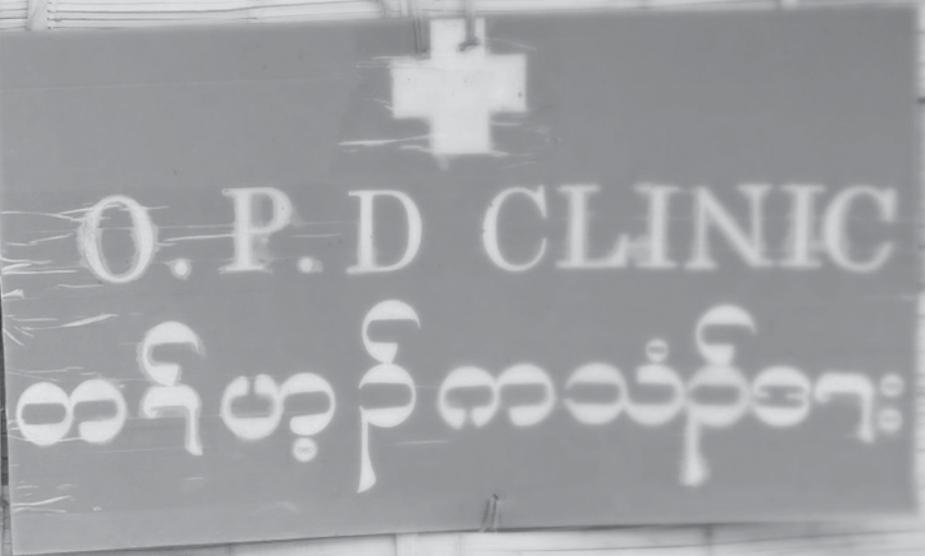


ScholarForum

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THE JOURNAL OF THE OPEN SOCIETY SCHOLARSHIP PROGRAMS

Public Health



**Regional Focus:
SOUTHEAST ASIA**

Essays and creative works by
Open Society Scholarship Programs'
grantees and alumni

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Dear Readers,

Over the past few years, Southeast Asia has been in transition. In Cambodia, the opposition party was able to make their strongest electoral gains to date against the deeply entrenched ruling party. When mass irregularities were exposed in those election results, citizens and civil society took to the streets in protest and showed the commitment to fair elections that may one day lead to a more robust democracy. In Burma, reforms continue in many sectors of governance that give reason for optimism, but the previous power structure, continued ethnic and religious discord, and an economic elite who benefit from slowing the pace of transition threaten to derail not only future progress, but reverse the substantial gains made since 2011. Faced with the uncertain future of an eventual transition in the monarchy, Thailand has again seen tense street protests as electoral factions compete for exclusive control of the reins of power. In Laos, local activists continue to work toward increased social justice, but do so in a dampened environment following the disappearance of a prominent civil society leader.

As the essays on the following pages show, our grantees illustrate that the changes sweeping Southeast Asia pertain to a range of human rights issues. This edition of ScholarForum focusses heavily on public health issues, a key pillar of the work of the Open Society Foundations. Our alumni also have significant thoughts in this area, highlighting issues of access to health care in Burma and restrictions on access to legal abortions in Croatia. An Ukrainian alumna speaks persuasively in favor of using a feminist framework to analyze discussions of female genital cutting, while a Burmese grantee explores the mixed knowledge Bangladeshi garment workers have about tuberculosis.

Our alumni are numerous. To give you a flavor of their activities, the last few pages of this edition summarize their research interests and professions. Where email addresses are provided, we encourage you to build contacts and networks in the fields and regions of relevance to you.

We hope you enjoy this issue's focus on the critical and quintessentially human issue of public health and the fascinating diversity of changes to be found in Burma and Southeast Asia. Your comments are always welcome to the Editor (scholarforum@opensocietyfoundations.org), as are requests for full references for citations.

Happy reading,

Open Society Scholarship Programs

The Open Society Scholarship Programs fund the participation of students, scholars, and professionals from Eastern Europe, the former Soviet Union, Mongolia, the Middle East, South Asia and South East Asia in rigorous, competitive academic programs outside of their home countries. The goals of these programs are: to revitalize and reform the teaching of the social sciences and humanities at higher education institutions; to provide professional training in fields unavailable or underrepresented at institutions in the countries served; and to assist

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COVER TOPIC

Public Health

Public Health: Progression vs. Regression

Marine BUISSONNIERE, Director, and
Jonathan COHEN, Deputy Director,
Open Society Public Health Program

Health has thrived as a global issue in the past decade, with the HIV pandemic catalyzing a period of unprecedented international financial assistance. The period has also been marked by growing attention to the imperative to assist those most vulnerable, including people in need of HIV treatment and palliative care, and criminalized populations such as sex workers, people who use drugs, and lesbian, gay, bisexual, and transgender communities. The last 10 years have given civil society actors significant success in leveraging international frameworks and institutions to persuade global health agencies such as UNAIDS and the World Health Organization (WHO) to enshrine human rights in their strategies, and to influence major donors such as the Global Fund to Fight Aids, Tuberculosis and Malaria (GFATM) to advance and fund a progressive health and rights agenda.

These international gains have also brought national or regional advances. The last decade saw the expansion of harm reduction programs for people who use drugs in Eastern Europe, advances in the rights of sex workers and people who use drugs in Asia, and new forms of accountability for viola-



“After 10 years of global solidarity in the field of health and human rights, the international community is retrenching”

tions of the human rights of women and girls in parts of sub-Saharan Africa.

This era of steady progress, however, is ending. After 10 years of global solidarity in the field of health and human rights, the international community is retrenching. A combination of austerity policies, resurgent ideologies, competition between sectors, and changing priorities has produced a severe crisis. The GFATM is shifting atten-

tion away from middle-income countries, bilateral donors such as Germany, Ireland, and the Netherlands are slashing development budgets for health and rights, and European Funds sources of funding are fail-

cover: A young girl standing at the mobile clinic in an IDP area, Karen State, Burma
above: An injured boy receives medical treatment in a makeshift shelter in an area for internally displaced persons, Karen State, Burma
photos Saw MORT

ing to fill the gap while continuing to support archaic institutions for people with disabilities.

