

Mountains Beyond Mountains Study Guide

Mountains Beyond Mountains by Tracy Kidder

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Plot Summary

Mountains beyond Mountains is the story of Dr. Paul Farmer as told through the author, Tracy Kidder. Kidder shadows Dr. Farmer with his patients, records his stories, and forms a chronology of Dr. Farmer's many achievements. Paul Farmer was born in 1959 and raised in a middle class American household. His father was a hard worker and loved Paul but wasn't the type to proclaim his feelings. Paul's mother stayed home when their children were young and eventually went back to school to earn her bachelor's degree. Paul and his siblings (there were a total of six children) were raised in Massachusetts, Alabama, and in Florida in what ranged from a traditional home to a bus and, at one point, a boat. The Farmer family wasn't poor in a third world sense, but money was definitely tight. Life was an adventure. Paul graduated from high school and attended Duke University on a full scholarship. He volunteered in Haiti at various clinics and set his sights on medical school. Paul was accepted at Harvard Medical School and graduated from there with his M.D. and also a Ph.D. in anthropology. The blend of medicine and anthropology guided his life in the years that followed.

Farmer is an American doctor and worldwide health activist. He believes strongly in the right of all individuals to have access to adequate health care. It is Paul's mission to make this possible in even the most rural areas. He chose Haiti as his primary point of aid, but he is also associated with efforts in other parts of the world through the charity he established, Partners in Health. Partners in Health is situated in Boston, Massachusetts. It has sister organizations in Haiti and Peru called *Zanmi Lasante* and *Socios en Salud*, respectively. Dr. Farmer chose these locations due to their extreme levels of poverty and inadequate health care. They have exceptionally high rates of infant mortality, malnutrition, tuberculosis, HIV, and AIDS. Dr. Farmer's associate, Jim Kim, designed, built, and oversees the operation of *Socios en Salud*. Dr. Farmer prefers to attend to his patients in Haiti but accepts speaking engagements and teaching positions to speak on behalf of the people he treats and to spread awareness of the conditions they face. Dr. Kim trained at Harvard with Paul, and they are both responsible for clinical time at Brigham and Women's Hospital, but Jim's specialty lies in policy making and advocacy.

Mountains Beyond Mountains traces Dr. Farmer's struggle to establish quality health care in lands devastated by loss of agriculture, political turmoil, and poor finances. Paul spent more than twenty years creating health clinics, schools, and homes for destitute people. Along the way he made many friends, both in the United States and abroad. He influenced the prestigious World Health Organization and battled for better tuberculosis treatment protocols. The world would benefit from following his example—the medical records of his patients at *Zanmi Lasante* prove that his methods are successful.



Dokte Paul, pages 1-44

Dokte Paul, pages 1-44 Summary and Analysis

Mountains beyond Mountains opens in Haiti in 1994. At that time the author, Tracy Kidder, was in Haiti visiting a Haitian army outpost protected by American soldiers. The American soldiers were present to support the democratically elected government and to suppress the military junta who had previously ruled and continued to threaten violence. The junta were suspected of beheading the assistant mayor of the town of Mirebalais. He had been well liked, respected, and elected by the people. Kidder was a journalist and was there on assignment investigating the situation. While visiting the barracks, Kidder encountered another American, Paul Farmer. Paul Farmer was more closely aligned with the Haitian people. He had founded a clinic he called Zanmi Lasante and treated the medical needs of thousands of Haitian peasants. Paul had come under the guise of offering medical aid, but he clearly wanted to impart information. He told the army captain and Kidder who stood nearby, that the Haitian people were losing faith in the ability of the American officers to help. They wanted justice for their beheaded official, yet no arrest had occurred. Paul also didn't hesitate to include his own personal opinion, which was that the American idea of aid would not ultimately help the average Haitian, although it would superficially bolster business. Dr. Farmer was frustrated by his native country's inability to do something meaningful.

Paul Farmer was raised in a trailer park in America. He has nothing against the working class, soldiers, or the poor. If anything, these were the people that inspired his work. When Kidder first met Farmer in 1994, Paul was thirty-five. He had graduated from Harvard medical school and had also obtained a Ph.D. in anthropology from the same institution. He worked in Boston, at the renowned Brigham and Women's Hospital four months of the year. While in Boston, Massachusetts, he called a church rectory his home. He spent the majority of each year at his clinic in Haiti. Most of his patients were destitute. They had lost their farms and the income associated with them after well meaning but perhaps not well thought out plans for a hydroelectric dam had been completed in Haiti. Paul shared with Kidder that he had been exiled from Haiti while the junta ruled, but had managed to sneak back in by offering a bribe. Farmer helped Kidder to understand the history of Haiti and to lend context to its political strife. This helped Kidder to write the piece he was working on. Kidder felt moved by Farmer's quest. He made donations to Farmer's clinic but took an "out of sight out of mind" approach to the plight of the Haitian peasant. They lost touch for a while, but Kidder reached out again to Farmer in 1999.

When they rekindled their acquaintance in 1999, much had changed for Farmer. He had been promoted to professor at Harvard and was an infectious disease specialist with seniority at Brigham. They met at the Brigham and Women's Hospital campus, which is flanked by other great medical and educational institutions. Boston is a medical mecca of sorts and Farmer finds it intellectually stimulating. Farmer, now forty, is seeing patients and teaching residents. He seems to have a great rapport with his students and



lovingly calls them ID. ID (Infectious Disease) proclaims diagnoses and treatments, rather than Dr. Farmer, which reinforces the team spirit. One case brought to his attention was that of a man named Joe. Joe was thirty-five, HIV positive, addicted to cigarettes, alcohol, and cocaine and now had a suspected tuberculosis infection. He had lost twenty-six pounds over a short span of time and had a chronic cough. Clinically, he was an excellent target for TB. It was a rare disease in America but thrived in people who shared characteristics, both medically and demographically, with Joe. Despite the easy diagnosis, Dr. Farmer wanted to be sure and decided to visit the patient himself. Farmer approached Joe with ease. He was not afraid of physical contact nor deep discussion. He exuded professionalism but was not distant. After talking at length with him, Farmer reached the conclusion that he'd rather have Joe admitted to the hospital where he was warm and safe with medicine and a six pack of beer than out on the streets freezing and using illegal drugs. For Christmas, Farmer brought Joe a six pack of beer. He was known to be an attentive doctor and friend. Before returning to Haiti for New Year's Day, 2000, Farmer checked his numerous emails and correspondence. He communicated with all of his colleagues at the hospital, inquiring after each one's health as well as that of their families. Then he sent a copy of his latest book, *Infections and Inequalities*, to Kidder. It utilized evidence based research to explain the relationship between disease and poverty. He also invited Kidder to see it for himself in Haiti.

Zanmi Lasante is the Creole translation for Paul's charity, which in America is called Partners in Health. One reaches Zanmi Lasante and the village in which it lies, Cange, by traveling thirty-five miles inland on National Highway number three, which more closely resembles a rutted dirt road than a highway. The area is one of the poorest in the world, with a per capita income of less than one American dollar per day. The area directly surrounding Zanmi Lasante is barren—over farmed, hilly, and depleted of nutrients, leaving behind dust instead of soil. Inside the borders of the medical facility indigenous fauna abounds, and Paul knows each by name. A typical day for Paul begins at dawn in the ambulatory clinic, where nearly one hundred people wait to be seen daily. Paul sees the most needy, while the others are seen by his colleagues. An hour later he emerges from ambulatory care and attends to his email and phone calls via satellite phone. He then sees patients in his office, many of whom bring small tokens of their appreciation—for example, unpasteurized goat's milk. After dark he completes rounds at the hospital—first the adults, then the pediatric ward. Outside of Zanmi Lasante's gates lies its catchment area—the surrounding area that is home to a hundred thousand peasants who are cared for by Zanmi Lasante's seventy community health workers. Of these workers, the majority are Haitian trained medical personnel. Zanmi Lasante isn't just a clinic—it includes a full fledged hospital, school, homes, and water and sanitation systems. Since its inception HIV, malnutrition, and tuberculosis were declining and childhood vaccinations were on the rise.

