



From the desk of... Perry Dougherty

Dear Friends,

On October 13, 2007, we held our 14th Annual Thomas J. White Symposium, entitled, "If We Fail to Act: The Future of Global Health." Sanders Theater at Harvard University was packed to the rafters, and many attendees have told us that the event was a great opportunity to learn about Partners In Health, become engaged with the issues of health and social justice, understand the key challenges to achieving global health equity, and come away inspired to take action.



Personally, I think my involvement in the planning and execution of the event prohibited me from relaxing enough to fully absorb the intricacies of each presenter's message. And with a program that included Ophelia Dahl, 20 of our colleagues from PIH sites around the world, Melinda Gates, Paul Farmer, Danny Glover, and Jim Yong Kim, I had hoped to soak up every ounce of what was said.

But two weeks later, having had adequate time to process the success of the event and everything it took to make it happen, I think I have realized something very important about the work of Partners In Health: Storytelling, informed by the experiences of our patients, their families, and the communities in which they live, has amazing transformative power.



Actor and activist Danny Glover speaking at this year's annual symposium

Months ago when we began planning the symposium, we consciously crafted the event in a way that we hoped would bring our work in Haiti, Lesotho, Malawi, Mexico, Peru, Russia, Rwanda, and inner city Boston to the 1200 people filling Sanders Theater. And during the symposium, it seemed that the theme of storytelling penetrated every presentation—through the sharing of specific stories using visuals or testimonials, through a reflection on the power of stories in the media, and through the consideration of formal case studies as a way of narrating stories (of success and failure) for future generations.

Certainly, storytelling is not new to Partners In Health. For years, our leadership has been moving seamlessly between our sites and the halls of power

in Washington, D.C., Geneva, and elsewhere. And all along the way, they have been telling stories that have influenced the world.

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From Students for PIH

What kinds of topics are being discussed on the [Students for PIH listserv](#)? Here is a selection of excerpts from recent posts.

I don't understand why a PIH club has to function just to send money. What about establishing a group that works to spread awareness concerning the issues that PIH addresses such as global inequality, social justice and solidarity? [...] I am a student at Portland State University struggling along in what they call the "premed track." There are more



Paul Farmer translates for Marie Flore, a site representative from Haiti

The [story of how Socios En Salud in Peru defied accepted medical wisdom](#) and proved that multidrug-resistant TB could be treated and cured in the shantytowns of a developing country helped change global policies and stimulate the creation of organizations like the Global Fund to Fight AIDS, Tuberculosis and Malaria and the Green Light Committee. The [story and photos of a skeletal Joseph Jeune](#) restored to smiling good health helped convince the world that it is both medically negligent and morally unacceptable to withhold antiretroviral therapy from people with AIDS, no matter where they live or how much they can pay.

After being a part of this year's symposium, I have no doubt that Partners In Health will continue to share its stories as we work to build a movement for health and social justice and to establish access to quality health care as a fundamental human right. Somebody recently asked me what I did for a living, and when I told him that I was an Executive Assistant, he responded, "But what do you do?" Now, instead of simply saying, "I schedule meetings, take messages, book travel, prepare documents, file papers, make to-do lists, coordinate events, etc., etc.," I realize that I can actually say something much more meaningful. Whether by coordinating an event, scheduling a meeting, preparing documents, or answering the phone, the role of our administrative staff in Boston is clear to me: in addition to making sure Partners In Health can continue to provide quality health care to people who have none, we share the stories of our patients with as many people as possible. By doing that, we are helping to change the world.

--Perry Dougherty
(Executive Assistant for Ophelia Dahl)

Botsabelo Hospital opens its doors

"Botsabelo Hospital opened today humbly and with little fanfare but with a beehive of activity and dedication to patient care," Dr. Jen Furin wrote from Lesotho at the beginning of October.

A former hospital for leprosy patients, the new facility has been renovated, re-stocked, and is now dedicated to treating patients with multidrug resistant tuberculosis (MDR-TB), especially those also co-infected with HIV.



