



Partners In Health  
2006 ANNUAL REPORT

FOCUS  
ON OUR  
PARTNERS





# Director's Message

Dear friends,

In 2007, Partners In Health celebrates 20 years as an organization—a significant anniversary by any account and one that prompts us to reflect upon the achievements of the last two decades. For each of those 20 years, to meet the ever-increasing need, PIH's recurring theme has been growth. Over the past five years, PIH's growth has been unprecedented. The budget quadrupled and now rests close to \$50 million. We expanded to three new countries in Africa in three years, bringing the total number of countries in which PIH works to nine. And in 2006 we recorded more than two million patient visits at our hospitals and clinics around the world, which is close to ten times the number we saw in 2002. Those figures don't include thousands of community meetings, workshops and training sessions, and hundreds of thousands of home visits, all of which have also increased geometrically in recent years. It feels remarkable to all of us at PIH that we have been able to grow at this rate and still stay true to the roots of our work—namely to bring the fruits of modern medicine to those who need it most and, I would add, to show that providing comprehensive medical care to entire communities is not just possible but essential. The excellent results in varied and difficult settings have built a strong case for the PIH model to be replicated in other countries.

I'm often asked if PIH has a secret recipe—how it is that we are able to achieve results in places that have never before seen significant improvements in health outcomes. While there is no silver bullet that will transform impoverished communities, I believe strongly that there are certain key components of our approach that contribute to our success. First, PIH's resources get to the people who need them most—94 cents of every dollar we spend goes directly to our programs and patients around the world. Second, we build on the strengths of the communities by working within public health systems and serving where there are gaps. Third, and perhaps most important, we invest directly in the communities we serve by training and employing a cadre of local community health workers to accompany our patients and their families through their care.

The ability of Partners In Health to put these three elements into practice relies almost entirely on strong partnerships—with patients, community health workers, nurses, doctors,

administrators, sister organizations, other NGOs, local and national governments, and funders. Twenty years after our founding, it is clearer than ever that Partners In Health was the right name for our organization. Though we've always known the importance of strong community partnerships, I'm not sure that in 1987 we realized how much of our continued success would depend on collaborations with other organizations, governments, and funding agencies. It has been a powerful lesson indeed to learn this over the years. Each of our partners brings a set of skills, expertise, and knowledge that complements ours. And like all good relationships, each contribution makes the whole much stronger.

We have much to thank our partners for this year and, as you will see in the pages that follow, we are honored to share our successes with the extraordinary people and organizations who make our work on the ground possible. In particular, I would like to highlight the vital role of our donors in this work. For the first time in twenty years, Partners In Health was not able to raise enough funds to cover the budget for the twelve months ending December 2006. Thanks to the generosity of our supporters, we were able to close the gap in early 2007. Nonetheless, the deficit has raised concerns for us as to whether we will be able to continue the remarkable growth that I've highlighted above. We hope that we will be able to do so, but the needs are great.

To address this, our Board of Directors and closest supporters have inspired us to establish a growth fund to provide for the continued expansion of our work. In honor of our co-founder and most generous donor, we have named this fund The Thomas J. White Fund for Innovation and Impact. We hope that the development of this fund will mirror PIH's growth, allowing us to keep pushing the boundaries in global health and to remain always an organization that, thanks to its partners, can respond rapidly to the needs of large communities. After twenty years, we are proud to be able to describe our accomplishments—not just within specific communities but also within the broader context of global health. With you as partners, we look forward to reporting on PIH's impact for twenty more years and beyond.



Ophelia Dahl

Executive Director, Partners In Health





# Our Mission

*Our mission is to provide a preferential option for the poor in health care. By establishing long-term relationships with sister organizations based in settings of poverty, Partners In Health strives to achieve two overarching goals: to bring the benefits of modern medical science to those most in need of them and to serve as an antidote to despair. We draw on the resources of the world's leading medical and academic institutions and on the lived experience of the world's poorest and sickest communities. At its root, our mission is both medical and moral. It is based on solidarity, rather than charity alone. When our patients are ill and have no access to care, our team of health professionals, scholars, and activists will do whatever it takes to make them well—just as we would do if a member of our own families or we ourselves were ill.*

*Children in Carabayllo, the shantytown outside Lima, Peru, where Socios En Salud pioneered community-based treatment of drug-resistant tuberculosis*



# Table of Contents

Director's message _____	i
Our mission _____	2
Table of contents _____	3
<b>FOCUS ON OUR PARTNERS</b> _____	<b>4</b>
In the community _____	6
In the clinics _____	10
Around the world _____	14
<b>YEAR IN REVIEW</b> _____	<b>18</b>
Haiti _____	18
Peru _____	20
Rwanda _____	22
Lesotho _____	24
Russia _____	26
USA (PACT) _____	27
Mexico/Guatemala _____	28
Selected publications _____	29
<b>FINANCE &amp; GOVERNANCE</b> _____	<b>30</b>
Financials _____	31
Partners Circle _____	35
Officers & Boards _____	40

*Sewing school creates income opportunities in Boucan Carré, Haiti*

# Focus on our partners

*Clearly, our founders understood the pivotal importance of partnership when they created a small medical solidarity organization 20 years ago and named it Partners In Health.*

They knew then that the identity, purpose and value of the fledgling group hinged on their alliance with a partner organization known as Zanmi Lasante (Partners In Health in Haitian Kreyol) located in a squatter community in central Haiti. And they knew that Zanmi Lasante's mission and success, in turn, were rooted in a commitment to save lives and transform communities not by importing shrink-wrapped "solutions" from afar but by engaging the community as active partners in challenging and changing the conditions of extreme poverty and injustice that are the substrate of disease.

What was true then applies even more today. As we have grown over the years, as our tallies of annual patient encounters have soared from the hundreds to more than two million, as we have expanded from one small clinic in Haiti to dozens of sites in nine countries on four continents, the number and variety of our partnerships have grown even more rapidly at many levels—in the community, in the clinics, and around the world.



*Mother and child at a mobile clinic in Haiti*

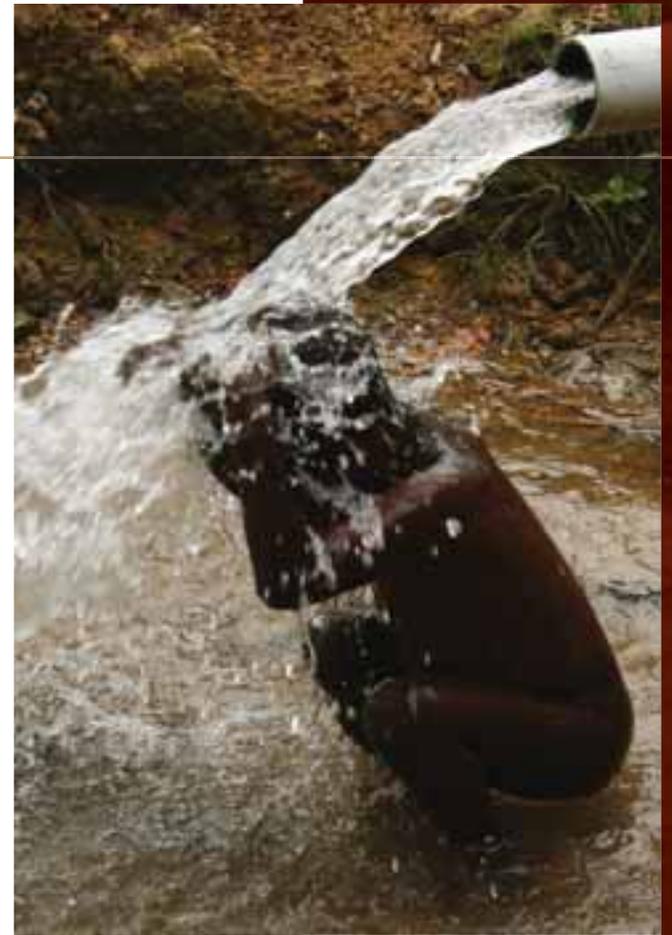
FOCUS ON OU

*In all of these areas, from remote villages in the mountains of Haiti, Rwanda and Lesotho to the capitals of governments and the headquarters of international organizations and major academic institutions, we have found partners who share with us a recognition that health requires far more than a supply of medicines and the absence of disease.*

It takes health systems that deliver quality care based on patients' needs rather than on their ability to pay. It takes access to food, clean water, schools, decent housing and opportunities to earn a living. It takes partners.

## **So meet the partners.**

In the following pages, we turn the spotlight on a necessarily arbitrary but representative handful of people. For every partner profiled here, there are literally thousands of others who are equally important to our work, equally deserving of recognition, equally committed to improving the lives of our patients and their communities. We hope that they and our readers will understand that these profiles represent a testimonial not only to the individuals whose names appear on the page but to all of the organizations and people whom we consider genuine partners in health.



*Enjoying clean water in Haiti*



*An accompagnateur delivering medications in Haiti*

# In the community

*Everything starts with our patients, with meeting their needs and fighting for their rights — quality health care for the sick, food for the hungry, schools for the uneducated, justice for the neglected and exploited.*

Without their engagement and leadership there would be no Partners In Health. As we have often said, “We don’t tell them what they need. They tell us.” And they also tell, teach and show us a great deal about how to go about meeting those needs through a genuine partnership, rooted not in charity but in solidarity.

*Out of the communities, too, come the accompagnateurs, community health workers who are the backbone of our model of care.*

Of the roughly 5,000 people who work for PIH worldwide, fewer than 100 come from the United States and other wealthy countries. More than 3,000 are community health workers who have been trained and employed to provide health education, to refer people who are ill to a clinic, or to deliver medicines and social support to patients in their homes. Community health workers do not supplant the work of doctors or nurses. Rather, they are a vital interface between the community and the clinics. As importantly, they are agents of change who mobilize solidarity as a community-wide immune response to pandemic disease, poverty, and despair.

FOCUS ON OUR

## Angela

*MDR-TB survivor*

*Socios En Salud—Peru*

Angela had almost lost hope. “My husband was sick with TB and I knew I was next,” she recalls. A doctor had told her that nothing could be done for her husband, that she should stop crying and “think about starting over with your life because you are going to be alone.”

Then she heard about an organization called Socios En Salud (SES), PIH’s partner organization in Peru, that treated patients with severe TB. “I will never forget the way the SES doctor spoke with my husband... She came close, knelt down and said to him, ‘It may be that you are sick, but don’t get depressed because you are going to get better. We will cure you.’ I cried because no other doctor had touched him, not even to take his pulse.”

Then Angela fell ill herself. “The doctor said to me, ‘Just like you, I am very sad, my heart is broken. But you have to be strong. You have been so brave, and now you have to continue even if it’s difficult.’ It may be because of that doctor that I promised to finish my pills”

Angela kept her promise, even when she weighed only 70 pounds and was so weak that she fell and couldn’t get up, even when her children pleaded with her, “Mommy, don’t take that pill. It’s bad for you. Don’t take it anymore.” She told them she had to do it, “because I had made a pact to continue with the treatment.”

Now that she is cured, Angela says, “I always pray for SES. They gave us the opportunity to be their patients, and I believe that is why we are alive.

**“To speak of SES is to speak of a family that receives you with open arms and makes you feel that you are important to them.”**

## Lisette Fetièrè

*Social Work Assistant living with HIV*

*Zanmi Lasante—Haiti*

A widowed mother of five, Lisette Fetièrè has been a patient in Zanmi Lasante’s HIV program since 2002. She started antiretroviral therapy in 2003.



Before she fell ill, Lisette had been a prominent member of the community. She served as mayor of Thomonde for 12 years, bought and sold goods at local markets, and operated a busy restaurant in the center of town.

After her HIV diagnosis, however, people stopped coming to her restaurant as they said that she was a “moun SIDA” (“AIDS person”). When this happened, a doctor at the Zanmi Lasante clinic in Thomonde asked her if she would like to work for ZL. After a month of training, she assumed the role of social work assistant, visiting patients in their homes to assess their needs, and working with the clinical staff to decide on appropriate ways to deliver food, improve housing and provide other socio-economic support. Lisette also helps organize support groups for HIV-positive parents, HIV-affected children, and guardians of children orphaned by AIDS.

**“I live for and from my relationship with Zanmi Lasante,” Lisette says. The HIV treatment she receives enables her to be healthy and active in the community. And her work with ZL allows her to provide for herself and her 5 children.**

“And I love the work,” she adds, “talking to people, understanding their realities, and helping them to find strength.”

# In the community

## François Musatsi

*Living with HIV*

*Inshuti Mu Buzima—Rwanda*



For François Musatsi, community-based care has meant not only a new lease on life but a path to peace and reconciliation. François returned to Rwanda full of hope soon after the overthrow of the regime responsible for the genocide in 1994. A few years later, he and his wife and eight children faced ruin. His small trading business faltered and he started suffering from repeated ailments and soaring medical bills.

It wasn't until he was admitted to a health center run by PIH's Rwandan partner organization, Inshuti Mu Buzima, that a nurse persuaded him to be tested for HIV. He was surprised when the results came back positive and even more surprised that all his symptoms disappeared when he started treatment with antiretroviral drugs (ARVs).

When he told his family that he would get his ARVs from a neighbor who works as an *accompagnateur* (community health worker), François recalls, "they were very worried." Although nobody accused the *accompagnateur* herself of having committed any atrocities, she was Hutu, François was Tutsi, and the 1994 genocide had pitted a predominantly Hutu population and government against ethnic Tutsis and Hutu opposed to the violence. But with his life on the line, François didn't feel he could hold someone responsible for crimes she didn't commit. Soon he and his *accompagnateur* became friends and started working together to convince their neighbors to get tested. Now far more than half the people in their village have been tested, and suspicions and hostility within the community have waned.

**“Inshuti Mu Buzima has been a miracle for me and for my village. It gave people positive values by eradicating stigma. And the *accompagnateur* system helped us discover each other in a positive way, destroying old and harmful ideologies.”**

*A Socios En Salud health promoter making her rounds in the community*

## *Accompagnateurs are the backbone of our model of care.*

### **Wilfrid Charles**

*Accompagnateur*

*Zanmi Lasante—Haiti*

Wilfrid Charles sets great store by education and employment, both as basic human rights and as keys to combating AIDS and improving health. He had been unemployed for three years himself when he was hired by Zanmi Lasante. Since then, his work as an *accompagnateur* has brought him into daily contact with poor patients and the problems they face obtaining food, housing, education, and jobs.

“Unemployment is a really big problem that contributes to AIDS,” Wilfrid explains. “People finish high school and even professional schools and cannot find jobs. So they turn to prostitution.”