Russia is a dramatic example of a country that has “graduated” to middle-income status. It is no longer a donor priority, despite

“We are witnessing defunding and scapegoating in places we thought would never need our attention”

being home to severe health-related human rights violations; and many people who constitute the world’s “new bottom billion” as defined in Andy Sumner’s 2010 work which claims the world’s poor are prevalent outside of the poorest nations. While the HIV epidemic is growing faster in Russia than anywhere else in the world and remains concentrated among people who inject drugs, international funding is about to dry up altogether. And since the majority of money for health and rights of the marginalized has traditionally come from international donors, marginalized groups are the ones who feel this donor retrenchment most acutely.

The push for low- and middle-income countries to share responsibility for public health is welcome and in some cases overdue. However, the risk is that it often means consigning those already at the margins of society to governments uncommitted to their protection. In many countries, defunding of essential health services has been accompanied by scapegoating of socially excluded groups, violations of health-related rights, unresponsive justice systems, and restriction of space to organize and advocate.

At the Open Society Foundations, we are witnessing the defunding and scapegoating in places where we had stopped working and in places that we thought would never need our attention. In Greece, Romania, and Russia, essential services have been defunded, particularly for people who use drugs, with accompanying spikes in HIV infection. In Macedonia, Uganda, and Ukraine, we are seeing reversals on rights in the form of increased scapegoating of marginalized groups (e.g., sex workers, people who use drugs, Roma), backlash against sexual and reproductive rights, or the introduction of potentially dangerous legislation. In China and Russia, space for civil society to organize, inform, and advocate is quickly narrowing.

In short, the world is facing a crisis of open society values in health that challenges us to consolidate the gains of the past decade while confronting new realities at the intersection of austerity and social exclusion. ■

Health: the Face of Human Rights

Doi RA, Burma

Myanmar Masters of Health Program 2010

Human rights in Burma have been neglected for so long that many Burmese are unaware of the protections they offer. For decades, human rights have been an untouchable issue, with activists committed to asserting them at risk of imprisonment and/or torture. As many people do not know what their rights are in relation to their health, the poor and the vulnerable gratefully receive any community health services provided. People from rural areas, for example, are overwhelmingly happy if their village has been appointed with a midwife or a health care worker. The Burmese, it seems, are accustomed to making the best use of what is provided to them, and some have long forgotten that they are entitled to basic health provisions.

Working for a community-based health project in the Irrawaddy delta region, I experienced the impact of Myanmar’s chronically frail health system, especially on mothers and children. The majority of women

in remote areas still have no better option than to rely on traditional birth attendants to help deliver their babies. They are unable to afford the means to reach skilled birth attendants and health facilities located far away. Due to this, the maternal mortality rate in Myanmar has remained stubbornly high. As of 2010, the maternal mortality rate was 200 maternal deaths per 100,000 live births. Major work still needs to be done to close the gap between this figure and the Millennium Development Goal (MDG) target of a 75 percent reduction by 2015 (WHO, 2012).

Children under five continue to die from preventable causes such as sepsis, beriberi, and acute respiratory infection. Health care as simple as cutting babies’ umbilical cords with a clean knife, applying low-cost antiseptic such as chlorhexidine, or

providing expectant mothers with vitamin B1 can help avert a significant number of child deaths. Yet the use of these simple, effective solutions still needs to be rapidly expanded. The new government has promised to increase the allocation of its budget for the health sector significantly in response to previous budgets that only allocated 1 percent of total government expenditure for health (WHO, 2012).

Rainbow over Inlay Lake, Shan State, Burma
photo Matthew WILSON



As a result, the supply of essential medicines, materials, and basic health staff has fallen short of meeting even the basic needs of communities. For example, I have witnessed village health centers that have gone for months without basic supplies such as oral

“Moderate malnutrition has almost become a common cause of death in rural Burmese villages”

rehydration solution, which is a simple medication used to treat children suffering from diarrhea. To combat these shortages, the government needs to make sure its increased allocation for health is distributed equitably across all the states and regions so that health care services and workers are not only concentrated in urban areas.

Evidence confirms that the period from conception through the first two years of life is a window of opportunity during which we must address maternal and child nutrition, as these factors can have a lasting, irreversible impact on a child’s overall growth and development (Dewey, 2006). How many countless opportunities have we missed for our children and for ourselves as well? Moderate malnutrition has almost become a common cause of death in rural Burmese villages. More than half of Burmese children under the age of five are moderately or severely stunted for their age (Myanmar Multiple Indicator Cluster Survey, Ministries of National Planning and Economic Development and Health: 2009-2010). Stunted growth is associated with poor socioeconomic conditions and frequent and early exposure to adverse conditions. This evidence highlights how much the new government will need to address neglected rights to security in relation to nutrition, economic, and social issues. Health is connected to different interrelating areas of a person’s life. As a result, for a person to be healthy, he or she should enjoy all the human rights prescribed by the United Nations Universal Declaration of Human Rights. The

Burmese government must respect, protect, and fulfill every right of its citizens, including the rights

to safe water, sufficient education, adequate food and nutrition, and open information. Many village health centers or households in the Irrawaddy delta region still lack access to clean water. This poses a major problem during the dry season. Furthermore, the government recently announced that primary education will be provided for free, which means that parents no longer need to pay for school materials, enrollment fees or other charges. However, other barriers such as distance from schools, inadequate roadways, the use of child labor, and continuing gender inequity must be addressed so that every child can receive education. Improved educational status of the people will imply heightened health literacy and allow people to make better, informed choices.

Reflecting upon a statement by former United Nations Population Fund Executive Director Thoraya A. Obaid, the basic principles of human rights have been denied the Burmese people for far too long. As Myanmar is rapidly undergoing a reform process and opening doors to various stakeholders with different interests, each

“Village health centers have gone for months without basic supplies”

one of us must internalize the human rights principles that protect us. These rights “must be absorbed and expressed in their own ways and within the positive aspects of their cultural values and beliefs” (UNFPA, 2005). It is also crucial that the political and social environments within a country provide an unfailing support system for those who assert their rights. But the first step still remains: we need to tirelessly inform each other about our inherent rights. ■

Female Genital Cutting: A Transnational Feminist Perspective

Alla CHERNENKO, Ukraine
Undergraduate Exchange Program, 2010

Contemporary health processes are heavily influenced by globalization, which can be defined as a series of cultural, economic, and political processes that result in the emergence of transnational structures in different areas of human life. The effects of globalization are not uniform: for instance, it has made certain health-related issues salient for many people in different parts of the world, while other issues remain relevant to specific geographic areas. One such issue is female genital cutting (FGC), which, while remaining local, has become resonant in the global context of women’s health and reproductive rights.

