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Doctors for Global Health Reporter

The story below about the work of José Ramiro Cortez Argueta, one of the first post-war health promoters trained in Morazán, El Salvador, illustrates the importance and results of one of DGH's guiding Principles of Action: Long-Term Accompaniment of Communities.

ONE OF THE FIRST HEALTH PROMOTERS IN EL SALVADOR CONTINUES THE STRUGGLE

By Shirley Novak

for Human Development), and its very capable Executive Director, José Ramiro Cortez Argueta. Born and raised amidst poverty of the area that included malnutrition and food scarcity, lack of health services, education and economic resources, Ramiro took advantage of every opportunity available that would guide and mold him toward the leadership role he holds today. Joining the FMLN as a teen, trained as a community health promoter after the civil war ended in 1992 (by volunteers who founded DGH), Ramiro was instrumental in forming CDH in 2001, which became a legal entity in El Salvador in 2004. As Director, he and CDH incorporate a Human Rights perspective in all aspects of their work, moving forward with the people of Estancia and its neighboring *caseríos* (hamlets).

A visit to the community this past February allowed me to witness recent progress made in the CDH communities in Morazán, El Salvador. A multi-disciplinary approach to CDH projects focuses on the right to dignified housing, adequate education, food security and health care. The community's first *kinder* (pre-school), built in 1995, was just replaced when CDH secured

Over DGH's 20-year history, articles have been written by volunteers and board members about our Salvadoran partner, *Asociación de Campesinos para el Desarrollo Humano* (CDH – Association of Peasants

“ Ramiro took advantage of every opportunity available that would guide and mold him toward the leadership role he holds today. ”

funding (largely from Fundación Gloria de Kriete) to construct a new building in Tierra Blanca, addressing the education of children aged 2-6. At a recent meeting with CDH board members, Ramiro stressed the importance of member presence at the upcoming inauguration of this new *kinder*. Invitations had gone out to numerous community, NGO and government groups; it would be an opportunity for CDH and its work to shine! All were to show up in their CDH-logo shirts to welcome and mingle among the invited guests.

With a \$10,000 donation to DGH by a long-time donor, CDH has recently broken ground on another project: a new kitchen/education center to replace the existing clinic kitchen, built as a temporary facility some 15 years ago. The



construction will provide an educational opportunity for youth in the community to learn and develop skills, as Ramiro envisions incorporating a newly formed youth group into the process, another example of Ramiro's ingenuity: hire a "master builder" to coordinate the work and teach the young people to carry out all aspects of the construction. Thus, more young men and women will learn life-long skills that will serve them well for potential jobs and home improvement. This same model has been used in Estancia with past projects from building bridges, latrines and houses, to tables and chairs for the community library.

With more members of the FMLN political party in office, some measurable progress has come to rural communities in recent years, but life remains a struggle for many subsistence farming families in the area. Basic food contributions and money supplements from the UN World Food Program, the Salvadoran government and other resources have been up and down over the years. Ramiro and CDH continue to accept the challenges of providing a hot meal to children in the *kinders* and schools each day, to seek funding to replace dirt floor shelters with dignified houses for those most in need in Morazán, and to provide basic health care "closer" to home in the CDH CAIPES clinic with DGH volunteer help.

I asked Silvia Martinez, Ramiro's *com-*

pañera (partner), where his vision toward social justice comes from. Silvia shared her understanding: Ramiro's mother died when he was four years old, "from anemia likely caused by malnutrition." She reminded me that there was no health care available in these isolated communities at that time. Soon afterward Ramiro's grandmother, who was raising him died; there was no father around. "At times Ramiro had no food to eat at all." Strongly affected by poverty, hunger and war, this orphan followed the path of social justice. "A child alone, malnutrition and the war... He suffered a lot as a child, and he has followed the path of social justice to make things better for others ever since."

“**Ramiro envisions incorporating a newly formed youth group into the process, another example of Ramiro's ingenuity: hire a "master builder" to coordinate the work and teach the young people to carry out all aspects of the construction.**”

Silvia continued, "Ramiro dedicates himself to CDH; he spends a lot of time in the [CDH] truck as a driver [delivering patients to hospital, networking all over El Salvador, and purchasing supplies for CDH]. I think that another Director would expect the organization to hire a driver... Ramiro dedicates more time to

work than the family; he's very dedicated, very involved in his work... Sometimes my daughter and I are at home alone con *miedo* [with fear] but we understand why he dedicates so much effort and time to CDH and the community. Ramiro is very responsible."

