



Doctors for Global Health Reporter

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LOS CHAVALITOS: DGH IN NICARAGUA

By Sasha & Elizabeth Wilson

Los Chavalitos is a residential school and farm founded in January 1997 to provide an education, a home and a family for a small number of orphaned, abandoned, and severely abused children in Nicaragua. The founder and director, Alejandro Obando Flores, was a teacher in New York for many years before deciding to return to his homeland to realize his dream of starting a school. He began the school on his 400-acre farm in the middle of the mountains in the region of Boaco, in central Nicaragua, with the labor and financial support of friends both in Nicaragua and the United States.

The chavalitos (a colloquial term meaning “kids”) who live at the farm come from a wide variety of circumstances, having in common only the challenging nature of their backgrounds. Some are from Managua, the country’s capital, some are from small towns and some are from the countryside right around Los Chavalitos. At the farm, the children receive an education through primary school, with a guarantee of going to secondary school in town if they so desire. They get three meals a day, clothing, a bed to sleep in and, perhaps most importantly, the affection and attentions of a family. Los Chavalitos does a lot more than simply provide schooling and food. The children are engaged around-the-clock. Education there is not limited to the four hours a day spent in the one-room schoolhouse but is happening constantly. The children also work to help care for their surroundings and to develop the farm’s goal of self-sufficiency. Both boys and girls are expected to work in the field and in the house, as Los Chavalitos operates with a vision of equality between boys and girls, which is very rare in the countryside.

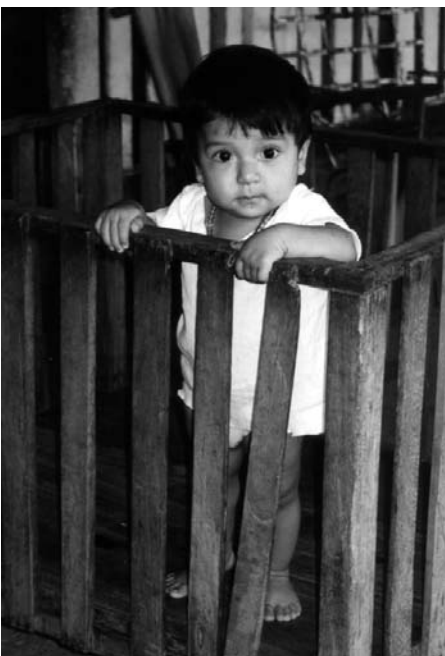
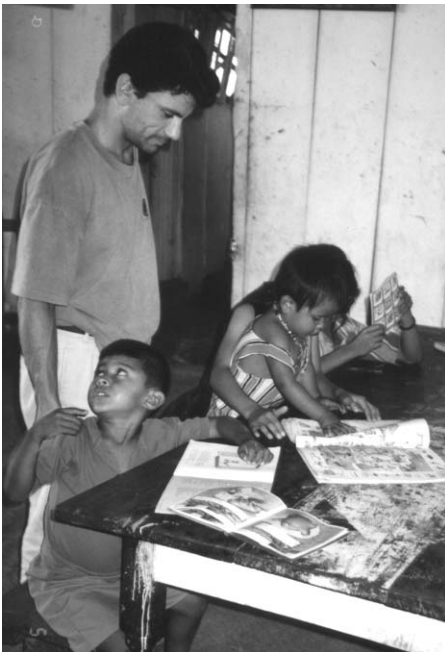
“These two boys, shy, unable to read and uncommunicative upon arrival, are now leaders both academically and in farm work, teaching newer students literacy and life skills.”

Los Chavalitos is full of inspiring and heart-breaking stories. Antonio, the first student at the school, grew up in the local area, selling oranges on the roadside and never attended school. When he heard about Los Chavalitos at the age of 13, he ran away from his abusive alcoholic father to seek an education. A year later, his younger brother Luis joined him at the farm. These two boys, shy, unable to read and uncommunicative upon arrival, are now leaders both academically and in farm work, teaching newer students literacy and life skills.

Josue arrived when he was about 6 years old. The police in the city of Tipitapa found him sleeping on park benches. He wouldn’t tell them anything about himself. He slept in the



police station for two weeks and received care from the officers, as they tried to figure out what to do with him. One police official who had heard about the school sent a request that he be taken in, which he was. Maria Jose arrived shortly after, so severely abused and malnourished that her physical and cognitive developmental delays are obvious to even casual observers. She was often locked in her house for entire days and was taken out of school in first grade because she had such difficulty learning. She was referred to us at the age of 8, when the abuse became so severe that neighbors became concerned.



Los Chavalitos has begun to address some of the issues that these children face but there are limits to what can be done with the extreme poverty and lack of infrastructure in Nicaragua. To get to the nearest health center, which only operates sporadically, people in the area must walk 45 minutes to the road and then take an hour-long ride on a bus that only runs infrequently. There are some medical supplies at the farm and some knowledge of how to use them, but there is no professional medical attention, nor basic knowledge about parasites and other common ailments. Also, the children face issues from early in their lives, such as malnutrition and abuse (both physical and emotional), that continues to affect them.

“In many ways, Los Chavalitos is a center for the community. Adults come from miles around to attend literacy classes in the schoolhouse. Many locals are employed as laborers and thus come to the farm every day but Sunday.”

In many ways, Los Chavalitos is a center for the community. Adults come from miles around to attend literacy classes in the afternoons in the schoolhouse. Many locals are employed as laborers and thus come to the farm every day but Sunday. Alejandro, the director, is a well-known and respected community organizer, who has brought many community members together to work on projects, like building several local schools, piloting a community tree nursery, and environmental and agricultural education workshops for small farmers. But again, the residents of the countryside have so little disposable income that they cannot even afford to take the bus into town. One worker, complaining about an ear infection, was asked if he had gone to the health center. His response was, “And the money?”