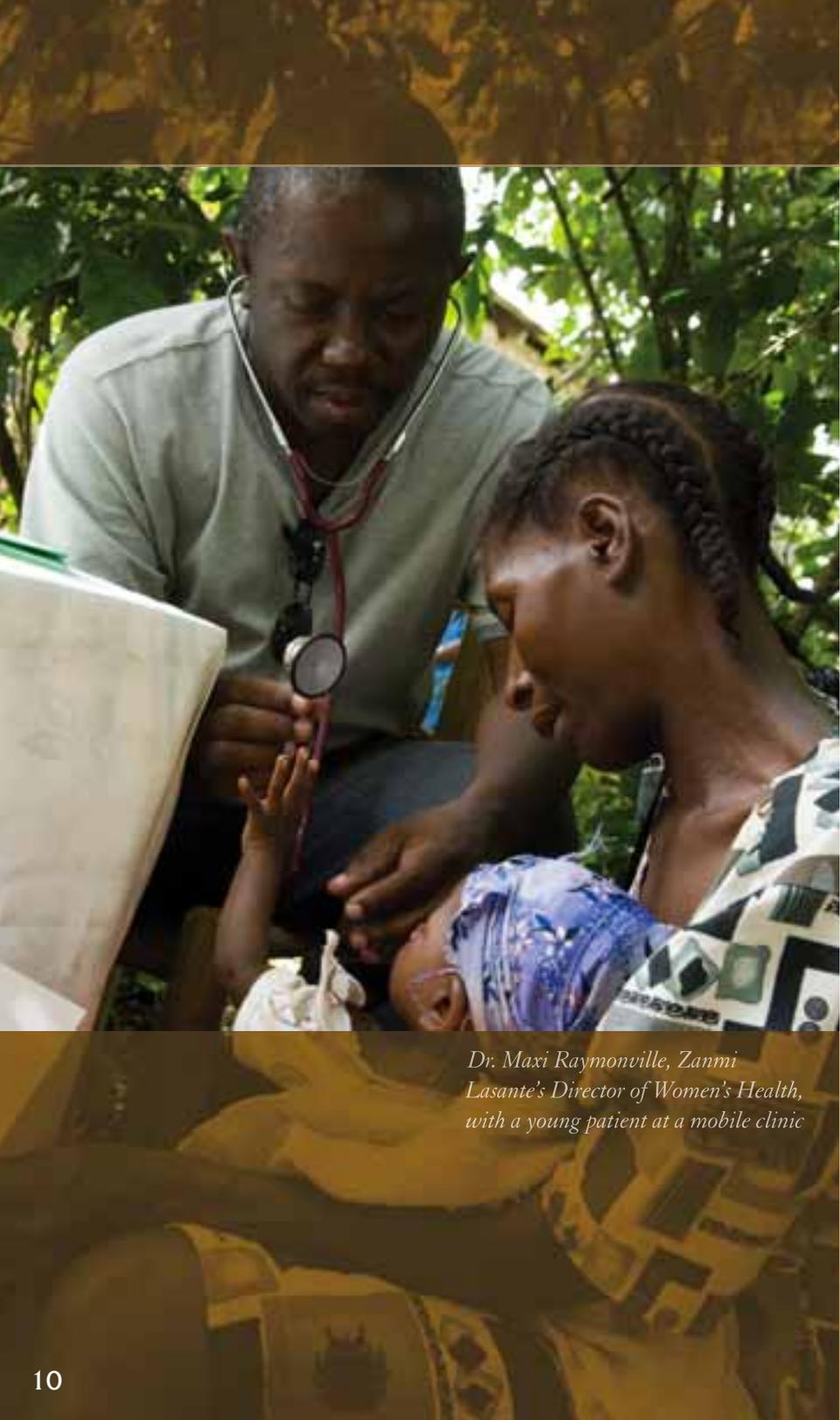
Wilfrid takes pride in working with an organization that helps people break out of that vicious cycle.

**“Zanmi Lasante does a lot of things for sick people. We give them jobs, build houses, and provide financial assistance and school fees for people who have very little means. Even though *accompagnateurs* are not paid a lot, they earn enough to feed themselves and their families and send their kids to school.”**

That is what the job has done for Wilfrid, a father of two who supplements his income by running a small business. But the value of his job to Wilfrid far exceeds the salary. “When you find someone who is seriously ill and you give them their medicine, after a month or two you can really see how they are improving,” he says. “It makes me very happy to see people getting better.”



*A Zanmi Lasante accompagnateur distributes medicines and solidarity*



*Dr. Maxi Raymonville, Zanmi Lasante's Director of Women's Health, with a young patient at a mobile clinic*

# In the clinics

*At all of our sites, PIH has worked to build clinical teams led and staffed by local nationals—doctors, nurses, social workers, pharmacists, laboratory technicians and other health professionals who come from the countries and communities we serve.*

By making sure that medical workers have the tools and resources to use their skills and provide quality care, we combat the demoralizing conditions fueling the “brain drain” that has notoriously brought more Malawian doctors to practice in Birmingham, England, than in the entire country of Malawi. As a result, the overwhelming majority of clinical and support staff at PIH hospitals and health centers are local. Many are ministry of health employees.

*Where we have worked the longest, local leadership and expertise are strongest. Our partner organizations in Haiti, Peru and Russia now provide training and support not only for other PIH projects but for ministry of health personnel throughout the countries and regions where they are based.*

As striking evidence of the strength of Zanmi Lasante's clinical resources and global commitment, a Haitian doctor now heads up one PIH clinic in the mountains of Lesotho. Still others play major roles in our collaboration with the Rwandan Ministry of Health to replicate the PIH model of comprehensive, community-based care in every rural health district in the country.

FOCUS ON OUR

*The overwhelming majority of clinical staff at PIH hospitals and clinics are local.*

## **Dr. Roland Désiré**

*Zanmi Lasante—Haiti*

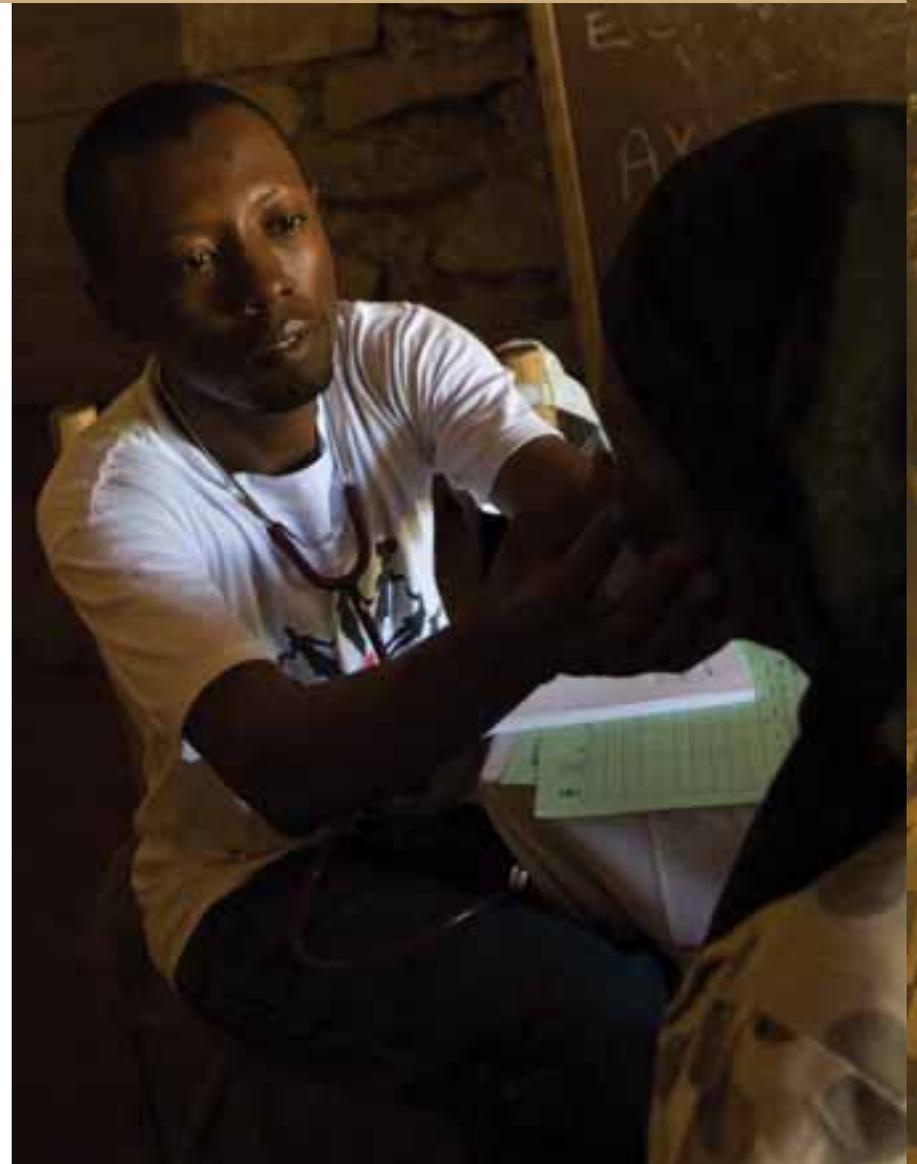
While completing his residency in Cap Haïtien on Haiti's northern coast, Dr. Roland Désiré recalls, "I heard of a foreign doctor who worked in Cange and visited people in their homes." When Dr. Désiré had to serve a month of "elective time," he decided to go to Cange and see for himself what Doktè Paul (Paul Farmer) and Zanmi Lasante were doing.

After spending a month treating patients in Cange, Thomonde, and at mobile clinics in isolated mountain communities, he was hooked. Later that year, he chose to spend his vacation working in pediatrics in Cange. And when he finished his residency, he joined ZL full time.

Dr. Désiré now works as a program doctor in Lascahobas, dealing with the full range of medical problems that walk through the door—general medicine, HIV and TB, and women's health. This role tending to all of the community's medical needs suits Dr. Désiré. After all, it was ZL's approach to providing free and integrated medical care and social support that attracted him in the first place.

**"We don't just look after TB patients or pregnant women," he says. "We look at everything together."**

As an example, he recalls a case from his early days in Lascahobas: "A four-year-old child was admitted for malnutrition. After 12 days of treatment, he wasn't improving, even though all of the tests came back normal, including one for TB. I remembered that severely malnourished children often test negative for TB even if they have it because their immune systems are too weak to mount a response to the test. So we decided to treat him for TB and he recovered quickly... **In another setting without integrated care, such as a program only for malnutrition, this child would have died.**"



*Dr. Roland Désiré with a patient  
at a mobile clinic in Haiti*

# In the clinics

## Manzi Anatole

*Nurse*

*Inshuti Mu Buzima—Rwanda*

“After the genocide [in Rwanda] in 1994, I watched people with AIDS dying every day,” says Manzi Anatole. “I saw too many people suffering from famine, from poverty. I was dreaming of an organization that could help people with HIV, poor people, patients who had no one to take care of them, children who were suffering, orphans. It was in my dream, but I never thought this dream could happen.” So when a neighbor told him about PIH’s Rwandan partner organization, Inshuti Mu Buzima, he applied for a job right away.

A nurse and trained psychologist, Manzi began working at Rwinkwavu Hospital in 2005. “It was horrible at the beginning because so many people were suffering and dying,” he says. “But we saved lives, we started taking care of HIV-positive patients, and started patients on ARVs every week.”

Knowing that many patients would be too sick or poor to travel to the hospital, Manzi began riding his motorcycle to remote villages, finding up to 30 new HIV patients each week, and bringing medicine, food, money for children’s school fees, and other social support services.

**“It was the first time people in these communities had ever seen a health worker come to their village.”**

Manzi currently runs the HIV program at Rukira Health Center in the southeastern corner of Rwanda. He has taken a special interest in the AIDS epidemic’s youngest victims. “Many children don’t have their parents [having lost them to AIDS],” he says. “They are orphans, they need someone to look after them, they may have psychological problems, they need counseling, they need food, they need medicine. And PIH is providing all of these. PIH is just like my dream.”



*Dr. Jean Bosoco  
Niyonzima with a  
patient at Rwinkwavu  
Hospital in Rwanda*

FOCUS ON OUR

## *Our partner organizations now provide training and support around the world.*

### **Yverta Edmond**

*Laboratory Technician*

*Zanmi Lasante—Haiti*

When a fire forced Zanmi Lasante to close down the laboratory in Boucan Carré for a few days, Yverta Edmond could easily have taken some well-deserved time off. So Dr. Louise Ivers was somewhat surprised to find her filing charts and pulling records in the overcrowded medical records room. “It’s a really thankless job,” Ivers remarked, “which just demonstrates Yverta’s particular dedication.”

Yverta has been demonstrating that dedication since she started working with ZL in 2003. With three years of training in medical technology at the University of Haiti Medical School, Yverta could almost certainly earn more working in Port-au-Prince, where she could also live full-time with her husband and son. But has already done that and decided she would rather work where her skills are needed most.

“I love the job, I give all my time for it and I never feel tired,” Yverta said. “People living out here need help to survive and they find free care thanks to PIH.”

**“When I was working in Port-au-Prince, I used to welcome well-to-do people who come and pay for the service. Now, in the setting where I am working, there are more people who are really in need. Working with PIH is an opportunity to be at their service.”**

### **Lesole Mokele**

*HIV Counselor*

*Bo-Mphato Litšebeletsong tsa Bophelo—Lesotho*

Lesole Mokele takes special pride and satisfaction in his work counseling and testing for HIV at the health center operated by PIH’s partner organization in Nohana, high in the mountains of Lesotho. He knows from personal experience just how important that work is.

Just three years before he started working with PIH, Lesole himself was critically ill, coughing day and night and suffering from a persistent fever, diarrhea, night sweats, and an alarming loss of weight. “I suspected that I had AIDS, but I was scared to get tested,” Lesole recalls. When he did eventually go for counseling and testing, results confirmed that he was infected. At first Lesole was afraid to tell anyone. Finally he told his sister, who became his treatment supporter when he started antiretroviral therapy (ART). From that point forward, Lesole became an outspoken leader for people infected with HIV.

“I met other patients and we started a support group for people living with HIV,” Lesole says. “Today that group is known as the Lesotho Network of People Living with HIV/AIDS and I am its current vice president.”

Lesole has played a major part in the successful launch and rapid growth of the PIH project in Nohana. “We now have more than 1,000 HIV patients in follow-up, 400 on ART and 220 receiving TB treatment. Everything we do for our patients is free – medicine, food, and formula for babies born to HIV-positive mothers.”

The impact has been dramatic and gratifying.

**“I remember two months ago someone came to me and said, ‘Nowadays we don’t see coffins every day here in Nohana. But before PIH started its program, people died like flies here, mostly from TB and HIV.’ I wasn’t surprised to hear him say that, because I know what we are doing for our patients.”**



# Around the world

Since PIH was founded, we have considered it part of our mission to “draw on the resources of the world’s leading medical and academic institutions” to work in partnership with “the world’s poorest and sickest communities.” Our “pillars of institutional support” at Brigham and Women’s Hospital, Harvard Medical School and the Harvard School of Public Health allow us to do just that, providing invaluable support for clinical care, research, and training.