CDH Administrator, Santos Victorino Sánchez Martínez, shared these words of praise for his colleague: "I have worked together with Ramiro since the beginning when our *Asociación* was formed. As CDH leader, Ramiro works with transparency; for this reason, CDH has advanced a lot. Ramiro always has been seen as a person of principles and values. The proof is that CDH now receives very important recognition, in large part because Ramiro has always done things very openly."

Lucía Sánchez Martínez, Coordinator of CDH, recently credited the many accomplishments of the group to Ramiro's management. "He is very intelligent, responsible, and has gained a great deal of experience over his 12 years with CDH, which is characterized through his work with and for the people of Morazán."

Thinking back on my twenty-plus years of connecting with Ramiro – always forward-thinking, a real visionary – I've learned that he's most comfortable at home resting in his hammock, catching up on *noticias* (news) on TV at the end of a long day. Before TV came to the house, he was a faithful listener of radio news. Ramiro was always happy to discuss recent events in El Salvador as well as happenings around the globe. A few years back, I attended a meeting where CDH *educadoras* (pre-school lay teachers) were admonished for not keeping up on the latest news in El Salvador. Ramiro

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PHOTOS: FRONT PAGE: Ramiro (left) at the 2014 DGH General Assembly in Chiapas, Mexico, with poster on UN Declaration on the Rights of Indigenous Peoples. LEFT: Ramiro (left) and Abraham in early years as health promoters, making house calls to remote areas of Estancia on horseback. RIGHT: Ramiro (bottom right) and other health promoters (and Shirley Novak left) on steps of the clinic in Estancia, El Salvador.

AT THE LIBERATION-BASED HEALING CONFERENCE

By Linda Sharp and Sarah Jane Smith

In November of 2015, DGH Board Members Sarah Jane Smith and Linda Sharp had the honor of speaking at the 10th Annual Liberation-Based Healing Conference (LBHC) held by California State University, Northridge in Los Angeles. The theme was “Challenging Inequities: Decolonizing Practices and Social Action.”

Overall, the 10th Annual LBHC offered strategies that promote healing by interrupting oppressive societal structures with justice-based practices, and brought in a range of speakers representing and centering on the experiences of voices that have been marginalized and disenfranchised. The conference explored criminal justice, community and domestic violence, education, immigration, health and mental health, religious and spiritual practices, homelessness and youth incarceration. The Keynote presentation was given by Roxanne Dunbar-Ortiz, author of *An Indigenous Peoples' History of the United States*.

Decolonizing practices is part of a framework that LBHC explores every year. Dr. Rhea Almeida, director of the Institute for Family Services in New Jersey and the conference founder, explains the meaning of ‘decolonizing practices’ and social action: “Decolonizing Strategies call for changing the Paradigm, the lens, the language, and the journey and necessitates debunking the myth of healing through diagnostic codes, individual structures and the rigid bi-furcation of individuals, their families, their context and their healing spaces. It encompasses the multiplicity of personal and social, institutional locations that frame identities within historic, economic and political life. These personal and political intersections are largely unacknowledged by current western models.” Liberation-based healing starts with this framework of challenging dominant paradigms, while acknowledging the complexities of historically oppressed individuals and communities and the wider social and political forces that shape health and well-being.

Our panel focused on educational systems. We shared the work of DGH around the world and the ideas and concepts of Liberation Medicine, focusing on how Liberation Medicine can guide social movements of young people, and also can be used as a tool to challenge the mainstream curricula of graduate and health care education.

Two other amazing speakers presented on our panel. Willie Tolliver, M.S., PhD, is an Associate Professor at Hunter College in NYC who spoke about “Diversity – the Velvet Glove of White Supremacy.” He shared his journey as a social worker and educator and explained how the paradigms of “diversity,” “cultural competence” and other common phrases in academia do not address oppression and the legacy of white supremacy, because they fail to provide the framework and conceptual tools to understand race and racism as ideologies. Cultural sensitivity doesn’t address who the “insensitive” are and the implicit assumptions and history of mainstream culture; similarly cultural “humility” does not leave room to discuss cultural imperialism or dominant forces. Thus, he explained, white supremacy is largely unacknowledged as the political and ideological system that produces social and economical inequities. “Our problem is not diversity, our problem is equity.” To address this issue directly, students in the school of Social Work at Hunter College are required to take a two-semester course on race, racism, white supremacy and oppression; they read and explore content on oppression and white supremacy, including the works of

Howard Zinn, Juan Gonzalez, Audrey Lorde and others.