When Lanny Smith, President of DGH, arrived unexpectedly one night in 1999, he immediately set about making friends with both children and adults, in excellent Spanish. He came to visit on the suggestion of a mutual friend, Susan Browne. He labeled and translated instructions for all the medical supplies at Los Chavalitos. He was able to train the residential director how and when to dispense the medications, which had been previously unused since no one knew what they were. He was only able to stay two days, but in that time it became clear that there were many commonalities between the purpose and work of DGH and Los Chavalitos. We are just beginning to explore the places that connection can take us. (DGH has sent four medical volunteers to Los Chavalitos—see page 3—and been able to offer some monetary support and a gas stove to replace the wood stove that emitted too much smoke throughout the house.)



The central place that Los Chavalitos plays in the community makes it an ideal location dispensing medical information and services. There is a severe lack of health care for the residents both at the farm and in the surrounding community. Additionally, the children and adults are very involved in the community, and with some information would be able to carry out further medical work. We look forward to forming a mutually beneficial partnership in the future. 🌿

Photos on these pages were taken by Wendy Hobson, MD in May 2000. She and fellow DGH Board Member, Andrew Schiavoni, MD, spent time with the children, giving them check-ups and assessing how DGH could best help the important work of the school. Andrew is pictured in the top photo on this page and Wendy can be seen in the bottom photo on the adjacent page. They fell in love with the children and look forward to developing more ways to assist Los Chavalitos.

A Day's Life... A Visit to Los Chavalitos

Isolated among the mountains, Los Chavalitos is a one hour climb by foot from the nearest road. Horses can make the trip in less time, and on a good day, Alejandro's new truck can do so in almost 15 minutes. Most days in the summer, however, the road is impassable by truck and even the horses have trouble with the mud, sinking to their knees and slipping down the slopes. The truck frequently has to be left near the bottom to ensure it can be used in an emergency.

The living complex consists of a main building, a schoolhouse, a bathroom/shower area, and a stable. There is no electricity on the farm. The three-sided, dirt-floored main building contains the kitchen, dining room, porch and seven bedrooms.

The stable is to one side of the house and there is a bathroom sink and shower on the other side. The sink area includes two washboards for laundry and lots of wet clothing waiting to dry. The stable currently holds 15 cows. There are also three pigs in a pen, and a few chickens, ducks, a turkey, a rabbit and a deer that roam around in front of the house. The three dogs and two cats have free access everywhere. There is also a covered area for storage and two unfinished bathrooms on the back side of the house. The schoolhouse is about 50 yards in front of the house and beyond that is the foundation for a new building.

From Los Chavalitos, the nearest town, La Calamidad, is a one and a half hour drive along the road towards Camoapa, the nearest city. La Calamidad boasts electricity, a few food stands, three small stores, a school, a health clinic that rarely has a doctor, and homes scattered along the river. Camoapa, with its population of 37,000, its bank, food shops, hotel and its buses to the capital, is more than three hours from Los Chavalitos. Travel is either on foot, horse or by *La Ruta*, an old army truck that goes to and from Camoapa twice daily. *La Ruta* will usually stop to pick up anyone on the side of the road and all their belongings for about 50 cents, and



thus is often unbearably overcrowded.

I went to Los Chavalitos with a few objectives in mind. I wanted to get to know the children and provide an assessment of their health status and areas that need improvement. I was also hoping to provide similar feedback to the orphanage as a whole and offer suggestions for future developments. Additionally, I wanted to take a look at the health of children in surrounding areas to see how the children of Los Chavalitos compare to their peers. Finally, I wanted to contribute to life at Los Chavalitos by working with staff and children on health related issues.

I had planned on taking a few days adjusting to life at Los Chavalitos and winning the trust of the children. However, as the Chavalitos are used to frequent short-term volunteers, the timeline of making friends and opening up is much hastened.

For the first week though, the kids would still go to the house mothers first with any health problem. Then they would call me in to consult. Mostly I was looking at fungal rashes or small cuts. When I took out my otoscope to look in the ears of some of the children who were noted to have recurrent ear infections, many of the Chavalitos feigned ear pain so I would look in their ears too. My entire time at the farm only a few substantial cases came up. Two of the children had to seek help from the doctor in Managua.

In line with my role of health care



provider I devoted some time to updating the medical records. I also created files for the new children. Some tracking of height and weight was available and I added the numbers for July, 2000. The scale did not appear to be very accurate and there was no tape measure to record the children's height. I did however, start tracking the kids height on a wall. They each had their own space on the wall and a different color crayon to mark their height. I think each volunteer who visits Los Chavalitos should spend some time updating the records of each child.

— Kelly Fogleman, University of North Carolina School of Medicine, 2000

JOHN MACARTHUR, MD, MPH, INTRODUCING THE KEYNOTE SPEAKER AT THE DGH 5TH ANNUAL GENERAL ASSEMBLY – AUGUST, 2000

For some time, my wife has been speaking out on issues of human rights and social justice in Burma. And for some reason or another Burma, Nigeria and East Timor seemed tied together in the mid-90's in universities across the country. Often, wherever we went to speak out against the brutal government in Burma, we found people speaking about the same in Nigeria and East Timor. One year, I attended a conference where one of the speakers was a physician from Nigeria, which I thought would be interesting. I went to listen to him speak about the issues of the Ogoni people, the

issues of transnational corporations, in particular Shell, and what they were doing to the people of the Niger Delta.

What I heard was this physician put it all in the perspective of a human rights paradigm. I learned that he was living in Toronto and thought I could network him into people who were interested in health and human rights in the United States because it is always good to be networked together. So I approached him afterwards and told him that there is a growing movement in this country and I would like to introduce him to some of the people involved in that move-

ment. I was studying public health at that time and discovered that Owens was going to be getting his Master of Public Health degree at Johns Hopkins the year after me. As you can see, our lives came together in the mid-90's and haven't separated since.

So it is my pleasure to introduce to you a person who is nothing more than a simple country doctor who unfortunately, after his brother the playwright and Ogoni activist Ken Saro-Wiwa was hung by the Abacha regime, was forced into the international limelight to continue the struggle for the Ogoni people: Dr. Owens Wiwa.