Zanmi Lasante's ideology began with Dr. Paul Farmer, affectionately known in the local dialect as "Dokte Paul", but financially it was made possible by public donations to Paul's charity, Partners in Health. The most substantial of all financial donors was a Boston developer named Tom White. Pharmaceutical companies also donated drugs which cut some costs to Zanmi Lasante, and Paul applied for grants as well. Zanmi



Lasante worked miracles on a budget that was exceedingly small by American standards. This supported Dr. Farmer's belief that per capita data is not indicative of success. Paul gave most of his own earnings to his organization and let his bookkeeper handle the particulars. Paul was happy to just "get by"; however, after four years of marriage and the birth of their child, his wife, a Haitian woman named Didi Bertrand, insisted on an apartment. While they had acquired a comfortable home, they were not often there together. Didi was working on her own academic studies in Paris and their daughter, Catherine, accompanied her. When in Haiti, Paul lived in a ti kay, the native equivalent to a small and rudimentary house, although his had a bathroom, unlike its counterparts. He didn't use it much, though, because he was so busy caring for the sick or otherwise traveling.

The average lifespan in Haiti is forty years old. This is in part due to famine. Malnutrition is easily cured by Farmer with Ensure supplemental drinks. Haiti may be one of very few places in the world where the children are so malnourished that they complain not of pain but of hunger during a diagnostic spinal tap. The diseases are more complicated to treat. At any time Farmer has an ongoing list of imperatives to attend to. These can be anything from preparing slides for a presentation to hand writing thank you notes to finding glasses for a blind patient who has requested them despite his blindness. Sometimes the imperatives include social calls to families. The local religion, voodoo, includes an aspect of sorcery. One may place blame for illness on a curse that presumably was sent from an enemy or otherwise disgruntled person. This ultimately causes discord amongst villagers and families. Farmer believes that understanding such underlying causes makes one see Haiti and the situation of its people more clearly. Haitians have a high rate of HIV infection. The drugs for HIV treatment are expensive, and most of the so-called western nations do not promote AIDS treatment in impoverished countries. At Zanmi Lasante, Farmer treats his patients just as he would if he encountered them at Brigham and Women's Hospital.

Farmer felt compelled by his background in anthropology to examine the people he was treating. The staff seemed to think that the cure rate of tuberculosis had to do with patients not completing their drug treatments for one reason or another. He designed and undertook a study with the purpose of defining the reasons associated with a cure. Farmer assigned his patients to one of two groups. Both groups received full care for their TB, but one group received additional services, including food and transportation to the clinic for check-ups. Farmer was surprised to discover that anthropology, religion, and personal beliefs had little to do with health. All of the patients who received treatment plus services were cured, leading Farmer to think that the culprit inhibiting a cure in the others was malnutrition. Farmer began giving all of his TB patients treatment plus services and, twelve years later, he was able to claim a one hundred percent success rate. It seemed that, at least in Haiti, belief in medicine and native religion could coexist.

In the midst of Haiti, deep inside the country and crisscrossing areas of famine, is a beautiful river called the Artibonte. Its banks used to nourish farmland for many miles. Farmers lived on their land and traded commerce as well as used it to sustain their families. The farmland was now buried under a lake. The reservoir was the result of the



Peligre dam, designed by the US Army Corps of Engineers to generate power for Haiti. If asked, the local inhabitants would have preferred to keep their land instead of the promise of power downstream. After the dam was completed and the water began to fill the basin, the people took their children and animals and headed for higher ground, thus losing their land and livelihood forever. The staple food of Haiti, millet, doesn't grow well in the rocky, nutrient poor soil of the hills, and water must be carried in dirty jugs from the reservoir up the steep hills to the families' huts.



The Tin Roofs of Cange, pages 45-122

The Tin Roofs of Cange, pages 45-122 Summary and Analysis

After spending time with Dr. Farmer, Tracy Kidder was compelled to learn what guided Paul's choices in life. He started at the beginning by interviewing Paul's family. His parents came from Massachusetts. His father was a hard worker and his mother stayed home to care for their six children (Paul was the second born). They left Massachusetts for Alabama when Paul Senior heard of job opportunities there. They would eventually settle in Florida, and Paul's mother, Ginny, would earn her bachelor's degree. Paul Senior always found a way to care for his family but not in a traditional way. He was known as the "warden" by his daughters for his strict rules regarding dating, yet he saw no problem with housing his family in a bus or a boat. When times were really tough, they picked citrus with the migrant workers and Paul was exposed to their language, Creole.

As a child, Paul read such thought-provoking books as *War and Peace*, and was placed in accelerated classes at a young age. Paul excelled academically and was involved in many extracurricular activities. He was president of his senior class and went on to Duke University, courtesy of a full scholarship. Attending college and being away from home helped the young man to become an individual, but in some ways he was becoming more, instead of less, like his dad. They shared a strong sense of determination and had more love and respect for each other than either would admit. The death of Paul's father in 1984 was difficult for Paul, who thought he still had more time to prove himself. Paul spent a semester abroad in college. He chose France. While in Paris, he perfected his French and attended many political demonstrations on his days off from his work as an au pair. He continued to study medicine and anthropology and declared his mentor as Rudolf Virchow, a scientist, anthropologist, and adventurer who had long since passed away. Farmer understood Virchow's logic and vision, which in many ways were parallel to his own. He met a nun, Sister Julianna DeWolf, and was moved by her willingness to help the Haitian farmworkers working in America. He was strikingly aware of the contrast between the effort she provided and that provided by what he termed WLs (white liberals) and academics. This further cemented his desire to work with and for Haitians.

The history of Haiti is full of struggle. Columbus landed there and named it Hispaniola. The native Indians were exterminated and the island, owned jointly by France and Spain, became a slave colony. The slaves revolted for over ten years before the island was finally recognized as an independent nation. Unfortunately, the black population that lived there were taken advantage of by foreign powers that occupied the country at different times throughout its short history. By the time Farmer visited in 1983, he was fascinated by Haiti, its history, and people. He expected to spend one year in Haiti working in one of the medical clinics and studying the culture. He first worked for a



charity called Eye Care Haiti. While with this organization, he met and fell in love with another volunteer named Ophelia Dahl. They had much in common and would have married, but Ophelia realized that she could never be completely at ease with Paul's commitment to the Haitian people. She hoped to return to the United States or England, whereas Paul was quickly realizing his life's purpose was to stay in Haiti. Paul had decided to specialize in medical ethnography as well as obtain his medical degree, for which he had already applied to Harvard. He wanted to speak for the Haitians and explain exactly why poverty and disease coincide.