Various forms of genital modifications performed on women, as well as on men, have been used for more than 2000 years in



certain parts of Africa, Asia, and the Middle East. While certain procedures, such as male circumcision, are now viewed as culturally acceptable medical or hygienic procedures within many Western cultures, others, including FGC, are considered violent and barbaric rituals. FGC is viewed not only as being dangerous for women's health due to the often unsanitary conditions in which the procedure is conducted, but also as denying women full sexual experiences and thus serving as a practical means of control over their sexuality and sexual behaviors. According to the World Health Organization, FGC is recognized as a violation of the rights of women to health, security, and physical integrity, the right to be free from torture and cruel or degrading treatment, and, in the most extreme cases, the right to life (WHO, 2012).

The four types of FGC, as defined by the WHO, include clitoridectomy, excision of the clitoris and inner labia, removal of most of the external genitalia and various forms of stitching performed on the labia (WHO, 2012). I must admit that a mere description of the procedures awakens explicitly negative emotional reactions in me as a person who grew up in a Westernized setting and internalized the idea of sanctity of human bodily integrity. However, as a feminist whose identity has been shaped through transnational experiences, I see the perfunctory acceptance of the hegemonic Western perspective on an essentially non-Western issue as inherently problematic. While FGC mostly affects non-Western women, their voices are rarely included in global discussions on the issue. I

“The women themselves know their choices, their communities, and their cultures much better than we do, and we should listen to them instead of adopting a savior paradigm”

believe that the women affected by FGC, and the women brought up to see it as a part of their cultural heritage, must not only be included, but should play the leading part in the construction of the global discourse on female genital cutting.

Including the voices of non-Western women within the Westernized discourses of health and human rights is a challenging project, since these voices do not necessarily represent a unified perspective. This leads us to question not only our assumptions about the issue itself, but also our perceptions of the “non-Western others.” Some women embrace FGC, arguing that their own experiences of FGC were not mutilating, but empowering. Others, however, risk their lives to escape the practice. Adopting a global postcolonial feminist framework, which grows from and expands beyond multicultural feminisms, allows us to deal with the necessity of redefining our main premises and refining our perspectives in order to create inclusive

global dialogues and trigger meaningful social change.

Global feminism is a framework for establishing global solidarity between women. While acknowledging the presence of interlocking oppressions defined by race, ethnicity, gender, class, sexual identity, age, etc., it emphasizes the geography of oppression: the fact that women in different parts of the world experience oppressions differently. Global feminism is deeply critical of traditional

“The perfunctory acceptance of the Western perspective on an essentially non-Western issue is inherently problematic”

Western theorizing and the idea of unified womanhood. Instead, it urges us to acknowledge and embrace differences, while working toward building a new kind of solidarity. Finally, it calls upon Westerners to abolish notions of “non-Western others” simply as victims of patriarchal oppression and to recognize their subjectivity and thus support their potential for social action.

Adopting a transnational feminist perspective, we are faced with the necessity of redefining and reevaluating traditional concepts of reproductive rights and human rights in general in order to successfully frame and address the issue of FGC. Indeed, the notion of universal human rights originated within Western discourse and does not necessarily translate into other cultural languages. Feminist theorists Sonia Correa and Rosalind Petchesky (2010) argue that while the concept of human rights is essentially Western, its main premises, namely, bodily integrity, personhood, equality, diversity and self-determination, transcend cultural borders. To apply these premises within our global feminist framework we need to reconceptualize human rights as communal, social entitlements, for it is social conditions that allow individuals to enact their personal choices. In other words, an individual should have a choice to exercise her rights or to sacrifice them, if she so desires, and the existence of a variety of choices depends on her community.

What does a transnational feminist perspective on human rights mean in practical terms in the context of FGC? What should Western feminists do, if anything at all? My answer is that we should act to help ensure that women across the globe are provided with choices and that their communities support these choices. We should remember, however, that the women themselves know their choices, their communities, and their cultures much better than we do, and that we should listen to these women instead of adopting a savior paradigm by trying to bring social change as we see fit. Instead, we, who often have more resources than women outside the West, need to direct those resources to support the grassroots actions of our sisters globally and locally, thus enabling them to fulfill their activist potential in the struggle against global oppressions. ■

Abortion Restrictions and Stigmatization Driving the Grey Economy in Croatia

Izidora SKRACIC, Croatia
Undergraduate Exchange Program, 2005

The past few decades have been tumultuous ones for Croatia. After almost 50 years of belonging to the socialist federation of Yugoslavia, Croatia became independent, fought a war, and was governed by its main right-wing party as it transitioned to capitalism and modern democracy. These radical changes influenced every aspect of Croatian life. Likewise, the impact on reproductive health and rights has been no less dramatic. As the most polarizing and pronounced, and therefore, perhaps the most representative reproductive health issue of our time, access to abortion in Croatia and the changes that have occurred in the country's reproductive

rights climate over the last 30 years will be the focus of this essay.

Despite its communist foundation, Yugoslavia's open borders led to free communication with the rest of Europe, allowing for feminist ideas to trickle into Croatian society. However, during this time, abortion was considered more of a public health issue than a women's rights issue. The procedure was first legalized under specific conditions in the 1950s as a result of increased maternal morbidity and mortality due to illegal abortions (see Population Policy Data Bank, 2002). Through the 1970s it went through a process of liberalization, concluding in 1978 with its "on demand" policy, where women won the right to choose an abortion until the tenth week after conception (Perincic, 1990). This new policy was accompanied by access to contraception and the establishment of family planning counseling centers, which were widely available and well-fre-

quented in urban settings. In comparison to eight other socialist Eastern European states prior to the fall of communism, Yugoslavia was the only one found to not have an explicitly pro-natalist official policy (David, 1982).