LIKE OIL & WATER: THE OGOINI IN NIGERIA

By Owens Wiwa, MD, MPH

I live in Toronto now, in Canada, a wonderful place. As an intro to what I want to talk about I am going to tell you how I came to Toronto and why I left my country and my home, which I love a lot. I come from a very big family. My father has 35 children, five wives, more concubines, so I come from a set up where my father was polygamous. But in polygamy something is very important: issues of justice. My father has to weigh what he says to each of his wives and their children, so that no one feels cheated, no one feels that his rights are being infringed. That, in a nutshell, is my family beginning.

I come from Ogoni. Ogoni is a small place, only 12 miles by 35 miles and home to half a million people. We are in a country of 118 million right now. Since we are small in a big country our rights are likely to be trampled upon, and our rights were trampled upon. Ogoni is very rich in oil. In Ogoni there are 100 oil wells, 2 refineries, a petrochemical complex and a fertilizer complex, yet the Ogoni people do not have electricity, they do not have running water. As of when I was there, there were five physicians for 500,000 people. I was one of those physi-

cians. The other four were living in the city and came to Ogoni only during the day.

I registered for the medical school in 1983, did my internship in Nigeria and then went to Britain to do a stint in respiratory medicine (you'll understand why I did respiratory medicine later as I go on). Then I came back home, worked in several parts of Nigeria and finally decided to return to my village, Ogoni. I set up a small clinic and I was busy. I was working 18 to 20 hours a day and I also made some money, which allowed me to travel a lot. I was going to Britain about 3 times a year on holidays. But in 1990 a lot of things changed.

A movement arose that came to be called MOSOP, Movement for the Survival of the Ogoni People. MOSOP was started by my elder brother Ken Saro-Wiwa. Ken Saro-Wiwa was a writer. He had written 30 books (poetry, short stories) and he produced a television series. He produced a sitcom in Nigeria that was watched by 30 million people every week and they did 72 episodes. He was well known, having won some international prizes for writing, and he had traveled all around the world. He had gone to more than 40 countries by the time I got to know where England was. He was a man of the world. But he wasn't happy that his people, the Ogoni people, were living in abject poverty despite the fact that we lived on one of the richest pieces of land on Earth. They were poor and they were always sick—well that is why I was working 18 hours a day and making a lot of money. MOSOP started talking about the effects of oil extraction on the lives of the Ogoni people, about the fact that the company was using a very bad metal to extract the oil and in the process was destroying the river, poisoning the air, and oil spills were destroying the land. The people were not only sick, they were too poor to get good medical care.

That changed my life. Instead of treating the cases, I decided to join the movement to prevent what we perceived to be the cause of the diseases and that is when I got in trouble. Within a short time I was spending my time in prison, treating those who were detained. Later on they started to arrest me. Once I was arrested and was charged with murder and arson, but I didn't kill anybody. I actually went with my ambulance to try to save someone that the army had shot. My brother came back from Europe. Amnesty International got into the issue and I was released.

Less than three months later my brother was arrested for a murder he didn't commit and I was declared wanted for the same murder. I entered the Nigerian underground to evade capture and I was lucky enough to meet several Ambassadors who directed me to see the head of Shell in Nigeria. I went to see the head of Shell in Nigeria and he told me that if I wrote a press release saying that Shell was not responsible for the environmental destruction than my brother and the

others would be freed. Of course, there was no way I could do that. To make a very long story short, my brother was hung by the military dictator Abacha, with eight of my friends, for something they didn't do. I escaped through three African countries. Luckily, I somehow made it to England and then I went to Canada, where I became an exile refugee. From Canada I went to Johns Hopkins and then back to Toronto, where I am now working as a research scientist looking at the stress of exiles and its relationship to the reactivation of tuberculosis. That is one aspect of my life. The other aspect, the reason why I am here, has to do with issues of health, environmental justice and human rights. I, and several others in exile, want to go back home. And I've asked myself, "What do I do when I am home? And what do I do before I go back to my country?"

I've just seen many of the slides that were shown before in the presentation about DGH's work in Uganda and they remind me of my country. I was particularly touched by the slide where you have the hospital that doesn't have enough physicians to treat the patients or to teach others who will be treating the patients. I felt very guilty being here in the West, because I should be in Africa. I want to be in Africa. But if I go back to my home today, Shell will be frightened. And a frightened transnational corporation can do anything to get rid of the threat.

I could talk about the Nigerian government and the human rights abuses they commit. I could also talk about the inefficiency of the health system in Nigeria. But to tell you all that would waste a lot of time. I would be saying what you know and possibly something that you can't influence, to be frank. Well, there is something you can influence, because I believe that most of the corruption, the poverty and some of the wars that are going on in Africa, are due to the activities of the transnational corporations. If you have any doubts about what I am saying, think about where there are problems now in Africa: in the Sudan, in Congo, in Angola, in Nigeria itself, in Sierra Leone. If you go back and look at what is causing these problems, it is due to difficulties in access to either gold mines, diamond mines or oil. At the bottom of this are transnational corporations and the governments backing these transnational corporations, which supply the weapons of destruction, the arms, to the warring factors. Or if there are no warring factors, they create them, divide the people so that they can continue to fight, so the corporations get the resources on the cheapest terms.

Well, as physicians what can we do? There are several things that can be done, some of which a few of us started at home. Speaking out against the corporations about the diseases that they cause directly due to the toxins, the pollution that they create directly or indirectly through the ecosystem destruction they produce when they are extracting their wealth. In either way, I have discovered that shareholders listen a lot when you put it out to them in statistics, that in order to produce this wealth for their profits some people die from diseases caused by the companies that are producing their wealth. I believe that shareholders can actually force or influence the oppressors to change their methods. I am not saying they shouldn't create wealth. I am not against the creation of wealth. But please don't kill the people who live in those areas where you are creating the wealth. That is the paradigm that I am working from.

I have come here today to listen to what you do and to plead with you to extend your services to Nigeria and to Africa as a whole. On my own, what I do specifically is look for environmentally challenged communities, which are often very vulnerable, not only to the diseases caused by pollution, but also to infectious diseases. I, and a few of my friends, have formed a non-profit NGO called AFRIDA, which works in the same paradigm as MOSOP.