Dr. Michael Yellow Bird, MSW, PhD, is a citizen of the Three Affiliated Tribes, (Mandan, Hidatsa, and Arikara) and is Professor and Director of the Tribal Indigenous Studies program at North Dakota State University. His work focuses on Indigenous Peoples’ health, leadership, and cultural rights and the effects of colonization and methods of decolonization. During the panel, Dr. Yellowbird explained how the current US system does not work for indigenous people. He also shared statistics about the ongoing human rights violations

“Liberation-based healing starts with this framework of challenging dominant paradigms, while acknowledging the complexities of historically oppressed individuals and communities and the wider social and political forces that shape health and well-being.”

to indigenous communities, including higher rates of state-sponsored violence and incarceration, and much higher rates of many chronic

diseases in native communities. He linked these trends to the colonial matrix of power, described as the hiding of crimes against indigenous peoples and keeping them “linked” into the sickness of this society. For example, the life expectancy for a man in his tribal community is 56 years; men are dying on average 20 years earlier than white men in the US. This is one of the many striking examples of health and social inequities he shared that has been

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Artwork displayed at the 10th Annual Liberation-Based Healing Conference held by California State University, Northridge, Los Angeles.

Human Rights

In the Arts

JUSTICE BY UNITING IN CREATIVE ENERGY

By Linda Sharp

Founded in 2001, Justice by Uniting in Creative Energy (J.U.i.C.E.) is a non-profit organization in Los Angeles that hosts free weekly urban art programs in MacArthur Park. The mission of J.U.i.C.E. is to provide a safe center run by and for young people to address the root causes of juvenile crime and of youths' need for community. Over the last 15 years, we have grown into an intergenerational program that provides skills, training, mentorship and a space for creative minds and bodies to flourish. Our programs allow young people to build skills in each of the elements of hip-hop culture: spoken word, music, visual arts and dance. These accomplishments speak directly to our mission and provide concrete alternatives to drugs and violence, as well as a sense of community, where the elements of hip-hop are a vehicle for social change, youth empowerment and arts education. Respect for the space and activating cross-cultural understanding to create an all-inclusive community through art, while gaining support from artistic communities, is one of our core values.

We believe that art is essential to cognitive, emotional and physical development, and is important to building multicultural understanding and preserving local culture. J.U.i.C.E. emerged as a direct response to work with incarcerated youth who were asked what they felt could make a difference in their lives. Their responses went into creating our art collective that is open to all, and provides inspirational and educational programs as well as mentoring in music and arts. On average, over 50 participants attend every week to practice their skills in breakdancing, mural and graffiti art, deejaying and emceeing, and music production. The majority of our participants come from areas of high crime, gang activity and lack resources for personal well-being. Because of these structural inequities, they face a variety of challenges such as underperforming schools, high rates of youth incarceration and a lack of professional and vocational opportunities. Our weekly programs give participants the opportunity to express themselves, grow and thrive through unconventional pathways.

Hip-hop is often portrayed to mainstream audiences as something to be feared; it is often misunderstood and generally undervalued as an art form. At J.U.i.C.E., the hip-hop arts are a powerful vehicle to build community relationships and to preserve hip-hop as an art form that continues to evolve on the streets of LA and into the hearts and minds of our amazingly talented young artists. Through the practice of our art, many find a voice to tell their stories. Others find a healing space for their deep wounds – the burdens of addiction, depression, PTSD, the loss of loved ones, or refuge from the violence and fear of gang culture. Sometimes people come to J.U.i.C.E. to grieve, especially when we lose a young person or member of our community. Already in the

last six months we have experienced the loss of two young men from our collective. At the end of the day, we are more than just another non-profit; we are a family that is held together by our expression of love and joy through hip-hop. Our only ground rule for showing up to J.U.i.C.E. was and continues to be “respect.”



Justice By Uniting in Creative Energy, group picture of Saturday participants at MacArthur Park, Los Angeles, 2015.



Friendly competition: A young breakdancer shows off his moves while other participants watch and think about their next moves.

ARTISTS IN COLLABORATION FOR HUMAN RIGHTS: EL COMALITO COLLECTIVE

By Edgar-Arturo Camacho-Gonzalez

“How can you be an artist and not reflect the times?”

