



# Doctors for Global Health Reporter

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## DGH IN EL SALVADOR: EARTHQUAKE RELIEF

By Marcelo Venegas-Pizarro, MD

The warm humid air of San Salvador struck me as soon as I got off the plane. Like other Latin countries, the airport was filled with family members awaiting their loved ones. Surveying the crowd I saw my name on a sheet of paper with Franchesca and Maximo holding it. They both belong to the church *Maria de los Pobres* in La Chacra, an area known for its crime and poverty. As we sped down to the town of San Agustin in the province of Usulután, Franchesca, *the gringa*, introduced herself as a volunteer at the Church for over two years, having left behind Lansing, Michigan and bringing her pharmacy skills to use in San Salvador. Maximo, the driver and church handyman, would later tell me his harrowing story more in depth.

As a child I had participated in activities concerning El Salvador that my parents assisted, denouncing the atrocities by paramilitary death squads and the US support of them. In my memory stood out the assassination of the Archbishop of San Salvador, Oscar Romero, an outspoken critic of the government and a "priest of the poor." The rapes and slayings of three American nuns and a female religious worker in 1980 also stood out in my mind. The more than ten-year civil war had come to a halt in 1992 through a peace agreement between the *guerrilla*, Farabundo Martí National Liberation Front (FMLN) and the Salvadoran government. The war had claimed the lives of over 75,000 people, mostly civilians, with over \$6 billion given by the US in support of the Salvadoran government.

I had come to El Salvador as a DGH volunteer to aid in the earthquake relief. The earth-

quake had struck El Salvador on January 13th, leaving massive destruction in the poorer regions. On the highway we passed relief trucks heading in the same direction. Fields of cotton, wheat and corn surrounded the highway along with chains of volcanoes on the horizon, including San Vicente and San Miguel. Soon we hit dirt roads and dense vegetation, as we entered the road to San Agustin. On the road we met Father Cesar, with his *sombrero* and constant smile. Young men with their *machetes* climbed onto the back as they hitched a ride to go and work the fields.

Entering San Agustin was like entering a war zone, not only because of the strong presence of the military and police

“Entering San Agustin was like entering a war zone, not only because of the strong presence of the military and police armed with rifles, but because of the overall devastation. It seemed that there was not one house left standing.”



Marcelo (far left) with Honduran volunteers, two weeks after the quake.



Marcelo at the health workshop held every Sunday at the San Agustin church.

armed with rifles, but because of the overall devastation. It seemed that there was not one house left standing. The women in makeshift ovens made *tortillas* and the children played in the dusty street running behind cars. Pigs and dogs ran in the streets and an occasional ox-driven cart stumbled by. We arrived to what was once the church of San Agustin greeted by Father Amilcar, Jaime and Olman. Jaime was a volunteer from the *Maria de los Pobres* Church, where he was in charge of the clinical lab. Olman is from San Agustin and had also been volunteering in the church reconstruction. Over 30 Honduran volunteers had come from a sister church to help in the earthquake relief. The overall scene was very busy, with tents sprawled over the grounds and people at work building latrines, bathhouses, cooking, or removing the concrete and adobe debris.

We walked all over the town surveying the wreckage. Jaime told us about how much aid had arrived, but explained that the ARENA party government of President Flores had allocated it mostly to its controlled zones. We also went into the San Agustin Clinic ran by two recent Salvadoran medical school graduates, Drs. Maureen and Jose, who were doing their year of social service. They had received several donations of medication from abroad and were busy seeing many patients, but the majority of the emergencies had been already controlled. They explained how lucky it was that the earthquake had occurred at midday, when most people were at work. Otherwise, they said, many more would have died.

That afternoon, I worked at the clinic seeing patients, but after a visit by one of the Sal-

vadoran ministers of health (who showed up in a Range Rover and had the audacity to ask me for tents for their clinic), Father Amilcar, Father Cesar and I decided that my work would be more useful visiting the surrounding communities or *cantones*. That night, after getting used to the dust, latrines and outside bathhouses, we congregated to sing songs with a guitar in hand—mostly religious songs, but intermixed with songs of protest, many of which I knew from Chile, my birthplace, and the resistance movements in exile. We all ate together with the Honduran volunteers and shared our day's events in the evenings as well as handed out medications as needed.

We visited a total of six *cantones*, all surrounding San Agustin: Buenos Aires, Galingawa, El Coroso, Los Patios, El Jicaró and El Rodeo. Many were far and hard to reach, some accessible only by walking. Many *cantones* had smaller populations, decimated by the war. In fact, some had been wiped out completely. We would set out with our medications in boxes, mostly acetaminophen, ibuprofen, parasite medication, common antibiotics, anti-fungal cream, vitamins, first aid supplies and oral rehydration salts. The people in the communities greeted us with great warmth and friendship, bringing cool water or *atole* to drink.

The majority of the cases we saw were not actual emergencies or earthquake-related medical needs. They were mostly chronic problems that already existed in the community. The mothers would diagnose parasites in their children—mostly enterobius and ascaris—when they saw the children not wanting to eat, fatigued and grinding their teeth at night. Cough and sore throat was very common due to the great amount of dust from the demolished buildings and clearing away of debris. Headaches, urinary tract infections, and fungal infections were all very common as well. Anxiety was also prevalent due to the aftershocks that continued to shake the earth well beyond two weeks after the earthquakes. I would awaken at night to *temblores*, the earth swaying back and forth, not knowing if another earthquake was soon to come.

In all, with the help of Jaime and Dr. Maureen, we must have seen some 800 patients in the *cantones*. There were also some memorable cases, such as a young man with an arterial laceration from a *machete* and a child who was brought to us in a state of lethargy from vomiting. We started an intravenous fluid line and sent the child to the closest hospital (one-hour away). We also encountered an elderly gentleman with a cerebral stroke and followed up on a mother and child in leg casts because a wall had fallen on them.