Beds in the newly renovated Botsabelo hospital are ready for patients

than 800 pre-health students here. I found it ridiculous that there were no groups at this large university that focused on either social medicine or global health. The only thing that I found was a "pre-health society" that basically is a mechanism for pre-health students to get ahead in a personal way. I mean, that is fine, but why is there so little student action? [...] I guess I just feel like there is such incredible potential among students in today's global health economy to really create positive dialogue and change.

There are opportunities for student activism that affect tangible, sometimes immediate change that reverberate across the world, including in developing countries where Partners In Health works [...] I've personally been involved with campaigns against Gilead Sciences (San Francisco) and Abbott Laboratories (Chicago) to increase their access to antiretrovirals. Because of student-based, organized and run actions across the nation (organized on listservs like this), Gilead Sciences agreed to allow generic competition of their drug, Tenofovir, as well as license it royalty-free for microbicides research within one year. When we started our campaign, Abbott's antiretroviral was available only in a handful of countries for the developing world price of \$500 per patient per year, while the rest of

"It was incredible to see the center and the amount of energy and dedication that has gone into creating this place and it has been the work of many hands," continued Dr. Furin.

PIH's partners in Lesotho hope that the hospital will soon become the core facility for a center of excellence in the management of MDR-TB/HIV co-infection. By the end of October, 18 of the 24 beds in the hospital had been filled with patients who "are very sick but stable," according to Dr. Hind Satti of PIH. Another 18 patients had been diagnosed with MDR-TB and are receiving community-based treatment.

Botsabelo Hospital is the latest addition to Lesotho's MDR-TB treatment arsenal backed by PIH and [a grant from the Open Society Institute](#). In addition, renovation of a national TB laboratory is nearing completion and a national training program for health workers caring for patients with the disease is well underway, buoyed by a visit from a team of MDR-TB experts from PIH's Peruvian partner organization, Socios En Salud.

"Just a year ago, policy people were not only saying that there was no MDR-TB in Africa but if there was, it would be impossible to treat," wrote Dr. Furin. "PIH has brought its usual energy and compassion into making high quality and dignified care available for the MDR-TB patients here and it is no exaggeration to say the Lesotho MDR-TB program is an inspiration to many of us," she added.

Conference participants seek out the intersection between health, nutrition, and food security

In [last month's e-Bulletin](#), Dr. Joia Mukherjee described the current projects and issues of the Institute for Health and Social Justice (IHSJ) at PIH. On October 11 and 12, the IHSJ revived its annual conference with a meeting attended by over 130 persons that focused on the [intersection between food security, nutrition and health](#). Attendees came from across the globe, representing all PIH field sites, several multilateral institutions, NGOs, academic and research organizations, and foundations, to establish a strong case and mobilize a coalition to fight for greater allocation of resources and changes in policy to integrate programming of food security, nutrition and health.

Profound hunger, malnutrition and food insecurity remain major health problems in places of extreme poverty, despite the past 50 years of programs in public health, agricultural development, and nutritional support. In fact, hunger and malnutrition are responsible for the majority of child deaths from endemic diseases (such as diarrhea, malaria and pneumonia) in poor countries.

Of particular importance at the conference was documenting and sharing the linkages between nutrition, agriculture, and health programs. Often, these areas of expertise remain compartmentalized, with each area addressed by policy makers or by those few persons in charge of international aid, not by an interdisciplinary team of field workers, or even members of the affected communities.

the world other than the U.S. averaged \$5,000 per patient per year. Within 1.5 years of starting since a student-organized, run and led campaign, Abbott's price has dropped to \$1,000 per patient per year across the developing world, access has increased to over 100 low-income countries and a heat-stable pediatric formulation has been developed.

Who out there is really excited about the proposed reforms to the farm bill?!?!? I sure am. Right now, the farm bill directly contributes to global poverty because it subsidizes domestic agricultural production which hurts the ability of foreign producers to compete in the international marketplace. Luckily, the farm bill is up for revision this year and we have the opportunity this year to change a U.S. policy that is directly contributing to global poverty by ending the domestic subsidies. If these reforms pass, I think it will definitely be a huge positive step towards a more equitable international economic system... that's definitely something to write Congress about!