—Nina Simone

My husband and I decided to open up a space for artists who are creating works that advocate for human rights, justice and decolonization. El Comalito Collective (www.ElComalitoCollective.com) was born in Vallejo, CA on January 1st, 2016, out of the need to create a platform for underrepresented artists to showcase important works that affect marginalized communities, to provide workshops, events and foster positive change. It is important to continue to create these spaces, document the work ourselves, and continue to foster artistic opportunities so that we can continue to change the world. It is equally important for marginalized communities who have lived in the shadows for so long to be reflected within the works and representations as assertions of lived experiences. With the right intentions, artists can bring life to a movement of political art because art in itself is political. Art is radical. Art is revolutionary. Art can change the way you see the world.

In a time where people truly believe that racism, sexism, xenophobia and other forms of discrimination no longer exist, it is not only important for artists to reflect the time, it is their responsibility. I

remember a time when I was so focused on improving my skills as a self-taught artist that all I could think about was how I would one day attain the skill to create photo-realistic paintings that would validate my self-appointed title, “Artist.”

Let me share with you that even though I am improving my skills everyday, I have found a bigger purpose through my work beyond myself. As an activist who believes in changing the world through a decolonial framework, I have realized that if my work is changing me as well as impacting my communities, I am on the right track. The power art has to move people is so impactful that corporations have mastered it by using imagery in television ads, newspapers, marketing and packaging – and, really, everywhere they can. Reclaiming this power and resisting through art means taking back my voice as an artist and using it to create positive change. Change that affects us all as humans while focusing on those communities living in the margins who desperately need support. People of color, indigenous communities, womxn, non-able bodied folx, poor folx, LGBTQ, etc. are dying all over the world for arguably many reasons, but the power to bring awareness lies in the power of finding a voice. For many, Art is that voice. ✨



CLOCKWISE FROM TOP LEFT:

► Edgar-Arturo working on a piece to show solidarity with communities of color, specifically Black communities who are disproportionately targeted by police brutality in the US. The taking advantage of power by appointed people in power such as law enforcement is an issue that affects people all around the world.

► Edgar-Arturo painting the walls to El Comalito Collective in Vallejo, CA, whose mission is to create networks that build support and foster opportunities for marginalized voices through works that explore the intersections of race, socioeconomic status, sexual orientation, gender, religion and more, through a decolonial lens. More info at ElComalitoCollective.com.

► Edgar-Arturo and his Mother Guillermina Camacho-Gonzalez at the red carpet premiere of “Sin Visa.” A film about the life of a young undocumented immigrant trying to attain a post-secondary education in the US. Edgar-Arturo portrayed the lead role of “Marco,” produced by Zarco Films.

► Image of US-Mexico border, with missing puzzle pieces of California and graduation caps in support of Dream Act legislation in CA as well as nationally. Made in collaboration by Abel Rodriguez and Edgar-Arturo standing in solidarity with migrant communities.



UGANDAN HOSPITAL: HUMAN RIGHTS MIRROR

By Kirk Scirto

We had only one available oxygen tank for two patients who were in severe respiratory distress in the ward. Brooding over this impossible problem, my gaze met a sign on the wall which read “Oxygen Saves Lives.” This is the everyday cruel irony of a very needy and inspiring DGH volunteer site: Kisoro District Hospital.

Kisoro, Uganda is a town of rolling hills, teeming with crops and development potential. It hosts world-famous volcanos and gorillas in the wild. Yet – despite its many resources and tourist presence – people here still live off less than \$2 per day. Locals die here from readily preventable “diseases of poverty” like meningitis, typhoid fever and TB. While the town’s lush green fields offer much food, its hospital is paradoxically flooded with malnutrition cases. This challenging and fulfilling environment is the perfect place for a health and human rights-focused group like DGH.

My wife Vicki and I joined a Montefiore-based DGH volunteer team for four weeks in September 2015. Working hand-in-hand with Ugandan doctors and clinical officers, we ran the busy wards of Kisoro District Hospital. We saw very humble, sick and appreciative patients in what was one of the most rewarding experiences of my life. Under the leadership of Jerry Pacione, an empowering and impressive Ugandan-US partnership has been forged here.