While investigating the many villages of Haiti's central plateau, Paul met a Haitian priest named Fritz Lafontant. Lafontant was the administrator of a small, one doctor clinic funded by a church in South Carolina. Lafontant also aided the nearby communities through outreach programs in literacy and women's interests. One of these villages, Cange, was particularly impoverished, and captured Paul's interests. When Paul arrived it was springtime. The wet season had nourished the foliage and the river Artibonte was flowing. Then he approached the dam, and after that all lushness ceased. Dust hung in the air and the people were as unhealthy as the land in which they lived. In other parts of Haiti the huts had roofs made of tin. Here the poverty was so encompassing that the tin was absent and its replacement, thatched roofs, had holes. This would eventually be the site for Zanmi Lasante, but at that time Paul modestly helped Lafontant to expand his mission. Paul contracted dysentery and had time to think about all that he had seen. He was attracted to liberation theology, which states that all individuals have the right to equality in all things, including health. Its believers had faith that a higher being was keeping score and that their plight did not go unnoticed. This theology was an awakening for many, but to Paul it seemed to give a title to what he already believed. In Haiti, malaria killed many people of all ages. Farmer was enraged by the medical system when a pregnant woman arrived with her sister. The pregnant woman was having a malarial attack and needed a blood transfusion. She and her sister couldn't afford it so the mother and baby both died. That mother left behind five other children and Farmer felt helpless. He wasn't the first foreign doctor to be moved by the situation, but many return home and attempt to forget or justify what they saw. Farmer was learning that his conscience wouldn't let him forget. Farmer rallied for the hospital in St. Croix and raised enough money to buy blood transfusion equipment to prevent deaths like the one he witnessed.

Paul's focus switched from anthropology to medicine when he entered Harvard Medical School in the fall of 1984. He barely attended classes, but earned great grades. When he was in Haiti, Ophelia would quiz him on what he was studying, but it came easily to Farmer. After all, he was immersed in the prevalent diseases in Haiti and essentially worked as a doctor already. He enjoyed his time with Ophelia, who affectionately called him PJ, but Ophelia came to realize that she would always be in his shadow. With Lafontant's blessing Paul enlisted some locals to help him collect data about the Cange village. He conducted a census of the people and began to plan a clinic, which he intended to make available to everyone, regardless of their ability to pay. Lafontant's South Carolina church connections invested in water spigots for the villagers, which was a huge step in improving their living conditions. The improvements in Cange were officially built by Lafontant, but Farmer had increasing amounts of input, especially in



the medical center. In fact, Paul returned from one of his trips to Boston with a microscope for the clinic's lab. It belonged to Harvard Medical School and it did not leave with their consent, but Farmer thought it wasteful to leave it in Massachusetts. They also built a school which taught not just literacy, but also health and offered meals to its students. The South Carolina Church members had limited resources, so Paul began to look for other donors. He applied to a charity called Project Bread for funds to build a bread oven. This project was successful and the original donor who provided the funds that were funneled through Project Bread was impressed. This man, Tom White, became intricately involved in Cange. White was a Harvard educated man, a veteran, ran his family's construction business, and had amassed millions of dollars which he intended to spend in positive ways before his death. He became Cange's benefactor, and between Farmer's paycheck and White's generosity, an entire town was created. By Haitian standards it thrived, but disease remained. Some thought Farmer was foolhardy or impractical, but he found it difficult to rest or eat when others were suffering.

Throughout the 1980s, Farmer expanded Cange. He still didn't eat or rest much but he continued to attend to patients as well as plant trees and add buildings. Politics in Haiti were heated. In 1986, "Baby Doc" Duvalier left Haiti and the Haitian army ruled the country. The people were unhappy and demonstrations, sometimes violent, occurred frequently. After a particularly violent outburst and dangerous stampede, Paul returned to Boston to complete his studies. In 1988, Paul began his clinical rotations at Brigham and Women's Hospital, but Haiti wasn't far from his mind. With Ophelia's help and White's financial support, Paul created Partners In Health (PIH). He also created a sister organization to PIH, Zanmi Lasante, into which they invested one million dollars. Paul brought in other trusted friends as well. An old classmate from Duke was placed on the board of advisers. Jim Yong Kim, a Harvard anthropology and medical student, joined PIH. He was full of indignation and idealism and was in some ways still searching for his sense of self.

In 1988 they decided to build another school for Cange. It would be called Kay Epin, and was funded by Ophelia's father. Before leaving for the airport, Paul was running last minute errands and was hit by a car. Paul's shattered knee took weeks to heal well enough for him to return to his apartment in Boston and even longer for him to travel to Haiti. His knee would continue to pain him throughout his life, but it never stopped him from trekking to remote villages to visit patients. At that time, Paul and Ophelia were living together and she tried to help him during his recuperation. Their relationship was strained, however. Ophelia didn't want to travel continuously, and although she and Paul loved each other, she sensed that they couldn't make it work long-term. Paul was determined to return to Cange, and did so in a wheelchair. Ophelia stayed behind in the States, and his relationship with her suffered. She admitted that he had been entirely honest from the beginning—he had always intended to live primarily in Haiti, it was she who wanted something different. They separated but remained cordial and Ophelia continued to work with PIH as an administrator.

The Haitian army ruled Haiti from 1986 to 1990 and were backed by the United States. The people resented the dictatorship of the previous government, the Duvalier family, and began something called dechoukaj, where they removed all outward signs of the



government. Occasionally this included people, and the army responded violently. In 1987, the army killed unarmed voters and ended their first attempt at democracy. Most of the rebellion occurred in the country side. One prominent figure was the priest Jean Bertrand-Aristide, who believed in liberation theology and urged his parishioners to not accept the current state of affairs. Farmer was enchanted with Aristide and they became friends. Amidst this turmoil, Paul sat down to write his thesis. It was called AIDS and Accusation, and it traced the emergence of AIDS in Haiti (it first appeared there in 1985). Some of those to die were friends of his. They died in the local hospital after receiving sub-par health care. In Boston, Massachusetts, their lives would have been much longer, even with the AIDS disease. Other friends were lost to malaria, typhoid, and sepsis, which he felt also could have been prevented. On a positive note, Lafontant's wife, Mamito, had done an excellent job of improving the living quarters of each family. Over the six years of Paul's stay in Cange, their homes had slowly been improved and most now boasted tin roofs. In the spring of 1990, Paul received both his MD and Ph.D. In an unusual arrangement, Farmer and Jim Kim split the Brigham and Women's residency so that they could both participate in Boston and Cange. In 1990, Aristide ran for president and was elected by the people in the first democratic election ever in Haiti. Paul Farmer was jubilant. He was moved by the prospect of peace and betterment for the people he loved and he was proud of them for making a statement.

When he left Haiti for his residency in Boston, Paul felt confident that the future of Haiti was positive, but on September 29, 1991, Paul discovered that the government had been deposed and he couldn't gain entry into Haiti. He was unable to return until 1992 and then only through bribing a military official. The atmosphere had deteriorated such that people watched every word and action. For example, one man was overheard talking and a military official interpreted his talk as being pro-Aristide. Later, when that man tried to return to his home, he was beaten so badly that Paul doubted he would have survived even with proper care in Boston. He sustained the following injuries: his face was beaten and unrecognizable, his neck bruised with the markings of a rifle butt, his ribs bruised and fractured, his genitals mutilated, his back and buttocks lashed so deeply that the underlying muscles were exposed. He was deposited this way on his doorstep and his family watched him die an agonizing death. They had the presence of mind to contact Dr. Farmer, but the man was beyond help. Paul did try to honor his life and end the violence. He did this by writing an essay about the senseless and viscous killing. It was published in the Boston Globe. Paul was increasingly angry with the politics of Haiti. His colleagues considered him reckless in many ways. They recalled that he pushed the envelope with his anti-junta sentiments and lacked discretion. He received the coveted MacArthur Award in the summer of 1993, but was unable to rejoice in the achievement. In despair, he retreated to Canada to write a draft of the book he would later title "The Uses of Haiti". For lending his voice to the situation he was formally expelled from Haiti. He was to remain in the United States until Aristide was reinstated in October of 1994. Haitian health deteriorated during the years of the war and Paul returned to increased cases of malnutrition, typhoid, measles, tuberculosis, and AIDS. PIH continued to support Haitians and also launched projects elsewhere.