As war broke out and Croatia fought for its independence, the 1990s were marked by extreme nationalist sentiments. Women, as the holders of reproductive potential, were burdened with the responsibility of the nation's cultural and biological continuation in the context of the war and newly acquired independence: fallen soldiers had to be replaced by new sons while the state needed as many Croats as it could find in order to justify its existence as a nation-state. Additionally, the region's traditional links between nationality and religion were used as war propaganda, driving home the notion that being Catholic was a prerequisite to being



A hospital in Split, one of the 32 medical facilities in Croatia where a woman may legally obtain an abortion
photo Izidora SKRACIC

Croat. This granted even more power to the reemerging Roman Catholic Church in Croatia. Subsequently, aided by the complementary effect of the rise of nationalism and the Catholic Church, there was a sharp shift toward pro-natalist policies, as demonstrated in the following examples. First, the new Croatian Constitution of 1990 deleted the explicit provision from 1974 giving citizens the right

“Stigmatization, primarily fueled by the Catholic Church, remains a key deterrent to abortion in Croatia today”

to free decision-making concerning childbearing (Hrabar, 1998). Second, a strong anti-abortion movement emerged, supported by right-wing politicians and the Catholic Church. Although the 1978 abortion law was successfully defended by the organized activism of women’s worker unions in 1991 (Dedic, 2007), a famous quotation best exemplifies the new sentiments that were driving abortion rights challenges: “A fetus is also Croat” (Goldstein, 2005). In line with this, large numbers of gynecologists suddenly refused to perform abortions on grounds of conscience. In 1995, government attempts to restrict access to abortion by legally mandating pre-abortion counseling were again thwarted by women’s organizations and public outcry (studies from the 1990s consistently showed over 70 percent of the population to be pro-choice).

In practice, the government’s implementation of its own program might be characterized as passive-aggressive. It eliminated all subsidies for abortion and for all but one form of contraception (oral). Consequently, there was a deterioration of abortion care services, leading to a sharp decline in abortion rates, as well as an alarming increase in abortions resulting from pregnancy complications such as ectopic pregnancies. Although this sudden shift was most pronounced in the 1990s, the trend remained present in the 2000s and continues today. Furthermore, the ratios between abortion on demand and abortion due to complications vary significantly by hospital (see the Croatian Institute for Public Health, 2010). Although there is no official explanation for this, three main reasons may be extrapolated: (1) women travel to other (larger) cities to have an abortion on demand (as evidenced by statistical records); (2) some abortions on demand are purposefully misreported as abortions due to complications (to avoid stigmatization); and (3) some abortions are performed but simply not recorded (Obad, 2006).

In 2005, undercover research found that over 30 percent of hospitals do not perform abortions in practice (legally). Basically, gynecologists invoke conscientious objection during their hospital shifts, but after work they perform abortions privately—without recording the procedure or the illegal premium fee charged. This has led to hospital shortages of available doctors for abortions, which in turn, has led more women to opt for unrecorded abortions rather than be turned away at public hospitals. The problem is that in Croatia doctors are only authorized to perform abor-

tions in hospitals. Therefore, all abortions taking place elsewhere are illegal; they contribute to the grey economy and put women in a position where they cannot enforce or redress their rights. Additionally, the proliferation of unrecorded abortions leads to inaccurate statistics, and thus any proactive measures meant to decrease abortion rates based on such erroneous statistics would most likely be ineffective.

For a medical procedure that has been legal since 1978, exercising one’s right to abortion on demand can be tricky in Croatia today. Despite advances in technology and a more democratic perspective on human rights, abortion in Croatia continues to be regulated by a 1978 law, in conjunction with a 1996 government resolution restricting the

procedure to a smaller number of authorized health institutions with a gynecological-obstetric unit, i.e. hospitals. Stigmatization, primarily fueled by the Catholic Church, remains a key deterrent to abortion, leading many women to travel much farther than their closest hospital to obtain the procedure. Furthermore, women from rural areas are disadvantaged, not only due to their remote place of residence, but also due to the more conservative environment of many smaller communities.

The development of abortion access in Croatia since its legalization until today indicates a clear conservative tendency in terms of reproductive rights. Although the dominant nationalist trend of the 1990s has since receded and childbearing is no longer considered every Croatian woman’s ultimate patriotic duty, the past 20 years have seen radical changes in Croatia’s power structures. With the rise of right-wing politics, the Catholic Church has established itself as an important player whose opinion is always publicized and always seems to matter. While there has recently been no serious attempt to criminalize abortion, it is a threat frequently revived by the Catholic Church, perhaps in an effort to remain relevant in a democratic, post-war, pro-European Croatia. ■

A Karen community health worker administers a blood test
photo Saw MORT



ABSTRACT

Tuberculosis (TB) Prevention and Care among Garment Workers in Badda, Dhaka: Exploring Knowledge, Attitudes, and Practices

Dr. Hnin Yee Mon Kyaw (M.B, B.S) (MPH)
Supplementary Grant Program Asia 2012

This study aims to explore knowledge of, attitudes about, and practices toward tuberculosis (TB) prevention and care among garment workers in Badda, Dhaka, Bangladesh. A cross-sectional descriptive study using quantitative methods was conducted in garment factories currently collaborating with the TB program of the international non-profit development organization, the Bangladeshi Rural Advancement Committee (BRAC). One hundred and twenty garment workers were interviewed using a semi-structured questionnaire. The participants were chosen by systematic random sampling from four garment factories in Badda. All participants

were garment workers age eighteen years or older whose TB status was unknown to the researcher or to both the researcher and the individual worker. Data on knowledge of, attitudes about and practices regarding TB prevention and care among garment workers was collected. Descriptive, bivariate and multivariate analysis was done on data using various statistical methods.

The findings of the study show that the majority of respondents (60.8 percent) obtained TB information from media sources, such as television, radio, newspaper, and posters. Ninety-eight percent identified the most significant symptom of TB (prolonged cough lasting over three weeks) and answered correctly when asked whether or not TB is curable. However, only 51.7 percent knew that TB was contagious. Thirty-five percent of respondents had sufficient knowledge of TB prevention and care. Sufficient knowledge was defined as the correct identification of at least three common symptoms of TB (for example, cough persisting over three weeks, blood in the sputum) and/or facts about it such as airborne transmission, the usual course of treatment is specific anti-TB drugs, and cough hygiene (Gilpin et al,2011; Center for Disease Control and Prevention, 2012). About one-third of the respondents reported that they would not agree to work alongside colleagues suffering

from TB. A lack of money was mentioned as the most common possible reason for treatment delay (86.7 percent). Time constraint was a major barrier affecting attendance at workplace health education sessions (77.5 percent). Fifty-nine percent reported that garment workers with TB might encounter financial problems due to losing their jobs or taking leave without pay. Almost 22 percent reported that they would choose informal health care as their first point of care if they suspected they had TB, even though a BRAC-run TB control program was running in their factories.