What we try to do is identify, investigate and analyze information from environmentally challenged communities in Africa; build schools, clinics and vision centers; provide health programs, including reproductive health, and emergency and mental health services to these communities; plant trees, fruits and other produce, because that is something that the peo-

“I believe that most of the corruption, the poverty and some of the wars that are going on in Africa, are due to the activities of the transnational corporations.”

ple need a lot (there used to be a lot of fruit trees when I was young, but now all those trees are gone). We also provide educational services to schools in Africa.

We do a lot of speaking tours. Schools that we have visited in America, especially high schools in Canada, have provided funds to build two health centers in Ogoni and to repair a hospital that was damaged.

All that we did was present to the school what was happening in these communities and showed them a video about the community and they were moved to do this. After that we connected the school with the community. Then we were left out of the loop. Now they are talking amongst themselves.

One of the projects that the public school teachers in Canada did was to raise money to train midwives and community health workers in my village and that has actually helped a lot. Those are the small projects that we have started doing and they range from two to three thousand dollars in cost for each project. Of course we would like to expand. I will discuss how we can cooperate to make this available to other communities in Africa and in the Niger Delta with the DGH Board tomorrow. I would like to thank John once again for making it possible for me to be here and also to all of you for listening to this boring story. Thank you so much. 



Owens Wiwa came from Canada to speak at the 2000 DGH General Assembly at Ft. Yargo, Georgia.

Human Rights around the World

ZIMBABWE

By Trevor Peter, PhD, MPH

Historical legacies continue to impact the welfare and development of the people of Zimbabwe, a small southern African country of 11 million nestled between Botswana, Mozambique, South Africa and Zambia. A white minority government ran the country, as Rhodesia, from the time of colonization by the British over 100 years ago until 1980. The colonizers gained control of most of the fertile farmlands from the indigenous tribal people, marginalized them on less fertile tracts of land and developed towns, roads, railways, farms and industries using a cheap black labor force. An apartheid system of government was established that relegated black people to lower socio-economic status without voting rights, land tenure or full access to public and private facilities and establishments utilized by the white colonizers.

Formal black resistance began in the 1920's, culminating in a bloody civil war against the white-run Rhodesian government in the 1970's. Together with increasing international pressure and economic sanctions, this precipitated a British-brokered transition to majority black rule, democratic elections and the formation of Zimbabwe with a majority black parliament. Despite the bitterness of the long independence struggle, the new black leaders, led by Robert Mugabe of the Zimbabwe African National Union party (ZANU), agreed to avoid excessive recrimination and the immediate re-distribution of white owned lands, business and other assets to promote national peace and unity and abate the flight of expertise through the emigration of trained white professionals.

With an established strong infrastructure and resilient economy that set it apart from most of its neighbors, for many years Zimbabwe enjoyed a reputation as a peaceful and successful example of racial integration, productivity and serious-mindedness, and a role model of post-independence democracy and self-sufficiency. However, in the early 1980s, in a bid to consolidate power and eliminate internal opposition factions, the army carried out brutal and indiscriminate "weeding out" exercises in southern Zimbabwe, resulting in the deaths of thousands of civilians. The same ZANU-dominated government has been in power since 1980, re-elected four times.

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Did You Know?

Worldwide, 1.2 billion people are income poor, living on less than \$1 a day; more than a billion people in developing countries lack access to safe water, and more than 2.4 billion people lack adequate sanitation; at least 150 million of the world's workers were unemployed at the end of 1998.

— 2000 UN Human Development Report

UNITED STATES

By Human Rights Watch

The United States in 2000 submitted a report on its compliance with the Convention on the Elimination of All Forms of Racial Discrimination (CERD). In September, the US produced—five years late—its initial report to the UN Committee on the Elimination of Racial Discrimination.

With unprecedented candor, the report acknowledged the persistence of racism, racial discrimination and de facto segregation in the US. The tenor and content of the report signaled the Clinton Administration's recognition that despite decades of civil rights legislation and public and private efforts, the inequalities faced by minorities remained one of the country's most crucial and unresolved human rights challenges.

One of the report's most significant weaknesses was in its consideration of the role of race discrimination in the criminal justice system. It acknowledged the dramatically disproportionate incarceration rates for minorities, noted the many studies indicating that members of minority groups, especially blacks and Hispanics, "may be disproportionately subject to adverse treatment throughout the criminal justice process," and acknowledged concerns that "incidents of police brutality seem to target disproportionately individuals belonging to racial or ethnic minorities." But it did not question whether the ostensibly race-neutral criminal laws or law enforcement practices causing the incarceration disparities violated CERD, nor did it acknowledge the federal government's obligation, under CERD, to ensure that state criminal justice systems (which account for 90 percent of the incarcerated population) were free of racial discrimination.

The report did acknowledge the dramatic, racially disparate impact of federal sentencing laws that prescribe different sentences for powder cocaine versus crack cocaine offenses, even though the two drugs are pharmacologically identical. The laws impose a mandatory five year prison sentence on anyone convicted of selling five grams or more of crack cocaine, and a ten year mandatory sentence for selling fifty grams or more. One hundred times as much powder cocaine must be sold to receive the same sentences. By setting a much lower drug-weight threshold for crack than powder cocaine, the laws resulted in substantially higher sentences for crack cocaine offenders. Although the majority of crack users were white, blacks comprised almost 90 percent of federal offenders convicted of crack offenses and hence served longer

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HONDURAS

By Brenda Norrell

Candido Martinez, leader of the Lenca Indigenous movement on the border of Honduras and El Salvador, speaks

quickly and rhythmically like the ticking of a clock measuring time.

"I am in the military's plan for execution." Without pausing, Martinez adds, "Every day is harder." Speaking during dinner at La Indita Restaurant, Martinez said he does not know how long he will live when he returns to Honduras. He urges a silent world to protest the slaughter and displacement of his people—the largest Indigenous group in Honduras—in the name of development.

Already, Lenca children have been burned alive in their homes, 50 Lenca protesters murdered by military and police, and Indigenous leaders imprisoned for crimes they did not commit, he said. "Children have been assassinated. Landlords and military police have set fire to Indigenous people's homes."