*An absolutely essential partnership in every country where we work is with the local Ministry of Health.*

While non-governmental organizations like PIH have a valuable role to play in developing new approaches to treating disease, only the public sector can assure universal and sustained access to health care as a fundamental human right.

*As we have expanded our efforts to address our patients’ needs for food, clean water, schools, housing and jobs, we have also forged new partnerships with non-governmental and multilateral organizations whose programs and expertise complement our own.*

The Clinton Foundation, for example, has been an indispensable partner at our three projects in Africa, mobilizing resources for agricultural and community development, reducing the costs of essential medicines, and strengthening coordination with governments and international donors.

Our other global partners range in size from globe-spanning UN agencies like the World Food Program and UNICEF to the Lesotho branch of Mission Aviation Fellowship, without whose overstretched team of pilots and single-engine planes we simply could not operate health centers that are often six hours walk from the nearest road. These partners are far too numerous to list and too valuable to pass over without collective acknowledgement and an expression of our profound appreciation.



*Dr. Elvis Buendía of Peru’s Ministry of Health at a neighborhood health center built by PIH’s partner organization, Socios En Salud*

# FOCUS ON OU

*An absolutely essential partnership in every country where we work is with the local Ministry of Health.*

## **Haitian Ministry of Public Health and Population**

**Dr. Raoul Raphaël, MD, MPH**

*Director, Central Department*

Dr. Raphaël first came into contact with Zanmi Lasante in 2000, shortly after he was put in charge of the Haitian Ministry of Public Health and Population (MSPP) in the Central Department, which includes the central plateau where ZL has worked for more than 20 years.

As one of his first acts, Dr. Raphaël conducted an inventory of all the non-governmental organizations involved in health activities in the area. What he learned about ZL must have made a positive impression. Soon afterward, he invited ZL to help upgrade facilities, improve staffing and salaries, and procure drugs and equipment for MSPP hospitals and health centers. He has been working closely and regularly with ZL staff ever since.

“The most important aspect of ZL’s work is their focus on serving the poor,” Dr. Raphaël says. Most people in Haiti’s impoverished central plateau suffer from lack of food, clean water, adequate housing and regular work, which has a direct and dire impact on their health.

For health to be improved and social justice to be achieved, Dr. Raphaël argues, “everyone must have access to health services.” He values ZL’s contributions to making that possible.

**“Zanmi Lasante’s philosophy of directing their activities and support toward the poor helps the Ministry build on its limited resources to serve the needs of the people of the Central Department.”**



*Dr. Raoul Raphaël (right) with Dr. Fernet Léandre, Director of HIV and TB programs for Zanmi Lasante*



*Family in a doorway in rural Haiti*

# Around the world

## Mission Aviation Fellowship

**Tim Vennell**

*Pilot, Lesotho*

Love of flying and love for humanity have landed Tim Vennell in the mountains of Lesotho in southern Africa, far from his roots in Amarillo, Texas.



His long and winding flightpath started when Tim first encountered mission aviation during a three-month church mission to Tanzania in 1989. Having “grown up poor,” Tim had always thought of a pilot’s license as a ticket to a good salary. But he came back from Tanzania determined to find a way to combine flying with helping poor, sick and isolated people and communities.

After completing a degree in Mission Aviation Technology at Moody Bible College, Tim was ready to take off on a career with Mission Aviation Fellowship (MAF). He and his family touched down first in the Democratic Republic of Congo before landing in Lesotho in 2003.

Three years later, Tim had what he describes with a laugh as “a God-ordained meeting.” On a commercial flight to South Africa he met a doctor from Boston with a fear of flying. Dr. Jen Furin was just laying the groundwork for the new PIH project in Lesotho. She had never heard of MAF. But she would soon learn that working in the mountains of Lesotho necessarily meant working with MAF, since many of the mountain clinics are accessible only by air.

Within months, Jen and her colleagues at PIH topped MAF’s list of frequent flyers, Jen had shed her fear of flying and donned her own headset, and the relationship between PIH and MAF had blossomed into a partnership marked equally by affection and respect.

**“It’s been a lot of fun working with people who are so skilled and dedicated,”** Tim said. Then, echoing the PIH mission statement, he added, **“We’re willing to do whatever it takes to make sure these patients are cared for.”**

*Dr. Josuè Augustin, a surgeon from Zanmi Lasante in Haiti, plays with a Peruvian child during a visit to Socios En Salud*

*We have forged new partnerships with organizations whose programs and expertise complement our own.*

## Clinton HIV/AIDS Initiative

**Pascal Bijleveld**

*CHAI Country Director, Rwanda*

Pascal Bijleveld's first day on the job as head of the Clinton Foundation HIV/AIDS Initiative (CHAI) in Rwanda could not have been more daunting. After a discussion involving Dr. Innocent Nyaruhirira, the Minister of State in Charge of HIV/AIDS, Ira Magaziner, the Chairman of CHAI, and Paul Farmer, it was decided that Rwanda wanted to scale-up PIH's "Rwinkwavu model" nationwide. But what would it take and how much would it cost? Suddenly all eyes turned to Pascal.

Since that February morning, Pascal and his small team at the Foundation have been working with PIH and the Ministry of Health to help develop a National Scale-up Plan. Six months on, the national plan is complete and four district implementation plans are ready to roll.

Continuing with the strong partnership established in Rwanda between the Clinton Foundation's "management perspective" and Partners In Health's "clinical expertise," the next challenge will be to help the Ministry of Health translate the plans into action in the four selected districts and then roll out the model across the whole country.

**“Working with Michael [PIH Country Director Michael Rich] and his team has been a real eye-opener,”** Pascal says. **“The fine balance between common sense and pragmatism on the one hand and ‘doing whatever it takes’ to save lives on the other has been mastered to perfection.”**

## Brigham and Women's Hospital/ Harvard Medical School

**Dr. Sonya Shin**

*Clinician and researcher*

Sonya Shin started working with Socios En Salud in Peru more than a decade ago, when she was a third year student at Harvard Medical School. She landed in the front lines of an epidemic of multidrug-resistant TB, a disease that global health experts and government officials then considered too expensive and too complicated to treat in poor communities.

Sonya soon recognized that “people were dying of the policy, not the disease per se.” And she was embarked on a career that has combined expert clinical care with rigorous research “that will inform better decisions and help build programs that meet the needs of patients in resource-poor settings.”

Both of her current research projects illustrate the point. One study examines the impact of integrating treatment for alcoholism into TB programs in Russia, where many TB patients have dropped out of treatment because of widespread alcohol abuse. A second research project aims to assess the effectiveness of providing 18 months of community-based directly observed therapy and psychosocial support to people infected with both HIV and TB in Peru, using the community health worker model PIH has employed successfully in both Haiti and Boston.

**“I believe in research that actually benefits the people who are being studied and helps lay down the infrastructure that will continue to help patients after the study has been completed.”**



# Haiti/Zanmi Lasante

*Zanmi Lasante continued to deepen and broaden its services to the poor of Haiti in 2006, inaugurating new facilities, programs and partnerships. Even as Zanmi Lasante mourned the tragic death of Jean Gabriel fils (Ti Jean), who had led and inspired construction of dozens of new homes and other activities of the Program on Social and Economic Rights (POSER), ZL staff found new resolve to carry on his commitment to social justice.*

## Highlights of the Year

- **EXPANDED THE HIV EQUITY INITIATIVE:** In 2006, Zanmi Lasante expanded its groundbreaking HIV Equity Initiative beyond the Central Plateau to two new sites in the Artibonite region of Haiti. The Artibonite clinics were rapidly scaled up to offer people living with HIV the same PIH model of comprehensive care—including accompaniment, socioeconomic support, and free medical care—that has proven so successful since Zanmi Lasante launched the HIV Equity Initiative in 2000.
- **STRENGTHENED HUMAN RESOURCES FOR CHILD SURVIVAL:** With the support of the U.S. Agency for International Development (USAID), Zanmi Lasante expanded its child survival and maternal health programs in 2006 to cover all ZL sites. ZL hired and trained new staff to work on pediatric programs in clinics and expand community outreach activities. With ZL staff running mobile vaccine clinics, rally posts and door-to-door distribution, access to childhood vaccinations increased dramatically. In addition, approximately 70-80 traditional birth attendants per site received ongoing monthly training in safe delivery care.



*Food distribution  
for families in the PIH  
nutrition program in Haiti*

# THE YEAR IN R

■ **OPENED NEW CLINICAL FACILITIES:** In August 2006, Zanmi Lasante and the Haitian Ministry of Health inaugurated a medical center in the Central Plateau town of Thomonde. This new facility provides comprehensive primary care and HIV/AIDS services to an average of 200 patients per day. During 2006, ZL also officially inaugurated a new clinic in Cerca La Source, a new hospital wing in Hinche and the Sante Fanm women's health center in Cange.

■ **TREATED CHILD HUNGER WITH A KNOWN REMEDY — FOOD:**

Zanmi Lasante rolled out an extensive child nutrition program in the Central Plateau in 2006, with support from the Johnson and Johnson Foundation, Meds and Food for Kids, the M•A•C AIDS Fund and the World Food Program. More than 9,000 children received daily school lunches free of charge through the program. ZL also began local production of nutritionally fortified therapeutic food for malnourished children.



■ **CONTINUED TI JEAN'S WORK — BUILDING HOUSES:** Colleagues and friends of Jean Gabriel fils (Ti Jean), founder of Zanmi Lasante's Program on Social and Economic Rights (POSER), promised that Ti Jean's tragic death on May 28 would not derail his life work of building new homes for destitute people in the Central Plateau. And they kept their promise. Shortly after the end of 2006, POSER completed construction of the last of 70 houses that had been identified as top priorities for the year. Throughout the Central Plateau, hundreds of sturdy houses attest to Ti Jean's tireless commitment to social and economic rights for the poor.



*Ti Jean, the mourned leader of ZL's Program on Social and Economic Rights (left). One of the 70 new POSER houses built in 2006 (right).*

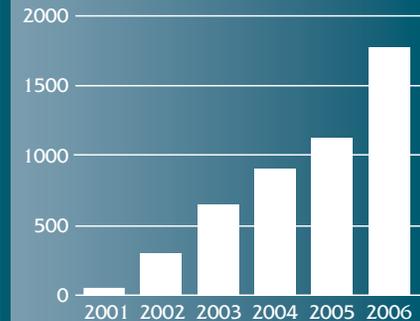
“Zanmi Lasante does a lot of things for sick people. We give them jobs, build houses, and provide financial assistance and school fees for people who have very little means.”

—Wilfrid Charles  
*accompagnateur*  
(page 9)

**1.8 million** patient visits

Number of ZL patient visits  
in Haiti, 2001-2006

number of visits (1000s)



**2,453** AIDS patients on  
antiretrovirals

**8,965** HIV-positive  
patients monitored

**6,395** children received money  
to defray the costs of attending school

**3,000** adults received literacy  
training

**9,163** students at 27 schools  
received free lunches

**7,126** people received nutritional  
assistance through hospitals and clinics

**1,199** people received seed money  
for small commercial enterprises

Staff:

**247** medical

**1,183** non-medical

**1,179** community health workers

# Peru/Socios En Salud

*Working in partnership with the Peruvian Ministry of Health, Socios En Salud (SES) played a leading role in expanding treatment of multidrug-resistant TB beyond Lima and in building and upgrading hospitals, laboratories and other infrastructure needed to fight the epidemic. Recognized worldwide for its expertise in treating MDR-TB, SES also adapted its model of community-based care to expand a successful, new HIV program that combines directly observed antiretroviral therapy with economic and social support.*

## Highlights of the Year

- **IMPROVED AND EXPANDED TREATMENT FOR DRUG-RESISTANT TB:** SES worked with the Peruvian Ministry of Health and with local health officials to expand treatment for MDR-TB patients both within and beyond Lima. In Arequipa, a major city in the south, the Regional Health Directorate committed to working with SES and began enrolling patients in the DOTS-Plus program. In Lima, almost 500 patients were declared completely cured; another 500 continued to receive medical treatment as well as nutritional, social, and economic support.



- **STRENGTHENED INFORMATION SYSTEMS:** In May 2006, the National TB Program declared they would utilize the PIH Electronic Medical Records System to track treatment of MDR-TB patients. This collaboration with the Ministry of Health will further the transfer of responsibility for TB care to the public sector, and will continue to improve quality of care among MDR-TB patients.



*Dispensing medicines to an MDR-TB patient*

# THE YEAR IN R

■ **EXPANDED HIV/AIDS CARE:** By the end of 2006, 79 HIV-positive patients were receiving comprehensive care through the SES HIV program launched the previous November. More than 90 percent of these patients were clinically stable and had an undetectable viral load. The HIV team worked with 17 health workers who administered life-saving antiretroviral drugs to patients and gave them critical emotional, economic, and nutritional support. The team also worked in tandem with the Ministry of Health's National HIV program to improve patient enrollment and adherence to treatment.

■ **BUILT NEW HEALTH FACILITIES:** SES worked to strengthen the Peruvian health care infrastructure by supporting the construction and maintenance of two operating rooms dedicated to surgeries for MDR-TB patients, two in-patient hospital wings for TB and MDR-TB patients, a national reference laboratory for diagnosis of MDR-TB, and an ambulatory care wing for a regional hospital.

■ **PROVIDED EDUCATION AND TRAINING:** SES continued to train fellow Peruvian healthcare professionals in the management of MDR-TB and collaborated with our colleagues in Haiti to provide a two-day training program to the Haitian Ministry of Health. SES doctors and nurses (along with one intrepid translator) traveled to the Zanmi Lasante training center in December 2006, and shared their 10 years of experience with their Haitian counterparts. SES also adapted the curriculum developed at PACT in Boston for use by Peruvian HIV community health workers and conducted trainings in community-based HIV/AIDS care.



“To speak of SES is to speak of a family that receives you with open arms and makes you feel that you are important to them.”

—Angela  
MDR-TB patient  
(page 9)

**3,126** MDR-TB patients in treatment

**1,543** MDR-TB patients cured

**77** MDR-TB surgeries performed (all free)

**98** MDR-TB patients participated in group therapy

**1,134** AIDS patients received treatment support

**35** community health workers trained for HIV treatment support

**1,452** medical consults in Carabayllo

**1,740** nutrition program patient encounters

**45** children in educational workshops

**14** training workshops conducted including 11 in Peru and 3 international workshops

Staff:

**12** medical

**95** non-medical

**695** community health workers

# Rwanda/Inshuti Mu Bu

*During our second year in Rwanda, PIH and our Rwandan partner organization Inshuti Mu Buzima (IMB) continued to renovate and expand our clinical facilities, scaled up our comprehensive HIV care program dramatically, more than doubling the number of patients on antiretroviral therapy, and expanded our support for nutrition, housing and other social and economic needs.*

## Highlights of the Year

### ■ BUILT A PEDIATRIC WARD AND INPATIENT MALNUTRITION CENTER:

The 30-bed pediatric care center at Rwinkwavu Hospital, built with support from the Clinton Foundation and UNICEF, serves as a referral facility for complicated pediatric cases from all IMB sites.