Medicos Aventureros, pages 123-178

Medicos Aventureros, pages 123-178 Summary and Analysis

Farmer educated Kidder about the importance of epidemiological maps. These maps display two relative populations—those who live long, healthy lives, and those who die significantly sooner, primarily due to disease, malnutrition, and poor health care. Countries and even cities are divided among the two populations. Countries with generally low incomes sometimes have aristocratic, wealthy areas where health abounds. The opposite is also true, industrialized nations sometimes have pockets—admittedly small—of high disease and death rates. Because of these exceptional areas, one cannot assume that low income counties will automatically have citizens of poor health. In Haiti, it is true that poor health and poverty coexist. Of the illnesses that plague its inhabitants, tuberculosis is a major concern. Tuberculosis was rare in much of the world thanks to relatively low cost, very effective drugs available for its treatment. When administered properly, these drugs were capable of curing the patient. Unfortunately, these drugs were not available in the remote villages of Haiti. They were available in the city hospitals, but there they were not always administered correctly. The drugs needed to be taken in specific amounts and at regular intervals or the tuberculosis bacilli could build up a resistance to the treatment. Over the course of time, this occurred in Haiti. Not only was TB (tuberculosis) a serious problem, but multi-drug resistant (MDR) TB was on the rise. Add to this the idea that many of the patients had HIV or AIDS as well, and it becomes apparent to the reader that during Paul's time in Haiti, Cange was experiencing a health crisis.

This sad set of circumstances was occurring elsewhere as well. MDR claimed the life of Paul's friend, Father Jack, in 1995. Paul had met Jack in Boston. Father Jack was the presiding priest at the church rectory that constituted Paul's home during medical school. At the time of his death, Jack was living in Peru. Jack had moved to Peru to serve a poor parish and encouraged Paul to bring PIH's success to Peru, too. Jack was immersed in Haiti, but his associate, Jim, was searching for a project to call his own. For eight years Jim had served PIH as Paul's second in command, but he was anxious to make a difference and personally treat patients. Jack's suggestion to bring PIH to Peru was an opportunity for Jim. Tom White provided seed money for this venture and Jim eagerly learned Spanish.

The Spanish version of Zanmi Lasante, called Socios en Salud, was a success, but it wasn't always easy. Peru was in the middle of its civil war and the Socios pharmacy was bombed. Jim was disappointed but they rebuilt the pharmacy. PIH's original census of Peru revealed an area that experienced great poverty and could benefit from a clinic, but they did not expect widespread disease. Peru had received help from the World Health Organization with regard to tuberculosis. The WHO had endorsed Peru's nationwide tuberculosis program and its preliminary results looked good. Then Father



Jack became sick. Paul flew him back to Boston, he died, and his test results revealed MDR TB. When Paul searched deeper in Peru he located a woman named Senora Brigida who also had MDR TB, as did her family. They discovered that when Peruvian TB patients relapsed after apparently being cured, the patients were treated again with the same drugs plus one new one. Later, they were released back into society where they infected the other citizens with MDR TB. This regimen, called DOTS for directly observed treatment short-course chemotherapy, had worked well in other parts of the world. It mandated that patients be watched while taking their medication and thus no doses were missed. Taking every dose in a timely manner for the full course of medicine usually ensures success. When it failed to do so, it was reasonable to think that adding one stronger drug would cure the patient. Successive failed attempts proved that the TB wasn't just resistant to some of the common treatment drugs, it was resistant to all of them, which is why no improvement was made when an additional drug was given. Dr. Farmer surmised from this case history that the Peruvian strain of MDR TB was highly resistant and he began rallying for a new treatment protocol. To this end, he delivered speeches to the International Union Against Tuberculosis and Lung Disease and the World Health Organization. He argued that treating the MDR TB cases wasn't just morally right, it was also self-preservation. He reminded those that argued against treatment for cost reasons that they could catch MDR TB just from breathing infected air at any time. The disease could easily spread worldwide. When authorities realized that the disease wasn't just a disease of the poor countries, they were forced to rethink their existing policies.

In 1996, Paul married Didi Bertrand, the daughter of Cange's schoolmaster. All of Cange celebrated. Meanwhile, Paul and Jim led their own crusade in Peru and continued their programs in Cange. The TB project in Peru was growing exponentially, and Paul's supporters worried about PIH's ability to sustain the costs it was incurring. Socio wasn't nearly as in debt as it should have been, mostly because Paul and Jim were taking drugs from Brigham and Women's hospital and using them to treat Peruvian patients. All totaled they owed the Brigham ninety-two thousand dollars, a sum Tom White gladly paid. Paul worked relentlessly and ignored vague signs of discomfort. He assumed that he was just suffering from exhaustion and refused to slow down. He returned to the States for his obligatory month of service at the hospital and was diagnosed with advanced hepatitis A. He became so sick that the physicians considered a liver transplant. Ophelia arranged a vacation for him and Didi in France where Didi was studying. On vacation they conceived their daughter, Catherine.

Having Catherine made Paul especially vulnerable to the needs of his pediatric patients. He invented a regimen of tuberculosis drugs not commonly used and in pediatric doses to treat his MDR TB pediatric patients. He had great success and marveled when the healthy children would return to visit him. Farmer had adjusted his approach to MDR TB but the majority of the world was still utilizing the standard DOTS protocol. Jim Kim revealed the early results of their Peru project at a 1998 conference in Boston, Massachusetts. Many officials, including the head of WHO's TB program, Arata Kochi, were in attendance. Kochi was interested in incorporating Farmer's approach to MDR TB, but he wanted to eliminate the negativity that had sprung up around the DOTS program, which he had worked on and believed was still a good program for some



circumstances. He coined the phrase "DOTS-plus" and opened a discussion about modifying the WHO's treatment recommendations. Also in attendance was Alex Goldfarb, a Russian microbiologist battling TB in Russian prisons. He questioned how bankrupt nations, such as Russia, could afford the suggested treatment. In Russia, one hundred thousand inmates had active TB and were being treated with just one drug because it was all the government had access to and money to purchase. He was aware that the treatment he described in conjunction with the close confinement of a prison was a breeding ground for MDR but he was unable to do anything about the circumstances he faced. Due to resource restrictions, he questioned the wisdom of treating five hundred MDR patients when he could treat five thousand non-MDR patients at the same cost. Jim Kim heard his concerns but argued that eradicating TB could occur in communities if its necessity was supported by the government and/or private donors. The international health officials continued to argue about the cost effectiveness of supporting MDR treatment.

It occurred to Jim that the biggest expense was the required drugs and that no one had addressed this problem. He researched this issue and discovered that many of the patents had expired on TB drugs, and he knew that this meant the prices could be driven down. Jim reported his findings to WHO and argued for the manufacture and purchase of generic versions. The WHO and a well-known global health charity, Doctors Without Borders, supported his plan. By the year 2000 the prices of tuberculosis treatment medications had fallen ninety-seven percent since Paul and Jim had first purchased them. Jim's hard work had paid off. He had come of age and found great satisfaction in his achievement on behalf of his patients. With Paul's blessing, Jim decided to pursue matters of policy instead of clinical care. Although the decreased cost of drugs was helpful, PIH had spent a great sum of money on drugs at premium prices for a decade. Ophelia warned Paul and Jim that in her assessment, PIH was in need of funding. Jim thought that the way to save PIH was by attracting an endowment. He saw a possible match in the Gates Foundation and applied to Howard Hiatt and Bill Foege, the science advisers at Gates, for forty-five million dollars in aid. He did not expect to receive the whole amount, but was hopeful for some help. Jim secured the future of PIH when it was approved for the full endowment.