According to these results, the majority of garment workers did not have sufficient knowledge of TB prevention and care. It is likely that this insufficient knowledge may lead workers to delay their treatment, which could result in higher degrees of infection and social stigmatization. Therefore, strengthening health education and communication activities in workplaces is needed to raise knowledge levels, increase treatment effectiveness, and remove social stigmatization among garment workers. ■

This abstract is a summary of
the author's MPH thesis



ALUMNI PROFILE

Marginalized Youth and Drug Use: Reducing Harm through the Model of Inclusive Services in Kyrgyzstan

Zulaika ESENTAEVA, Kyrgyzstan

Doctoral Fellows Program, 2012, OSF-CNOUS Program, 2007

A young woman—serious, compassionate, uninhibited—talks to a group of young people in a nondescript neighborhood of Bishkek, Kyrgyzstan. Nothing unusual about that, you may think, until you learn that these young people live on the margins of society as drug users. How to best address the health needs of these communities in her home town has become a career-defining passion for Zulaika Esentaeva, a current Open Society Doctoral Fellow and OSF-CNOUS Program alum. Currently pursuing a doctorate in public health at Hunter College, City University of New York, Zulaika developed a deep interest in these communities when researching women entrepreneurs in Bishkek for her bachelor's thesis. "I would go to bazaars to interview women, who would often tell me about their hardships," Zulaika said. "Later, when I was working as an intern at an association supporting people with mental health problems during my master's degree studies in France, I started realizing how important it is to develop a holistic approach to treatment."

ScholarForum sought out Zulaika for this edition so she could share her views on public health provisions in Kyrgyzstan and their effect on young people who use drugs, in particular.

ScholarForum (SF): Zulaika, can you tell us your opinion as to what the major public health issues are in Kyrgyzstan today?

Zulaika Esentaeva (ZE): Since 1996, when Kyrgyzstan lost its status as the world's last HIV-free country, as identified by the World Health Organization, we have witnessed a rapid increase in HIV cases. According to UNAIDS, the num-

ber of people currently living with HIV in Kyrgyzstan exceeds 12,000, and according to international experts, the number of people who use drugs in the country exceeds 9,000 (UNODC). For a country with just 5.5 million people, this is a large percentage. Indeed, in some places, as many as 14 percent of people who inject drugs are HIV positive. Injecting drug use remains the main driver of the HIV epidemic, but HIV transmission via unsafe sex has also grown alarmingly from three percent in 2009 to 29 percent in 2012 (see <http://harmreduction.kg>).

Due to large donor investments, a comparatively more vibrant and stronger civil society movement, and a favorable legal framework, Kyrgyzstan has adopted relatively successful internationally-recognized evidence-based intervention models as part of its response to these growing epidemics. These models include needle exchange programs, methadone maintenance treatment, antiretroviral therapy, and the prevention of mother-to-child transmission of HIV/AIDS during childbirth.

SF: What are Kyrgyzstan's major shortcomings in the public health provisions for HIV/AIDS populations and intravenous drug users?

ZE: Well, statistics show there is definitely room for improvement. As an example, 10 percent of all HIV cases are discovered at the final stages, a stage at which the virus is often untreatable. A significant percentage of those with AIDS are already dead, while the remainder struggle to receive proper palliative care. These figures speak both to inefficient voluntary counseling and testing and the untimely delivery of antiretroviral therapy.

There is a high prevalence of hepatitis

C among people who inject drugs. Hepatitis C is also an opportunistic infection in many patients with HIV/AIDS and is the second cause of death after tuberculosis (TB). While the necessity to integrate HIV and TB services is apparent, particularly in prisons, the country is still struggling with this process.

Despite Kyrgyzstan's attempt to integrate HIV services into existing health structures, many clients from affected populations, such as people who use drugs, gay men, and sex workers, prefer to receive services from non-governmental organizations rather than family medical centers. Physicians at government-run health facilities may be less informed and motivated than social or outreach workers at NGOs. Compounding this, Kyrgyzstan faces a brain drain of highly qualified physicians, including specialists in infectious diseases and addiction, many of whom migrate to Russia and Kazakhstan in search of higher salaries.

Another structural barrier is the ongoing violence of some law enforcement bodies, behavior that hinders access to services. OSF has been working since 2006, together with the Ministry of Interior Affairs and their academy, to develop good practices, namely a course on harm reduction for the Academy's cadets.

SF: Can you elaborate on your thoughts of the HIV/AIDS population in Kyrgyzstan and what is being done to aid them?

ZE: The HIV epidemic has the face of a young person: 59 percent of those with HIV are aged 20-39, and according to a UNODC survey, the mean age of drug use initiation in Kyrgyzstan is 17.5 years. However, little is done to make HIV services youth friendly. While working at the Soros Foundation-Kyrgyzstan for the Public Health Program, I was dismayed to see harm reduction was failing to address the needs of young people significantly affected by HIV. There is scant research about the needs of young people who use drugs and the kind of drugs they are using today.

There is only one civil society organization that specifically targets young people who use drugs, although inevitably, all NGOs have some young people among their client base. Those aged 14-18 rarely access harm reduction services offered by NGOs, let alone from the state structures. Fear of parents and relatives finding out, and the resultant social stigma are key deterrents, but outreach teams do not effectively penetrate areas where young people who use drugs congregate. There is a clear need for youth-focused materials and general education within this population about the services on offer and the options they have. Through my work with the Public Health Program, I heard various stories of young people harassed by the police or denied access to health care, sometimes not knowing where to go and to whom they can turn. I also heard stories of people overdosing. The fact that there are harm reduction services in place and that young people don't have the means to access them has been central to my research. My ultimate goal is to develop concrete recommendations on service design, as well as to identify ways to integrate specialized harm reduction

services into general health clinics to make those services accessible to both the general public and health professionals.

SF: Can you tell us more about the characteristics of health care services for drug users?

ZE: Besides the problematic access to general health services, people who use drugs in Kyrgyzstan also experience a number of drawbacks due to the specialized substance abuse services that were inherited from the Soviet Union. For example, communist social policy placed a greater locus of control on physicians (see Raikhel, 2010), with the result that patients took little responsibility for their own treatments. Narcology—the study and treatment of drug and alcohol abuse—was loosely linked to the legal institutions and penal system and included sharing data of the registry of a person who uses drugs with the law enforcement, employers, etc. Focus on control resulted in a heavily medicalized detoxification service. Despite the short-term effectiveness and high cost of these detoxification services, they were the only option offered within the public health care system and hence patients often preferred these poor-quality and infective detox programs over “twelve-step” behavioral therapy offered by NGOs, patients groups or alternative service in other informal settings.

