



in partnership

An update on the work you make possible • Summer 2022

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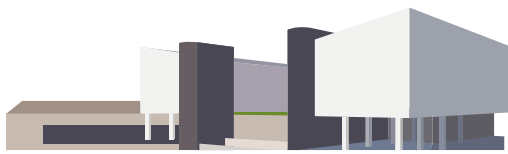
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Butaro District Hospital

T O ↔ E X P A N D

Progress continues on Partners In Health and the Rwandan Ministry of Health's expansion of Butaro District Hospital (BDH)—the only hospital in Burera District, one of the most remote and impoverished regions of Rwanda, and a primary provider of cancer care for patients across East Africa.

The multiyear project will take the hospital from 150 beds to 256 beds and will introduce new and improved medical technology and services. Phase one of construction—which is now more than halfway finished—adds bigger, renovated emergency, oncology, and general pediatric wards and an imaging department offering CT scan, X-ray, and mammography services.

By the completion of phase two—which is set for August 2023—the hospital will also have two new operating rooms, an isolation facility, and an oxygen plant, among other improvements.

Such growth has been years in the making. As recently as 2008, Burera had no public hospital, leaving most families without access to health care. This injustice changed when, enabled by your support, PIH and the Rwandan government opened BDH in 2011.

Over 10 years later, the hospital—which also includes the Butaro Cancer Center of Excellence and serves as a teaching hospital for our nearby

University of Global Health Equity—is serving more patients than ever before. Its pediatric ward, for example, is at 130% capacity, with some children having to share beds—signalling the urgent need to meet demand.

“The work we do in Burera demonstrates perfectly what settings like this have been deprived of and what we can do to make a change,” said Dr. Joel Mubiligi, executive director of Inshuti Mu Buzima, as PIH is known in Rwanda. **“This hospital will allow us to save more lives, quicker.”**

Watch our video
about the BDH
expansion



Top photo: Dr. Joel Mubiligi visits the University of Global Health Equity, Butaro District Hospital and other sites in Rwanda in June 2022.

Photos by Pacifique Mugemana/PIH

CEO's Letter

Dear friends,

The last few times I've written to you, I shared my reflections on the remarkable life and legacy of Dr. Paul Farmer, our friend, mentor, and PIH co-founder. It has now been about five months since his unexpected passing, and while the grief within our PIH community will never truly disappear, all of us around the world have been adjusting to a new normal without Paul's physical presence.

I specify "physical" because Paul does remain present with us—his ideals, teachings, and inspiration continue to guide our collective work to make health care a human right, now and for decades to come.

Even amid the devastating circumstances of Paul's loss, the work never paused or faltered. In true PIH fashion, our incredible staff of more than 19,000 people around the world found solace in each other, in Paul's memory, and in your outpouring of support day after day. These forces motivated each of us to play our part in delivering high-quality care and building health systems that prioritize the needs of the poor. I am in awe of every PIHer for the courage and commitment they have shown and am so appreciative to you for standing in solidarity with us.

Because of this teamwork, the last five months have been characterized by progress in addition to grief. On behalf of all of us at PIH, I'm excited to use this newsletter to catch you up on some of the headway we've made towards new lifesaving facilities, programs, and systems—all of which are made possible by your generosity and stand as a testament to Paul's enduring impact.

With gratitude,

Sheila Davis
Chief Executive Officer
Partners In Health

Photo by Jodi Hilton for PIH

PIH Responds to Disaster in Malawi

The link between climate and health is on full, unjust display in Malawi, where recovery efforts continue in the wake of a deadly cyclone and resulting cholera outbreak and food shortage. Both emergencies affected Neno District, one of the most remote and impoverished communities PIH serves.

In January, the cyclone's torrential rain and high winds damaged more than 190,000 homes and destroyed acres of crops, among myriad other losses. In Neno in particular, more than 7,500 homes were destroyed and more than 17,400 households—over half of the district's farming households—are without a food supply. Staff of Abwenzi Pa Za Umoyo (APZU), as PIH is known in Malawi, set up five temporary camps to shelter and provided other social support, including food, to those displaced. They also quickly ensured services continued at Neno's three PIH-supported health facilities, despite electricity and other infrastructure challenges.

APZU staff have their sights focused on not just Neno, but across the entire region.

"The extent of damage means that the resettlement of affected families and rehabilitation of the health system will require significant resources beyond the



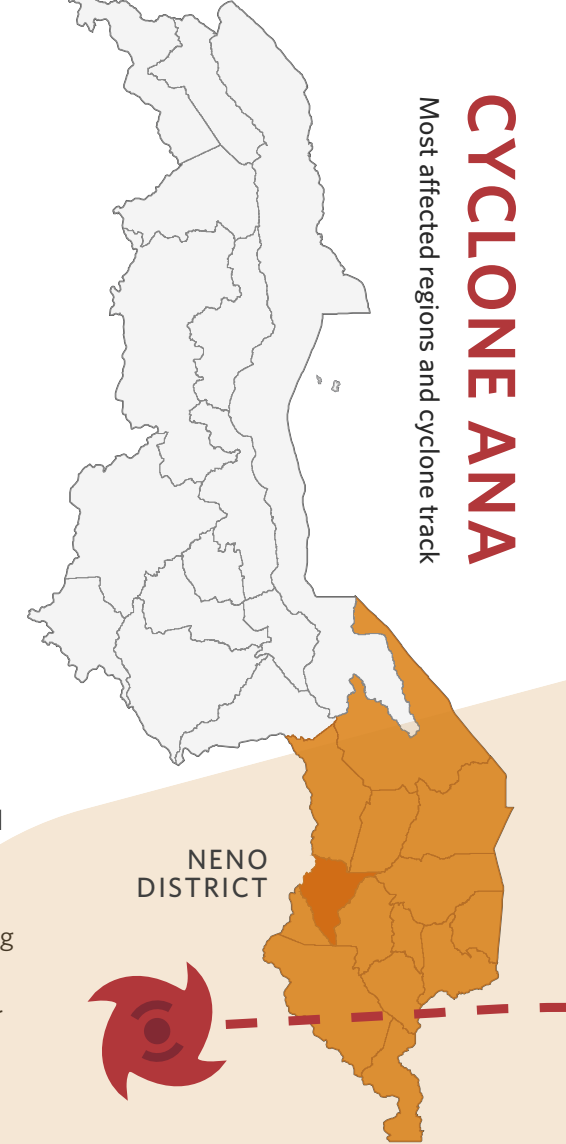
Nurse Cephat Adam tends to 17 year-old Cholera patient Enock Josephy. Cholera treatment units are set up in a camp at Lisungwi Community Hospital. Photo by Ben Phiri / PIH