### ■ INAUGURATED AN OPERATING SUITE:

In October 2006, Rwinkwavu Hospital officially opened its fully renovated operating room. Doctors at Rwinkwavu Hospital immediately began performing emergency Cesarean sections. Prior to renovations, emergency obstetrical cases had to be transferred to the closest hospital—more than an hour away.

- ### ■ IMPROVED STAFFING AND FACILITIES AT FIVE OTHER SITES IN SOUTHEASTERN RWANDA:
- The sites include four health centers in Kirehe health district serving a population of more than 350,000 people. At the Kirehe health center, clinical and laboratory facilities were expanded, pending construction of a new district hospital.



*Rwandan mother and child—  
bednets and formula-feeding are  
keys to preventing malaria and  
mother-to-child transmission of HIV*

# THE YEAR IN R

- **EXPANDED NUTRITIONAL SUPPORT FOR PATIENTS WITH HIV AND TB:** In 2006, IMB distributed more than 1,500 food packages per month to HIV and TB patients and their families, and signed an agreement with the World Food Program for another 1,000 per month.
- **SUPPORTED SOCIAL AND ECONOMIC RIGHTS:** During the course of 2006, IMB built more than 35 houses, paid secondary school fees for almost 400 students who would otherwise have been unable to go to school, and established a carpentry and welding workshop that provides both jobs for local residents and furnishings for IMB clinical facilities. In addition, IMB dispersed 40 microcredit loans to income-generating projects for associations of HIV patients in Rwinkwavu and Kirehe.

- **PROVIDED COMPREHENSIVE CARE FOR CHILDREN AFFECTED BY HIV/AIDS:** IMB enrolled more than 150 children living with AIDS on lifesaving antiretroviral therapy and instituted comprehensive prevention of mother-to-child transmission programs at all six clinical sites in 2006. Children living with AIDS and their families meet for monthly pediatric counseling groups, where IMB staff provide education and psychosocial support.



- **EXPANDED ACCESS TO HIV TREATMENT:** By the end of 2006, about 2,000 patients had been enrolled on antiretroviral therapy. Patients are visited daily by more than 800 community health workers, trained by Inshuti Mu Buzima to distribute medications and provide social support.

“Many children are orphans. They need someone to look after them. They need counseling. They need food. They need medicine. And PIH is providing all of these.”

—Manzi Anatole  
nurse  
(page 14)

**1,969** AIDS patients on therapy



**51,434** patients tested for HIV

**91,325** patient visits  
(85,082 outpatient, 6,153 hospitalizations)

**22,974** cases of malaria diagnosed and treated, of which 13,086 were among children

**487** cases of active TB treated with a cure rate of 78.9%

**1,800** food packets distributed each month

**2,412** children received educational support

Staff:

**170** medical  
**228** non-medical  
**825** community health workers  
**170** Ministry of Health employees

# Lesotho/Bo-Mphato Li

*After starting work in June, PIH Lesotho moved rapidly to implement key components of our model of comprehensive, community-based care. We trained dozens of village health workers, scaled up testing and treatment for AIDS, provided food to patients and families suffering from hunger and malnutrition, and worked to reinforce the public health sector.*

## Highlights of the Year

■ **TRAINED VILLAGE HEALTH WORKERS:** In June 2006, staff from PIH Lesotho led the first village health worker training at the Nohana Health Center, our first clinical site in Lesotho. More than 75 village health workers participated in the training, which focused on HIV/AIDS care, prevention and treatment.



■ **DELIVERED FOOD TO THE HUNGRY IN NOHANA:** On November 16, 2006, a first shipment of food was delivered to Nohana Health Center under an agreement between PIH Lesotho and the World Food Program that will provide nutritional support to HIV patients and their families.

*Dr. Jonas Rigodon reviewing records of a village health worker in Nohana*

# THE YEAR IN R

# tšebeletsong tsa Bophelo

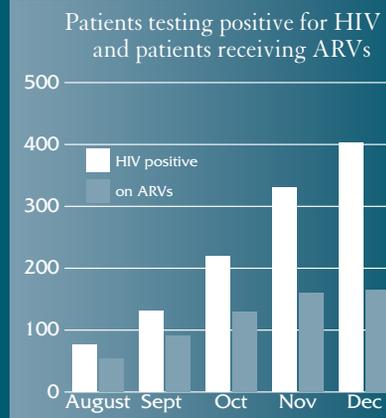
■ **IMPROVED TREATMENT FOR TUBERCULOSIS AND SOUGHT OUT CASES OF DRUG-RESISTANT TB:** Testing in Nohana confirmed high rates of tuberculosis and of HIV-TB coinfection. PIH Lesotho identified almost 100 active cases of TB, among whom almost 90 percent are coinfecting with HIV. Outbreaks of multidrug-resistant and extensively drug-resistant tuberculosis (MDR-TB and XDR-TB) in neighboring South Africa raised concern about drug-resistant tuberculosis in Lesotho. In response, PIH Lesotho partnered with the National Tuberculosis Program of Lesotho to conduct a rapid survey of two Lesotho districts bordering the affected region of KwaZulu-Natal Province, South Africa, during October and November of 2006. The survey provided a snapshot of the extent of MDR-TB and XDR-TB in Lesotho and spurred plans to launch a program to combat drug-resistant TB in 2007.

■ **PROVIDED ACCESS TO LIFESAVING TREATMENT FOR AIDS:** In July 2006, PIH Lesotho started its first 16 AIDS patients on antiretroviral therapy at the Nohana Health Center. As news of the remarkable recovery of these patients spread throughout the area, the number of people seeking HIV testing or treatment at the Nohana Health Center increased dramatically. Within just six months, more than 160 patients were receiving ART at the Nohana Health Center and over 450 were enrolled in pre-ART care.



“I remember two months ago someone came to me and said, ‘Nowadays we don’t see coffins every day in Nohana. But before PIH started its program, people died like flies here, mostly from TB and HIV.’ ”

—Lesole Mokele  
HIV counselor  
(page 15)



**1,320** patients tested for HIV, of whom 586 tested positive

**165** patients receiving antiretroviral therapy

**102** patients diagnosed with TB, of whom 87% were HIV-positive

**200** patients and families provided with monthly food supplements

**100** village health workers trained in the management of HIV and AIDS

Staff:

**9** medical (3 part-time)

**10** non-medical

**75** community health workers

# Russia/Партнеры во имя Здоровья

*PIH Russia reached major milestones in 2006, both in a training program aimed at improving care for multidrug-resistant tuberculosis (MDR-TB) throughout the Russian Federation and in strengthening delivery of treatment to patients in Tomsk Oblast, Siberia.*

## Highlights of the Year

- **TRAINED DOCTORS TO TREAT MDR-TB:** Working in collaboration with the Russian Ministry of Health and the World Health Organization, PIH Russia led three comprehensive training sessions on management of MDR-TB. Two sessions held near Moscow and one in Novosibirsk, Siberia, provided training to 213 physicians serving almost 80 percent of the territory of the Russian Federation. With continuing support from the Eli Lilly and Company Foundation, two more sessions were planned for 2007 to extend training to the entire country.
- **EMPLOYED COMMUNITY HEALTH WORKERS TO REACH THE NEEDIEST PATIENTS:** In November 2006, PIH Russia and Tomsk Oblast TB Services launched the “Sputnik Program,” the first use in Russia of what has long been a key component of PIH’s model of care in other countries – recruiting, training and paying community health workers to provide directly observed therapy and comprehensive social, nutritional and medical support to improve treatment adherence and support for the poorest and most neglected MDR-TB patients in the region.
- **EXPANDED ACCESS AND IMPROVED THE QUALITY OF TB CARE:** The Global Fund to Fight AIDS, Tuberculosis and Malaria approved phase two (years 3-5) of a grant to PIH Russia for the treatment of MDR-TB in Tomsk Oblast. PIH is the primary recipient of this grant, providing clinical, financial and programmatic monitoring for all TB patients in the Oblast. PIH Russia also received approval from the World Health Organization’s Green Light Committee to enroll 350 additional MDR-TB patients in treatment.



## BY THE NUMBERS

**680**  
MDR-TB  
patients enrolled

**203**  
prisoners

**477**  
civilians

**1,337**  
TB and MDR-TB  
patients received  
nutritional support

**72%** success rate  
among DOTS-Plus  
MDR-TB patients

Staff  
**6** medical  
**11** non-medical

*Directly observed therapy  
for MDR-TB in Tomsk*

# THE YEAR IN REVIEW

# USA/PACT

*The Prevention and Access to Care and Treatment (PACT) Project in Boston expanded both its health promotion and directly observed therapy services for marginalized HIV/AIDS patients. PACT also expanded harm reduction and HIV prevention efforts with vulnerable populations in the area, including substance abusers and commercial sex workers. In addition, PACT established collaborative relationships that could lead to replication of the PACT model in several other communities around the United States.*

## Highlights of the Year

- **SCALED UP HEALTH PROMOTION:** During 2006, enrollment into PACT health promotion and directly observed therapy for HIV patients increased by 115 percent. PACT staff began an extensive outreach campaign designed to reach patients who have experienced difficulty accessing care and adhering to treatment.
- **EXPANDED ACCESS TO CARE:** PACT services expanded from the inner-city neighborhoods of Dorchester and Roxbury to serve the greater Boston area, as PACT developed new partnerships with healthcare providers to reach more of the area's most vulnerable communities.
- **DESIGNED TOOLS TO HELP OVERCOME BARRIERS TO CARE:** PACT staff developed a curriculum to train community residents as health promoters. The curriculum teaches promoters and patients problem-solving skills needed to overcome common barriers to treatment adherence faced by the communities served by PACT.



*A PACT patient talks with her health promoter*

## BY THE NUMBERS

**87**

patients receiving health promotion services

**17**

patients on directly observed antiretroviral therapy

**251**

total patients served since program started

**259**

Latino men and women trained in street outreach for drug prevention

**13,000**

condoms distributed in 2006

**1,330**

street encounters to promote harm reduction and HIV prevention

*Staff*

**3** medical

**26** non-medical

**6** contracted

# Mexico & Guatemala

*Recovery from the devastation of Hurricane Stan and further training and support for community health promoters were the main themes of 2006 at EAPSEC (Equipo de Apoyo en Salud y Educación Comunitaria), a PIH-supported project in Chiapas, Mexico. In neighboring Guatemala, another PIH-supported project, the Association and Technical Team for Education in Community Health (ETESC), continued its work identifying victims and providing mental health support for survivors of massacres perpetrated by government forces and paramilitaries.*

## Highlights of the Year

- **EXPANDED THE NETWORK OF COMMUNITY HEALTH PROMOTERS:** EAPSEC staff trained 137 health promoters to work in 11 municipalities and 83 communities across four regions of Chiapas, serving an area of approximately 16,900 people.
- **PROVIDED MEDICAL CARE TO HURRICANE VICTIMS:** EAPSEC continued to support and staff emergency clinics in Belisario Dominguez and Honduras, two of the communities hardest hit by Hurricane Stan.
- **INITIATED SOUTH-SOUTH COLLABORATIONS:** Together with Socios En Salud, PIH's sister organization in Peru, EAPSEC initiated a Chiapas-Peru collaboration to share best practices for training health promoters.
- **ASSISTED VICTIMS OF REPRESSION:** ETESC continued its work of exhuming, identifying and reburying victims of Guatemala's repressive military, inspecting five hidden mass graves, exhuming remains from a site where 36 people had been massacred, and holding four commemorative ceremonies.
- **PROVIDED DENTAL CARE:** ETESC also conducted dental clinics, providing examinations, fillings, extractions and preventive dental care.



*A mother and daughter served by EAPSEC in Chiapas*

# THE YEAR IN REVIEW

# Selected 2006 Publications

## CLINICAL and TECHNICAL GUIDES

Partners In Health; Program in Infectious Disease and Social Change, Harvard Medical School; Division of Social Medicine and Health Inequalities, Brigham and Women's Hospital; François-Xavier Bagnoud Center for Health and Human Rights, Harvard School of Public Health. *The PIH Guide to the Community-Based Treatment of HIV in Resource-Poor Settings*. Second edition. Boston: Partners In Health; 2006.

## ARTICLES

Chalco K, Wu DY, Mestanza L, Muñoz M, Llaro K, Guerra D, Palacios E, Furin J, Shin S, Sapag R. Nurses as providers of emotional support to patients with MDR-TB. *International Nursing Review*. 2006;53(4):253-260.

Drobac PC, Mukherjee JS, Joseph JK, Mitnick C, Furin JJ, del Castillo H, Shin SS, Becerra MC. Community-based therapy for children with multidrug-resistant tuberculosis. *Pediatrics*. 2006;117(6):2022-2029.

Farmer PE, Nizeye B, Stulac S, Keshavjee S. Structural violence and clinical medicine. *PLoS Medicine*. 2006;3(10):e449.

Furin J, Farmer P, Wolf M, Levy B, Judd A, Paternek M, Hurtado R, Katz J. A novel training model to address health problems in poor and underserved populations. *Journal of Health Care for the Poor and Underserved*. 2006;17(1):17-24.

Keshavjee S. Bleeding babies in Badakhshan: symbolism, materialism, and the political economy of traditional medicine in post-Soviet Tajikistan. *Medical Anthropology Quarterly*. 2006; 20(1):72-93.

Mathew TA, Ovsyanikova TN, Shin SS, Gelmanova I, Balbuena DA, Atwood S, Peremitin GG, Strelis AK, Murray MB. Causes of death during tuberculosis treatment in Tomsk Oblast, Russia. *International Journal of Tuberculosis and Lung Disease*. 2006;10(8):857-863.

Mukherjee JS, Ivers L, Léandre F, Farmer P, Behforouz H. Antiretroviral therapy in resource-poor settings: decreasing barriers to access and promoting adherence. *Journal of Acquired Immune Deficiency Syndrome*. 2006;43 Suppl 1:S123-S126.

Rich ML, Socci AR, Mitnick CD, Nardell EA, Becerra MC, Bonilla C, Bayona J, Seung KJ, Furin J, Farmer PE, Mukherjee JS. Representative drug-susceptibility patterns for guiding design of retreatment regimens for MDR-TB. *International Journal of Tuberculosis and Lung Disease*. 2006;10(3):290-296.

Shin SS, Pasechnikov AD, Gelmanova IY, Peremitin GG, Strelis AK, Andreev YG, Golubchikova VT, Tonkel TP, Yanova GV, Nikiforov M, Yedilbayev A, Mukherjee JS, Furin JJ, Barry DJ, Farmer PE, Rich ML, Keshavjee S. Treatment outcomes in an integrated civilian and prison MDR-TB treatment program in Russia. *International Journal of Tuberculosis and Lung Disease*. 2006;10(4):402-408.