Communities of people who use drugs, especially those who are not aware of existing services, are often disempowered and thus unable to demand better treatment. Experts talk about “building the capacity” of these communities, yet, in my opinion, a better approach would be to empower these individuals to ensure they are accepted as full members of society. “Building capacity” is simply giving knowledge and skills, but empowerment is a step further – it is ensuring people have the guts to act using those skills and the knowledge, as well as ensuring that people are aware they have the capacity to change the environment they live in. Often,

health services for people who use drugs are not integrated into mainstream health options, a peculiarity which prevents a “one stop” holistic service.

Compared to Russia, though, Kyrgyzstan was able to address some of these challenges by preserving elements of the previous system. In 2009, Kyrgyzstan's Ministry of Interior Affairs adopted a quite progressive internal policy, which instructs police officers not to intervene with harm reduction programs and even mandated they serve as liaisons between clients and harm reduction or HIV-prevention sites. Beletsky et al. developed a paper-based, cross-sectional survey on police officers' knowledge of the recent policy and distributed it among 500 police officers across the country. Its results reflect promisingly high levels of knowledge within the police force about HIV for those officers reached by trainings, along with relatively favorable attitudes towards harm reduction (Beletsky et al. 2012).

SF: Do you know of other countries which have successful models of public health interventions with these populations?

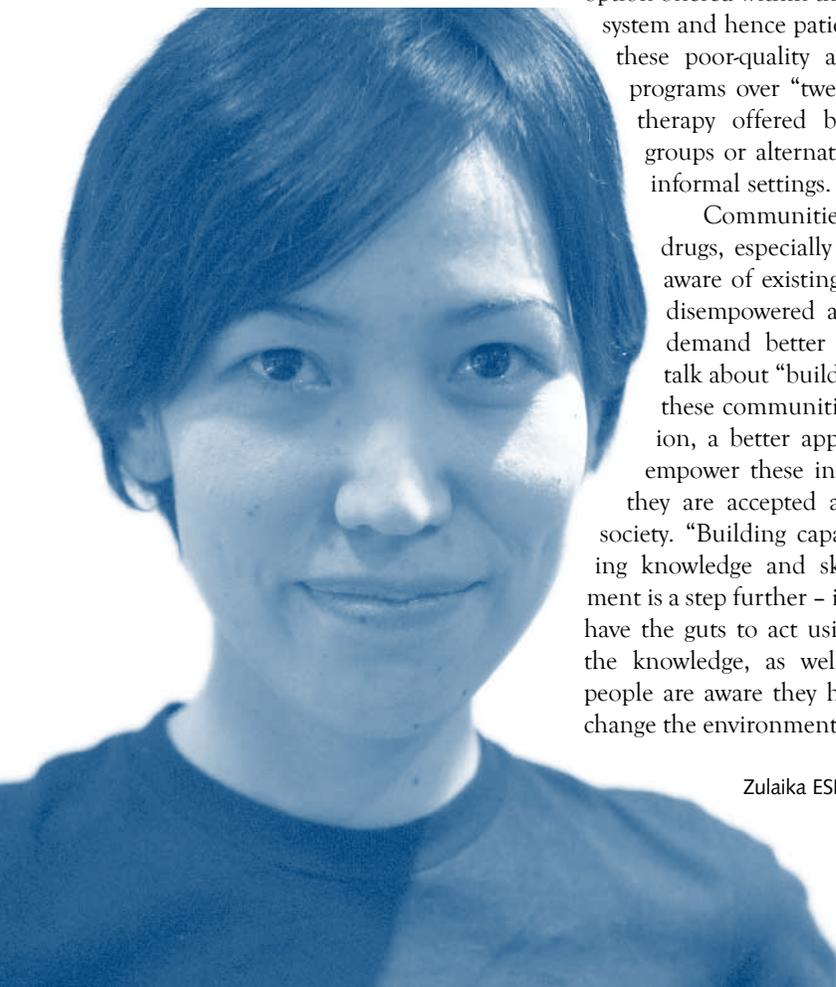
ZE: To my knowledge, Moldova has rather successfully implemented effective HIV programs, such as methadone maintenance therapy in prisons. Further afield, a number of European countries exhibit good examples of a non-judgmental scientific approach to treating people who use drugs while simultaneously reducing crime and reducing blood-borne infections.

Kyrgyzstan certainly has work to do to meet these standards, but there are passionate advocates, inside and outside of the country, determined to pull the system in this direction. ■

For more information, about the **Open Society Public Health Program**, including reports, expert opinions, and grants, please visit www.opensocietyfoundations.org/about/programs/public-health-program

For information on the **Open Society International Harm Reduction Development program**, visit: www.opensocietyfoundations.org/topics/harm-reduction

Zulaika ESENTAEVA (photo provided)



REGIONAL
FOCUS

Southeast Asia



Map adapted from CIA World Factbook. Public domain. Names in Vietnam are shown without diacritical marks.

Michael PALLER
Program Coordinator, Open Society
Burma Project/Southeast Asia Initiative
Matthew WILSON
Program Manager, Open Society
Scholarship Programs

Southeast Asia plays an increasingly prominent role on the global stage. With abundant natural resources and increasingly sophisticated labor markets, many countries in the region are experiencing rapid economic growth. Such growth, however, has been accompanied by widening income inequality, growing environmental concerns, and alarming human rights abuses. Across the region, corruption and impunity are stifling political reform. These challenges are being met with demands for justice by the emergence of a dynamic civil society comprised of new youth movements, legal aid organizations, and empowered citizen groups.

In Burma, human rights advocates are working to uphold the recent reforms while continuing to push for further democratic change. In the past two years, the government has released political prisoners, relaxed censorship laws, and engaged

the opposition in peace negotiations. Independent media groups operate more freely and new political parties are drafting legislation to improve education and health care throughout the country. Despite these encouraging developments, many challenges remain, including fostering durable peace and ensuring protection for the nation's ethnic and religious minorities.

In Cambodia and Thailand, journalists and lawyers are developing new tools to help vulnerable populations access information. Yet both of these countries are also marked by the rollback of basic freedoms, particularly freedom of expression and freedom of assembly. In Cambodia, for example, the police recently cracked down on demonstrators protesting the fraudulent results of the July national elections. In Thailand, the courts are handing down increasingly harsh sentences to bloggers writing about sensitive topics, thus fostering a culture of self-censorship.

Throughout the region, land confisca-

tion and environmental degradation are on the rise. In Cambodia, private corporations join forces with the government to exploit natural resources like timber and minerals, leading to large scale displacement and deforestation. The government in Laos is aggressively pursuing hydropower, often with the support of international financial institutions, but ignoring the concerns of downstream communities that are struggling to maintain their livelihoods.