A Light Month for Travel, pages 179-238

A Light Month for Travel, pages 179-238 Summary and Analysis

Paul and Jim were now under less financial pressure, but they still suffered from having too much to do and too little time to complete it all. By the late 1990s, Dr. Farmer had earned a reputation as a specialist in the field of TB. He received many offers to speak and teach. These gave him the opportunity to speak for the poor and address their needs. He made time for these engagements amid caring for his patients in Boston and Cange. He also lent advice for the TB projects in Peru and Russia. All of these projects required him to travel incessantly. He meditated on scripture but still struggled with Catholicism in which he had been instructed when a child. His worldliness offered him a greater perspective. He had become an expert traveler. Paul was well known by the stewardesses on many flights. He also frequented the airport lounges and was a member of the Mile High Club. He packed light, saying that fresh underwear was more necessary than clean clothes. This provided more room for him to transport necessary items and gifts between his life in Boston and abroad. Paul confided in Kidder that while the pace was much too fast, he feared that if he slowed down someone would die needlessly.

Dr. Farmer considered life on the island of Cuba. It had the same ecology as Haiti. It was a mere ninety miles away but was thriving in comparison. He reflected on the difference between managing wealth and managing poverty which were not, in his opinion, redundant. Paul had studied the ideologies of Marxism, socialism, and communism but found them all to have faults. It was absolutely undeniable to him that poverty was a social condition and that the rich were responsible for not just creating poverty but for encouraging it by their lack of action in response to it. Paul wanted to offer AIDS treatment to his patients in Haiti. The antiretroviral drugs this would require were cost prohibitive, so he asked for help from a friend, Jorge Perez, and Peggy McAvoy at the United Nations. He also set his sights on employing more indigenous doctors in his clinics. Unfortunately, Haiti's medical training wasn't thorough enough, and the well-trained American doctors he employed often returned to the United States. Farmer thought it would be ideal to reverse the Haitian slave triangle. He was intrigued by the irony of ultimately helping the people who had been taken advantage of by attracting doctors from Cuba and financial support from the French. Whether or not it would be possible remained to be seen, but Farmer thought it prudent to ask for their aid. He figured that if they didn't contribute willingly, they might do so out of shame, or at the very least, promise their support in the future.

At a speaking engagement in Cuba, Paul gave two lectures. The first was about clinical treatment of TB. The second speech he called "Why Life Sucks". In it he detailed how poverty, inequality, and poor health are co-infectious. He talked about how the Haitian people suffered following the building of the dam on the Artibonte River. He discussed



how the women of Haiti caught HIV from truck drivers and soldiers, the only men on the island who experienced economic stability. In an effort to cease the spread of AIDS, the US military had detained AIDS infected Haitian individuals at Guantanamo. They were fed poorly, forced into long lasting contraceptive use, and beaten. The residents were treated so poorly that the US court system found the project unconstitutional and ended it. In Cuba, AIDS patients were also quarantined but under much different conditions. An hour outside of Havana, AIDS infected individuals were housed in the many rooms of a countryside hacienda. In the beginning of the Cuban quarantine, when the fear of AIDS was new and at its peak, the individuals were under strict security. Over time, the security dwindled but the patients were always well fed and had good health care. When the walls were eventually torn down some patients left, but many stayed because they preferred their life at the hacienda to returning home. Although both quarantines were handled very differently, neither stopped the spread of AIDS. Farmer was determined to find a better way to treat AIDS in his clinics. AIDS is a great example of disease resulting from social inequality. He detests social inequality and the pain it creates. Paul was American, but more and more he related to his life in Haiti. Paul retained his old friendships, and didn't begrudge his friends' luxuries, as long as they gave some of their means to charity. He carried pictures of his patients beside his picture of Catherine inside his wallet. It has been said that if he has a weakness, it was his desire to love everyone as his own family. In doing so he inadvertently created what he called PIHers—those who believed in the PIH mission—all over the world.

Although Dr. Farmer continued to be fully engaged with his commitments in Boston and Haiti, he was increasingly drawn into his advisory position in Russia. The World Bank had negotiated a loan to help Russia fight its MDR TB epidemic. This held promise, but the TB outbreak in Russia was worse than any epidemic Paul had previously encountered. This was partially due to Russia's backlogged prison system, where prison transfers make proper treatment difficult if not impossible. This type of interrupted treatment increase the odds of MDR creation. Compounding this problem, the prisons had recorded an increase in syphilis, which is often a warning sign prior to an increase in AIDS. Inmates suffering from AIDS would have decreased immune response, making them even more susceptible to TB. Farmer refused to be pessimistic and offered his encouragement to the Russian TB project's director, Alex Goldfarb.



O for the P, pages 238-298

O for the P, pages 238-298 Summary and Analysis

The Gates Foundation awarded Partners In Health forty-five million dollars to eradicate MDR TB in July 2000. This launched Partners In Health into a world-wide tuberculosis campaign. The community organization Paul founded had to adjust to a global scale. They were thankful for the Gates grant but were aware that their goal would require everything that had been given. With this in mind, they continued to court all of their supporters, old and new. Paul believed so much in the personal feel of his charity and in his supporters that helped him along the way that he continued to personally write thank you notes to his contributors. Jim and Paul worked hard to make Haiti, Peru, and Russia successful in their missions, but the effort wasn't always a concerted one. Paul seemed to defy the laws of the body, but not all people are capable of exerting themselves that way. Jim was willing to work but was happy to do so from a distance, whereas Paul felt the need to be everywhere all of the time. In fact, they were rarely together for any stretch of time although they communicated daily. At Paul's urging, Jim did travel to Russia to meet with their associates and voice his support. He attended a banquet and led a non-traditional form of ice-breaker: karaoke. Paul wasn't present, but certainly would have admired Jim's ingenuity. Paul was conscientious of corporate etiquette but he wasn't paralyzed by it. Some would even say that PIH (and by default Farmer) was impractical with money. Farmer's reasoning was that while businesses could wait for more favorable business conditions, sick patients didn't have the luxury of time. Paul successfully channeled his anger at the world's disparities into productivity and healing. He felt intellectually stimulated during his rotations at Brigham and Women's Hospital but was continually drawn back to Haiti. It was his desire to create a small example for the world. His successes in Haiti were indicative of what the world could do if it only cared more about the people and less about the finances and politics.

Aristide had been reelected in 2000, but his government was not well supported. With no funding coming in from outside sources, the people were free from tyrannical rule and physical terror, but the country lacked inner structure. This was exhibited by the closing of many health clinics. Zanmi Lasante was exceptional in its care. Even Zanmi Lasante met its unsurmountable obstacles, however. When cases were too complicated or were outside of Dr. Farmer's specialty, he flew the patients to Boston for treatment. This sometimes cost hundreds of thousands of dollars and was outside of the PIH budget for Zanmi Lasante. After seeing this happen repeatedly, doctors from Massachusetts General Hospital started donating their services to Paul's cause. One notable cancer patient, John, was brought into MGH, but it took too long to move him from Haiti. By the time he arrived in Massachusetts, the doctors could not do anything to prevent his death. They did, however, make his rest comfortable. His case was the beginning of a collaboration between Partners In Health and Massachusetts General Hospital that continues on today. Paul Farmer instills confidence in people and brings them together in a united belief that something better is possible. The narrator ends the

story in much the same way it began: trekking alongside Dr. Farmer on an eleven hour journey into the country of Haiti to visit his patients.