Smith Fawzi MC, Jagannathan P, Cabral J, Banares R, Salazar J, Farmer P, Behforouz H. Limitations in knowledge of HIV transmission among HIV-positive patients accessing case management services in a resource-poor setting. *AIDS Care*. 2006;18(7):764-771.

Smith Fawzi MC, Lambert W, Singler J, Léandre F, Nevil P, Bertrand D, Claude MS, Bertrand J, Louissaint M, Jeannis L, Cook EF, Salazar JJ, Farmer P, Mukherjee JS. Identification of chlamydia and gonorrhea among women in rural Haiti: maximizing access to treatment in a resource-poor setting. *Sexually Transmitted Infections*. 2006;82(2):175-181.

## REVIEWS, CHAPTERS, and EDITORIALS

Farmer P. Never again? Reflections on human values and human rights. In: Petersen GB, editor. *The Tanner Lectures on Human Values, Vol. 25*. Salt Lake City: University of Utah Press, 2006, p. 137-188.

Kim JY, Farmer P. AIDS in 2006—Moving toward one world, one hope? *New England Journal of Medicine*. 2006;355(7):645-647.

Koenig SP, Kuritzkes DR, Hirsch MS, Léandre F, Mukherjee JS, Farmer PE, del Rio C. Monitoring HIV treatment in developing countries. *British Medical Journal*. 2006;332(7541):602-604.



*Weighing a child at a neighborhood clinic in Peru*

# FINANCE & GOVERNANCE

# Financials

Partners In Health supports its work through the generosity of individual donors, foundation grants and contracts with governments and multinational organizations. Each year, PIH has to raise almost its entire budget anew, and the challenge of doing so increases dramatically as we continue to expand our work.

As shown on the pages that follow, PIH had \$10.3 million in *Unrestricted Net Assets* at December 31, 2005 to support its work in 2006. We spent \$31.1 million in 2006, ran an operating deficit of \$609,000, and ended the year with \$9.9 million in *Unrestricted Net Assets* at December 31, 2006. In 2007, PIH changed from a calendar year end to a fiscal year that runs from July 1 to June 30. In the six-month period ended June 30, 2007, PIH generated an operating surplus of \$1.1 million, yet concluded the fiscal period with just \$8.5 million in *Unrestricted Net Assets* to support an expanded budget for programs and services of \$51.7 million in FY 2008.

As these figures demonstrate, PIH has been successful in raising an increasing amount each year to fund the growth in its health programs for the poor. Yet, as a percentage of budget, unrestricted net assets have been declining each year. This raises concerns about our capacity for continued expansion and long-term sustainability.

To help strengthen our financial position, PIH Board members and other supporters have created a new fund – The Thomas J. White Fund for Innovation and Impact. Launched with a \$10 million gift in 2005, the fund has now grown to \$16 million. These resources are critical to our ability to continue expanding our work without jeopardizing existing commitments. We are determined to increase this fund substantially over the next two to three years, even as we continue to raise the resources needed to meet our operating expenses.

On behalf of our patients around the world, we thank you for your continued interest in and support of Partners In Health.

*Donella M. Rapier*

Chief Financial Officer

*Construction of  
a new hospital  
in Lacolline,  
Haiti*

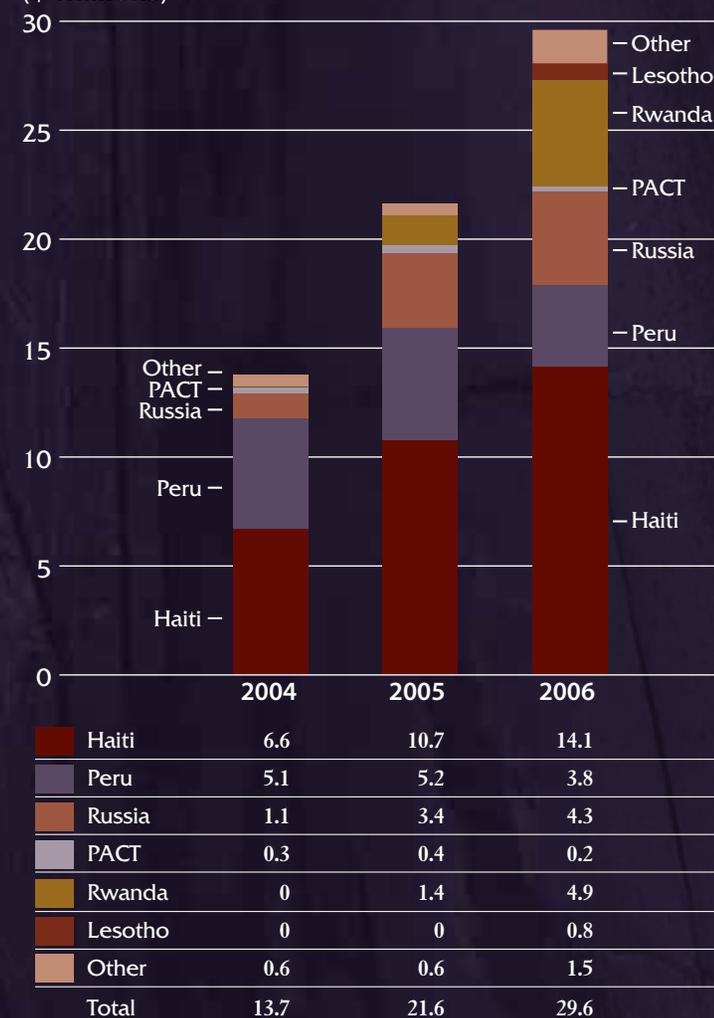


# Financials

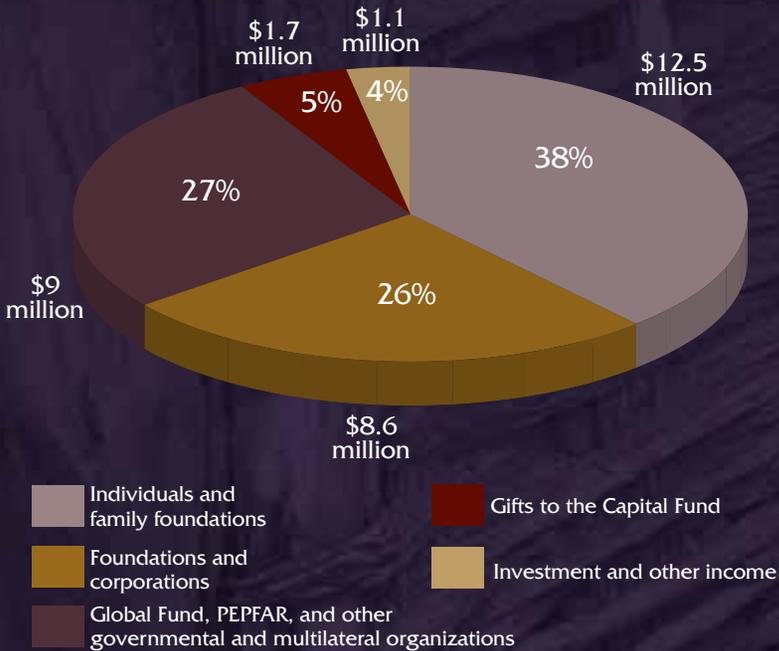
Statement of activities (dollars in thousands)	Twelve months ended December 31		Six months ended June 30
	2005	2006	2007
<i>Support and revenue</i>			
Contributions	14,750	12,482	8,576
Grants and gifts in kind	10,958	17,624	10,044
Contributions to Thomas J. White Fund	10,000	1,653	904
Investment and other income	494	1,138	1,063
<b>Total support and revenue</b>	<b>36,202</b>	<b>32,896</b>	<b>20,586</b>
<i>Expenditures</i>			
Programs	21,620	29,597	17,092
Development	518	705	359
Administration	683	802	636
<b>Total expenditures</b>	<b>22,821</b>	<b>31,104</b>	<b>18,087</b>
<i>Net assets</i>			
Change in net assets – Operating	3,028	(609)	1,103
Change in net assets – Capital fund	10,354	2,402	1,396
<b>Total change in net assets</b>	<b>13,382</b>	<b>1,793</b>	<b>2,499</b>
Net assets, beginning of year	12,878	26,199	28,192
Currency translation adjustments	(61)	201	61
<b>Net assets, end of year</b>	<b>26,199</b>	<b>28,192</b>	<b>30,752</b>

Note: In 2007, PIH changed from a calendar year end to a fiscal year ended June 30.

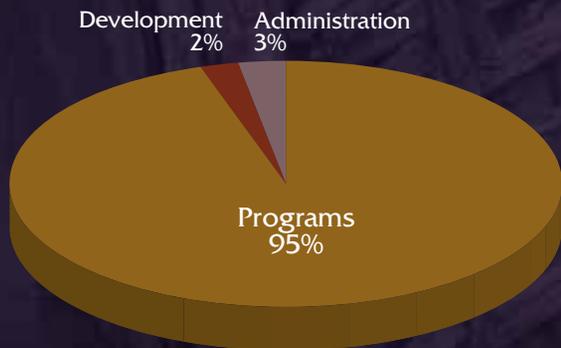
Program costs 2004-2006  
(\$ millions)



## Revenue by source 2006



## Expense components 2006



## Balance sheet

(dollars in thousands)	December 31		June 30
	2005	2006	2007
<i>Assets</i>			
Cash and cash equivalents	7,571	7,997	7,566
Receivables	3,842	4,451	1,165
Prepaid expenses and other assets	470	302	212
Investments	14,570	15,879	23,466
Real estate and equipment, net	443	527	815
<b>Total assets</b>	<b>26,895</b>	<b>29,155</b>	<b>33,224</b>
<i>Liabilities and net assets</i>			
<i>Liabilities</i>			
Accounts payable and accrued expenses	696	963	2,472
<i>Net assets</i>			
Currency translation adjustments	(94)	107	168
Unrestricted	10,296	9,904	8,498
Temporarily restricted	4,348	3,543	6,052
Thomas J. White Fund	11,624	14,613	16,009
Permanently restricted	25	25	25
<b>Net assets, end of year</b>	<b>26,199</b>	<b>28,192</b>	<b>30,752</b>
<b>Total liabilities and net assets</b>	<b>26,895</b>	<b>29,155</b>	<b>33,224</b>



*Drawing circle—children outside the hospital in Rwinḱavvu.*

# Partners Circle

## Foundation Grants

Anonymous  
A Chance...Fund, Inc.  
The Alvin and Fanny B. Thalheimer Foundation  
Atkinson Foundation  
The Baobab Fund  
Bill & Melinda Gates Foundation  
Blue Cross Blue Shield of Massachusetts Foundation  
The Boston Foundation  
Children Affected by AIDS Foundation  
Clinton Foundation HIV/AIDS Initiative  
Clinton-Hunter Development Initiative  
Conservation Food & Health Foundation  
ElectricAid  
Eli Lilly and Company Foundation  
Firelight Foundation  
The Ford Foundation  
The Frank B. Mazer Foundation  
Friedland Foundation  
The Friendship Fund  
General Service Foundation  
Grace Jones Richardson Trust  
The Grace River Foundation  
Hess Foundation  
The Hyams Foundation, Inc.  
Inavale Foundation  
The International Foundation  
John M. Lloyd Foundation  
Johnson & Johnson Family of Companies Contribution Fund  
Juniper Networks Foundation Fund at Community Foundation Silicon Valley  
Louise Crane Foundation Fund at The Boston Foundation  
Lynch Foundation  
M-A-C AIDS Fund  
Norcross Wildlife Foundation, Inc.  
Partners HealthCare System, Inc.  
Pfizer, Inc.  
Reginald F. Lewis Foundation  
The Reusing and Cole Family Charitable Fund  
The Robert and Ardis James Foundation  
Robert Earl McConnell Foundation  
Rutgers Presbyterian Church  
Shifting Foundation  
The Starr Foundation

Sterling Stamos Capital Management, LLP  
Valerie Ann Briehl Family Foundation  
Wallace Global Fund  
Yawkey Foundation II

## Government, Multilateral and Other Grants

Brigham and Women's Hospital  
Caribbean HIV/AIDS Regional Training Network  
Center for AIDS Research  
Centers for Disease Control and Prevention  
Fogarty International Center  
French Development Agency  
Global Fund to Fight AIDS, Tuberculosis and Malaria  
International Training and Education Center on HIV  
National Institute of Mental Health  
National Institutes of Health  
President's Emergency Plan for AIDS Relief  
United States Agency for International Development  
World Health Organization

## Matching Gifts

Abbott Laboratories  
ABN AMRO  
ADP, Inc.  
Aetna Foundation, Inc.  
American International Group, Inc.  
Ameriprise Financial  
Amgen Foundation  
Arch Chemicals  
AXA Foundation  
Bank of America  
Bearing Point  
Bill & Melinda Gates Foundation  
Charles Schwab Foundation  
Chubb & Son  
Cingular Wireless  
Citigroup Foundation  
Clorox Company Foundation  
CNA Foundation  
Coach  
Computer Associates International  
CRT Capital Group LLC  
David and Lucile Packard Foundation  
Delta Dental

Deutsche Bank Americas Foundation  
Dun & Bradstreet Corporation  
Eileen Fisher  
Eli Lilly and Company Foundation  
FactSet Research Systems, Inc.  
Fannie Mae Foundation  
Flora Family Foundation  
FM Global Foundation  
GE Foundation  
Genentech  
Goldman, Sachs & Co.  
Google  
Houghton Mifflin  
IBM Corporation  
John Hancock Financial Services  
JP Morgan Chase  
Juniper Network  
Kraft Foods/Oscar Meyer  
Loomis, Sayles & Company, L.P.  
Mass Mutual Financial Group  
May Department Stores Company Foundation  
MBIA Foundation  
McGraw Hill Companies Employee Giving Campaign  
Merck Partnership for Giving  
Merrill Lynch  
Microsoft  
Millipore Foundation  
Motorola  
National Grid  
Open Society Institute  
Oracle Corporation  
Patagonia  
PepsiCo Foundation  
Pfizer Foundation  
Prudential Foundation  
SPX Corporation  
Star Tribune Foundation  
State Street  
Sun Microsystems  
Susquehanna International Group, LLP  
The Conrad N. Hilton Foundation  
The Hanover Insurance Group  
The Progressive Insurance Foundation  
The Spencer Foundation  
The Standard  
Tyco  
U.S. Bancorp  
UBS Foundation USA GivingStation  
Verizon  
Vivendi Universal  
Wachovia Foundation

Washington Mutual  
Washington Post  
Watermark Estate Management Services  
Wellington Management Company, LLP  
William and Flora Hewlett Foundation  
Ziff Brothers Investments LLC

## Individuals, Family Foundations, and Organizations

### \$100,000 and above

Anonymous  
Arnold Family Foundation  
Lauren and Hank Cardwell  
Dobkin Family Foundation  
Paul Farmer and Didi Bertrand  
J. Christopher Flowers and Mary White  
Mary and Bob Heine  
Hershey Family Foundation  
Howard and Doris Hiatt  
Al and Diane Kaneb  
Malcolm McComb  
John and Margarette McNeice  
White Flowers Foundation