The Students for PIH list-serve provides a forum for students to raising awareness about inequalities, pursue careers in global health, and promote social justice. It's a space to ask questions, share ideas, exchange information, and motivate others. [Read responses to any of the above posts, or join the discussion.](#)

One goal of the conference was to elicit responses that address the structural underpinnings of these problems, with the goal of developing a set of concrete recommendations for programs and policies that can break the cycle of food insecurity, malnutrition, disease and death.

Presentations were slotted into four different thematic sessions:

- **Food as Treatment**
Food as an integral component of disease treatment: Presentation and discussion of successful nutritional interventions with measurable impact on the incidence and severity of specific diseases
- **Linking Nutrition, Health and Agriculture**
Linking soil, plant and animal nutrition using practical examples of how to forge some of the needed linkages between the nutrition, health and agriculture sectors.
- **Food as Prevention**
Nutritional interventions as a “vaccine” to reduce morbidity and mortality: Presentation and discussion of successful nutritional interventions with measurable impact on the incidence and severity of specific diseases. Food security as population-based risk mitigation: Presentation and discussion of demonstrated decreased disease risk with improved food security
- **Policy, Funding and Programming**
The role of local production and sourcing of food aid; resource allocation to foster integration of health and nutrition programs; and greater efforts towards increased food security for the most vulnerable populations.

[All presentations are now available for download in PDF format on the PIH website.](#)

The policy panel concluded with a passionate call for significant additional resources for improving food security and integrating food and health programs by PIH co-founder Dr. Jim Yong Kim. He suggested that we “square the M” on the GFATM (the Global Fund to Fight AIDS, Tuberculosis and Malaria) by adding a second M for malnutrition as one of the key health problems for the Global Fund to fight.

Finally, Dr. Mukherjee concluded the conference with a draft statement listing a few key problems and tasks for conference attendees and other interested parties to first agree upon and then work together on solving. The conference statement has been shared with attendees by email and will be finalized by December 1st.

Faculty and staff of the Friedman School of Nutrition Science and Policy of Tufts University and the Francois Xavier Bagnoud Center for Health and Human Rights at the Harvard School of Public Health collaborated closely with IHSJ staff to organize this successful event. We look forward to continued cooperation with the new partners we gained through the conference and to increased and sustained efforts to reduce the burden of hunger, malnutrition and disease around the world.

Student conference explores the nitty-gritty of activism

Students of all ages from across the country came together for PIH's first student conference, titled "Guts, Glory, and Global Health: The Nitty-Gritty of Student Activism." The one-day conference at Tufts Medical School was coordinated by a group of students on behalf of PIH, and was held in conjunction with PIH's annual symposium. The conference emphasized student networking and reflecting on why it is we do the work we do.

Representatives from program sites in Peru, Mexico, Rwanda, and Malawi also attended, bringing their perspectives on how to initiate social change. Dr. Blaise Bucyibaruta, assistant director of the Pediatric Program at Inshuti Mu Buzima (PIH's partners in Rwanda), eloquently voiced his fond memories of his days as a medical student when he worked with students from around the world on initiatives for social change. He urged students at the conference to find their passions and figure out how they can use them to advocate for social justice.

Other presentations included: "(Re)Defining Advocacy—Not Just Writing Your Senator," "Remembering the 'Student' in Student Activism," "Bird-Dogging: Global Health and the '08 Elections," and "Local vs. Abroad—How Do We Decide Where We Will Serve?"

One of the highlights of the conference was a panel of college students who had already devoted a great deal of their college careers to issues of global health—Dave Ryan, the current executive director of [Face AIDS](#); Peter Luckow, the founder of [Globe Med](#); and Connie Chung, of Harvard's chapter of [Universities Allied for Essential Medicines](#). The students gave inspiring talks about how they were utilizing the resources and knowledge base they have available to them at their universities to create innovative ways to engage more students, university administrators, and community members in the global health movement.