Three days into my arrival there was talk of organizing a health promoter group with representation from each *canton*. On Friday night Jaime, Maureen and I headed to San Salvador to meet Father Daniel from the *Maria de Los Pobres* Parish to help organize a meeting with representatives from each *canton*. It was the following morning that Maximo, the driver, explained to me during breakfast how a military death squad had killed his father and brother. He showed me their pictures in a thick binder along with many more pictures of those killed. Jaime had talked to me about the hundreds of deaths of protesting youth at the university and at the hands of death squads in the middle of the night. With that in mind they gave me a poster of Monseñor Romero to take home with me, which read (in Spanish): "It is blood and pain which will water and nourish new and each time more numerous seeds of Salvadorans, who will take consciousness of the responsibility that they have in con-

**“Anxiety was prevalent due to the aftershocks that continued to shake the earth well beyond two weeks after the earthquakes. I would awake at night to the earth swaying back and forth, not knowing if another earthquake was soon to come.”**

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# DGH LOCALLY: LIBERATION MEDICINE IN THE US

By Shirley Novak

Medicine. There were two major problems in writing this: 1) There are so many possible ways to promote Liberation Medicine; and 2) Those doing the promotion are not boasting about their activities. Mostly, they go about their daily routines, living their lives, doing what they know and enjoy, doing what comes naturally and not thinking that what they are doing is anything special or unusual. Maybe it's not special to themselves, but to those "who have no voice," or to folks who "have difficulty making their voices heard," it can literally mean the difference between life and death.

Liberation Medicine is: "The conscious, conscientious use of health to promote human dignity and social justice." The best way to do this—really the most effective way to do this—is to incorporate the concept and practice into our daily lives.

The very first step in any process is to become informed. To be educated. After that, one can make an informed decision, take a stand for or against something, make a meaningful contribution, make a difference. The work of DGH in developing countries is important—to the people living there and to us. Part of that work is being done by volunteers through funds donated by those already educated on the needs. Folks like you. In this world of injustices, where the needs are so great, it is easy to see the necessity of educating more and more people to make more and more informed decisions, to take more and more stands against injustices, so the wide gap between the haves and the have-nots is narrowed, where the voiceless can begin to speak—without fear—and be heard. Now I'll share with you some examples of DGH members and supporters promoting Liberation Medicine, Health and Human Rights, within their own communities here in the US.

DGH folks often take the opportunity to talk informally about the organization and its projects with their co-workers and visitors entering their workplaces. Indirectly, this helps make clear the existing inequities and injustices that make the work necessary. Such informal talks take place all around the country: in the Georgia Parks, Georgia Tourism and Wildlife

You probably are most familiar with Doctors for Global Health's international projects. This is to give an idea of what DGH is doing in the US regarding Liberation

Resources, and the Bronson Hospital in Kalamazoo, MI, when a pediatric resident gave a Grand Rounds on her recent month spent in El Salvador. This exposes people to issues facing the marginalized poor of El Salvador (and other places) and gets folks thinking in ways

they might not have done otherwise. For other DGH volunteers, the variety of formal and informal talks, often with slides of international projects, ranges from 3rd grade at area elementary schools and high

school Global Studies classes, to university Spanish or Latin American Studies courses. Community organizations—religious and secular—are also the recipients of this Liberation Medicine/Human Rights promotion, though those terms are not always prominent, depending on the age group of the audience.

**“Liberation Medicine is: The conscious, conscientious use of health to promote human dignity and social justice.”**



**TOP:** A DGH-sponsored health workshop for new immigrants at the Center for the Education of Workers in NYC.

**MIDDLE:** Dr. Lanny Smith (far right) at a DGH-sponsored Liberation Medicine workshop at the American Public Health Association Annual Conference in Chicago.

**BOTTOM:** Shirley Novak sharing her experiences in El Salvador with fifth graders.

When one DGH board member was made aware of a local filmmaker's search for a non-profit organization willing to assist in channeling donation money, Liberation Medicine took on another form. At the screening of *Long Haired Warriors* in Salt Lake City, DGH was introduced to many more locals and the opportunity to pass on financial help to elderly women in need in Vietnam was realized.

Press work is an obvious and important aspect of this type of collaboration. DGH and Liberation Medicine/Human Rights themes are often addressed as volunteers make contributions to journal articles, local newspapers and organizational newsletters, and involve the non-print media whenever possible. With any DGH project, volunteers are encouraged to initiate their own press work.

## Creative Fundraising

Timothy Holtz, MD, MPH, a DGH Board member and epidemiologist with the Centers for Disease Control, used his creative talents to raise money for DGH. He held a photography exhibit, *Portraits of Tibet: Outside In*, at the Java Monkey Coffee House in Decatur, GA, in June of 2001. He was able to capture images of refugee life on film during a year spent in Dharamsala, India (seat of the Tibetan Government-in-exile) working with survivors of torture as a Columbia University Fellow in Human Rights and Health. But Tim may no longer be able to consider himself an amateur photographer. He sold all of the photos and donated the proceeds to DGH.

As Tim explained in the invitation, "Tibet's recent history is one of an ancient nation hurled from feudalism into modernity in a series of tumultuous events, with the loss of life from a small and unique population of genocidal proportions. It is the story of an invasion and occupation of a peaceful country that resulted in the loss of over one million lives (one-sixth of the population), the destruction of thousands of monasteries and ancient relics, and the decimation of forests and wildlife of a previously protected ecology the size of Western Europe. It is also a history of a non-violent fight waged by the Dalai Lama and the Tibetan people to preserve their culture and identity as a constructive refutation of Chinese claims on their homeland."



Since local media is often interested in covering stories of local community members, this allows marginalized groups like poverty-stricken *campesinos* in El Salvador and the indigenous of Chiapas to get media coverage for their seldom-heard stories.

DGH sponsored a poetry contest two years ago and this year a photography contest was held to illustrate the need for Universal Healthcare. Thus, we have brought Liberation Medicine into the realm of the arts, as we did with the film screening in Salt Lake City.

One of DGH's board members used his creativity and talents, when a photography exhibit became a fundraiser, generating money for DGH and promoting Human Rights at the same time (see above).

A major financial contribution came coupled with a very special award this spring. We were most proud when our founding treasurer, Renée Smith, was named Georgia Mother of the Year, and through this honor, DGH became more widely known. The state award recognized her essential work in the community in the formation and development of DGH over the past six years. Renée earned

national recognition for herself and DGH as well, when she was named one of two special honorees and \$1,000 from the American Mothers Group for the charity of her choice was donated for a DGH project enhancing the life of abused or abandoned children in Nicaragua.

