## **OBITUARY**

## Paul Edward Farmer: the Anthropologist who pioneered Global Health (1959-2022)

Around fifteen years ago, as a PhD student at IIT Delhi, I was searching for literature focusing on social determinants of health and illness in the major libraries across the city. Stacks after stacks my eyes rolled over the books on sociology and anthropology of health. One book stopped me and I was captivated for quite a long period of time. The book was titled *Pathologies of Power*. The name itself stuck me and I wondered what can be the *pathologies* of power? How can power determine health conditions? I took no time to bring that book in my hand and started turning the pages. What I found in the book changed my perspective towards what we consider as health or biology. The biological determinism I had believed in started to fade away. New approach and confidence in me started to shape my inner researcher as I turned page over page of the book. Since then, the author of the book Paul Farmer took a prominent place on my study table.

Paul Edward Farmer was born on 26 October 1959 in North Adams, Massachusetts, USA. His family lived a humble life in Alabama and Mexico during his childhood. His parents worked in different environments and endured financial hardships. Paul, as a child, came to the contact with Haitian migrant workers when his parents had to work with them in a plantation farm. This exposure to economic hardships, bad health conditions and migrant workers ignited the inner anthropologist in Paul. His family, inspite of difficulties, valued education and often read higher literature. Paul continued school education and graduated in Medical Anthropology from Duke University, Durham, North Carolina in 1982.

His earlier exposure to the Haitian workers during his childhood prompted him to reconnect with them in the North Carolina tobacco Plantations during his graduation. He carefully observed and examined the inhumane conditions in which the Haitian workers lived. Soon after his graduation he led an action-oriented project to uplift the health and general conditions of the Haitian workers. He then moved to Haiti where he established a community based health project in 1983. He also volunteered in a Hospital in Haiti and became involved in the works to ameliorate the plight of the Haitians. In 1987, while pursuing his MD and PhD in Anthropology in Harvard University he jointly established Partners in Health (PIH) along with his colleagues from

Harvard. In 1990 he completed his MD and PhD and returned to Haiti to fully engage with research and projects to promote community health across impoverished countries.

His long experience of working in community setting contributed immensely to the researcher in him. He tried to understand the factors which highly influenced the quality of health of people in poverty in Haiti and Rwanda. He realized that the health of the world's poor will remain poor if we don't change the actions of the rich people around the world. His experience in Rwanda and Haiti lead him to examine health from a very close angle and he found that health depends upon not only on what we eat, what medicine we take and what we pay for it but also on social structure, state policies and international relations etc. The policies we encourage at national and international level, though apparently looks unrelated to health, do shape the quality of health of people. He insisted that policies around the world are prorich and as a consequence the poor suffer.

Paul examined various ways society can enter into our bodies. While working in Haiti he examined the factors responsible for high incidences of the AIDS infection in the region. He focused on seemingly unrelated factors such as building a dam and linked it to the increasing incidences of AIDS. His first book "AIDS and Accusations" was an opening argument of his lifelong research to show that body reflects social inequalities. Paul worked on his experience among patients suffering from infectious diseases in Haiti, Chiapas and Russia and argued that inequality needs to be seen as violence. This is a form of violence which seems natural and causes suffering silently. In his book "Pathologies of Power" he investigated the ways political and economic factors structured the risk of AIDS and tuberculosis. Social forces including poverty and racism structures the way suffering is embodied as individual experience. Citing examples from the field Paul has shown how this structural violence, as he named it, defeats those who would describe it. Structural violence makes suffering complete and extreme. The concept helps immensely in revealing the true nature of health and illness and has since been a powerful concept in Medical Anthropology.

Paul Farmer received grants from various international agencies to work towards eradicating infectious diseases such as tuberculosis and AIDS. He served as the Chief of the Division of Social Medicine and Health Inequalities at the Brigham and Women's Hospital, Boston. He also served as the Kolokotrones Professor of Global Health and Social Medicine at Harvard Medical School. He received many prestigious awards such as the 2003 Heinz award for Human condition and the 2008 Skoll Foundation Social Entrepreneur of the year award. He was appointed deputy UN special envoy for Haiti in 2009 and worked on many projects related to community health. During the last decade he was instrumental in establishing a hospital and a University (University of Global Health Equity) in Rwanda. During the Covid-19 pandemic

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Paul Farmer was associated with various efforts to contain the spread of the virus. This pioneer of global health died of cardiac arrest at the age of 62 on 21 February 2022 in Rwanda. He is survived by his wife Didi Bertrand and three children Catherine, Elizabeth and Sebastian.

Paul farmer wanted to heal the world from its suffering and illness. He imagined global health as a "collection of problems" which needs to be tackled with "toolkit" that he provided in the book titled "Reimagining Global Health". His wide and deep experience in working with the patients and sufferers opened a powerful perspective to look at health in general and health of the poor in particular. The world is indebted for his contribution which I am sure will inspire young scholars and physicians in years to come. His vision and work has given health and illness a completely new dimension to understand. His argument "What happens to Poor people is never divorced from the actions of the powerful" will continue to guide academics and activism in global health.

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