The afternoon concluded with a reflection time—a time to think and talk about what pragmatic solidarity means for each student present, a time to brainstorm what it is each of them hopes to do, and a time to share reactions from the day. "We hope that the conversations started at the conference will be shared with others and that the dialogue will lead to pragmatic action," said Cate Oswald, one of the organizers of the conference.

For materials presented at the conference and more ways to engage with students involved in the growing health and social justice movement, please subscribe to the [Students for PIH listserv](#).

Volunteers help Arcade Fire raise money and support for PIH

Canadian rock band Arcade Fire has helped support PIH projects since early 2007. In addition to raising close to \$80,000 from ticket sales for PIH in their latest tour, the band decided to recruit PIH volunteers to help spread ideas of global health and social justice to their indie rock following at their concerts.

The volunteers talked to concert-goers about the work of PIH, handed out information, and collected extra donations. Overall, they were met with a very warm reception from the band's fans. "People (at the concert) really did seem interested to talk to us after the concert about PIH - which might have had a little something to do with the Arcade Fire talking about PIH on stage," said one volunteer from the concert in Columbus, OH.



Students volunteer at an Arcade Fire concert in Kansas City, MO

The band makes a point to explain to people why they support PIH at some point during their set. Haiti has special meaning to the band--lead singer Régine Chassagne's family emigrated from Haiti. After reading *Mountains Beyond Mountains*, she and her husband (lead singer Win Butler) decided to use their musical talents and growing international fame to support the work of Partners In Health in Haiti. Butler also often writes the Haitian proverb *sak vide pa kanpe*, or "that which is empty cannot stand up" in tape on his guitar, accompanied by a version of the four hands PIH uses as its logo.

The band also designed and sold t-shirts to support PIH, and printed posters explaining PIH's work in Haiti and Arcade Fire's connection with the work. Collectively, the events raised an additional \$15,000 in donations and t-shirt sales, and volunteers handed out over 40,000 posters.

High school teacher Matt Cone organized a group of volunteers from his students at Rock Bridge High School in Columbia, MO. His students had the greatest fundraising success at the Kansas City concert on September 28, raising over \$1,300 in donations. "We had such a great time helping and it made us feel good to do something for a cause instead of just reading about it!" wrote one student. Cone uses Partners In Health to teach about social justice issues in his classes.

The success of this project in the United States led the band to extend it to the next European leg of the tour, which is currently going on. Arcade Fire's fan base is larger in Europe than in the United States and the next concerts will bring in even more support

for Partners In Health in the coming months.



Photo by Steve Cohen

For more about Arcade Fire please visit www.arcadefire.net.

Governor Deval Patrick appoints Joia Mukherjee UN Day Chair



PIH Medical Director Joia Mukherjee delivers the keynote address at UN AIDS Day at the Massachusetts State House

Massachusetts Governor Deval Patrick recently appointed PIH Medical Director Dr. Joia Mukherjee as the state's United Nations Day Chair.

The appointment carried the responsibility of delivering the keynote speech at the United Nations Day Celebration at the Massachusetts State House. Dr. Mukherjee used the occasion to highlight several of PIH's projects, as well as the organization's philosophy of "sustainability," a buzz word in the field of international development. One criticism often lobbed at PIH is that its projects are not

"sustainable," said Mukherjee, as the traditional view of a successful development projects is to have it be self-sustaining after the development organization leaves. "[But] we're global citizens and we're not leaving. We're in this together. You don't exit from humanity," countered Dr. Mukherjee. "You don't have an exit strategy." The only thing that is truly self-sustaining is entropy, she added.

"If you teach people to fish, then they can fish for a lifetime," she said, quoting a common sentiment of sustainable development. "But in fact, if the rivers are dry, and there are no fish, and you have no fishing pole, you can't learn to fish," she said.