Of course it is expected that numerous presentations would be given by DGH Board members and others within various medical institutions. Both formal slide presentations and informal breakfast table discussions are just two examples of Liberation Medicine promotion at the Society of Teachers of Family Medicine annual meeting, a Chapter meeting of Physicians for Human Rights, local faculty development classes in Arizona, Liberation and Social Medicine curriculum for medical residents in the Bronx, NY, at the Center for Disease Control in Atlanta and many other similar institutions. Through Highbridge Community Life Center [Clinic] in the South Bronx, NY, the underserved—many of them undocumented immigrants—are offered health care with dignity. This is perhaps Liberation Medicine at its best.

The University of Iowa sponsored *A Global Assembly: Advancing the Human Right to Health* in April of this year. DGH was well represented. Two Board members and several Advisory Council members were major presenters at this conference. DGH also lent its name to this important gathering as one of the off-campus sponsors. Through DGH volunteers, Liberation Medicine has been brought to Manhattan through computer and health-related classes taught at an ESOL center for immigrants. The recent earthquakes in El Salvador encouraged the formation of a coalition of community groups in Syracuse, NY, to promote the sale of Fair Trade coffee from El Salvador. Given much local media attention, the mayor eventually signed a proclamation declaring "El Salvador Earthquake Coffee Month." DGH was also promoted since a Board member and local resident had recently returned from volunteering in El Salvador, and the coffee project was carried prominently on the DGH web site (see page 11). You can also check out the DGH web site often for updates and links on a variety of Liberation Medicine and Human Rights issues.

With ever-increasing Globalization closing in and transnational corporations squeezing local companies out of business—putting profit before people—

*(Continued on page 10)*

# A SURGICAL STRIKE WITH COLLATERAL DAMAGE: WELFARE REFORM AND CHILDREN IN IMMIGRANT FAMILIES

By Jennifer Kasper, MD, MPH

The United States is undergoing an amazing demographic shift: one in five children in the United States is an immigrant or is US-born but lives in an immigrant family. This is the fastest growing segment of the child population. In 1996, welfare reform drastically altered the provision of public assistance (Medicaid, Food Stamps, welfare, and Supplemental Security Income), for *legal* immigrants of all ages in this country, a distinction based solely on their immigration status and date of entry into the US. This may have unintended repercussions for the health and well-being of children and, based on the articles of the UN Convention on the Rights of the Child, is a violation of their human rights.

According to Census figures, the vast majority of immigrants in this country (90%) are here legally. The safety net of social programs that historically buoyed them in their initial and most difficult years was abruptly torn asunder upon welfare reform's passage, leaving scores of families without basic services. Essentially, all *legal* immigrants—children and adults alike—who enter the US after August 22, 1996, are effectively barred from all federal benefits until they become naturalized citizens. Whether a child is an immigrant ineligible for health insurance and food assistance, or a US-citizen whose immigrant parent is ineligible, the end result is the same: the child's health and nutritional well-being are jeopardized.

The most recent analysis available from two independent surveys highlighted this disturbing trend. In a study I conducted with Physicians for Human Rights, we found that 4 out of 5 low-income, legal immigrant families interviewed were hungry or on the brink of hunger. They had to skip meals or go whole days without eating because they didn't have money to buy food. The California Food Policy Advocates also found that immigrant families who lost food stamps were suffering from increased hunger. Children in some immigrant families would benefit from the receipt of assistance to ensure optimal growth, function and health, yet studies have shown that they are more than likely not receiving it. For example, there were 1.2 million fewer lawfully present immigrants receiving food stamps in 1998 than in 1994, a decline of more than 80 percent. Even more startling, there was a decline of over one million US citizen children of lawfully present immigrants during the same period, a 75% drop due largely to the effects of the 1996 legislation.

This apparent gap between nutritional need and received services among immigrant families needs to be addressed. Immigrants make a cumulative \$25 billion contribution to the US economy annually. Ironically, their tax dollars support the very programs they are being denied. Parceling out public assistance based on the merit of citizenship is immoral and fails to recognize the role that immigrants play in our society. Children do not live in isolation; they are uniquely dependent upon the adults in their families and communities to ensure their optimal health, well-being, and development. Local, state and federal governments must be committed to eliminating the blights of poverty, hunger and inadequate access to medical care in all families by abolishing the stigma of immigration status.

President Bush has an opportunity to support immigrants' family values by ensuring they have the means to provide for their families. Articles in the UN Convention on the Rights of the Child, specifically non-discrimination, the right to the highest attainable standard of health, and a standard of living adequate for a child's physical, mental, spiritual, moral and social development, crystallize what ought to be

done to recognize the social claims of children and care for them in a just fashion.

If you're interested in learning more, and advocating on behalf of immigrant families, visit these web sites: Food Research and Action Center ([www.frac.org](http://www.frac.org)), National Immigration Law Center ([www.nilc.org](http://www.nilc.org)), National Council of La Raza ([www.nclr.org](http://www.nclr.org)). On the federal level, you can support pending legislation collectively called, *The Healthy Solutions for America's Hardworking Families*

**“Welfare reform drastically altered the provision of public assistance for legal immigrants of all ages in this country, a distinction based solely on their immigration status and date of entry into the US.”**

2001. This agenda includes three pieces of legislation that address health and nutritional concerns for immigrant families (each of these Acts enjoys bipartisan support):

- ▶ **The Immigrant Children's Health Improvement Act of 2001** gives states the option of providing federal health care to lawfully present immigrant children and pregnant women.
- ▶ **The Nutrition Assistance for Working Families and Seniors Act of 2001** restores food stamps to qualified immigrants, primarily affecting families with children, and makes other improvements in federal nutrition programs.
- ▶ **The Women Immigrants' Safe Harbor Act** permits new American domestic violence victims to obtain the same services available to all other Americans.



Jennifer Kasper (far right), currently a fellow with Physicians for Human Rights, teaching health promoters during her 18-months as a volunteer in El Salvador.