immediate response," said Dr. Luckson Dullie, executive director of APZU.

By May, such resources became crucial, as cholera broke out in Neno and surrounding districts—the product of damaged sanitation infrastructure and contaminated water sources from the cyclone.

Enabled by your support, APZU staff

again worked quickly, setting up a 20-bed cholera treatment center, performing contact tracing, engaging communities about risk and prevention, and distributing safe water and chlorine. As of June 16, the cholera treatment unit had cared for a total of 104 patients, with new cases still trickling in. Malnutrition cases are also expected to rise.



Most affected regions and cyclone track
CYCLONE ANA

NENO DISTRICT

"BRING O2" TO FILL GLOBAL GAPS IN OXYGEN



Oxygen tanks at PIH-supported Botšabelo Hospital, Lesotho's only hospital offering treatment for multidrug-resistant tuberculosis.

Only 40% of health facilities in low- and middle-income countries have access to oxygen—leaving millions of patients around the world without the crucial, lifesaving resource needed if undergoing surgery, suffering from pneumonia, or battling COVID-19.

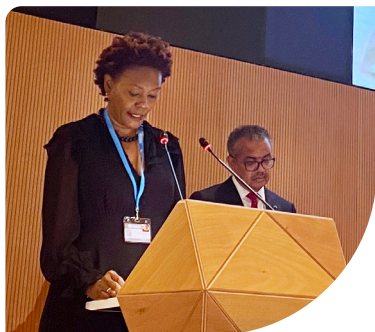
In response to this injustice—which continues as COVID-19 spreads and vaccine distribution favors wealthy nations—PIH has partnered with Unitaid, Build Health International, and PIVOT Health Madagascar on BRING O2, a new initiative that will accelerate access to safe, reliable, and quality oxygen in Malawi, Rwanda, Peru, Lesotho, and Madagascar.

PIH staff and partners in these high-need countries are building new oxygen production plants, repairing broken or malfunctioning plants, making improvements to health facility infrastructure, and providing training for biomedical engineers and clinicians.

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The long-term vision is to improve local biomedical and clinical capacity and strengthen the entire oxygen ecosystem at the national level. This will save lives during COVID-19 and beyond.

DR. MELINO NDAYIZIGIYE
EXECUTIVE DIRECTOR OF PIH LESOTHO



Dr. Paul Farmer Honored with WHO Award

On May 22, at the opening of the 75th World Health Assembly, Dr. Tedros Adhanom Ghebreyesus, director-general of the World Health Organization (WHO), bestowed a WHO Director-General's Global Health Leaders Award on Dr. Paul Farmer, PIH's beloved co-founder who unexpectedly passed away in February.

Wingdie "Didi" Bertrand, co-founder and president of the Women and Girls Initiative and Farmer's widow, accepted the award on his behalf and delivered a powerful message to the audience of health leaders.

"We owe it to Paul to collectively keep his legacy alive," said Bertrand. **"That is why today I am encouraging all in attendance to adopt policy decisions on behalf of your fellow citizens that prioritize treating every person as a person and invest in the provision of high-quality, lifesaving health care—as health is a fundamental human right."**

▶ Watch the award ceremony: PIH.org/paul-WHO



Photo by Steve Lipofsky

Dr. Joia Mukherjee: Choosing Proximity, Hope, and Action

This spring, PIH Chief Medical Officer Dr. Joia Mukherjee offered words of wisdom to Harvard Medical School and the University of Michigan Medical School's classes of 2022. Mukherjee urged the next generation of physicians to **"transform from a doctor to a healer"** by keeping patients in close proximity, and to always choose **"hope and action, in solidarity with others, [which] will help you cure a sick child, change a local system, and even move the levers of power."**

Mukherjee included similar lessons in the newly published second edition of her textbook, *An Introduction to Global Health Delivery: Practice, Equity, Human Rights*. In the book, Mukherjee outlines the history of the global health movement and talks about the resources and advocacy efforts necessary to provide high-quality health care to all. The new edition is greatly expanded to include new content on pandemics, global leadership, and antiracism.

▶ Watch the full commencement addresses: PIH.org/joia-speech

YOUR 2021 IMPACT

We just released our 2021 Impact Report, detailing the year by year growth of our collective work. Here are just a few examples of what you made possible last year:



32,600 chronic disease patients in care



58,300 safe, facility-based deliveries



3,056,320 outpatient visits

TAKE A LOOK AT THE FULL REPORT:

PIH.org/impact-2021