This year's UN Day focused on fighting AIDS, malaria, and other infectious diseases, also known as the sixth of the Millennium Development Goals (MDGs). Established at the UN Millennium Summit in 2000, the MDGs call for significant progress by the year 2015 toward eradicating poverty and hunger, achieving universal primary education, promoting gender equality, reducing child mortality, improving maternal health, combating disease, ensuring environmental sustainability, and developing a global partnership for development.

About 100 people attended the celebration, including students, government officials, and representatives from local organizations such as Fenway Community Health Center, Women of Color AIDS Coalition, and Communities Without Borders.

Zanmi Lasante organizes support groups to help children and their HIV-positive parents

Smiling radiantly, a two-year-old child follows her HIV-positive mother to the clinic. As long as the child is cared for and fed, she is oblivious to the struggles of her parent. One is struck by the "resiliency" of such children, writes Dr. Joia Mukherjee. Yet developmentally, the indomitable spirit of youth is eroded by the stresses and anxieties

of their parents, and many children take on preoccupations of their own. As adolescents, such children often become isolated by the loss of their parent, the inability to go to school, and the economic collapse of their families.

Zanmi Lasante (ZL) recently began implementing a curriculum for psychosocial support groups for adolescent children living with this heartbreaking reality. The project, "Tout timoun se moun" (every child is a person), was designed to reach out and provide intensive social support for children affected by HIV. The project is funded by the National Institute of Mental Health to help develop a psychological support system for these children.

After months of collecting and analyzing quantitative questionnaires to determine baseline levels of depression and anxiety in HIV-positive parents and their adolescent children in the central plateau of Haiti, Zanmi Lasante recently launched the first support groups using the new curriculum. Phase one of the groups involved HIV-positive parents discussing ways of coping with their own illness, emotions, and relationships with their families. "This session has changed how I will look at myself in the future and how I will treat others," commented one participant in a focus group conducted after a session on learning to cope with anger. "I no longer live in fear of what tomorrow will bring," said another parent.

Encouraged by the positive response, ZL began the next phase of the program in September. In these groups, parents have shifted from talking about how they cope with their illness to how they can better support their children. Additionally, their adolescent children (ages 10-17) began attending groups of their own to discuss ways that they can better cope with their parents' illness. Over the next year, ZL hopes to expand these groups and provide opportunities for more children and their parents to become involved. Currently about 220 children who were deemed most "at risk" of severe levels of depression and anxiety are involved in the groups. An additional 270 children enrolled in the study are receiving individual follow-up from social workers at six of ZL's hospitals.

Dateline PIH: Project updates from all over

Rwanda: Inshuti Mu Buzima (IMB), PIH's partner organization in Rwanda, has accomplished a great deal during its first two years of work in two destitute rural health districts, recording nearly 100,000 patient visits in 2006. Not content to stop there, IMB and their partners in the Rwandan Ministry of Health and the Clinton Foundation have now committed themselves to an even



Children in Rwanda recreate the PIH logo

more daunting and inspiring challenge—to make IMB’s approach to delivering comprehensive, community-based care the model for Rwanda’s national Rural Health system. Plans have already been drafted to extend the model first into four districts most in need of services and then to all 27 districts and nine million residents of rural Rwanda. [Read more about this exciting development.](#)

Lesotho: A famine currently threatens many communities in Lesotho, especially in the rural mountain regions where PIH’s partners work. In recent weeks, PIH has become the primary agency responsible for providing therapeutic feeding to children affected by the food crisis in these communities, with clinics serving more than 250 children and their families. With help from Lesotho’s Ministry of Health and the World Food Program, PIH has also been enrolling families in emergency food assistance programs, using the infrastructure originally built for treating HIV patients with ARV to distribute food to malnourished patients.