## DGH Photography Contest Winners

This year DGH sponsored a photography contest to illustrate the need for universal health care. All entries were based on the theme of "Promoting health and human rights with those who have no voice." We received many wonderful photos, making choosing the winners a difficult task for our distinguished panel of judges. Our thanks to all who shared their powerful images with us and our congratulations to the winners, listed below.

### FIRST PLACE (SEE PHOTO ON THIS PAGE):

► **Jennifer Vu**, Washington, DC, Computer Scientist/programmer

**Photo:** Tan Binh, Vietnam

### SECOND PLACE (SEE PHOTO ON PAGE 7):

► **Caroline Brown**, Morgantown, WV, Postdoctoral Research Fellow in Nursing

**Photo:** San Carlos, Philippines

### THIRD PLACE:

► **Kevin McGarvey**, Indianapolis, IN, Second Year Medical Student

**Photo:** Nicaragua

### HONORABLE MENTION:

► **Eugene G. Ryan**, Portugal Cove, NF, Canada, Professional Photographer

**Photo:** Nigeria, West Africa

► **Maya Vijayaraghaven**, Jamaica Plain, MA, Masters in Medical Science Program

**Photo:** Calcutta, India

► **Stephanie Doniger**, Long Beach, CA, Fourth Year Medical Student

**Photo:** Honduras

## Help DGH Earn Online Referral Fees

Go to the DGH web site, follow the links to the online stores listed and purchase the books or CDs you planned to buy anyway. DGH will get a percentage of the sale – at no additional cost to you.

<http://www.dghonline.org/reflinks.html>

# Human Rights

At DGH we believe there is an intrinsic relationship between art, health, education and Human Rights. Art, in its various forms, inspires our daily work. Every other issue we'll share some of the books, movies and music that have touched us. We invite you to recommend some works that have moved and enlightened you. Send your suggestions with a brief description to Monica Sanchez at [newsletter@dghonline.org](mailto:newsletter@dghonline.org).



## In Print

**ON THE FRONT LINE: GUERRILLA POEMS OF EL SALVADOR**, Edited and Translated by C. Alegría and D. Flakoll, Curbstone Press, 1996, Fiction, ISBN 0-915306-86-7. In this collection of poetry the voices of the El Salvadoran insurgency spring to life with works of testimony, as well as acts of imagination, a record of the struggles, hopes, and dreams of a war-torn country. All the poems, whether of love or war, childbirth or the "disappeared," radiate a hard-won optimism.

**CLANDESTINE POEMS**, by Roque Dalton, a Bilingual Edition Translated by Jack Hirschman, Curbstone Press, 1990, ISBN 0-915306-91-3. In Clandestine Poems, Roque Dalton invented five poets who express their concern over the situation in El Salvador. Written just before his assassination, Clandestine Poems delivers its political insights with biting humor, strength and tenderness.

**MÁS ALLÁ DEL HOMO SAPIENS**, By Mariú Suárez, Trafford Books, 2000, Nonfiction, Spanish, ISBN 1-55212-522-X. This two-volume book by a DGH friend, Beyond the Homo Sapiens, painstakingly describes the reasons why the world was and still is corrupt and demeaning to its inhabitants. Her premise is that time is a wheel of continuous movement; the present is the fruit of the past, and the future is the fruit of the present; any hope for a better future, requires that we understand the past and change the present. This mystical and historical journey successfully re-interprets the historical events of the past 5,000 years, providing new insights for methods of self and universal improvement.

**IN THE SOUTH BRONX OF AMERICA**, Photographs by Mel Rosenthal, Introduction by Grace Paley, Curbstone Press, 2001, Nonfiction, ISBN 1-915306-96-4. Residents of New York City's South Bronx neighborhood live in the most severe and widespread poverty of any US metropolitan area. This book offers both an intimate view of life in this neighborhood and a context for understanding the last two decades of accelerated social decay. Documentary photographs counterpoint statements by residents, newspaper clips and brief statistical data. Rosenthal's engaging photographs are the focus of the book, celebrating the vital human spirit that survives economic hardship and urban blight.

**I WAS NEVER ALONE: A PRISON DIARY FROM EL SALVADOR**, by Nidia Diaz, Ocean Press, 1992, Nonfiction, ISBN 1-875284-13-3. A moving personal account of survival by a Salvadoran revolutionary leader whose 190-day imprisonment became the focus of an international human rights campaign.



# In the Arts

**ISLAND UNDER SIEGE**, by Pedro Prada, Ocean Press, 1995, Nonfiction, ISBN 1-875284-88-5. An excellent outline of how Cuba has been affected by almost four decades of blockade by the United States.

**HOMAGE TO CHIAPAS: THE NEW INDIGENOUS STRUGGLES IN MEXICO**, By Bill Weinberg, Verso Books, 2000, Nonfiction, ISBN 1-85984-719-6. The Zapatistas in Chiapas have served as a catalyst for revolutionary indigenous movements across Mexico, pioneering a new model of resistance and posing a powerful threat to the stability of NAFTA. This book vividly depicts the grassroots struggles for land and local autonomy now underway with on-the-spot reportage from Tabasco, where fishermen blockade state owned oil wells to protest local pollution; from Central Mexico where plans for a giant computer complex and golf course spark an Indian uprising; as well as from Chiapas where the author interviews Subcommander Marcos.

**I, RIGOBERTA MENCHU: AN INDIAN WOMAN IN GUATEMALA**, By Rigoberta Menchu, Verso Books, 1987, Nonfiction, ISBN 0-860917-88-6. This book recounts the

remarkable life of Nobel Peace Prize Winner Rigoberta Menchu, a young Guatemalan peasant woman. Her story reflects the experiences common to many Indian communities in Latin America today. Rigoberta suffered gross injustice and hardship in her early life when her brother, father and mother were murdered by the Guatemalan military. She learned Spanish and turned to catechist work as an expression of political revolt as well as religious commitment.