There are enormous challenges ahead, but in each country of the region, youth are using new media and technology to shift power away from the wealthiest individuals. Their innovative efforts are yielding exciting change and national debate, and fostering political engagement on an inspiring scale.

In the Scholarship Programs, we believe that quality higher education plays a key role in helping this next generation of leaders push the reform agenda forward. In the pages that follow, you will find a few of these inspiring voices. ■

The Right to Education for Karen Refugees and Internally Displaced People

Hsar Doe Doh MOO
Supplementary Grant Program Asia, 2008

Burma, one of the most ethnically diverse and natural resource-rich countries in the world, has experienced a series of crises since gaining independence from the British colonial government in 1948. Interethnic conflict, civil war, political instability, socioeconomic turmoil, and human rights abuses are all major obstacles that have prolonged the country's development and prosperity. In light of this, the abolishment of the military dictatorship, intensification of the democratic transition, protection of ethnic nationalities, restoration of a durable peace through political means, and reform of the economic and education system are highly desirable to Burmese citizens. After decades of military dictatorship and isolation from the global community, Burma's recent series of political and socioeconomic reforms are a welcome sign. Burmese citizens all hope that it will lead to genuine reform.

The prolonged armed conflicts between the Karen National Union (KNU) and Burmese Army over the last six decades have resulted in disastrous effects on Karen communities. Civil war and human rights violations forced thousands of Karen civilians to abandon their home towns, agricultural fields, livestock, and property and become internally displaced persons (IDPs) within the country or seek refuge in Thailand. Karen people residing in IDP areas or refugee camps have been traumatized by human rights abuses on the part of the Burmese army, including forced labor, land confiscation, sexual violence, extrajudicial killings, forced relocation, extortion, excessive taxation, and mental and physical torture.

Peace talks and the initial ceasefire agreement between the KNU leadership and Burmese government delegations representing reformist President Thein Sein in January 2012 brought good news to peace-loving people, including myself. However, I have mixed feelings and I am both positive and skeptical as to whether the initial peace talks will build a genuine and sustainable peace

“Education is crucial to transforming the atmosphere in Burma from negative to positive”

and freedom for everyone in Burma. One of the main questions I have about the process is this: Can we guarantee a genuine peace for Karen and other ethnic school children in war zones where they can learn safely and happily with dignity?

Improvement in the right to education is impossible for the majority of Karen children in armed conflict zones. For these children and young adults of school age, education is precarious

and learning takes place under constant fear and threat. Life for Karen ethnic children/youth is often a nightmare involving hiding in the jungle without a proper classroom and learning materials. However, the Karen people's desire to learn remains a driving force in their effort to get education.

Karen refugees from Burma have been residing on the Thai border for almost 30 years, and the protracted situation of refugees has become a burden for Thailand as well as international aid organizations. Improving the quality of refugees' lives significantly

“Armed conflicts between the Karen National Union and Burmese Army over the last six decades have had disastrous effects on Karen communities”

depends on the provision of food, security, shelter, health care, and education, especially during emergency situations. Without support for these basic needs, life for refugees is a challenge. Recent budget cuts for refugee assistance could lead to hardship for the refugee population in Thailand.

The European Union has been the largest donor for Burmese refugees since 1995, providing financial assistance in major sectors (education, food, health care, and shelter). It has minimized its funding since 2010 and now emphasizes capacity building in agriculture, livestock, and handicrafts. In the education sector, due to the funding shortage, stakeholders involved in refugee education have encountered a huge challenge that has had a great impact on sustainable education in Karen refugee camps.

The Karen Refugee Committee Education Entity (KRCEE) is the main educational representative of seven Karen refugee camps. In these camps, it manages and coordinates schools providing basic and higher education, locally known as post-secondary education programs. For KRCEE, the decline of teacher's salaries is a setback because financial support plays a crucial role in providing quality education and sustains the long-term commitment of teachers to their work.

According to American psychologist Abraham Maslow's hierarchy of needs, physiological or basic needs, such as food procurement, are necessary for survival. Without having met these basic needs, further growth and progress is difficult. In an educational setting, when children's physiological need for food is unfulfilled, they will not be able to concentrate on their studies, may have a lack of interest in schooling, may become delinquent, and, finally, may drop out. In the same manner, without receiving adequate food, refugee teachers on the Thai border

will leave the camps where they have been confined and try to ensure their survival by looking for job opportunities in nearby Thai villages.

The rate of teacher turnover is high, especially in the basic education sector, as a result of inadequate financial support. The quality and sustainability of education in Karen refugee camps principally depends on these teachers. Their replacement with novice and inexperienced teachers is therefore a challenge. Bringing about the long-term provision of quality education to refugees is precarious.

Working in the field of education, I am convinced that education is crucial to transforming the atmosphere in Burma from negative to positive. It is a vital tool that can bring lasting peace and justice,

build a sustainable and prosperous society, alleviate poverty, and revive the hopes of the citizens of Burma. Despite living in a restricted and insecure environment where

there are insufficient resources and facilities, refugee and IDP students are never reluctant about pursuing their education. It is a life-long process, and if one can use and apply it in an appropriate and useful manner, education can bring about changes in one's life, society, and country.

Finally, as education is a fundamental human right, it should be respected. The current government of Burma and its stakeholders in political and socioeconomic

“Improvement in the right to education is impossible for the majority of Karen children in armed conflict zones”

reform must underscore the importance of education in their reform agenda, and provide essential support and assistance. This will revitalize the hope of school age children and young adults, and strengthen their confidence as they work to make Burma prosperous and democratic. ■



Three girls wearing Lisu clothing outside of a tourist site, northern Thailand
photo Matthew WILSON

Health and Rights in Burma: A Case of the Kachin of Northern Burma

Dan Seng LAWN
Supplementary Grant Program Asia 2012

Everyone has the right to a standard of living adequate for the health and well-being of himself and his family, including food, clothing, housing and medical care and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.

—Article 25 of the Universal Declaration of Human Rights

Burma has become a center of attention for the international community since its recent purported change from a military to a quasi-civilian government. Whether the motive of the ruling elite for change is genuine or not is still subject to hot debate. Has the government taken the initiative to establish a democratic society with a government and an economy that responds to the needs and interests of citizens? To address this question I will explore the field of health, pertaining to fundamental rights, with a special reference to the ethnic Kachin of Burma.