PIH also recently began providing medical support to Jewels of Hope, a group working with orphans and street children in Lesotho’s capital city of Maseru. The volunteer-run group provides the children with social support, teaches them to make jewelry, provides raw material for the jewelry, and helps them market their wares internationally. The project offers a means of generating an income for the children and their families. PIH will supply the children with a stipend for school, clothes, and nutritional support, in addition to providing free health care. [Learn more about Jewels of Hope.](#)

Peru: Epidemiologist Mercedes Becerra, who works with PIH and Harvard Medical School’s Program in Infectious Disease and Social Change, has been awarded a grant from the National Institutes of Health that will provide funding for the most comprehensive study of multi-drug resistant tuberculosis (MDR-TB) in Latin America to date. A team comprised of staff from Socios En Salud (SES) will collect data from over 25,000 TB patients and their families over the next five years. Because no data comparing drug-sensitive and drug-resistant TB currently exists, it is not known whether MDR-TB is more contagious than other, less deadly forms of the disease. By monitoring treatment and follow up to both MDR-TB and drug-sensitive TB patients in metropolitan Lima, the project will not only provide care, but also compile important information about the disease and its transmission in a low-resource setting. The team will also be able to distinguish between relapses (with the same strain of TB) and re-infection (with a different strain of TB), which will help SES staff become better equipped to provide patients with appropriate medications with fewer delays. The study will not only serve patients, but will also serve to guide research in tuberculosis diagnostics and treatment globally.

Malawi: The Nsambe Health Center sits in the highlands of Malawi near the border with Mozambique, hours from the nearest paved road. This month, it became the most recent facility to join a partnership with APZU (PIH’s partners in Malawi). The center cares for a region of 13,000 people. Renovations and equipment procurement are underway, including running water, solar power, and a new laboratory. The local community has responded to the new partnership enthusiastically, said Dr. Keith Joseph, PIH’s country director for Malawi.

Boston: PACT was recently awarded a grant from the U.S. Office of Minority Health for a project called "Eliminating Health Disparities." As part of the grant, PACT will partner with the AIDS Action Committee of Massachusetts and Boston Healthcare for the Homeless. The two latter organizations will refer patients to PACT, which will provide health promotion interventions. On their side of the partnership, the AIDS Action Committee will support PACT's patients with increased case management and social service referrals, and Boston Healthcare for the Homeless will help provide funding for a nurse to work with PACT. PACT will also be working with the two organizations to develop a strong coalition around community health workers and continue to improve health care utilization patterns for the patients they serve. The grant will provide \$750,000 over three years.

Russia: Last month, PIH's partners in Tomsk, Russia, began improving on a Home Treatment program for TB patients with problems adhering to the strict medication regimens needed to cure the disease. The program was based on "Sputnik," PIH's patient-centered model started last December in Tomsk for patients struggling with alcoholism, drug use, mental



illness, poverty, or other issues that hamper treatment adherence. Like the Sputnik program, which has successfully treated 23 of 26 patients, the new and improved Home Treatment program will feature an additional team of health workers visiting the patients at the patients' convenience to encourage drug adherence. The added staff will reduce the number of patients for whom each health worker is responsible, allowing them to make longer visits and forge stronger relationships with each patient, reported Dmitry Taran, the program coordinator in Tomsk. One big problem of the old Home Treatment program was that health workers were only able to spend a few minutes with each patient due to a large number of assigned patients. Using feedback from Sputnik, the new program will also have a team of health workers exclusively devoted to visiting patients in the evening. The day-time teams will pass along information on the patients who missed doses during the day visit to the evening team, which will check back with these patients and help give them the extra support they need, said Taran. Like the Sputnik program, the new Home Treatment program will also provide psychosocial support such as food, legal assistance, housing assistance, educational opportunities, and treatment for alcohol addiction. Currently, about 60 patients have been enrolled in the new program.

Haiti: Zanmi Lasante's annual report to PEPFAR (the US President's Emergency Program for AIDS Relief) includes some eye-catching numbers. An additional 1,103 people started antiretroviral therapy (ART) during the 12-month period that ended September 30, bringing the total number of patients on ART to more than 3,100. 72,619 people received counseling and testing for HIV during the course of the year, including 21,277 pregnant women. In addition, ZL helped pay school fees for 6,647 orphans and vulnerable children (children infected/affected by HIV) and trained 687 healthcare workers in Haiti.