, Haiti's Surgeon General Dr. Gabriel Timothé also said he was very proud to be a part of PIH's global efforts. In a trip to visit PIH's Rwandan partners (Inshuti Mu Buzima) earlier this year, he said that he felt the spirit of Cange, ZL, and Haiti at the Rwinkwavu site, and he was very enthusiastic about the partnerships he saw there.

As a show of partnership and solidarity, several colleagues from Inshuti Mu Buzima, PIH's partner organization in Rwanda, were able to attend the conference to share how the lessons from Haiti were guiding the sites in Rwanda.

For a full report from the 13th annual Cange Forum on Health and Human Rights, [please click here](#).

Breakthrough in Bobete – men's clinic encourages HIV testing and treatment in Lesotho

The PIH project in Lesotho scored an important breakthrough in mid-September in its efforts to bring universal HIV prevention, testing and treatment to remote mountain communities. The Bobete health center organized its first clinic session designed specifically to encourage participation, education and testing for men.

The response exceeded their hopes, expectations and supplies of testing materials. 150 men showed up for the clinic. And at the end, 120 of them asked to be tested. That's more men volunteering to be tested in one day than the health center had averaged for each month through the first half of the year.

The reluctance of men to get tested – or even to seek health care - has been a major obstacle to rolling out HIV prevention and care in Lesotho. Through the end of July, more than twice as many women had been tested as men, even though the percentages of men and women who test positive are virtually identical.



Patients waiting to get tested for HIV at the Bobete clinic

To read the full story, [please click here](#).

PIH plays active role at meetings of the Global Fund and the Stop TB Partnership

PIH staff participated in a pair of important international conferences in Tbilisi, Georgia, in mid-September, aimed at strengthening regional and international efforts to combat HIV/AIDS and tuberculosis.



PIH Medical Director Joia Mukherjee with Michel Kazatchkine of the Global Fund

About 350 medical experts attended a regional meeting of the Global Fund to Fight AIDS, Tuberculosis, and Malaria. This three-day conference was for the region of Eastern Europe and Central Asia, which includes programs run by PIH's partners in Russia. The purpose of the meeting was for attendees from countries with Global Fund grants to discuss strategies of implementing grants, share experiences, and receive updates on performance monitoring from the Global Fund.

On September 20, the day after the Global Fund conference, several PIH staff remained in Georgia to attend a meeting of the Stop TB Partnership, an international partnership of organizations committed to eliminating TB. This particular meeting was for a special working group that focuses on MDR-TB (multidrug-resistant TB). About 200 TB specialists from around the world met to discuss their projects, share experiences, and set new goals for scaling-up MDR-TB treatment.

A plan was presented that would provide universal access to MDR-TB treatments—an ambitious goal of treating 1.6 million patients by 2015. As only 40,000 of the estimated 420,000 MDR-TB patients currently receive proper treatment, the plan would significantly scale-up programs around the world.

[Click here to read the full story on the PIH website.](#)

Salmaan Keshavjee named to head of international Green Light Committee for MDR-TB

Dr. Salmaan Keshavjee, Deputy Director of the PIH project in Lesotho, has been elected to serve as the new chair of the Green Light Committee, an international partnership of organizations that promotes access to and the wise use of drugs to treat multidrug-resistant TB (MDR-TB).



Dr. Salmaan Keshavjee

Based at the World Health Organization (WHO), the Green Light Committee (GLC) was established to evaluate proposed programs for treating MDR-TB patients, and to help link programs with the technical assistance needed to improve their chances of success. Once programs have been approved, the GLC then links them with the Global Drug Facility (GDF), which helps them procure drugs at discounted prices. The GLC ultimately provides on-going monitoring and evaluation, with the aim of helping programs expand their treatment of MDR-TB.

PIH has long been a member of the committee. In fact, PIH co-founder Jim Kim was a founding member of the GLC in 2000 and served as the very first chair.

“PIH is excited to be at the helm again,” said Dr. Keshavjee, who is also a physician at Brigham and Women’s Hospital and Assistant Professor at Harvard Medical School. “One of the major roles of the GLC is to advise the WHO on MDR-TB policy. [The chair] plays an important role in this. It doesn’t guarantee that all the partners will get exactly what they want, but it gives PIH the platform and opportunity to share our vision of MDR-TB scale-up within the international TB community.”

To read more about Dr. Keshavjee’s plans for the GLC, [please click here](#).

Dateline PIH: Project updates from all over

Lesotho: PIH’s project in Lesotho recently started treating patients at a fourth mountain health center, Lebakeng. The team decided to open the new clinic ahead of schedule in order to provide urgently-needed services to several HIV-positive pregnant women, including measures to help the women lower their risk of transmitting the virus to their babies. In its first day, the clinic enrolled 7 patients on antiretroviral therapy, and tested 29 people for HIV. Despite difficulties in organizing logistics for the clinic (as it is about five miles from the closest road), the team and the community are enthusiastic. “It promises to be a busy site, but the patients are very excited we are there,” said Country Director Jen Furin.