One-hundred and eighty-four Lenca "have been disappeared," the term for the extermination of protesters in Latin America. Their crime was to protest the destruction of their medicine plants and deforestation by 37 sawmills; opposition to a proposed hydroelectric dam on the border of Honduras and El Salvador; and theft of their intellectual property rights. Now, in the struggle to protect aboriginal land of the 300,000 Lenca, Martinez said the Internet could be a means of getting their message out to the world and ultimately saving their lives.

"We have no e-mail or Internet and part of our mission is to install this. We have a need for this network to inform the world," he said, speaking in Spanish through a translator. Martinez is among the leaders of COPIN (National Civic Committee of Indigenous and Popular People) targeted for death by the military in Honduras.

Although he is under constant watch in Honduras, with the help of US human rights organizations, Martinez secured a visa and traveled to the United States to carry the Lenca's message and their fear of the Honduran military's next attack. "We don't doubt that they are getting ready to commit a massacre."

In their struggle, Lenca in desperate conditions carried out 35 pilgrimages, marches and strikes. As tens of thousands protested, others maintained hunger strikes. They have sought political asylum at the Costa Rican Embassy when lives were threatened; protested in solidarity with Mayans from Chiapas outside Mexican and Guatemalan Embassies; protested the US military presence outside the US Embassy. Outside the Embassy of Spain, they protested colonization and in front of France's Embassy, they rallied against nuclear testing. They are now opposing a proposed hydro-electric dam that would displace 40,000 Lenca. "The product of our struggle is that we have been able to expel

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CHILE

By Monica Sanchez

The Mapuche have a long and proud history of resistance. They are the only indigenous group to withstand the attacks of the Inca, never being conquered by them. They are also the only South American indigenous group that was never conquered by the Spaniards. Just over a century ago, the Mapuche nation spread across the present-day nations of Argentina and Chile. It possessed a vast territory that, on the Chilean side, stretched from the Bio-Bio River down to the South. This territory was recognized first by treaties with the Spanish Crown and then by a series of treaties and parliaments held with the newly established Republic of Chile.

However, during the early 1880's, the Chilean army was deployed in the region and used force to quell a Mapuche uprising, killing hundreds of thousands. With the military defeat of the Mapuche people in 1883, the Chileans took possession of the Mapuche territory. The Mapuche were then settled on *reducciones*, or reserves. This continued until 1929, when 3,078 reserves had been created. By 1979, the date of the current law that provides for the division and liquidation of the Mapuche reserves, the amount of land available to the Mapuche had been further reduced. Today, the Mapuches hold title to about 6 percent of their former territory. Although the word Mapuche means *people of the land*, an estimated 60 percent of Chile's 1.2 million Mapuches have had to migrate to the nation's two largest cities in search of jobs.

The plight of the Mapuche is clearly linked to the richness of their land. Mapuche leaders charge that the government is joining forces with commercial interests to exploit tribal lands and hoard profits. An illustration of this can be seen in the arrest of a Mapuche tribal leader after he presented a Human Rights Report to the United Nations. On May 14, 1999, the *Environmental News Service* (ENS) reported that, "Pedro Cayuqueo, a leader of Chile's Mapuche indigenous people, was arrested by the international police upon his arrival at Santiago's airport Sunday. He was returning from Geneva, Switzerland where he had taken part in the 55th annual session of the Commission on Human Rights of the UN."

The ENS report went on to explain that Cayuqueo travelled to Geneva as the secretary of the Co-ordination of Arauco-Malleco Communities in Conflict. According to the Mapuche International Link, a support group based in Bristol, England, "The context of his detention is the repressive official policy of the Chilean government towards Mapuche people. He suffered the penalty of those who dare to speak the truth. His aim was to make the international community aware of the daily violation of the rights of the Mapuche nation."

Cayuqueo's report to the Commission on Human Rights included details of what forestry companies have done in usurping Mapuche land as well as the serious damage to the environment they have caused: altering the eco-system, polluting the soil, rivers, sea

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Did You Know?

Around the world, about 100 million children are living or working on the street; an estimated 300,000 children were soldiers in the 1990's and 6 million were injured in armed conflicts; in developing countries there are some 250 million child labourers—140 million boys and 110 million girls.

— 2000 UN Human Development Report

DGH PROFILE: DREAMING LIFE

By Gregorio de Anda Pérez, MD

With one blow Blanca Alegria extinguished the candle and suddenly the light of the moon bubbled into her room slipping between the fence that served as a wall. Her feet felt the humidity of the mud on the floor. She slowly approached the corner where her two sons, Samuel and Marcos, slept and drew a cross on their forehead with a caress. She made sure that they were well covered and lay down to rest the fatigue of the day on the pine tables that served as her bed.

Into the air she sent a long, deep sigh, and between the ringing of crickets and the song of frogs, her memories began to blend with her plans and fatigue. By the light of the moon she traveled back eleven years to when she first went to a guerrilla camp to share her dreams of a more just future for her and her people with other *compañeros*. The memory was so vivid she seemed to be hearing: “Our life is now pain, but tomorrow we descend from the mountains, from this pain hope will be born. You, as farmers of the mountain know that first it is necessary to

clear. The burning will soon come. Then the planting and finally the harvest. Now we are clearing. When we have the strength to start the fire, we will set the country afire. And the Indian heart of Mexico will once again be felt.”

Clinging to the silence of the night, Blanca Alegria thought that her destiny was tied to the light of the moon: One moonlit night Armando had declared his love for her. One moonlit night her first son Samuel had been born. And it was one moonlit night six years ago that Armando had been lost to her when soldiers surrounded the Zapatistas in Ocosingo inflicting a considerable number of casualties. He had told her: “If a bullet reaches me, take good care of our sons. For them it is that we fight.”


After eleven days of war, both the Zapatistas and the federal government decided on a unilateral truce. Blanca Alegria thought: “We spent years clearing, weeding the fields. We set the country afire in eleven days. Now comes the planting season. I hope the harvest will be my children’s.”