### \$50,000 - \$100,000

Anonymous  
Mark and Katherine Bellissimo  
Cathedral of the Sacred Heart of Jesus  
Chinook Charitable Trust  
Ophelia Dahl  
Annie Dillard  
Lesley and William King  
Ride 4 World Health  
River Street Development Foundation  
Ker and Michael Thompson

### \$25,000 - \$50,000

Anonymous  
Arcturus Fund  
Richard and Brenda Boyce  
Paul and Catherine Bottenwieser  
Andrew and Katherine Constan  
Cullen-Martin Family Foundation  
Felicity Dahl  
Phillippe Daniel  
DeLaCour Family Foundation  
Generous Returns  
Glenn Hadden and Cynthia Gray

Rick Hayman  
Michael and Dorothy Jones  
Anna Lane  
William Lee Matteson  
Keith and Laura Rothman  
Dorothy Shane  
Michael Sherman  
Stephanie H. and David A. Spina  
Family Foundation  
Trinity Church  
W.T. Rich Company, Inc.  
Wellington Management Company, LLP  
Paul Zintl and Lisa Frost

### \$10,000 - \$25,000

Anonymous  
Amy and David Abrams  
Victor Ambros  
Eric and Cindy Arbanovella  
Matthew and Margaret Balitsaris  
John and Beverly Barry  
Philip and Maureen Bonanno  
Anna Borden  
The Joan H Brack Charitable Foundation  
Leslie Breaux  
Harold and Ella Brehm  
Barbara Bryant  
CAF American Donor Fund  
Maryann Carroll  
Clements Foundation  
Angela and Richard Comeau  
Congregational Church of Weston  
Beverly Cowart  
Dan D. Crawford  
Joel and Randi Cutler  
Da Capo Fund  
Guido and Hennie Deboeck  
Virginia Deknatel  
Gary and Michelle Dillabough  
DMMN Foundation  
Gordon and Karen DuGan  
Steven and Marilyn Emanuel  
Robert and Pamela Fair  
Robert and Marie Fehribach  
Felcher/Bazerman Fund  
Leslie Fleming  
Byron G. George Marital Trust  
Richard and Rhoda Goldman Fund  
Julie and Bayard Henry  
Rowan O'Riley and William Kaiser  
Amalie M. Kass Fund of the Boston Foundation  
Steven and Kathryn Keefer  
Tracy and Frannie Kidder

Jim Yong Kim and Younsook Lim  
Janet Kinnane and Conrad Smith  
Kirby Family Foundation  
Janice and Richard Kvam  
Emile Lacrampe  
John Lechner and Mary Higgins  
Sandy and Mark Lipten  
Richard and Terry Lubman  
Zella Luria  
Mr. and Mrs. James Magliozzi  
Martha Maguire  
Mattis Family Foundation  
Elizabeth McCarthy and Brian O'Leary  
McCue Corporation  
Denise and Michael McFall  
Middleton Family Foundation  
Joa Mukherjee  
Christine and Patrick Murray  
Marree Noble/ Elizabeth Stumpf  
Memorial Foundation  
J. M. and Jane S. O'Neal  
John and Susan Pap  
Hilary Peattie  
Michael Rich  
Robert Richardson  
Nina Ritter  
Mr. and Mrs. Larry Roberts  
Robert and Betty Romer  
St. Margaret Mary Church  
Haun and Yu-lin Saussy  
George Schaefer  
Cherylann Schieber and Alan Barton  
Leo and Diane Schlinkert  
Wendy and Frank Serrino  
Thomas Crane and Susan Shaw  
Silver Mountain Foundation for the Arts  
Lawrence and Ann Smith  
Rachael Solem  
Nancy and George Soule  
Chris Stamos  
Elizabeth Steele  
Stillpoint Fund  
Mary Ellen and Mark Stinski  
The Stonesifer/Kinsley Family Fund of the Seattle Foundation  
Valerie and Paul Street  
Patricia and Alan Symonds  
Gerard and Marjoie Thomas  
Angelo J. Tomedi, M.D.  
Villanova University  
Stephen and Melissa White  
Kevin and Eileen White  
Mr. and Mrs. Thomas J. White  
Michael and Elizabeth White

# Partners Circle

Ann Wiedie and Keith Hartt  
A. Morris and Ruth Williams  
Heymann Wolf Foundation  
Barbara Wood  
Ellen and George Woodzell  
Cathy Yarbrough

## \$1,000 - \$10,000

Charles C. Adams, Jr.  
Michael Adams  
Audrey Ades  
Susan Adler  
Aetna Foundation, Inc  
AIDS Housing of Washington  
Alice Alexander  
Alexander Allain  
Altman-Stiller Foundation  
Altschul Family Fund  
Patrick and Jeannine Alwell  
Mehrdad Amanat  
Edouard Amar  
Jeremy Amar  
Lizzie Americo  
Sally and John Amory  
Francis Angino, Jr.  
Elizabeth Good Angle and Frank King  
Anonymous  
Armand Antommaria and Cali Matheny  
Susan and Michael Anzaldi  
John Arnholz and Julia Slavin  
Aranson Foundation  
R. Scott Asen  
Drew and Diane Asson  
Dr. Hugh Auchincloss  
Benjamin Auspitz  
Paul and Sally Austin  
Bridget Austin  
Alfred and Patricia Austin  
Mark and Peggy Austin  
Sonia G. Austrian, Ph.D.  
John Ayanian and Anne Fox  
Cynthia Ayres  
Lenore Azaroff  
Kent Bailey  
Roberto Bajandas  
Nick and Maura Balaban  
Ann and Charles Balch  
Ben Ballweg  
Balticorp  
Mary Jo Bane and Kenneth Winston  
Devon J. Baranski  
George Bard  
Tanya Barnett and Jay Geck  
David Barrett

Donna Barry  
Kathryn Barry  
Christina and Charles Bascom  
Frederick Basilico and Judith Waligunda  
Gary Bass  
Joseph Basso  
Carl and Myla Battaglia  
Steven and Joanne Bauer  
Daniel Baxter  
Baylor College of Medicine  
Thaddeus Beal  
George and Barbara Beal  
Nancy Beam  
Carol Beasley  
Mercedes Becerra and Salmaan Keshavjee  
Kathy and Gordon Bechtel  
Bedminster Fund  
Tim and Elizabeth Beeton  
Curtis Behrent  
Beigle Family Foundation  
Belmont Day School  
Albert & Pamela Bendich Charitable Foundation  
Joyce Bennis  
Lee F. Benton  
Laurence Benz  
Lucie Bergen  
Eric and Kathleen Berger  
Berkeley Craftsmen G.C. Inc.  
Irwin and Ilene Bernstein  
Cornelia Bessie  
Beth Israel Deaconess Medical Center- Dept of OB/GYN  
Elsie D. Bickford  
James and Debra Bishop  
David Blair and Linda Marsella  
Elizabeth Blanchard and Franklin Ellis  
Timothy and Patricia Blank  
Veronica Blette  
Madeline Blobe  
David and Elizabeth Block  
Jennie Weiss Block  
Elise Bloustein  
Sally Blower and Nelson Freimer  
William A. Blum and Susan C. Brown  
Bette and Edward Boddy  
Shawn Bohlen  
Boise State University  
James Bolger  
Chip and Ceeya Bolman  
James Bolton  
Bolton High School

Mary and William Booth  
Boston College Center for Ignatian Studies  
Boston Common Asset Management  
Boston Latin School Association  
Patricia Bott  
Nancy Bott  
Erika Bourguignon  
Megan Boyd  
Robert Brack  
Earl Bracker  
Brian and Kristine Bramson  
Susan Branch-Logan  
Janet Brashler  
Vern Brethour  
Charles Breunig  
Preston Briggs and Marya Silvernale  
Jonathan and Susan Britt  
Timothy Broas  
Richard Broockmann  
Brookline High School  
Brooklyn College Central Depository  
Brookside Congregational Church  
Brookwood School, Inc.  
Anna and L. Nicholas Brosnahan  
Kevin Brosnan  
Hilary Brown and Charles Read  
Paul Bucci  
Thomas Buck  
Martha S. Bullock  
Thomas Bumol  
Gene Bunin  
Earl and Adelaide Burch  
Peter Burian  
Alexandra Burke  
Burke Family Foundation  
William Burks  
Carrie Busch  
Chris and Ann Butler  
Patricia E. Butler and Christopher J. Cook  
Sally Butler  
Cadenhead Walters Charitable Foundation  
Carola Cadley and Maggie Lange  
Howard P. Calhoun Family Fund of the Baltimore Community Foundation  
Deborah Winston Callard  
Calvert Social Investment Foundation  
Helen Campbell  
Robert and Kathleen Campbell  
Stella and Ralph Caporale Fund  
Edward Cardoza  
Susan and James Carlin

Lisa and Richard Carlson  
Luke and Louise Carlson  
Lyle and Patricia Carlson  
Elizabeth Carr  
Eleanor and Charles Carr  
Michael Reilly and Debbie Carson  
Jeffrey and Lucy Carstens  
Kris Carter  
Barbara Carver  
Edward Casey  
Margaret Casey  
Castagnola Family, Inc.  
Pat Ryan and Ray Cave  
Richard and Nancy Celio  
Center for Practical Bioethics, Inc.  
James and Katharine Chace  
Elizabeth Chadwick  
Henry Chambers  
Lai Chan and Warren Moberly  
Ruth Chappell  
Brad and Judy Chase  
John Chaves and Karen McIlvena  
James and Andrea Cheng  
Shui Tai Cheng  
Chicago Community Foundation  
Michael Chisek  
Dave Chokshi  
Cheryl Choy  
Jeffrey Chu  
Christ Church of Oyster Bay  
Church of the Holy Family  
Alex Cilito  
Citigroup Global Impact Funding Trust  
Carmine and Eileen Civitello  
Bennett and Alice Clark  
Ann F. Clark and Peter M. Nicholas  
Patricia Clark  
Clark University  
Dorothy and Frederic Clarke  
Miriam Clasby  
Priscilla and John Clement  
David Clive and Gloria Vigliani  
Clorox Company Foundation  
Clovix Foundation  
John and Margaret Coan  
William and Marybelle Cochran  
Elizabeth Coe  
Owen Coffey  
Jonathan and Jeanne Cohn  
Eric and Nadia Colburn  
Marjorie and William Coleman  
Rebekah Coleman  
Colleen A. Griffin Charitable Foundation, Inc.  
College of Saint Mary

Dr. Michael F. Collins  
Ann and George Colony  
Patricia A. Come, M.D.  
Community College Students Leadership Association  
Andrew and Julie Peskoe Advised Fund of the Community Foundation of Middle Tennessee  
Concordia College  
George and Claire Conklin  
John and Stephanie Connaughton  
Ted Constan and Alison Franklin  
Brian and Karen Conway  
Susan J. Blotzer and Mark Coolican  
Tereza Coraggio  
Shelly Corbett  
Dennis and Marie Corcoran  
Corcoran Construction Corp.  
Robert and Karen Corder  
Tom and Rosemary Costello  
Richard and Leah Cotton  
Coupeville High School  
Breg Couzens Schultz  
Liz Coville and Verne Dusenbery  
Lillian and Norton Cowart  
Mary and John Cox  
Kevin Coyle  
The C.P. and S.G. Babel Family Charitable Fund  
Vicki Craver  
Sara Crawford  
Irene and Charles Creecy  
Peter Crimp and Paula Cullenberg  
Corinne Cronenwett  
Vincent Cullen  
Cathy, Edward, and Thomas Cullen  
Culver Family Foundation  
A. Ranger and Celia Curran  
Diane Currier  
Gerald and Jeanne Curtis  
Cymaron Foundation  
Lucy Dahl  
Theo and Madeleine Dahl  
Paul and Karen Dale  
Murray Dalziel  
Edwidge Danticat  
Peri Danton and Ellen Felker  
Janet Davidson  
Charles Davies  
Alan Davino  
Douglas Davis  
Richard and Karen Davis  
Robert Davis  
Sally and Robert Davis  
Susan and Brian Davis  
Dorothy and Douglas Davis

Elizabeth De Lima  
Robert Deiss  
Pamela Delaney  
Frederick N. Dello Russo, Jr.  
Alfred de Maria Jr. and Susan M. Case  
Denver Foundation  
Frank and Carolyn Deodene  
Louis Desantis  
Paul Detrisac  
Linda DeYoung  
Priscilla Dickson  
Kathleen Diener  
Charles Dietrich  
William Dingwell  
Mark Dionne and Cynthia Mason  
Kendra and Paul DiPaola  
Joseph and Lynne DiStefano  
Lisa Dobbertein  
Gustavo and Judy Dobs  
Ingrid Dodard  
Christopher Doebelin  
Christopher Donahue  
Liam Donohoe  
The Donovan Family Foundation  
Steven Dorfman  
Marcia and J. Peter Dowd  
Doylestown United Methodist Church  
Jennifer Dressler  
The Dry Family Charitable Foundation  
Laura Dudgeon  
Robin A. Dumas, Esq  
Catherine Dunlay  
Mary B. Dunn Charitable Trust  
Nikhil Dutta  
Mary Jo and George Dvorak  
Alex Dworak  
Alan Dworkin  
D. Brad Dyke, M.D.  
Ralph and Shirley Earle  
Martha Easter-Wells  
Claire and Mark Edersheim  
Edith Hendrickson Family Foundation  
Peg and Keith Edmondson  
Edmond I. Eger II, M.D.  
Joan Egrie  
Teresa Ehling  
Michael Eichenwald  
Eva Eilenberg  
Mary Ann Ek and Joel Wittenberg  
Muna El Futuri  
The Elias Foundation  
Jane and John Ellis

Titia Ellis  
Samuel and Maryann Ellsworth  
Elon University  
Patricia and Harris Elvebak  
David & Margaret Engel Family  
Foundation  
Martha Entrekin  
Evans Family Foundation  
Vikki Evers  
Caroline L. Everts  
Myriell and Bill Eykamp  
W. Michael Fagan  
Mary Ellen Fahs  
Robert and Doris Fair  
Fairfield University  
Carla and Timothy Fallon  
Sarah Farley and Betsy Tisel  
Sonja and Brent Farmer  
David and Joan Fay  
Christopher and Ann Fay  
James Feldman  
Gary Felicetti  
Fennie and Mehl Architects  
Linda Ferguson  
Santiago Festa  
Fife Cragin Charitable Trust  
Janice and Daniel Fleurriel  
First Congregational Church of  
Western Springs  
First Parish in Concord  
First Parish in Lincoln  
Donna and Paul Fischer  
Heike Fischer  
Stuart Flake  
Joyce and William Fletcher  
Janice and Daniel Fleurriel  
Lindsay N. Flynn  
Monica and Robert Foley  
John and Lila Foster  
Mark Fowler  
Mary and Paul Fox  
Peter and Eliza Fozzard  
Frank B. & Virginia V. Fehsenfeld  
Charitable Foundation  
Frank Pernel Foundation  
Laurie Frankel  
David Frankel  
Marc Franklin  
Franklin W. Olin College of  
Engineering  
Lisa Frantzis  
Hamish Fraser  
Tim Fraser  
Tom Friedman  
Peter Frisbee  
Evie Frost