As a reflection of the poor and socially-unjust society around it, the Kisoro District Hospital is profoundly understaffed. Ugandan providers are stretched far too thin; they may simultaneously be asked to finish a C-section, diagnose an adult who passed out,

and do a lumbar puncture on a dying child. Given this provider shortage, almost all pediatric diagnosis and treatment is organized by nurses when DGH providers are not there. There are also few nurses here so our interpreters checked most of the vital signs and did most of the lab collection of our patients. In an effort to help meet this staffing crisis, DGH trains village health workers and sends over US medical volunteers ten months per year.

The sickest cases in the district are referred here in the hopes of finding more advanced diagnosis and treatment. However, there were only a few days all month that we had consistent electricity at the hospital; labs and imaging were therefore hard to come by. The hospital also

ran out of medicines frequently, leading us (the staff) to buy our patients’ medicines in community pharmacies.

Despite its many challenges, Kisoro’s hospital reminds me of other troubled ones in Uganda and Sierra Leone. In the context of Africa’s vast unmet medical need, I can’t help but wonder what Uganda would look like if it were never colonized. England spent decades stealing Uganda’s resources and stunting its development, leaving it not only with a “gift” of independence, but also with a legacy of corrupt leadership. England’s abuse of Uganda truly set the scene for others to do the same. Indeed, a history of social injustice continued under Ugandan leaders Idi Amin and Milton Obote for nearly two decades.

I organized volunteer trips to a different area of Uganda in 2003 and 2004; yet, surprisingly, I felt like I was back in time during our 2015 trip. Although there has been some economic and health progress, it is painfully slow and barely recognizable. Ugandans have a right to access needed education, food, employment and health care, among other needs. They have a

right to show up at a hospital where there is adequate staff, electricity, oxygen and medicine.

We live in a world where rich countries can throw away surplus medical supplies, while a Ugandan hospital can struggle to function without consistent access to gloves. We live in a world where citizens of rich countries enjoy a laudable life expectancy and turn on their TVs at night to watch those in Uganda dying from exotic diseases that they need not worry about. In Kisoro, all hospital wards had various patients with known or suspected TB – including multidrug-resistant TB. Many of our sickest patients had HIV and were co-infected with cryptococcus, salmonella, HSV and/or TB. Suffering and dying from such preventable diseases is both an egregious human rights violation and an everyday reality for many lower income countries.

As healers, we stand with our inspiring Ugandan medical colleagues and patients. As human rights advocates, we should also advocate for Ugandans to find access to their basic human rights including health and adequate health care. Kisoro is a challenging and underserved place that is well-suited for a fruitful DGH partnership.




ABOVE: DGH volunteer physicians in Kisoro: Tim, Sara, Vicki and Kirk.
BELOW: Pediatrics Rounds with Vicki, Nutritionists, Nurse and Interpreter.



explained what he had just heard that morning on the radio. He suggested that they each had a “responsibility, as teacher and community leader, to keep up with what’s going on outside Estancia as much as to teach the children.”

Not choosing ever to draw attention to himself, it was a challenge to engage Ramiro in conversation that focused on himself and his role in CDH. My questions included, “Why do this work?” “From where does your sense of social justice come?” Drawing him out on the long ride from Estancia to the airport, Ramiro acknowledged that growing up in poverty pushes him to do what he can to guide family, friends and neighbors in Morazán toward living dignified lives. He shared how much he likes learning and says he gets satisfaction from passing this knowledge on to others in the community. He’s appreciative of the many people outside El Salvador who chose to help [teach]; he sees the importance of those who were educated to use their skills to educate others. He credits the MDM project that Lanny Smith started – which led to the founding of DGH – with allowing him to finish his high school education and his training as a health promoter, later came computer training and skills learned for management of projects. “I like my work; it gives me a lot of happiness when people call me, asking for help.”

“The difficulties of unfair education have improved to where we now have more youth graduating from high school. Another positive change has been important improvements in health in our country. They have truly changed the way of life here.” But still, Ramiro adds, so many flee El Salvador for the US. “TPS [Temporary Protective Status, legal status for some Salvadoran immigrants in the US] has changed things a lot. It’s hard when our people leave El Salvador.” He continued: “It’s a big problem. It shows there is a lack of consciousness; these people have left for North America following what they thought was the big dream. But many have been there 15-20 years and their lives haven’t changed! It’s sad for us here in Estancia that so many are up North. Now we have no funds to train others to take their places.”