**UNDER FIRE**, Directed by Roger Spottiswoode, Starring Nick Nolte, Gene Hackman, Ed Harris and Joanna Cassidy, 1983. What happens when journalists step over the line of professional detachment and become personally involved in the stories they are covering? That's the question at the heart of this acclaimed political thriller set in 1979 Nicaragua. The streets are filled with the violence of the civil war, the main character is caught in the crossfire and forced to flee with the people, the Sandinistas.

**SALVADOR**, Directed by Oliver Stone, Starring James Wood and James Beluchi, 1986. Engrossing true-life account of the violent civil war in El Salvador as told through the perspective of a has-been journalist trying for one last grasp at glory. He leaves San Francisco broke to cover the escalating conflict and hopefully return to his former stature as a war correspondent. What he finds is a nation torn by random violence, shifting ideologies, poverty and the malevolent influence of the US.


**FICTION OF WAR**, Documentary by Sheila Franklin, 2000. The film contrasts statements made by public and military officials with those of human rights workers, church and community leaders, the displaced, and what we ourselves witnessed. It makes its point with up-close and personal interviews. Workers at the Cen-

ter for Justice and Peace, a human rights organization, describe how the military forced them to the floor at gunpoint before searching their offices. A priest explains how paramilitaries entered a poor slum area neighborhood, killing eight people and kidnapping 40 more who were never seen or heard from again. One of the most enlightening interviews is conducted with former Colombian Army Colonel Carlos Valásquez, who explains that the paramilitaries sometimes "do the work" of the army, resulting in what he calls a "dirty" compromise for the military. To order, call 413-323-7629 or visit [www.1worldcommunication.org](http://www.1worldcommunication.org).

**OUTRIDERS**, Documentary by Pamela Yates and Peter Kinoy. This film depicts the cross-country trip taken by members of the Kensington Welfare Rights Union in 1998. The Kensington Welfare Rights Union is a group of poor and homeless people, who have organized to improve conditions for themselves and others like them. The bus trip was undertaken to gather stories from poor Americans across the country regarding the effects of welfare reform, which they then presented to the United Nations as evidence of the US government's violations of their economic human rights. For copies of the video visit [www.kwru.org](http://www.kwru.org) or call 800-724-8367.



**AFRO-AMERICAN BLUES & GAME SONGS**, Library of Congress, 1999. Part of the Library of Congress' Archive of Folk Song, this collection of rural African-American blues and folk, assembled by Alan Lomax on back southern roads between 1934 and 1941, is a vibrant lesson in music history. Despite its rough recording quality, the a capella hollers are movingly sung and certainly at the root of the blues experience.

**FAREWELLS & FANTASIES: THE PHIL OCHS COLLECTION**, 3-CD Box Set, Atlantic, 1997. Among folk legends, Phil Ochs stands out with over a dozen years as a ringing voice against social and political injustice. His music and lyrics remain powerful, and in some cases topical, over 30 years later. 



**FIRST PRIZE WINNER (LEFT):** "While volunteering at a leper village near HoChiMihn City, I was touched by the evident affection and devotion of a young boy for his grandmother."  
**SECOND PRIZE WINNER (ABOVE):** "This photo was taken in March 2000 of a young girl awaiting surgery by an Interplast volunteer surgical team in San Carlos, Philippines."

# STARVING FOR THE SWOOSH: THE OLYMPIC LIVING WAGE PROJECT

By Jim Keady

Try on these shoes...You are a 20-something adult working 8am to 8pm, Monday through Saturday and sometimes Sunday. That doesn't include travel time or preparing yourself for work. You don't have the money to go out with your friends on Saturday night and celebrate someone's birthday. You don't have the money to buy a television or even a radio. You haven't bought yourself something new to wear in over two years. When you get home at the end of the day, you have to spend a good 30-45 minutes doing your laundry by hand. You need to do laundry frequently, because you don't have many clothes and whatever you wear (depending on the color and how bad you sweat) is visibly dirty at the end of the day.

You have a child who has no toys. Your child is malnourished, even after you put in 12 hours a day at the factory. Because of the malnourishment, your child is more susceptible to illness. On top of that, your

child has nowhere to play except for dirt streets and open lots lined with garbage. There's a cesspool running throughout your neighborhood where rats, cockroaches, dirty cats, roosters and chickens wallow. You don't have the money to move to a better location. You don't make enough to save money to one day move to a better location. You have debt. You don't have enough money to take your child to the doctor. You don't have enough money to buy cough medicine. A real treat would be buying a small loaf of bread. You're constantly inhaling car pollution and the nauseatingly sweet stench of burning plastic and rubber.

You're exhausted. You can feel the tired in your bones. You're afraid that if you speak up, you'll lose your job. And the multinational company you work for is telling the world that they've made serious changes, and consumers need not worry, because you're 100% happy.

— Leslie Kretzu's Online Journal, [www.nikewages.org](http://www.nikewages.org)

In 1997 I was asked to join the coaching staff of the St. John's University Men's Soccer Program, who, at the time, were the defending NCAA Division I National Champions. It was a coaching dream; I was joining the staff of the hottest college soccer team of the 1990's. What was equally exciting was that I was also going to be able to pursue a Masters Degree in Theology at St. John's and the University would be paying for it. I wanted to study theology because I had spent the past three years teaching high school religion and I felt that my students had some great questions for which I didn't necessarily have great answers. Being able to coach at the top program in the country and try to find answers to the deep theological questions that burned inside me seemed a perfect match.

From my first day, the work I did for the

Men's Soccer Program was intense. We were defending a National Championship and every team in the country wanted to prove they could knock off the best. I was the goalkeeper coach for the team. Prior to my time at SJU, I played three seasons as a professional goalkeeper with the NJ Imperials. By the season's end, our goalkeeping unit had the lowest goals-against average in the country. We did not fulfill the dream we all shared that year, to repeat as National Champions, but we did make it to the Big East Final and to the Sweet 16 of the NCAA tournament.

What was even more intense during that year was the academic work and the ensuing personal challenge I faced because my of studies. In a short period of six months, my entire world would be turned upside down. I would be forced to put my commitment to truth on the line and would also be forced to make one of the most difficult decisions of my life.