Cecile Fruman  
Lilyan Fulginiti  
David Funtanilla  
Maria Furman  
Steve Gabbard  
James and Patricia Gaffey  
Mark Gannaway  
Mr. and Mrs. M. Dozier Gardner  
David and Josie Gardner  
James Gauch  
Ruth Gauthier  
Mary Gearn  
Mr. and Mrs. Geary  
Sharon Genovese  
Elizabeth Germain  
John Gershman and Deborah Yashar  
Andrea and Gessner Geyer  
Bruce Giantonio  
Ribert Gibbons  
Chris and Susan Gifford  
Louisa Gilbert  
Melissa Gillooly  
Anna Giske and Madan Kumar  
Susan Gladin and Peter Kramer  
Leah Glasheen and Matthew  
MacWilliams  
Mary E. Glass  
Katherine Glassey  
Bridget Gleason  
Global Impact  
Thomas Glynn  
Jean and Lawrence Gohlke  
Nancy Gold  
Adam Goldberg and Debra Sit  
Byron and Mary-Jo Good  
Good Samaritan United Methodist  
Church  
Mark Goold  
Michael Goroff and Jill Friedlander  
Silvia Gosnell  
Tamara Rochlin Gottstein  
Margaret Grady  
Valerie and William Graham  
Deborah Kacanek and Roger Grande  
GreatEscape Foundation  
Carol and Derek Green  
Green Giant Landscape, Inc.  
Susan Gregory  
Gillian Gregory  
Hugh Griffiths  
Jessica Griffiths  
Richard Grodecki  
Charles Groppe  
Stephen and Sharon Grubb  
William Guarente  
Alexander and Emily Guimaraes

Susan Gula  
Katherine Gundersen and  
Christopher Nagel  
Marc Gunther  
H Wick Chambers Charitable Trust  
Walter and Elise Haas  
Stacy Hagen and Andrew Paterson  
Christine Haggerty  
Mark Cover and Dr. Kristin E.  
Hahn-Cover  
Barbara Hakim  
Hale Foundation  
Christopher and Sherrie Hall  
Marie Hall  
Paula and Van Hall  
Gene and Nancy Haller  
Kimberly Halley  
Ellen and Michael Hallor  
Cynthia Hampton  
Jean Handy  
Lynn Hanganu  
W.J. Hannigan Family Fund of the  
Boston Foundation  
Linda Hanson and Jonathan Wallach  
Laura Hanson and David Cecelski  
Pamela and Karl Hanson  
Monie Thayer Hardwick  
Christopher Harned  
John Harper  
Global Impact  
Catherine Harrison  
John Hart  
Jo Anne Hart and David Weitz  
Dr. and Mrs. William Hart Fund of  
the Jewish Community Federation  
of Cleveland  
Susan Hartung  
Isabella Harty-Hugues  
Harvard University  
David Haskell and Sarah Vance  
Paul and Victoria Hasse  
Kevin and Kristie Hassett  
George and Marina Hatch  
Meredith Hawkins  
GreatEscape Foundation  
Hawthorn  
Dr. and Mrs. Harley A. Haynes  
Ormond L. Haynes, M.D.  
Harvard Business School Section C  
- Class of 2007  
Barry Hayes Mutt Fund of the  
Heartland Charitable Trust  
Kris Heggenhougen  
Angela and Thomas Heigle  
John Held  
Nancy Helgeland  
Sarah Hemphill

William and Gisela Hendley  
Caren Hendren  
Cynthia Henebry  
Chrissy Henneberg  
Kirk and Mary Henry  
Amber Henson  
Jeanne Herbert  
Ann Hersey  
Gerald Hershkovitz  
Mary Claire Doyle and Patrick B.  
Herson  
Mary Hester  
Nancy Hewitt  
Philip and Anne Heymann  
Louisa Heyward  
James Higa  
Christopher and Martha Higgins  
Anne Higgins  
Jennifer Hill  
Jeremy Hill  
Stephen Hill  
Benjamin and Francine Hiller  
Lindsay Hintz  
Margaret and Michael Hinzman  
Ella Hirst  
Hoang-Nakada Fund of the Asia  
Pacific Fund  
Pamela and Glen Hochstetter  
Tamara Hodgson  
Dan Hogan  
Leonard and Jean Holder  
Frank Holowach and Pam Williams  
Tina Holt  
David and Gloria Hood  
Nancy Hopp  
Kim Hopper and Nancy Travers  
John Hornbostel  
Horowitz Associates, Inc.  
Bryan Hotaling  
Karen Hover  
Dawn Howard  
HRK Foundation  
Bradley Hubbard-Nelson  
J. Huber and Deborah Clarke  
Jude and Ray Huetteman  
Lam and Shuk Hui  
Andrew Huibers and Martha Man  
Kimberly Hult and Robert Pasnau  
Richard Hunt  
Mark and Annmarie Hunter  
Margaret Hunter and Reede  
Stockton  
Catherine Huntley and David  
Rundle  
Jesse Hutchens  
Nicole Hynes

Rosemary T. Hyson and David  
Junius  
I Do Foundation  
David Ingram and Melayne Finister  
Integra Northwest Foundation  
Irving S. and Alwyn N. Johnson  
Family Foundation  
Lydia Irwin  
Susan Irwin  
John Jacobi and MaryEllen McVeigh  
Gertrude Jacoby  
Helen Jacoby and Peter Cannavo  
Rebecca James  
Ralph and Janice James  
Tatiana and Todd James  
Nora Janeway  
Nina Janopaul and Bartlett Naylor  
Kirstin and Jordan Jansen  
Maria Jasin  
Irene Jenkins  
John Jennings  
Jon and Erin Jensen  
Jewish Communal Fund  
Jewish Community Foundation  
Jewish Foundation of Nashville  
Maneesh Jhunjhunwala  
Susan Jick and Daniel Groher  
Jocarno Fund  
Marie A. Johantgen, M.D.  
Philip Johnson and Donna Gordon  
Walter Johnson  
Steve and Rosemarie Johnson  
Edwin and Rita Johnson  
Jason and Helen Johnson  
Don and Rochelle Johnson-Mansfield  
Andrew Johnston  
William Johnston  
Nathaniel and Kristin Jordan  
William Paly and Amy Judd  
James and Celia Judge  
Steve Kadish and Linda Snyder  
Roger Kafker  
Neerja and Hemant Kairam  
Bianca Kamps  
Anne and Robert Kantack  
William and Judith Kates  
Joel Katz and Laura Thorp  
Kathleen and Charles Kauffman  
Michael Kazhdan  
Mitchell Keamy  
Robert and Julie Kebartas  
Daniel Keller  
David Keller  
Marianne Kelley  
Kevin Kelly and Germaine Fuh  
Suzanne Kelsey and Ken Siegert

Peter Kelsey  
Cecelia Kelso  
L. Gilbert and Carol Kendrick  
John Kenerson and Lisbett Hanson  
Ellen and Leonard Kennedy  
William and Anne Kenney  
James Kenny  
Anne Kent  
Nannerl and Bob Keohane  
Scott and Cheryl Kerns  
Sharon Kerrigan  
William Keske  
Steven Ketcham  
Mark Keusenkothen  
Kevin D. Gorter Memorial  
Foundation  
KeyBank National Association  
Reine T. Kidder  
Elliott and Jacqueline Kieff  
Raejeanne Kier  
James and Elizabeth Kilbreth  
Laura Kimberly  
Brian King  
Margaret O'Toole and Robert Kinzel  
Ruloff F. Kip, Jr.  
Jill Kirshner  
Zeev Klein  
Katherine Klein and John Gomperts  
Anne Kleinman and Thomas Wong  
Arthur and Joan Kleinman  
Jill Kneerim  
Kjersti Knox  
Eric and Sarah Knutzen  
Amelia Koch  
Richard Koffman  
R. J. Kolesar  
Katharine Kolowich  
Martha Koonsgaard  
Joann Konce  
Patrice Kopistansky and Kevin  
Flynn  
Karen Kosinski  
Kathleen Kosinski  
Paul Kosmerl  
Mark and Donna Kozin  
Larry and Mary Louise Krakauer  
Edward Kramer  
Bruce Kraus  
George and Sue Kresovich  
Michael Kressig  
Eric Krock  
Melchoir S. Krol  
Elizabeth Kunkel  
Ira Kurzban  
Tracy Smith and Thomas Kvinge  
Michael and Kate Lahey

# Partners Circle

Lanny Lake  
Lakeside School  
Mr. Sidney Landau  
Lander Family Charitable  
Foundation  
Tim Landes and Sierra W. Valuation  
Lang Foundation  
Langdon Family  
Maggie Lange  
Warren and Mary Langton  
Kathleen Lannan  
James and Mary Larsen  
Lily Laufer  
Daniel and Debra Laufer  
Steven Lauryn  
Christopher Le Mon and Rachel  
Taylor  
Matthew and Annie Leary  
William Ledsham  
James and Katherine Ledwith  
Kyung Lee  
Clara Lee  
Lemaire Family  
Marla and Nicholas Lembo  
James Lentz  
Helaine Lerner  
Darcy and Richard Lettieri  
Michelle Levene  
Gordon and Jennifer Levering  
Wendy Levinson  
Farron and Sue Levy  
Howard LeWine and Susan Evans  
Liana Foundation  
Stuart Licht  
Catherine Liddell  
Judith Lidsky  
Margaret and Art Lim  
Kee Hak and Janet Lim  
Lincoln Sudbury High School  
Anne and Colin Lind  
James and Margie Lindsey  
David Link and Margaret Ross  
Hamish Linklater  
Gerald T. Lins  
Penny Livesay  
Dorothy Lloyd  
Margaret Locke  
Charles Logan  
William Logan  
R. Keith McCormick and Eva B.  
Lohrer  
Susan Lowery  
Edward and Valerie Lozowicki  
The Henry Luce Foundation, Inc.  
Martin Luchtefeld  
Lucile Packard Foundation for

Children's Health  
Mary Luddy  
Kelly Lunda  
John Lutzius and Alison Cohen  
Karen and Nicholas Lygizos  
Deborah Lynch  
Susan Lynn  
Karen and Thomas Lyon  
Sarah Lyons  
Mary Lyons  
Mary Therese Lysaught and William  
Riker  
Maryann and George Macdonald  
Mary Macneil  
Andrew MacNeill  
Ann and Richard Madigan  
Maine Community Foundation  
Malaspina Communications  
Sandra Maldonado  
Joanna Baldwin Mallory  
The Mancini Charitable Foundation  
Amy Mandel and Katina Rodis Fund  
Barbara Manger  
Charlotte Mao  
Claude Marchessault  
Robert and Ann Marcus  
Samuel and Judith Marcuson  
Shevelev Marina  
Stephanie Markison  
Mr. Robert Marr  
Carl Martignetti  
Dr. and Mrs. Joseph B. Martin  
Patricia and William Martin  
Martin Family Foundation  
Joseph and Mary Martingale  
Mass Bay Community College  
James and Marjorie Matthews  
Andrew and Christine Matz  
Max Kagan Family Foundation  
Collin May  
David McCallie  
Jane and WM McConnell  
Nancy McCormack  
Richard and Rosemary McCreedy  
Ann McDonnell and Patricia Sager  
Thomas McDougal  
Laurie McDuff  
Stephen and Elaine McElhennon  
Ann and Jon McGee  
James and Theresa McGuire  
Ralph and Carole McKay  
John McKelvey  
Peter and Elizabeth McKelvey  
Curtis McKnight  
Margaret McLellan  
Christian McMillen and Stephanie

Tatel  
Sally and Matthew McShea  
Patsy McSweeney and Michael  
Sargent  
Francine and David Meckler  
Daniel A. Medalie and Diana Pruffer  
Revis Meeks  
Paul Melvin  
Curtis D. McKinney and Joan M.  
Menard  
Mohammed Mesiya  
Horst and Sandra Metz  
Michael J. Zamkow and Sue E.  
Berman Foundation  
William and Hilary Midon  
David Harrison and Joyce Millen  
Bill and Diane Millen  
Roberta Miller  
Bruce and Patricia Miller  
Chris Miller  
Gayle Miller  
Charles Mills  
Sharon and Lloyd Mintz  
Mitchell Family Fund of the  
Columbus Foundation  
Mark Mitchell  
Georgiana Mitchell  
Brooke Mitchell  
Carole Mitnick and Chris Johnson  
Mom Agenda  
Marcy Moody  
Karen Moore  
Franklin and Nancy Moore  
Forrest Mooy  
Dwight and Lynne Morris  
Harold and Julie Morse  
Morsman Family Foundation  
Moschetto & Koplin, Inc. PS  
Bradley and Dori Moseley  
Edwin Moses  
Patricia Mukherjee  
Michael and Stephanie Mulligan  
James and Sarah Mulloy  
JoAnne Yates and Craig Murphy  
Rosemary and Kenneth Murphy  
Edward Murphy  
Michael and Doris Murray  
Mark Murray  
David and Marion Mussafer  
Arthur Naiman  
Nancy Peery Marriott Foundation  
Ed Nardell and Madeline Crivello  
Narnia Foundation  
Greg Nash  
Nathalie and James Andrews  
Foundation

The Nature Conservancy  
Stephen Naum  
Barbara and John Nelson  
Marc Nester  
New Aid Foundation  
New Creation Community  
New Haven International Festival of  
Arts & Ideas, Inc.  
Jennifer Newsom  
Harry and Susan Newton  
Heidi and Richard Nichols  
John Niepold  
F.W. Niugent  
Charlotte Nixon  
William Noble  
Arthur Norcross  
Carmelle Norice  
Norma and Milton Mann Family  
Foundation  
James and Eileen Norton  
F.W. and Allis Nugent  
Thomas and Eugenia O'Brien  
David O'Connell  
Patricia O'Connor  
Neil O'Donnell and Christine Motley  
Richard O'Dwyer  
Rev. Dr. Joseph Oechsle  
Quentin and Paula Ogren  
John O'Laughlin  
Sarah O'Leary and Michael Perry  
Lorne Olman  
Tamara Olsen  
Karina O'Malley and Christopher  
Thrasher  
Charles T. O'Neill and Mary E.  
Neylon  
Terence O'Rourke, M.D.  
Kelly and Jeffrey Orringer  
Robert and Joanne O'Toole  
Jeanne and Dan Ouellette  
Sylvia Pabreza  
David and Lucile Packard  
Foundation  
Marie Palladino  
E. Christopher and Suzanne Palmer  
Thomas and Jill Pappas  
Donald and Ann Parfet  
Suzanne Parish and Norm Carver  
Ann Parker-Way  
Alan, Christina and Melissa  
Parkinson  
Geri Parsons  
Parsons Family Foundation  
Robert Pasnau  
William and B Paul  
Mary Payne and James Brookeman