When she began to live on recovered land, Blanca Alegria decided: “From this day forward my main task will be to care for the life of my children, all the children and women: I will become a health promoter.” Six years after having made that decision, Blanca Alegria told herself the story of that day’s harvest: In the morning, as she weighed the small group of 13 malnourished children, she felt an immense joy when she saw that, after two months of preparing mincemeat with toasted corn, beans and pumpkin seeds, six of the little ones were already at normal weight, six were improving and only one continued in the red. She was glad as she

remembered Nicolás’ little eyes, which before seemed dull like ash in front of his food, but now were like two little flames that devoured whatever was put on the plate in front of him. With a disguised smile she noted that, without anybody saying anything to them, each one of the mothers had washed the hands of her children before they began to eat. “We are winning the struggle against the lack of hygiene,” she thought.

That same day, in the evening, the Community Assembly had approved the penalty of one day in jail for any man who took advantage of a trip to town to drink, and three days in jail without food to any who dared strike his wife. “Finally, we women are learning to make our rights respected,” Blanca Alegria had pointed out when commenting on the Assembly’s agreement.

A frozen wind woke Blanca Alegria, forcing her to rise to get a blanket. Upon feeling the roughness of her hands on the smoothness of the blanket, she remembered that in the *mañanita*, when the sun rose, she would have to go clean her cornfield, and so she sank into the coolness of the night to continue dreaming life.

— Dr. Gregorio de Anda Pérez is a Mexican physician who has been training healthcare promoters in the remote communities of Chiapas. This community health project was initiated through Hospital San Carlos, but was about to be dropped due to a lack of funds. DGH is now sustaining the project and sending volunteers to assist in the development of the training curriculum. This poetic essay was written by Dr. de Anda Pérez about one of the healthcare promoters he has trained (names have been changed). Up to the present, 50 promoters have been trained. 

“Clinging to the silence of the night, Blanca Alegria thought that her destiny was tied to the light of the moon: One moonlit night Armando had declared his love for her. One moonlit night her first son Samuel had been born. And it was one moonlit night six years ago that Armando had been lost to her when the soldiers surrounded the Zapatistas in Ocosingo, inflicting a considerable number of casualties.”



Linnea Capps, DGH Board Member, at a training session of the health promoters in Chiapas.

ZIMBABWE

(Continued from page 6)

bred corruption and the government has mismanaged the country's affairs with lack of accountability. The first three elections were political landslides, reflecting the enormous popularity of ZANU in rural areas, where the majority of the population still lives under subsistence farming with minimal education and access to independent opinion. The last election, in 2000, was closely contested by the increasingly popular opposition party Movement for Democratic Change (MDC), signaling widespread dissatisfaction with the ZANU government by people who are remarkably peaceful and tolerant. The welfare of most Zimbabweans has slipped below minimal levels as the ability of the government to provide adequate health, education and social services is jeopardized by its greater focus on difficult-to-justify endeavors, like a huge long-term financial and military commitment to the civil war in the Congo and hefty rewards for high level government officials. Ordinary people are increasingly left to fend for themselves.

The run-up to the elections was marred by violence against people in farming areas, usually perpetrated on behalf of the government. Central to this unrest and an issue of major political and economic import, is the question of land re-distribution. The majority of the highly fertile land in Zimbabwe is still owned by a minority community of white farmers. The vast majority of black people live in densely populated and communally-utilized land of lower productivity that is heavily over-grazed and eroded. They have neither land tenure nor access to high-level lending facilities, so they are unable to develop large scale, more productive agriculture to improve their lots. Although an issue of lengthy debate since the 1980s, the government has made limited efforts to address the land ownership imbalance left by nearly a century of colonial rule. Last year, however, it turned land re-distribution into a hot political issue in order to bolster its low popularity in the elections. Intimidation of white farmers and their black staff by "war veterans" demanding land without compensation was widespread and openly encouraged by the government. Numerous farms were forcibly taken over and hundreds of residents were beaten and threatened, and several were killed. The police failed to react to many of these crimes. Since the elections, the violence has receded but farm occupations continue and the government is going ahead with forced acquisition of farms. Inarguably, land re-distribution is required to redress serious historical imbalances. However, the uncertain and heavy-handed manner in which it is being conducted reduces confidence in the rule of law in the country. The economy of Zimbabwe is heavily dependent on agriculture and this industry requires careful handling to prevent investor fear and economic crisis. Re-distribution must not seriously jeopardize the welfare of the people and the benefits must be experienced by those who are most disadvantaged by the current system.

Did You Know?

Human freedoms have never advanced automatically. And as in earlier times, advances in the 21st century will be won by human struggle against divisive values—and against the opposition of entrenched economic and political interests. People's movements and civil society groups will be in the vanguard, raising public awareness of rights violations and pressing for changes in law and policy.

—2000 UN Human Development Report

UNITED STATES

(Continued from page 6)

sentences for similar drug crimes than whites. While recounting the Clinton Administration's unsuccessful effort to secure a limited reform of the cocaine sentencing laws (a reform which, in any event, would still have left black drug defendants disproportionately vulnerable to higher sentences), the report did not venture an assessment of whether the current laws violate CERD. Nor did it consider whether the striking racial differences in the incarceration of drug offenders at the state level was consistent with CERD, reflecting the Administration's general reluctance to subject the US war on drugs to human rights scrutiny.

As reflected in the report, the Administration also mistakenly believed that US constitutional prohibitions on race discrimination meet its obligations under CERD. Under state and federal constitutional law, racial disparities in law enforcement are constitutional as long as they are not undertaken with discriminatory intent or purpose. But CERD prohibits policies or practices that have the effect of discriminating on the basis of race regardless of intent. By requiring proof of discriminatory intent, US constitutional law erects a frequently insurmountable obstacle to obtaining judicial relief from criminal justice policies that have an unjustifiably discriminatory impact. Instead of championing reforms that would reduce striking racial disparities in, for example, the rates at which blacks and whites are arrested and incarcerated

on drug charges, the Clinton Administration expressed pride in constitutional protections that do not, in fact, meet international standards.