During the fall semester, when we were right in the heart of the season, my moral theology professor gave me an assignment. I had to write a term paper for his class, and he wanted me to find a topic linking moral theology and sport. For a few weeks I looked at different things and he made some suggestions, but nothing stuck. Eventually, through a series of coincidences, I chose to examine Nike's labor practices in light of what is called Catholic Social Teaching.

What I found in the next few weeks while doing my research was that if you wanted to find a company that completely violates the ethos of Catholic Social Teaching, the Nike Corporation would be that company. As my research progressed, what became increasingly disconcerting to me was that St. John's was negotiating a \$3.5 million endorsement contract with Nike. This contract would call for all athletes and coaches to wear and promote Nike's products. Because of my research, I concluded that I could not, in good conscience, become a walking billboard for Nike. I began to privately and publicly protest the University's involvement with Nike, and I refused to wear the equipment that would be supplied in the coming year. For my actions, I was eventually given an ultimatum by my head coach, "You need to wear this equipment and drop this issue publicly, or resign."

I couldn't believe that, at a Catholic university, I was being told to violate the dic-

**“In a short period of six months, my entire world would be turned upside down. I would be forced to put my commitment to truth on the line and would also be forced to make one of the most difficult decisions of my life.”**



These children of Nike factory workers should be in school, but their parents do not make enough money to pay the fee.



tates of my conscience. I was being forced to choose between my commitment to social justice and a commitment to a company that has been one of the most flagrant violators of human rights. St. John's stance did not change, and I was forced to resign from my position. News of this spread fast from our small Queens, NY, campus and news stories appeared in the *New York Times*, *Newsday*, the *Daily News* and other major publications. It was also a feature story on HBO's *Real Sports*, ESPN's *Sports Center* and NBC's *EXTRA*. I soon found myself as a featured speaker at a number of prestigious universities, including the University of Notre Dame, Princeton University and even St John's Law School.

When I would give these talks, there seemed to be two statements that were repeatedly made by the less-informed. First they would say, "Those are great jobs for *those people*." And they would also comment that \$1.25 a day isn't much in the US, but in Indonesia, that is a fantastic wage. I knew from my research that this was certainly not the case, but I also knew that I would have to take some type of radical action to get people in the US to realize that these statements were just not true. My first attempt at addressing these questions was asking Nike for a job in one of their contractor's factories. Not surprisingly, they declined.

I knew I had to create some kind of action that would allow people here to not only understand what the men and women working in Nike factories in places like Indonesia are going through, but action that would also outrage them to the point of taking immediate action. A fellow activist who wanted to create some kind of online project that would bridge the gap between the workers in developing countries and consumers here in the US, planted an idea in my mind.

There was almost 10 years of research that was most condemning to Nike's operations in developing countries. The campaign that focused around these studies had some impact, but it was glacial at best. How could we get American consumers to relate to the suffering of "those people" who make the shoes and clothes they wear? Since Nike would not allow me to work in the factory, I would do the next best thing. I would go live on the wages and in the conditions of the workers and document the whole experience on the internet and with the latest digital technology. I organized some of my closest friends and initiated the Olympic Living Wage Project. The team was set and on a shoestring budget of a few thousand dollars of private donations and far too many charges on my credit cards, we were off to Tangerang, Indonesia.

Indonesia is about as far from the familiarity of the east coast as we could get. The reality of the volatility of Indonesia set in on our second day in Jakarta when we were two blocks away from a bomb blast that killed two people and injured dozens. What had I gotten us into?!

We eventually made our way to Tangerang, an industrial suburb that is home to the factories that produce for Nike, Adidas, Reebok, Fila, Lotto, Old Navy, the Gap, Levis, Ralph Lauren, among others. You name the major brand, they are producing in Tangerang. We set up shop in a 9' x 9' cement box, with a shelf-paper-lined floor and two thin mats to sleep. We would call this home for the next thirty days. In a neighborhood lined with putrid open sewers, riddled with piles of burning garbage, and pollution you could cut through, we would spend the next month trying to survive on a \$1.25 a day—a starvation wage. I know—we starved on it. We spent most of the month exhausted and painfully hungry, losing 25 pounds.

Although we set out with a focus on Nike, we quickly came to realize that most, if not all, of the sporting goods multinationals producing in Indonesia (including industry giants like Nike, Adidas and Reebok) are exploiting their workers. Given the first-hand experience of the human impact of these companies' labor practices, I can tell you that we will continue to work to bring the stories of these workers to the world. They are not just factory workers, they are fellow human beings, our brothers and sisters. We will strive to give them a voice, to let the world know that they are suffering and in need of justice.

I am now on a National Speaking Tour in the US with the project's Associate Director, Leslie Kretzu, and will be speaking at Colleges and Universities as well as at High Schools, Churches, and Union Halls. We began our tour on October 19, 2000, at St. Joseph's University in Philadel-



**This single room is home to three Adidas shoe factory workers. The back door leads to the communal bathroom, kitchen and laundry facilities. These living conditions are typical for all shoe and garment factory workers in Tangerang.**

phia and have events scheduled in NY, NJ, CT, MA, VT, ME, PA, OH, IN, IA, MI, WI, DE, and will be scheduling events in the West and South of the US in the coming months.

You need to take action on this issue! American-based multinationals are outsourcing to countries like Indonesia where labor and environmental laws are lax and poorly enforced. By operating in countries such as this they can circumvent the labor and environmental laws that we Americans democratically established in the US and value dearly.

Also, some of these companies' business practices violate sections of ratified treaties of the United Nations, including the Universal Declaration of Human Rights and the International Covenant on Economic, Social and Cultural Rights. We are calling on Congressman Chris Smith (R-NJ), who chairs the Subcommittee on International Operations and Human Rights, to call a hearing to investigate this issue and propose legislation that will keep the exploitative practices of companies like these in check. This is a crucial step in the campaign to ensure that worker's rights are internationally respected.