Ramiro admits to worrying over a long list of happenings locally and around the world: economic changes, wars, the “government situation,” local health problems, security, food security, water. “How can we persevere over time? I liked a lot the presentation on local tribes at the GA [DGH General Assembly] in Seattle last August. It reinforced for me that we have to work together to change the system.” And Ramiro Cortez and CDH, with continued accompaniment from DGH, are doing just that! 




Ramiro (center) participating in dedication of the new volunteer house in Estancia, where DGH volunteers now live when they are working with the communities.

perpetuated through neo-colonial ideologies and practices.

One of his most important take-aways was restoring indigenous practices around food. “Return to healthy traditional diets and health will return. Decolonization means engaging in indigenous beliefs, values, philosophies and practices to counter colonialism and restore well-being. Decolonization is the restoration of cultural practices, thinking and beliefs that were taken away during colonization but are relevant and necessary for survival and well-being. It is the birth and use of new ideas, thinking, technologies and ways of life that can contribute to the healing and advancement of Indigenous Peoples.”

We hope this is the beginning of a long and bountiful relationship between the LBHC founders and organizers and Doctors for Global Health. We are indebted to those we met for allowing us to participate, to listen and learn about the work of others, and explore how we can do our work better. Dr. Almeida: “this conference is important to resist the pull to enter mainstream pedagogy and become part of the mainstream contract of coloniality...We bring together multiple disciplines to dialogue and tear down the walls that are falsely constructed to maintain the system of coloniality. These walls are the pillars of coloniality, of structural violence, used by empires globally to segregate those in power and ownership from those without. This is about breaking down silos, and building communities that are safe and promote dignity and health for all.”

DGH and CSU, Northridge were able to build on this relationship at the recent Diversity Day conference: “Environmental Inequalities, the Legacy of Colonization”. DGH representatives from our partner community members in Santa Marta, El Salvador discussed their work in environmental justice and their fight for water rights and against international mining on their land. The work continues. “*Adelante!*” 



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DGH Announcements

► **Congratulations to DGH Advisory Council member Karen Kerney, recipient of the 2015 People's Peace Award!** The Syracuse Community Choir has been building community for 30 years, keeping its mission always the same: singing for peace and justice and showing that every voice matters. Twelve years ago, the choir started a tradition of honoring ordinary people in the community who were doing extraordinary things. The People's Peace award is given at the winter solstice concert. The 2015 award went to Karen, a choir member since the beginning, for her contributions to the choir and community through her art. Karen is also the Art Director of the Syracuse Cultural Workers.

► **Former DGH Board Member Sara Doorley was featured in an article about her work with the homeless.** "The most important aspect of my job isn't finding the cure but creating a dignified, compassionate space where individuals can receive support and be cared for in times of both sickness and health," the article quotes Doorley, medical director of the Valley Homeless Healthcare Program in San Jose, California. "At times, a compassionate touch or a dignified encounter can be more healing than the provision of a medicine." You can read the full article at: <http://is.gd/6q7aoK>.

► **Save the Date!** The 21st Annual DGH General Assembly will be held July 15-17, 2016 at the University of Minnesota, Minneapolis. The theme will explore: "Narratives on Immigration, Refugees & Race Through the Lens of Liberation Medicine." Register now at: www.dghonline.org.

► **Be a DGH Sustainer!** Our work is not done until a dignified life, optimal health and well-being, and social equity are realities for all. Help DGH work toward that goal by becoming a Sustainer: Establish an automatic, monthly or annual donation (<http://is.gd/jT7EPn>). It is also the easiest way to give and ensure your ongoing support to DGH's partner communities. Make your support the most sustainable, reliable and lasting, with a pledge of \$25/month.

► Update Your Contact Information.

Have you moved recently or changed your e-mail address? Don't lose touch with the DGH community. Update your contact information and preferences at:

www.dghonline.org/update-membership.

DGH Reporter

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DGH has no paid employees in the US. DGH is administered by a volunteer **Board of Directors** whose members have volunteered with DGH in the past and are elected by DGH **Voting Members**. The Board is assisted by an **Advisory Council** comprised of over 200 physicians, students, retirees, artists, nurses, business people and others. A diverse group of volunteers provides the vital core of DGH's resources, including this newsletter. Incorporated in the state of Georgia and registered with the IRS as a 501(c)3 not-for-profit, **DGH welcomes your donation, which is tax deductible.** To donate, please make your check out to *Doctors for Global Health* and send it to the address above. You will receive a letter stating the amount of your gift for tax purposes, and the very good feeling of having helped make a difference.