Afterword

Afterword Summary and Analysis

As of June, 2002 Partners In Health still ran much the way it did at its conception. It was larger, of course, but so were its goals. The World Health Organization finally adopted procedures for the treatment of MDR TB. The prices for TB drugs continue to fall, which further increases their availability. Jim had been a huge proponent of both these advancements. He felt that the moral standing of his generation could be defined by its response to the medical crises it faced. In 2002, Paul began expansions at Zanmi Lasante. The public had petitioned Aristide for the electricity they had long ago been promised from the dam. The Red Cross established a blood transfusion post as well. Twenty years after it began, Dr. Farmer's dream for proper health care in Haiti was achieved. In 2003, when a new director took office at the WHO, he invited Jim to join him as senior adviser.



Characters

Dr. Paul Farmer

Paul Farmer was born in 1959 and raised in a middle class American household. His father was a hard worker and loved Paul but wasn't the type to proclaim his feelings. Paul's mother stayed home when their children were young and eventually went back to school to earn her bachelor's degree. Paul and his siblings (there were a total of six children) were raised in Massachusetts, Alabama, and Florida in what ranged from a traditional home to a bus and, at one point, a boat. The Farmer family wasn't poor in a third world sense, but money was definitely tight. Paul and his father occasionally picked citrus to earn money. They worked side by side with Haitian migrant workers. Life was an adventure. Paul graduated from high school and attended Duke University on a full scholarship. He volunteered in Haiti at various clinics and set his sights on medical school. He also spent a summer abroad in France. Paul was accepted to Harvard Medical School and graduated from there with his M.D. and also a Ph.D. in anthropology. The blend of medicine and anthropology guided his life in the years that followed.

Paul was deeply troubled by what he had observed in his travels to Haiti. Back in Boston, Massachusetts, he established a health care charity called Partners In Health. PIH funded health care projects throughout the world. Its largest project, and the one most dear to Paul's heart, was called Zanmi Lasante. Zanmi Lasante consisted of a hospital, school, bread oven, and homes for the people of Cange, in Haiti. Paul was intricately involved in this project from its inception through its recent expansion. In 1996, Paul married Didi Bertrand, the daughter of the schoolmaster in Cange, Haiti. They have a daughter named Catherine. Paul travels extensively between his family, his clinical responsibilities at Brigham and Women's Hospital in Boston, his public speaking around the world as a health care advocate, and Zanmi Lasante. Paul's travels leave him with less sleep and nutrition than the average American has, but he won't slow down. Paul is always chasing his dream of equality with regard to health care.

Dr. Jim Kim

Jim Kim was born in South Korea but raised in the United States during the 1970s. Jim's father was a periodontist and had a practice in Muscatine, Iowa. It was Jim's mother, also very highly educated, who suggested that they live in a small town, and encouraged Jim to explore the world. Jim excelled in science as a child and always knew that he wanted to be a doctor. Jim was an excellent year-round athlete and valedictorian of his high school class. Jim excelled in many respects, but he was painfully aware of being the only Korean family in town. Jim left home for his college studies at the University of Iowa and later transferred to Brown University. While there he became aligned with an organization called the Third World Center. Jim was eager to identify with a group after spending so many years as an outsider. He grew tired of this,



though, and eventually settled into himself. Like Farmer, Jim went on to study both medicine and anthropology at Harvard. Jim talked with Farmer at the PIH office in Boston and decided to become involved with Farmer's mission.

Jim served PIH for many years. He enjoyed the work and believed in its cause. He also worked at Brigham and Women's Hospital where he and Paul had shared their medical school residency. Farmer's project in Haiti always took precedence, and Jim understood that, but he yearned for something he could excel at. He wanted to expand PIH into other needy areas. Jim was enthusiastic when a friend of Paul's suggested the need for a center similar to Zanmi Lasante in Carabayllo, Peru. He learned Spanish and began designing a clinic. Dr. Farmer was hesitant at first, but once he agreed to the project he supported Jim unconditionally and they communicated daily via email and telephone.

Over time, Jim began to realize that the majority of PIH's budget was consumed by the expensive drugs they were purchasing to treat their patients. He was convinced that they could do more to help those in need if the costs of medicine weren't so high. He researched the subject and learned that many of the patents had expired on the drugs and that price gouging was occurring. Jim lobbied to end this practice. He demanded the manufacture of generic drugs at affordable prices and petitioned the World Health Organization for help. Jim was successful in his venture and many people and charitable organizations have benefited from his work. In this way, Jim learned that policy making excited him. In 2003, Jim accepted an offer to be the senior adviser to the director of the World Health Organization.

Father Fritz Lafontant

During his early excursions in Haiti, Paul met a Haitian priest named Fritz Lafontant. Lafontant was the administrator of a small, one doctor clinic funded by a church in South Carolina. Lafontant also aided the nearby communities through outreach programs in literacy and women's interests. One of these villages, Cange, was particularly impoverished, and it captured Paul's interests. This would eventually be the site for Zanmi Lasante, but at that time Paul volunteered his time and modestly helped Lafontant to expand his mission. Lafontant gave his blessing and Paul enlisted some locals to help him collect data about the Cange village. They conducted a census of the people and Paul began to plan a clinic that he intended to make available to everyone, regardless of their ability to pay. Lafontant's South Carolina church connections invested in water spigots for the villagers, which was a huge step in improving their living conditions. The improvements in Cange were officially built by Lafontant, but Farmer had input, especially in the medical center. Lafontant demonstrated the need for education and community as well as medicine. Paul respected Father Lafontant's efforts on behalf of the Haitian people, but dreamed of something more expansive.



Tom White

Tom White was a Harvard educated man and a veteran. He ran his family's construction business and had amassed millions of dollars, which he intended to spend in positive ways before his death. White often chided Paul that he would die broke but happy. The South Carolina Church members had limited resources, so Paul began to look for other donors. He applied to a charity called Project Bread for funds to build a bread oven. This project was successful and Tom White, who had provided the original funds that were funneled through Project Bread, was impressed. Tom made Paul's acquaintance and became intricately involved in Cange. White became Cange's benefactor, and between Farmer's paycheck and White's generosity, an entire town was created. By Haitian standards it thrived, but disease remained.

Ophelia

Ophelia was Paul Farmer's first love. They met when they were both volunteers for a Haitian charity called Eye Care Haiti. Paul and Ophelia shared a commitment to serving the poor and to each other. They both felt compelled to improve the health conditions of Haitian peasants. The couple would have married, but disagreement about where to call home seemed insurmountable. Ophelia planned to return to the United States or England, but Paul planned to spend the majority of his time in Haiti. Ophelia also felt that she remained in Paul's shadow and that his commitments would always take priority over their relationship. Although this saddened her, she was not bitter. She watched Paul improving the lives of Haitians and was proud of him. As the pain of their break-up eased, they settled into a comfortable friendship. She and Jim were Paul's closest confidants. After returning to the States, Ophelia accepted a job at the Partners In Health headquarters in Boston, Massachusetts. Like Paul, she donated most of her paycheck to PIH. Ophelia managed Paul's schedule and the finances of PIH (when PIH grew too large, other staff took over some of these responsibilities, but Ophelia remained involved). She came from a wealthy family in England and her father donated the funds to build the Kay Epin School in Haiti.

Didi Bertrand

The daughter of the schoolmaster in Cange, Haiti. She married Paul Farmer in 1996. They have a daughter named Catherine. Didi supported Paul's efforts from afar. They spent summers together in Haiti, but she and their daughter spent the academic year in France, where she was pursuing her own studies.