Despite what companies like Nike will tell you, the most viable solutions for positively impacting the lives of factory workers should come from the workers themselves. The workers and union organizers we met with during our stay in Indonesia are asking for a basic monthly cash wage of \$81USD and truly independent monitoring of the factories. To get more information on how you can get involved, visit our web site, at [www.nikewages.org](http://www.nikewages.org). Take action now! 🌿

## A Day's Life . . .

I was called to Don Luis' house at 8 pm by his son because his father could "no longer talk." In the darkness of the driving rain, we slogged through the muddy terrain alongside an overflowing river. During the hike, I gathered more information from my companion: Don Luis was a 73-year old man in good health with no significant past medical history who, after eating dinner, took a nap and had been delirious and unable to rise from bed. When we reached the clearing around his house, I saw a sea of candles held by people surrounding the bed where Don Luis lay. There were over twenty people in the room, both friends and family, and most of them saying he was going to die tonight. I quickly worked up a differential diagnoses list, which ranged from meningitis, hypertensive stroke, subdural hematoma, to overdose with an herbal sleep medicine. There was no equipment to perform a lumbar puncture, a head CT was out of the question, and the clinic was severely short on antibiotics. The nearest hospital was over two hours away, over a dangerous mountain trail of rocks and mud. It seemed that we would have to wait until morning if we wanted to get him to a hospital. I rushed to the clinic with Etelvina, fellow health care promoter, and after we gathered what medicines we could find, we hurried back to the house.

After giving Don Luis the first round of antibiotics to treat what I cautiously presumed to be meningitis, I sat with his family and waited. Throughout the rest of the night, we maintained a midnight vigil with Don Luis, all of us wishing life into him. That night, I burned with the frustration of being unable to adequately treat a patient in unstable condition. But I was struck by a deeper understanding of what medicine truly is. As I looked around the house, I saw Don Luis' wife, his children, and his friends staying by his bed and sleeping under the doorways as the rain continued to fall. The medicine I was able to offer was not for Don Luis alone but for all of us, a symbol of hope that life could be preserved even in the darkest hours of life. And it was an incredible honor to be embraced by Don Luis' friends and family as we watched and waited together for Don Luis to recover. The cookies and coffee I ate that night were among the sweetest I have ever eaten. Thankfully, within twenty-four hours, Don Luis recovered enough to recall that a few hours before his symptoms began, he had drunk a strong herbal sleeping tea after a few drinks of homemade maize alcohol. He has since made a full recovery. And I will never forget that night in Estancia.

— Ben Lee, *El Salvador*, 1999

## LIBERATION MEDICINE IN THE US


*(Continued from page 4)*

it has become very important for grassroots organizations in civil society to band together. DGH's promotion of Liberation Medicine and Human Rights has taken the form of accompaniment. One of the original founding members of the Mexico Solidarity Network, DGH is proud to be part of this grassroots movement fighting not only for Human Rights and Social Justice in Mexico, but also for the rights of indigenous and minority peoples around the world.

The Latin American countries with which we partner have suffered greatly at the hands of soldiers trained at the School of the Americas (SOA), recently renamed the Western Hemisphere Institute for Security Cooperation (WHISC). Over 75% of those cited by the *United Nations Truth Commission For El Salvador* for murder, massacres, torture and "disappearances," were trained at the SOA. Ten of 12 officers of the Salvadoran army battalion that carried out the 1981 massacre at El

Mozote, where more than 900 unarmed civilians were killed, including many children under the age of five, were graduates of the SOA/WHISC. Throughout the decades-long bloody civil war in Colombia, the civilian population has been caught in the crossfire where over 10,000 SOA graduates possess the worst Human Rights record in all of Latin America. Of the \$1.3 billion US aid package known as Plan Colombia, more than 75% is in the form of military assistance. A grassroots movement to close the SOA/WHISC has mushroomed across the nation and the world to the point where another 26 US citizens have been sentenced and most of them entered various federal prisons this July for their non-violent acts of civil disobedience. DGH has written a proclamation against the SOA/WHISC. Many DGH members and supporters have attended those annual November vigils at Fort Benning, GA, the site of the SOA/WHISC; some have crossed the line in civil disobedience, and two Advisory Council members have served 6-month and 14-month prison sentences for their non-violent acts to shut down that School of Assassins.

Another grassroots solidarity movement where DGH volunteers have put their efforts is in the non-violent protest against US Navy bombing on the Caribbean island of Vieques, Puerto Rico. A civilian has been killed in this military test ground and folks committing civil disobedience have been jailed protesting the destruction of an ecological system, along with claims that the people are being exposed to toxic chemicals.

In giving this run-down of DGH Liberation Medicine and Human Rights promotion in the US, I purposely have not used names, with one appropriate exception. It is very likely that many of you have recognized yourselves in the brief descriptions of actions. That too would be no coincidence. Some of you are new to DGH, some have been around since the beginning. But we are all reading this because of an interest in Health and Human Rights, and that translates to the promotion of Liberation Medicine as well. We all can educate. We all can advocate. There are as many ways of doing that as there are individuals holding this in their hands right now. 

## DGH IN EL SALVADOR: EARTHQUAKE RELIEF

(Continued from page 2)

structing a society that is more just and humane." El Salvador had been one of the main centers for the Liberation Theology movement espoused by Monseñor Romero and many others, who believed in the church as an active entity in the struggle for justice and equality for the poor.


That Sunday after mass we met with representatives from nine *cantones*. The people discussed some of their main health issues—such as latrines, waste containment, first aid medical kits for each community, transportation and emergency care. The theme for that day was hygiene, with several points discussed, including the washing of hands, washing fruits and vegetables, the daily bathing of children and adults, dental care, water purification, latrines, and the containment of animals. An elderly man stood up and announced that more emphasis should be placed on medicinal plants, listing several of them and their uses. From there it was established that they would all meet the following week to discuss natural medicine. Back at La Chacra, Jaime had already ordered several hundred herbal pills of *Passiflora* and *Valeriana*, used for anxiety and nervousness. A student from San Salvador arrived with several posters on good health promotion that were handed out and the people seemed enthusiastic to meet again.

Dr. Maureen, Jaime and Olman will continue the health promoter project with support from both parishes, the San Agustin clinic and the clinic at *Maria de los Pobres*. They plan to meet every Sunday after mass with the *canton* representatives for a health workshop. In turn, each will take what they learn and teach within their respective community. I will coordinate DGH help to raise funds and send volunteer teachers for this project. One of my first goals is to raise enough money to buy first aid kits for each *canton*.