Lesotho and Peru: In a testimony to the strength of PIH partnerships, a group of clinicians from Socios En Salud (SES, PIH’s partner organization in Peru) crossed the ocean to help share their vast experience in treating MDR-TB with the new Lesotho staff. The SES team will rotate through several sites around the country, training

local clinicians in management and community-based treatment of MDR-TB and preparing them to become trainers themselves and pass their knowledge on to other health workers. With about a decade of experience, the Peruvians have many lessons to share with their partners in Lesotho.

Haiti: "Literacy is for us all," proclaimed the t-shirts of hundreds of people, as Zanmi Lasante celebrated International Literacy Day. The day also honored the successes of the Zanmi Lasante

Alphabetization program (Zanmi Alpha), which was started in 2003 to contribute to improving the country's literacy rates. Crowds of participants sang, danced and marched their way to Cange to take part in community discussions highlighting strategies for improving access to education, especially in the Central Plateau, and to demonstrate the importance of integrating



A Zanmi Alpha adult literacy class in Haiti

education and health initiatives. Zanmi Alpha currently provides resources to over 60 literacy training centers across central Haiti. Last year about 3,000 people took part in literacy programs.

Malawi: According to a Haitian proverb, giving a patient medicine without food is like washing your hands and drying them in the dirt, especially for wasting diseases like HIV and TB. Taking this lesson to heart, our partners in Malawi recently launched a nutrition program to distribute food to all TB patients, all pregnant women with HIV, and all HIV patients on antiretroviral therapy. In the first week of the program, more than 60 patients were enrolled, and by the end of the first month, more than 200 patients were receiving food assistance.

Peru: Last month, an earthquake measuring 7.9 on the Richter scale rocked through Peru, leveling 85 percent of buildings in the coastal town of Pisco and surrounding towns. Immediately following the earthquake Socios En Salud (SES), our Peruvian sister organization, quickly organized a team to help relieve some of the devastated people of the region. The team also began searching for the approximately 115 MDR-TB patients, to ensure that they have the support they need to continue the rigorous daily drug regimen to control and cure the disease. In subsequent weeks, two more teams of SES staff and volunteers joined the search for other patients in the areas around Pisco. The teams have made contact with almost all of the patients, and provided them emergency supplies such as food, water, blankets, and clothing. Ninety percent of patients' houses are now uninhabitable, and many lost family members during the earthquake and its aftershocks. A fourth team is planning to return to affected areas this week; they will follow up with patients and continue to search for those they have not found. If you would like to make a donation, or read more about SES's earthquake relief efforts, [please click here](#).

Rwanda: A new agricultural project at Rwinkwavu hospital is providing an opportunity for 100 HIV patients both to supplement their

nutrition and income and to learn farming skills. A group from the nearby Kibungo University will lead the group in cultivating soy, maize and peanuts on over four hectares of land. A portion of the food will be consumed by the patients and their families, and the rest will be sold in local markets.

PIH's partners in Rwanda will also begin supporting job training and general health care programs for inmates at Nsinda prison in the southeastern corner of the country. The prison is in dire need of help, with only one nurse caring for over 11,000 prisoners, including at least 200 HIV patients who need ARV treatment (of whom only 23 are actually receiving the medications). The program will help provide a number of services, including supplying ARVs, TB medication, consultations, lab exams, food, blankets, and job training skills for carpentry.

Boston: The Boston-based program PACT (Prevention and Access to Care and Treatment) was recently awarded a research grant worth \$130,000 over two years from the National Institute of Mental Health. The grant was an "R21," intended to encourage new exploratory research projects in the early stages of development. This study will focus on community-based participatory research, and will help PACT create a Community Advisory Board to review and comment on all research activities from a community perspective. The study will also help finalize PACT's health promotion curriculum, which coaches adherence to HIV medications for PACT patients.

Russia: PIH recently organized training in St. Petersburg for 52 MDR-TB doctors from throughout the European region of the Russian Federation. Russian and international experts led sessions on the treatment of MDR-TB in line with international guidelines. The course emphasized practical implementation of MDR-TB programs in the Russian setting, and was accompanied by robust debate and discussion, particularly on aspects of TB infection among pediatric, diabetic, and elderly populations. With the completion of this training, representatives from all 88 regions of the Russian Federation have now been trained at PIH-led trainings over the past two years. Encouraged by the successful conclusion of the ambitious training program, PIH's partners in Russia are currently planning the next steps to ensure that the territories have adequate follow-up and resources.