The US maintained its failure to become party to important human rights treaties, including the International Covenant on Economic, Social and Cultural Rights and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). It was one of only two countries in the world—with Somalia, which has no internationally recognized government—that had not ratified the Convention on the Rights of the Child. In addition, little progress was made toward signing and ratifying core International Labour Organization conventions intended to protect basic labor rights, though the Clinton Administration did sign ILO Convention No. 182, the Convention concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour in December of 1999. It also submitted an ILO Convention concerning employment discrimination to the Senate for ratification, but the Senate did not act.

— Copyright © 2001 Human Rights Watch. Reprinted by permission. You can also read about the initial US report to the United Nations Committee against Torture—produced four years after it was due—acknowledging areas of "concern, contention and criticism" with regard to police abuse, excessive use of force in prison, prison overcrowding, physical and mental abuse of inmates, and the lack of adequate training and oversight for police and prison guards at the HRW web site (<http://www.hrw.org>).

EL SALVADOR EARTHQUAKE RELIEF

By Guillermo Hidalgo, MD

El Salvador has suffered, as few other countries in the earthquake belt, devastating effects from two of these natural disasters in the last decade. El Salvador's case is acute over chronic. That is to say, with overpopulation in urban areas, a standing unemployment rate of 40 percent, an under employment rate of 68 percent and the recent "dolarization" of an economy that has a yearly per capita income of \$387.00, the earthquake of January 13th caused, in 30 seconds, the loss of the equivalent to 50 percent of the nation's budget for 2001.

Nonetheless, it is also true that even though the disasters are "natural" in origin they seem to affect with higher intensity the poor and, in this case, those who were already without voice, house, food and clothing. This is the reality that we witnessed in El Salvador during our brief visit in a medical relief effort with DGH. At first we were anxious to go. Then, upon arrival, we did not know where to begin, the need was so overwhelming. After making some contacts with local organizations we realized that the towns affected had already received some type of aid, but the areas in the periphery of the towns—the *cantones*—had not. We decided to focus on such areas, and with a team of about nine volunteers, including medical students, a nurse, a pharmacist, physician assistants, a physical therapist and doctors, saw an average of 80 patients per visit.

What we saw was the devastating effects of the earthquake and its magnitude. The faces of people denoted anxiety, incertitude and desperation. The most frequent complaints were a mix of anxiety and fear. Most of the kids had upper respiratory infections from sleeping in the cold weather under the tents. As opposed to the 1986 earthquake, this time there were actually very few cases of surgical trauma.

We visited San Agustin, a town in Usulután, where there was no standing house. It was a scene of war. The fact is that the people of El Salvador have survived, in the last decade and a half, a 12-year civil war, hurricane Mitch, epidemics of dengue, methanol intoxication and rotavirus, and a couple of earthquakes. There is desperate need of your help to support the reconstruction process.

— *Dr. Hidalgo is a Salvadoran Pediatric Nephrologist, Orthopedic Surgeon and DGH Advisory Council Member living in NYC, who traveled to El Salvador with DGH President Lanny Smith and other DGH volunteers immediately after the earthquake. Lanny reports that the areas of Morazán and Cabañas, where DGH works through local groups, were not significantly affected by this earthquake. Unfortunately, Morazán is so underdeveloped it is still far behind many of the communities hard hit by this natural disaster. Your emergency aid is badly needed, as is your continued support of a healthy and socially just future for the people of El Salvador.*



DGH

DGH Announcements

- ▶ **People's Health Assembly.** From December 4-8, 2000 over 1,500 activists from more than 94 countries participated in PHA 2000, including five representatives from DGH. As the culmination of more than a year of organizing in communities throughout the world, we discussed each other's work toward health and social justice, formed alliances and planned ways to make a difference. DGH is proud to be a signee of the People's Charter for Health. See www.pha2000.org for details.
- ▶ **DGH General Assembly.** Join us in Kalamazoo, MI on July 20-22, 2001, for *Equality in Health: It Takes a Revolution*, the 6th Annual DGH General Assembly. See www.dghonline.org for details and the registration form.
- ▶ **Global Assembly for the Human Right to Health.** DGH is a co-sponsor of this meeting, to be held from April 20-22nd 2001 in Iowa City, IA. See the DGH web site for more information.
- ▶ **Liberation Medicine Workshop.** DGH is organizing a half-day workshop on the weekend before the American Public Health Association's 2001 conference in Atlanta, GA, October 22-25. See the DGH web site for exact time and place.
- ▶ **Mulukuku and Dorothy Granada.** Please support the community of Mulukuku, Nicaragua, in preserving the health and social justice work of Dorothy Granada. See www.peacehost.net/Dorothy.

DGH Reporter

Edited and designed by Monica Sanchez. Mail suggestions to P.O. Box 1761, Decatur, GA, 30031, U.S.A., or e-mail it to newsletter@dghonline.org.

DGH is administered by a volunteer Board of Directors whose members have volunteered with DGH a minimum of three years and are elected by DGH Voting Members. The Board is assisted by an Advisory Council composed 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. There are no paid employees. DGH is incorporated in the state of Georgia as a 501(c)3 organization. Donations are tax deductible.

HONDURAS

(Continued from page 7)

larger companies. They were doing a lot of damage to our ecology. Flora and fauna were being destroyed, medicine plants damaged.”

With 15 percent to 20 percent infant mortality and annual monthly income of \$50 to \$70 (US), Lenca struggle for survival. Only three out of every 1,000 attend universities, he said. “The government has never shown any interest in developing education in our territory.”

Martinez said Lenca lack technical skills to produce manufactured products on their own. They have no labor rights, evidenced by the fact new factories leave without paying wages owed to Lenca. “They open and close quickly and argue they have gone bankrupt.”

The privatization of public water and utilities threatens to raise even higher the cost of living. Already, the local currency is worth one-seventh what it was eight years ago, Martinez said.

“We firmly believe that in Honduras the rich are getting richer and the poor are getting poorer. In Honduras, people become rich overnight.” Except for the Lenca. “Indigenous people can vote, but we are not recognized as part of the social system.”