My last day in El Salvador was spent in celebration of all the work we had accomplished, bathing and playing *futbol* on a beach named Espinares. At night we said our farewells, with the Honduran volunteers speaking beautiful words about all the work that was done. I explained how I viewed health as something that should be available to all and something that encompasses, not just the use of medication, but also adequate housing, food, jobs, space for children, mental sanity and a healthy environment, and that means striving against poverty and for more equality. We all sang together and promised to meet again.

I got a ride to the airport from Father Amilcar. As he was leaving I gave him all the dollars I had

left, not realizing I would end up stranded, trying to pay the \$28 airport tax with an out-of-order cash machine. While talking in vain to a manager, a man approached me and said he recognized me as the doctor working in Usulután and handed me forty dollars.

Upon leaving, I thought of the countless children I had seen, beautiful, barefoot children, innocent of all their parasites, innocent of all the poverty, innocent of all the war, innocent of all the greed, and a quote came to mind of a Guatemalan poet, Otto Renee Castillo: "Nothing can against this avalanche of love... nothing can against the faith of the people, in the sole potency of their hands... nothing can against life..." 

### DGH Reporter

**Edited and designed by Monica Sanchez.**  
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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.

## The Coffee Connection: Cup-by-Cup Earthquake Relief

Syracuse, NY has long aided El Salvador through the Syracuse-La Estancia Sister Community project, coordinated by DGH Board member Shirley Novak. Now that relationship has expanded even further. Syracuse University students raised funds for earthquake relief, and joined in the El Salvador Coffee Connection project to promote coffee from the devastated country in Syracuse restaurants. This small impoverished nation has suffered two billion dollars' worth of earthquake damage. More than one million Salvadorans lost their homes to the earthquake and are still living in tents or shacks.

The promotion of El Salvador earthquake relief coffee has had many successes. This past April, Paul deLima Coffee Company began offering El Salvador coffee from small-farm co-

ops, which was harvested before the earthquakes. The Marriott-run Lemoyne College cafeteria in Syracuse is using Salvador Fair Trade Living-Wage Coffee, as are several supermarkets, coffee shops, restaurants, workplace offices and churches (Among them are Peter's, Nojaims, Nancy's, Dunkin Donuts, Gem Diner, Brueggers, Burger King at the Zoo, etc.).

The major of Syracuse proclaimed June as El Salvador Earthquake Relief Month. The El Salvador Coffee Connection also hopes that Syracuse City Hall politicians and staffers will begin buying the El Salvador coffee, so Syracuseans should call and suggest it.

The mountain-grown coffee is Certified Fair Trade, Living-Wage and Rainforest Eco-OK. It's guaranteed enviro/bird-friendly. Your cup-by-cup sustains small farmers against giant coffee

plantations and helps them survive the devastation of the earthquake. With coffee whole-sale prices currently at an all-time low, your support is now more more important than ever.

You can buy Salvador Fair Trade Living-Wage Coffee to help economic relief efforts in El Salvador through distributor Paul deLima by calling 800-962-8864 or visiting their web site at [www.delimacoffee.com](http://www.delimacoffee.com). Paul deLima also sells widely all over New York state, so ask for it to be carried by your favorite restaurant, coffee shop or supermarket if you are a NY resident.

To learn how you might begin a similar campaign in your community, contact Austin Paulnack at the Accountability Project, El Salvador Coffee Connection: 119 Strong Avenue, Syracuse, NY, 13210, 315-472-1394, or [earthquakecoffee@hotmail.com](mailto:earthquakecoffee@hotmail.com).

## Dorothy Granada and the Mulukukú Women's Clinic Under Attack Again

In the waning days of their six year stint in power, top officials of the Nicaraguan government are once again training their fire on Dorothy Granada. As reported in the August 9th edition of *El Nuevo Diario*, Minister of Internal Affairs (Gobernación) José Marengo Cardenal has ordered the suspension of Dorothy's residency permit. Minister Marengo has served as the right-hand man of President Arnoldo Alemán in the persecution of Granada and the attempts to close down the Women's Clinic in Mulukukú she has directed for 11 years.

In some ways, this renewed attempt to expel Dorothy is not surprising. Even after losing their battle against Dorothy in the Nicaraguan courts and with the Nicaraguan people, Alemán and Marengo have made it clear they would not renew her residency when it expires on September 9th of this year. But Marengo has moved precipitously to declare her residency suspended even before her application for renewal could be processed.

Human rights leaders in Nicaragua, who consider the attack against Dorothy to be an attack against Nicaraguan civil society, are concerned there may be an attempt to deport Granada before her current residency permit is due to expire. Even the Human Rights Commission of Nicaragua's National Assembly is strongly defending Dorothy Granada at this moment. According to its president, Dr. Nelson Artola, the Human Rights Commission is filing complaints with the National

Assembly and also with the Interamerican Commission of Human Rights, which is attached to the Organization of American States (OAS). According to Artola, the complaints will denounce the abuse of the human rights "of a person who has sufficient merits that the National Assembly, in accord with the Constitution, should honorably award her Nicaraguan nationality and not treat her like a common criminal."

In *El Nuevo Diario's* report, Dr. Artola quotes Dorothy as saying, "What I have done is to serve 30,000 *campesinos* from Mulukukú with medical assistance during the 13 years that I have worked in Nicaragua. My crime has been to combat malaria, tuberculosis, diarrhea and malnutrition from which the *campesinos* of Mulukukú suffer, and they are not treated in any way by the government."

Dorothy's asks for your support: "Thank and encourage the Human Rights folks for continuing their efforts to secure my right to remain in the country based on my record of service. All accusations against me have been disproved by the investigating groups. All cases in the courts have been decided in my favor. *Campesinas* are abandoned, and are suffering ill health, hunger and violence. Continuing our Women's Center will provide continued accompaniment with those who are among the poorest. This work is an important people-to-people project. If I am not allowed to be in Nicaragua, the program will suffer."

— Excerpted from [www.peacehost.net/Dorothy](http://www.peacehost.net/Dorothy). See web site for more info.



### DOCTORS FOR GLOBAL HEALTH

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