Louis L. Pech  
Stephen and Cynthia Peck  
James Pecot  
Thomas Peil  
Peninsula Community Foundation  
Penn State University  
Penn State University- Project Haiti  
Michael Peri  
James Perkins  
James L. Perkins  
Daniel and Susan Perry  
Samuel Peters  
John Petrowsky  
Kathryn Peyton and Tyler Brown  
Anthony and Marigrace Piazza  
David and Suzanne Picher  
Dayton Pickett  
Christine Pielenz  
Eleanor Pienitz  
Mark and Clara Pierson  
Donna Pignatelli  
Pilgrim Church  
Leslie Pinnell  
Maria Pitaro  
Renvy Pittman  
Teresa Plowright  
Cecilia Plum  
Philip Plumbo  
PNC Hawthorn  
Alexander and Harriet Pollatsek  
Irene Porro and Leonard Strachan  
David and Jane Potrykus  
Clermont and Ellen Powell  
Stephen C. and Anne B. Peacher  
Charitable Foundation  
Thomas and Theresa Pretlow  
Ginny Price  
Fredric Price and Ellen Wilson  
Mary Pughe  
Myrna Putziger  
Quilt Fund of the San Antonio Area  
Foundation  
Kathleen and Edward Quinn  
Joshua Rabinovitz  
Mary Rabion  
Susan and Carl Racine  
Cathie Ragovin and Derek Polansky  
Ben and Nancy Randall  
John Randolph  
Linda and Rex Rarden  
Pamela and David Rasmussen  
Ian and Lucy Rawson  
Sughra Raza, MD  
Reach Out To Haiti  
Susan and Joseph Rechter  
Emily and Greg Redinbo

Redlich Horwitz Foundation  
Paul Reeder  
James Reeves  
Michael and Christy Refojo  
Cynthia Reichman  
Carla Reid  
Alexandra Reid  
Dale Reiger  
Donald Reilly  
Steven and Jennifer Reimer  
Gary and Sylvia Reiser  
Derek Reisinger  
Mary Renda  
Susan Rendon  
Frank Reuter  
Emily Rex and Alex Sanfilippo-  
Rosser  
Aaron Reynolds  
Carin Reynolds and Nat Pierson  
RFUMS Executive Student Coucil  
Sarah and Joe Rhatigan  
Barbara Rhine and Walter Riley  
Philippa Ribbink  
Simon Rich  
Ralph and Suzanne Rich  
Lisa and Marc Richard  
Richard E. and Nancy P. Marriott  
Foundation  
Wendy Riches  
Nancy Richter  
Anne and Jeffrey Rienks  
Richard and Nancy Riess  
Edward and Sheila Riley  
Amy and Timothy Riley  
Kay Riley  
Steven Rioff  
Alexander Riseman  
Jeffrey Liebman and Eve Rittenberg  
Jack and Betsy Rix  
Robert and Catherine Miller  
Charitable Foundation  
Martha S. Robes  
Harrison L. Robinson  
Mara Rockliff and Doug Sulouff  
Eric Rodbard  
Beth Roebuck  
Chad Roedemier  
Sarah Rohrbach  
Ronald and Eva Kinney Family  
Foundation  
Marilyn Roossinck  
Cynthia Rose  
Jennifer Rose  
Pam Moore and Charles Rose  
Max Rosen, M.D.  
Debra Rosenberg

Rosenbluth Family Foundation  
Jim, Sharon, and Peter Rosenfeld  
Michael Ross  
Charles and Marianna Ross  
Shelley Roth and Jed Weissberg  
Peter and Ann Rothschild  
Jesse and Joan Rothstein  
Hannah Rothstein  
Adam Rothstein  
Rothstein Foundation  
Doffie Rotter  
Lewis and Esther Rowland  
Joseph Ruby  
Kim Stacey Rueben  
Philip Ruedi  
Amy Ruhl  
Thomas and Mary Rutledge  
Colleen Ryan  
Daniel and Barbara Rylko-Bauer  
Thomas Saccardi  
Emily Sagor  
The Saint Paul Foundation  
Chris and Pito Salas  
Alexander Salkever  
Henry Salzarulo, M.D.  
San Francisco Foundation  
Peter Sanborn  
Richard and Julia Sanders  
Jay Sandvos  
Marie Sanon  
Santa Fe Community Foundation  
Susan L. Santos, Ph.D.  
Sate Foundation  
Mike and Janet Savage  
Eric Savage  
Paul and Carolyn Sax  
Dr. V.C. Scanlon  
Scarborough Foundation  
Scarsdale Congregational Church  
David Schamp  
Cynthia Scharf and Vladimir Klimenko  
Jessica and Paul Schendel  
Richard and Ellie Scherr  
Robert Schick  
Walter and Tracy Schier  
Richard and Barbara Schiffrin  
Rob Schiller  
Carl and Keri Schmidt  
Naomi Schneider and Irvin Muchnick  
Steven Schnur  
Howard Schoninger  
The School District of Columbia  
School Employees Credit Union of Washington

Daniel Schreiber  
Katherine Schrenk  
Janette Schue and Jeff Corbin  
Janelle and Harold Schuler  
Margaret Schultz  
Ruah and Frank Schwamb  
Marc and Lisa Schwartz  
Don and Mary Scott  
Richard Scriven  
Timothy and Brigitte Searchinger  
Olga and Lee Seham  
Sandy and Bob Seidensticker  
Stephen Senna  
William Shafarman and Judith Schneider  
Stanley and Kathy Shaffer  
Jonathan Shaheen  
Gabriel and Jeanne Shaheen  
Robert and Anne Shapiro  
Roger Stix and Jane Share  
Jack Shaughnessy  
Clifford Shedd and C. Michelle Miller  
Dudley and Barbara Sheffer  
Marina and Michael Shevelev  
Jan Shifren  
Caitlin Shirts  
Susannah Falk Shopsin  
Stephen Shore and Fiona Havers  
Sidhu Family Foundation  
Deborah Siegele  
Sara Elizabeth Sievers  
Helen and Leroy Sievers  
Scott Sikorski and Nhan Tai  
Herb Silverman and Sharon Fratepietro  
Susan Simmons  
Carrie Simon  
Rob Simonfy  
Medha Sinha and Arthur Epker  
Dwight and Susan Sipprelle  
John Sirois and Sheila McParlin  
Elizabeth Skim  
Trond and Anne Skramstad  
Susanne Slavick  
James and Monica Slavin  
James Sloman  
Carole Smarth and Tim Johnson  
Jill Smith and Leon Green  
Jim and Betty Smith  
Trellan Smith  
Wafaie Fawzi and Mary K. Smith-Fawzi  
William and Lillian Smyser  
Garrett and Jean Snipes  
Loudell F. Snow

Elliott and Cynthia Socci  
Elizabeth Soffer  
David and Lori Soglin  
Mark Somers  
Katherine and Stephen Somers  
Arne Sorenson  
Jeffrey Sosman  
Ernest Sota  
Stephen Spalding  
Betsy Spears  
Hans Spiller  
St. Andrew's School  
St. Frances Cabrini Parish  
Janet St. Goar and Joseph Donovan  
St. Zepherin Catholic Church  
Anne Stack and Tim Dunnier  
Barbara P. Stafford  
Levi Stahl and Stacey Shintani  
Andrea Stambaugh  
The Standard  
Harold and Emily Starr  
Rosanne and Dan Stead  
Carolyn and Eric Stein  
Daniel Stein  
Eugene and Marilyn Stein Family Foundation  
Joel Stein  
John Stephens  
Jean Stevenson  
Jane Stewart  
Louise and John Stolzenberg  
Thomas and Valerie Stone  
Alison Stone  
Robert Stoner and Molly Bartlett  
Brian and Aleece Strachan  
Andrew and Thelma Strauss  
Michael and Kathleen Stringer  
Jonathan Strongin and Ellen Seely  
David Stuesse  
Suzanne Holler and James Styerwalt  
Mandy Suhr  
Sherry Suisman  
Robert Sullivan  
Eugene Sun and Wendy Ward  
Richard and Nancy Swanson  
Ralph and Christina Sweetland  
Andrew and Sandra Swinburne  
Craig and Cynthia Tanny  
Kevin and Martha Tansey  
Andrew and Dianne Tappe  
Ramie Targoff and Stephen Greenblatt  
Arnold Teasdale  
Anne and Don Teddlie  
The Ten Foundation  
James Terrell and Kathleen Sullivan

Liz Terry  
Thendara Foundation  
Jeffrey and Kelly Thomas  
Jonathan Thomas  
Kelvin and Susan Thompson  
Kevin Thompson  
Donald Thompson  
Lisa Thorne  
David Thorne  
Robert Threlkeld  
Claudia Tierney  
Daniel C. Tosteson, MD  
Kathleen Touns  
Towne Foundation  
Diane Traiger  
Don Traver  
Trillium Asset Management  
Triton Foundation  
John Trotter  
Frank Tsai  
John Tschirhart  
Ruth Tucker  
Kate and Bill Ewall  
Nancy Turnbull  
Allison Turner  
Rebecca Turner-Chapman  
Ann Twiggs  
Timothy Twito  
Winona Tyler  
United Church of Chapel Hill  
United Way  
United Way of New York City  
University at Albany - Haitian Student Association  
University of California Press Foundation  
University of Minnesota  
University of Rhode Island  
Rachel Unkefer  
Carolyn and W. Michael Vale  
Linda Van de Car  
David and Kathleen Van Note  
Amy and Paul Vargo  
Jack C. Vaughn, Jr.  
Peter Vellis  
Rama P. Vemulapalli  
Vera C. Hendry Foundation  
Charles Vickery, Jr.  
Laura Voisinet and Mark Becker  
Judd Volino and Julia Kazaks  
Laura and Thomas Von Ahn  
Anne Von Rosenstiel  
Brian and Jennifer Vosburgh  
Wagner Family Trust  
David and Jeanne Waite  
Donald Wakeman

Nanette Walkley  
Tom Wandless and Karlene Cimprich  
Jane Wang  
The Wapack Foundation  
Marcy Wasilewski  
Jennifer Watson  
Goerge and Sarah Wattendorf  
Taylor Watts  
Leigh Weatherly and George Denny  
Bruce Weber and Nan Bush  
Edward Hernstadt and Maia Wechsler  
Steven Wegmann  
Weingarten Family Foundation  
The Emanuel and Anna Weinstein Foundation  
Fred and Joan Weisman  
Sanford and Anne Weiss  
Anne and Kenneth Weiss  
Steven Weiss  
Weiss Family Foundation, Inc.  
Christopher and Kathleen Weld  
Mona and Wade Wells  
Patricia Maher and Michael R. Wessels  
Westminster Christian Academy  
Weston Charitable Trust  
Kent and Sara Weymouth  
Bonnie M. Wheaton  
Christina White  
Andy White and Nancy Branberg  
Martha Whitney  
Karin Whittemore  
Douglas Wholey  
Hunter and Christen Wiggins  
Thomas and Suzi Wilder  
Wilderness Point Foundation  
Marjean Willett  
James Williams  
Doug and Beth Williams  
Aileen Williamson  
Jennifer Wilshire  
Douglas Wilson  
Fiona Wilson and Tor Archer  
Michael Wilson  
Priscilla and Rodney Wilson  
E. Hope Wilson  
Martha and David Wilson  
Steven and Linda Wilson  
Andrew Winders  
David Winner  
Richard and Janet Wohlers  
Drs. Marshall and Katharine Wolf  
Wolf Creek Partners  
Brian Wolfe and Jennifer Berish

Christine Wolfe  
Gregory Wolfe and Jennifer Singler  
Steven Wood  
Lilith Wood  
Nick and Christi Wood  
Scott and Kimberly Woods  
Woods Foundation  
Rebecca L. Wright  
Christopher and Holly Wright  
Richard Wright and Sheila Culbert  
Anson E. Wright  
Timothy Wyant  
Cathy Wyatt  
Cynthia Yancey  
Paul Yasi  
Nicholas Yatsko  
Geoff and Andrea Young  
Michael and Debra Young  
Sabine Zerarka  
Joseph and Florence Zilka  
Kai Zinn

**We would also like to extend a special thank you to those individuals and groups who have taken on fundraising for Partners In Health as their own cause, including but not limited to:**

Athletes Racing for Charity  
FACE AIDS  
Luke Kelly  
Rock Bridge High School  
Stanford Dance Marathon  
Walk for Haiti

And to the countless other supporters whose creativity in spreading Partners In Health's mission throughout their communities has inspired us all.

*Partners In Health would like to thank our legal counsel, Schulte, Roth & Zabel LLP, and Goodwin Procter LLP, for their voluntary support of our mission.*



Children in Haiti

# Officers & Boards

## Officers

Ophelia Dahl, President and Executive Director  
Paul Zintl, Chief Operating Officer  
Donella M. Rapier, Chief Financial Officer  
Kristin Nelson, Clerk  
Paul E. Farmer, Executive Vice President  
Edward M. Cardoza, Vice President of Development  
Ted Constan, Vice President of Program Management  
Joia Mukherjee, Medical Director

## Board of Directors

Ophelia Dahl, Chair  
Jack Connors, Jr.  
Paul E. Farmer  
Gary Gottlieb  
Howard Hiatt  
Albert Kaneb

Diane E. Kaneb  
Jim Yong Kim  
Todd H. McCormack  
Ted Philip  
Bryan A. Stevenson

## Advisory Board

John Ayanian, *Brigham and Women's Hospital*  
Jaime Bayona, *Socios En Salud*  
Rose-Marie Chierici, *State University of New York*  
Marie-Flore Chipps, *Zanmi Lasante*  
Jody Heymann, *Harvard School of Public Health*  
Marie-Louise Jean-Baptiste, *Cambridge Hospital*  
Philip Johnson, *Philip Johnson Associates*  
Fr. Fritz Lafontant, *Zanmi Lasante*

Yolande Lafontant, *Zanmi Lasante*  
Anne McCormack, *Partners In Health*  
Patrick Murray, *Winston & Strawn LLP*  
Guitèle Nicoleau, *Frederick D. Patterson  
Research Institute*  
Haun Saussy, *Yale University*  
Amartya K. Sen, *Harvard University*  
Loune Viaud, *Zanmi Lasante*



*Carrying water in Haiti*



**Partners  
In Health**

20 years of health and social justice

641 Huntington Avenue, 1st Floor • Boston, MA 02115  
617-432-5256 • Fax 617-432-5300 • [www.pih.org](http://www.pih.org)

*PIH is a 501(c)(3) nonprofit corporation and a Massachusetts public charity  
Copyright 2007 © Partners In Health. All Rights Reserved.*