Tracy Kidder

Tracy Kidder is the author of *Mountains Beyond Mountains*. He shadowed Dr. Farmer with his patients, recorded his stories, and formed a chronology of Dr. Farmer's many achievements. He is impressed by Farmer's dedication to the Haitian people. Farmer is



driven beyond empathy and into action. Listening to Farmer's views causes Kidder to examine his own life and look at the world differently. Kidder elevates Farmer, calling him saintly, and is afraid of seeming ignorant or otherwise disappointing Farmer. When they first met, Kidder was a journalist on assignment in Haiti. Kidder was moved by Farmer's statements and interviewed him six years later for *Mountains Beyond Mountains*. One could say Kidder is inspired by Farmer and Farmer is inspired by the peasants of Haiti.

Father Jack

Father Jack presided over a church, St. Mary of the Angels, in Roxbury, Massachusetts, where Paul stayed during his med school years. Father Jack was involved in the community. After years of service in Roxbury, Father Jack moved to Peru to preside over a church in a village called Carabayllo. At his urging, PIH funded a health care center there. It was built right next to Father Jack's church. While in Peru, Father Jack contracted MDR TB. Paul had him flown to Boston for treatment, but his case was aggressive and he died soon after. The loss of this long time friend was painful for Paul.

Jean Bertrand-Aristide

Aristide was the first democratically elected official in Haiti. Before being elected president in 1990, Aristide served the people as a popular priest. He believed in liberation theology and his teachings resounded with the people of Haiti. Paul and Aristide were friends and Paul supported his candidacy.

Catherine

Paul and Didi conceived a child and named her Catherine. Paul had always been drawn to helping the less fortunate, but after having Catherine, his career and the life and death struggles his patients faced became more poignant.



Objects/Places

Boston, Massachusetts

City where the Partners In Health headquarters is situated. It is also home to Harvard Medical School and Brigham and Women's Hospital.

Harvard Medical School

Harvard is where Paul Farmer earned his medical degree as well as a Ph.D. in anthropology. He eventually became a professor for the prestigious university. Jim Kim and Paul White are also alumni from here.

Brigham and Women's Hospital

Famous teaching hospital in Boston where Paul and Jim complete their medical residencies and return to for part of each year as specialists.

Cange, Haiti

This village is the first to capture Paul's attention and benefit from PIH funding. The village used to be associated with farming but lost its farmland when a dam was built along the Artibonte River. This plunged the inhabitants further into malnutrition and poverty.

Zanmi Lasante

Zanmi Lasante is the sister organization of Partners In Health. It is located in Cange, Haiti. Paul designed it to be first a clinic, then expanded it to include a full hospital and laboratory, pediatric ward, obstetric services, school, and huts for the villagers. It is an oasis in an otherwise decimated area. Haitians travel many days by donkey, foot, or unreliable auto to reach the health care Paul provides.

Socios en Salud

Socios en Salud is another sister organization of Partners In Health. Socios is located in Carabayllo, Peru. Socios was designed and run by Jim Kim, a friend and colleague of Paul's. Socios was funded by PIH but was not as extensive in terms of space as Zanmi Lasante. Jim was eager to take on a project of his own, and Paul consented, but they did not know that Socios patients would require treatment for MDR TB. This project was a much bigger undertaking than they planned.



St. Mary of the Angels

Paul called the rectory of this church home when he was in medical school. The church was in the city of Roxbury, which is known for being rough at best and sometimes violent. The presiding priest, Father Jack, was involved in the community. Paul admired the effort Jack spent trying to unite the people of the city. It was a lesson in anthropology, which Paul was studying in addition to medicine.

World Health Organization

The WHO is located in Geneva. It is the branch of the United Nations charged with creating health care recommendations and policies around the world. It advises physicians and business groups on proper medical practice. It also gathers and publishes the world's epidemiological data. Paul Farmer informed the WHO of his TB findings and made recommendations for MDR TB treatment. Jim Kim presented his findings to the WHO in an effort to decrease the cost of TB drugs and improve patient outcome.

Peligre Dam

Cange farmland used to be nourished by the Artibonte River. The Peligre Dam was designed by the US Army Corps of Engineers to generate power for Haiti. Unfortunately, the dam created a lake where the farmland used to be. The farmers who lived on the land made their livelihoods trading the crops they grew as well as using it to sustain their families. The dam and its resulting reservoir essentially wiped out the agriculture upstream. The dam was not intended to harm anyone, although its construction was not well thought out, and it promised electrical power downstream, although it offered no benefits for those living upstream.

France

Didi and Catherine lived in France during the academic year while Didi pursued her studies. Paul visited them as often as he could. Additionally, Paul lived in France for a semester abroad during his undergraduate degree and he vacationed there with Didi.



Themes

Service

Dr. Paul Farmer leads a life of service. He gives continually of himself to everyone—patients, family, friends, even those who would seem adversarial (for example, Alex Goldfarb). People recognize his loving nature and sincerity. For this reason, people are drawn to him and he leaves quite an impression. Some call him saintly, but he is quick to correct them. He aspires to be that wonderful but recognizes his limitations. Paul is not the only one who is giving of self. When the reader looks closely, one can see that Paul surrounds himself with like-minded people, although arguably on a different scale.

Jim Kim is also very giving and dedicates his life to advocating for the poor. He spent over a decade by Paul's side at PIH. Ophelia is dedicated as well. Not only does she give time and resources to PIH and the poor, but she also releases Paul from their commitment so that he can be free to live in Haiti. Later, Paul finds love with Didi. Didi essentially raises their daughter on her own for much of the year, although communication with Paul is frequent. Farmer is not present on a daily basis and feels guilty about it, but all three make it work because they believe in PIH and what it means for the people of Haiti. Some of Paul's closest friends are priests. Those who chose a career in the priesthood live lives of service to God in addition to people. Father Jack was one of Paul's closest friends. He gave his time and compassion to the families of Roxbury and Carabayllo before passing away. Father Lafontant was another close friend of Paul's. He was a missionary priest serving the people of Haiti. Lastly, Paul befriended Aristide, who was a priest before being elected president of Haiti. In both positions, Aristide served the people.

Religion

Religion is an underlying theme in *Mountains Beyond Mountains*. Paul Farmer was raised Catholic but grew to question it in his adult years. He was fond of the scriptures, and able to quote them, which gives the impression that he took the time to truly read them and ponder their meaning. Sometimes the more one ponders, the more questions arise. Paul is unable to find the answers and guidance he seeks in any one established religion. He finds it difficult to reconcile the poverty and disease he sees in Haiti with a loving and merciful God.

The official religion of Haiti is Catholic, although the majority of the people either practice or believe in aspects of voodoo, the indigenous religion. In Haiti, many of the people have been recently converted by missionaries or are descended from people who were converted when the island was occupied at various times throughout its history. Even once new religions are established, remnants of the old remain. For example, one might be surprised to discover that a person who proclaims himself a Catholic may also fear evil spells sent by a fellow villager. This causes needless strife



between the affected and the accused. Farmer postulates that Haitian belief in sorcery is based in inadequate medicine. With no proper medical care, illnesses seemed to arise without cause. Because of a lack of medical treatment, those illnesses either cleared up on their own over time or claimed their victims. Such occurrences were mysterious and therefore attributed to sorcery. This simultaneous belief in two seemingly opposing belief systems is akin to those who practice a religion but also readily utilize western medicine. The two systems can work together, and Dr. Farmer believes that both should be respected. During his time in Haiti, Paul developed positive relationships with the voodoo priests.