During US military occupation in the area, DNA sampling was done and experiments performed on Lenca to determine their resistance to disease, Martinez reported. “They want to extract microorganisms from human beings and plants. It is one more form of genocide.”

Their struggle is costing Lenca their lives. During a protest last year, police hurled 500 tear gas canisters into a crowd of 25,000 people, killing two, wounding 40 and resulting in fetal deaths and birth defects, Martinez said. “We have our hearts for the struggle. This power doesn’t come from money, but the desire and strength that comes from our veins.”

Dr. Joy Mockbee, medical doctor in Tucson serving with Doctors for Global Health, said it is organizing medical and human rights support for Lenca. Witness for Peace, a grass-roots human rights organization supporting justice and sustainable economies through non-violent means, and Doctors for Global Health were hosts for Martinez’ Southwest visit.

Martinez urged letters to the World Bank, requesting consultation be carried out with Lenca before development destroys their land and culture. An appeal was made for letters to the government of Honduras to respect the United Nations

International Convention 169, regarding consultation and participation of ethnic people in decisions regarding livelihood, lands and cultures.

“The new conquerors are disguised as democracy, but they want our land,” Martinez said. “It has grave consequences for our human rights.”

— *This article was first published in Indian Country Today. It has been reprinted here with the permission of the author, Brenda Norrell.* 🌿

CHILE

(Continued from page 7)

and air. He referred to Arauco S.A., Mininco S.A., Volterra Ltd., Shell, Mitsubishi and Amindus among others. The Mapuche leader told the Commission these companies use chemicals such as sulphate of soda, chlorine, caustic soda, chlorate and gasoline, which contaminate the beaches around Concepción and its bay area, the Bio-Bio River, and the Gulf of Arauco. He added that the companies have destroyed native forests, caused the extinction of some species of trees and medicinal plants, poisoned people, caused congenital illnesses with their use of pesticides, and replanted forested areas with unsuitable species such as eucalyptus, which lowers the water table and leaves communities without water.

Cayuqueo also gave a detailed account of human rights violations especially in the provinces of Arauco and Malleco. Here, the indigenous communities of Cuyinco, Pascual Cona, Rucananco, Pichiloncoyan and Temulemu have been suffering systematic attacks on their basic human rights as defined by the UN. The police detain people illegally and torture them in police stations, where they are not treated according to the law or presumed innocent, Cayuqueo said. Mapuche people are stopped from using and enjoying the fruits of their own land. Armed police prevent Mapuche people from freely using public roads and rights of way through land in dispute. Cayuqueo complained to the Commission that the media publishes incorrect or damaging information about Mapuche leaders, insinuating their connection with subversive left-wing groups.

Billions of dollars worth of international investments in forestry, mining and hydroelectric projects are at stake in the increasingly violent conflict. A sprawling commercial timber project on the outskirts of Temocuicui (pronounced TEY-mo-kwee-kwee) demonstrates the type of tensions brewing across a region that the Mapuches have claimed as their homeland for nearly 200 years.

On November 4, 1999, *The Dallas Morning News* reported that since September, almost 400 armed Chilean National Police have been deployed in the forest to keep Temocuicui’s residents from uprooting pine saplings and torching timber equipment. “What we are demanding is that they leave completely. We want them to pack up and go,” said Jose Nain, a leader of the All Lands Movement, one of several organizations advocating mass protest among the Mapuches. Around the time of that report, the conflict had resulted in one death and several injuries to Mapuches, as well as more than 400

Mapuche protesters being jailed for acts of civil disobedience.

Many Mapuches view the conflict as one in which they have little left to lose, since their living standards have bottomed out and nobody is listening to their concerns. “We’ve been shot at. We’ve been taken prisoner. People come and say they will help, but nothing changes,” explained Luz Verena, a mother of six who lives in Temocuicui. 🌿

Did You Know?

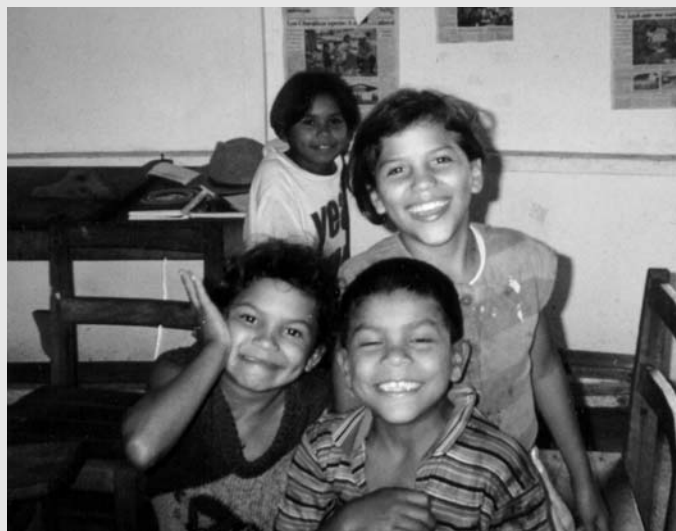
An estimated 5 million people died in conflicts within national borders in the 1990’s. Globally in 1998 there were more than 10 million refugees and 5 million internally displaced persons. The number of deaths and displacements alone greatly underestimate the human rights violations in these conflicts, which had widespread rape and torture.

— 2000 UN Human Development Report

“To be truly radical is to make hope possible rather than despair convincing.”

- Raymond Williams

Doctors for Global Health thanks you for helping to keep hope possible in the communities and organizations with which we work around the world. We wish you and yours all the best for a joyful, peaceful and rewarding 2001.



Los Chavalitos, Nicaragua



DOCTORS FOR GLOBAL HEALTH
Promoting Health and Human Rights
“With Those Who Have No Voice”

Box 1761, Decatur, GA 30031 U.S.A.
Tel. & Fax: 404-377-3566
e-mail: dghinfo@dghonline.org
<http://www.dghonline.org>

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**Equality in Health:
It Takes a Revolution**

Take part in the 6th Annual DGH
General Assembly in Kalamazoo, MI
July 20-22, 2001