Politics

Politics, both old and recent, abound in *Mountains Beyond Mountains*. Paul gives an account of Haiti's history, and Tracy Kidder recounts it in his narrative. According to them, Haiti was a significant stop along the African slave route and was populated largely by slaves. Slavery is always steeped in politics and finances. When Paul first takes Didi to Paris, he hopes to impress her. However, she is saddened to think that the beautiful city was created by money that was obtained through the exploitation of her ancestors in Haiti. Later in the book, Kidder records Paul's idea to reverse the slave triangle by employing doctors from Cuba and securing financial support from the French with a goal of improving conditions in Haiti. In the not so distant past, Haiti was ruled by the Duvalier family (Papa Doc and then his successor, Baby Doc), who didn't hesitate to use violence. The people revolted against their tyrannical rulers and were suppressed by the military junta. In the year 2000, Haiti experienced its first democratic election. It was not altogether peaceful, however. American troops were deployed to help maintain order, which was in and of itself a political move. Prior to that, Farmer indicates how the design of the Peligre Dam by the American Army Corps of Engineers was also based in politics. Paul's work in Haiti was interrupted by his expulsion from Haiti and his inability to return. These occurred because the military government correctly assumed him to be pro-Aristide and didn't welcome him or his ideas. Even at meetings of the World Health Organization, which is a branch of the United Nations, and should, by definition, be united, Paul and Jim were met with political obstacles and financial concerns.

Style

Perspective

The author writes in the first person. He narrates the story by including his own thoughts and experiences. This is important. It demonstrates how Dr. Paul Farmer affects the people he encounters. The author, Tracy Kidder, was clearly moved by Farmer. He found Farmer to be an intriguing and compassionate man. Kidder also found Farmer's charity, Partners In Health, to be worthy of his support. The author's biography informs one that, like many of the characters in the book, he is a Harvard graduate and resides in Massachusetts. This may instill in him a feeling of kinship. The reader understands that the author wishes to convey the struggles experienced in impoverished areas, particularly Haiti, and the desire of a few very dedicated individuals to make a difference.

Tone

Mountains Beyond Mountains is a thoroughly compelling book. The book is not verbose and is readily understood by the layman despite its medical content. The characters oscillate between being hopeful, frustrated, angry, and at times pleased, yet the tone of the book is never one of despair. The main character, Dr. Paul Farmer, is dedicated to improving the living conditions of the Haitian peasants. His efforts are at times thwarted or made difficult by politics and funding. Regardless of whatever may be plaguing him, Paul seems continuously optimistic. He forges forward and is always willing to give more, whether that be of himself, his money, or PIH resources. This forward momentum and positive attitude keep the book from being one filled with sorrow, although it is easy to imagine how, if the information were presented differently, it could trigger such a response. Instead, the book informs without chiding the reader for ignorance. It gently requests empathy and suggests action. Paul is quick to acknowledge that not everyone can respond in the way he has, and he doesn't begrudge Americans their wealth. He only asks that one contribute accordingly and make informed decisions. Without seeming accusatory, the book asks the reader all to reexamine one's own thoughts and efforts on behalf of the poor.

Structure

Mountains Beyond Mountains is 301 pages long, excluding its section for acknowledgments and bibliography. It is divided among five parts and an afterword. Part One, called Dokte Paul, explains how Kidder met Dr. Farmer and introduces Paul's mission. It encompasses chapters one through four. Part Two, The Tin Roofs of Cange, includes chapters five through twelve. It is the longest of the five sections. Part Two gives the reader insight into Paul's childhood, education, his first impressions of, and early life in Haiti. Much of this content arose from research conducted by the author and



interviews with Paul's family and Ophelia Dahl. It also examines Paul's motivations and the creation and growth of his charity, Partners In Health. Part Three includes chapters thirteen through nineteen and is called *Medicos Aventureros*. This section discusses PIH's expansion to support the Peruvian project and provides information about drug resistance and why drug resistance and tuberculosis are a particularly scary combination. Jim Kim was in charge of the project in Peru, so much of this part is dedicated to him—his upbringing, education, relationship with Farmer, and professional struggles and achievements. Part Four, *A Light Month for Travel*, includes chapters twenty through twenty-three. The title is ironic. By most people's standards, Paul Farmer never has a light month of traveling. By this point in the book, Paul Farmer is well known and considered a specialist in infectious disease. He travels the world teaching, advocating, and treating patients. Despite his travels, he calls Haiti "home". Part Five is called *O for the P*. Chapters twenty-four through twenty-six focus on advocacy and bringing change to Haiti. In the afterword, Tracy Kidder reveals the current status of Partners In Health and the projects its supports.



Quotes

"Giving people medicine for TB and not giving them food is like washing your hands and drying them in dirt." p. 34

"A hundred chatty Haitians," he would say. "Don't try this at home." p. 34

Farmer said, 'The only non-compliant people are physicians. If the patient doesn't get better, it's your own fault. Fix it.'" p. 36

"If a patient says, I really need a Bible or nail clippers, well, for God's sake!" p. 42

"Still gazing, Farmer said 'To understand Russia, to understand Cuba, the Dominican Republic, Boston, identity politics, Sri Lanka, and Life Savers, you have to be on top of this hill.'" p. 44

"In any case, he seemed to think I knew exactly what he meant, and I realized, with some irritation, that I didn't dare say anything just then, for fear of disappointing him." p. 44

"An individual might exist in misery this great almost anywhere, but it was hard to imagine an entire community poorer and sicker than this." p. 77

"I'm an action kind of guy." p. 79

"Yeah, but I've got staying power. That's the thing." p. 81

"No, you twit, of course not,' she thought." p. 87

"But,' Farmer asked, 'are they appropriate technology?'" p. 89

Farmer would say 'Clean water and health care and school and food and tin roofs and cement floors, all of these things should constitute a set of basics that people must have as birthrights.'" p. 91

"They called this 'pragmatic solidarity,' a goofy term perhaps, but the great thing about it was that, if you really practiced it, you didn't have to define it, you could simply point at what had been accomplished." p. 101

"Lives of service depend on lives of support." p. 108

"He gazed at the woman and pursed his lips and said softly in Spanish, 'For me, it is a privilege.'" p. 158

"Patients came first, prisoners second, and students third." p. 182



"Haitians, man. They're totally over the top. My kind of people." p. 184

"The church group, the Cuban government, and the Soros Foundation, he answered. He smiled. 'Capitalists, commies, and Jesus Christers are paying.'" p. 184

"Farmer wasn't put on earth to make anyone feel comfortable, except for those lucky enough to be his patients, and for the moment I had become one of those." p. 210

"Of all the world's errors, he seemed to feel, the most fundamental was the 'erasing' of people, the 'hiding away' of suffering." p. 218



Topics for Discussion

Examine the character of Paul Farmer. What motivates him? What are his strengths and weaknesses?

Discuss the history of the Peligre Dam and its benefits and/or consequences.

Compare and contrast Paul's two loves: Ophelia and Didi.

Why did Paul Farmer create Partners In Health?

Who was Tom White? Why was he so important to PIH, and what were his motivations?

Zanmi Lasante is the culmination of Paul's dreams. Discuss what one might find when visiting it.

MDR TB is a significant health challenge. Please define MDR and recount the conditions under which MDR occurs.

Jim Kim spent quite a while searching for something unique unto himself. Discuss his role at Partners In Health.

Paul believed in liberation theology. What is liberation theology, and why do people relate to it?

As a child and teenager Paul's family unit was stable but their housing was not. Give examples of this and discuss how it may have formed his sense of home.