The modern perception of human rights is a combination of two important historical developments: the evolution of the ideas of humanity and rights. While classical Greek philosophy laid the foundation for these ideas, the Magna Carta (1215), the Bill of Rights (1689), the French Declaration of the Rights of Man and the Citizen (1789), and the Universal Declaration of Human Rights (1948) developed this foundation and shaped many of our notions of rights into their current form. Thus, Costas Douzinas aptly proclaimed that “human rights are the greatest invention of modern political philosophy and legal jurisprudence.” In contrast to this, the traditional perception of Burmese society views an individual

“Even minor infections often lead to critical conditions due to scarcity of medicine”

as the bearer of “duties” rather than “rights” (Maung Maung Gyi, 1983). This perception is still pervasive in the culture of the ruling clique. Thus, “duty” becomes a prerequisite relationship between the rulers and their subjects.

Against this backdrop, it is not surprising that the government does not pay much attention to the rights of its people, despite criticisms from the international community.

Another factor is that successive governments in Burma failed to bring about durable solutions to settle protracted political problems with ethnic nationalities. Instead, we witnessed the burgeoning militarization of the government on one side and “insurgency as a way of life” in ethnic areas on the other side. These factors

have led to a severe humanitarian crisis, which is exacerbated in the ethnic regions due to civil war.

The Kachin signed the Panglong Agreement in 1947, which formed the foundation of the Union of Burma that followed in 1948. The agreement contained important provisions for protecting the rights of minorities, including groups such as the Shan, Chin, Burmese, and other ethnic nationalities. From 1948 to 1961, the Kachin actively took part in politics in this period of parliamentary democracy in Burma. An unpopular religious policy of Prime Minister U Nu was marked by an agreement to cede the Kachin villages of Phimaw, Gaulam, and Kanphang, to China, despite bitter protest from the Kachin. These policies prompted the Christian

“Successive governments in Burma failed to bring about durable solutions to problems with ethnic nationalities”

Kachins to take up an armed rebellion against the government in 1961, while other ethnic nationalities like the Shan pursued constitutional remedies through the Taungyi Conference (Graver, 1996). The plight of Kachin civilians has been great for over 50 years. The first conflict started in 1961 and lasted until 1994, when a ceasefire agreement was signed between the Kachin Independent Organization (KIO) and State Peace and Development Council (SPDC). In 2011 a second civil war broke out and is still ongoing.

The successive administrations of the military government are not remembered as responsible but as authoritarian, insensitive, aloof, and inefficient in dealing with humanitarian problems. In 1976, many lives were lost in a widespread famine that broke out in the triangle area of Kachin state. No humanitarian measures were taken by the government, and little to no international help was received due to lack of media attention.

The health care system in Burma has four sectors: traditional, private, public, and military. Among them, the public sector is the most inefficient. There are divisional hospitals, district medical centers, and village public clinics at the lowest level. These health care facilities lack access to sufficient medicines, especially in rural areas. The root cause of this failure is the government’s unwillingness to allocate higher budgets, train medical workers, and maintain medical supplies. The result is that even minor infections often lead to critical conditions due to scarcity of medicine. (This is an inference drawn from personal encounters during a trip in 2007 with college students to three remote villages: Maji Bum, Gaw Lun and Zupra in Hukaung township). The private sector seems to be booming, yet is not accessible for the poor. The traditional sector is on a decline due to rapid deforestation caused by indiscriminate mining and logging. Thus, herbal plants become hard to find for the traditional practitioners though traditional medicine is still in high

demand. Though the military sector is well maintained, it is also not accessible to the general public. These shortcomings have led to widespread diseases, such as malaria, cholera, small pox, diarrhea, and HIV and AIDS, which is widespread in Kachin State, often due to drug addiction and intravenous drug use. It is alleged that some corrupt local policemen even compel families to sell drugs. A silver lining to these problems is that they have attracted the attention of groups like Medecins Sans Frontieres-Holland (AZG) and World Concern, which both currently take care of HIV patients.

“Without solving political problems first, it will not be plausible to handle health and human rights problems”

The outbreak of civil war in 2011 has further aggravated these negative conditions. Many civilians have been displaced and face acute mental and physical health problems, in addition to social, economic, and political challenges. The total number now has reached more than 100,000. In principle, the government agreed to allow the UN to help reach out to camps for internally displaced persons (IDPs), yet in reality relief for the Kachin was hampered by concern for the safety of aid envoys and travel prohibitions (Irrawaddy News, 04/24/2013). IDPs are facing a dire shortage of essential goods such as drinking water, firewood, and food despite limited help from church organizations and NGOs (Kachin News Group, 04/26/2013). In Phakant, according to local people I spoke to in May 2013, the number of IDPs was more than 10,000. The fight between Tatmadaw and KIA in the Hpakant region reached its height from October 2012 to March 2013. Now the number of IDPs has come down to about 1,000, since most of these people have gone back to jade mining. The two main camps are in Maw Wan and Ngapyawtaw respectively, and are run by church leaders. As I discovered from interviewing a local resident, food shortages in the camp had prompted some IDPs to flee to their home villages, where they were killed by Burmese soldiers. These are the present dire conditions of IDPs in Kachin state. Martin Smith, of the advocacy group Article 19, aptly pinpointed the root cause of the humanitarian crisis in Burma, saying “starvation, disease, poverty, injury, genocide and other gross human rights violations arising out of armed conflict are perhaps the most extreme health emergencies” (Smith, 2003).

Having explored Burma’s grim conditions, it is obvious that without solving political problems first, it will not be plausible to effectively handle health, social, economic, and human rights problems. All these problems stem from the policies of Burma’s previous leaders such as Prime Minister U Nu, who built a nation-state based on religion, and General Ne Win, who used military power and forced assimilation to run the country. These policies have played a large role in causing Burma’s ethnic nationalities to respond with widespread armed rebellions. The civil war in 2011 therefore seemed inevitable. It continues in Kachin state and is spreading to Shan state as well (Democratic Voice of Burma, 05/09/2013). It is

natural that no effective mechanism to ensure fundamental rights (including the right to health) could be implemented under this kind of nebulous state of affairs. Burma’s ruling elite must change its perceptions of state/individual or state/ethnic group relationships, and not see them founded on the basis of “duty,” but on rather on the basis of “rights.” Though economic liberalization will be crucial to easing troubles and tensions, it is not the panacea for all political problems. There are other factors that are shaping Burma’s political destiny. Ethnic conflicts should be solved by means of fair and sincere political negotiations, not by whole-scale military offensives. Thus, how far the current so-called “civilianized” government takes measures to solve these problems will reveal how genuine its motives really are. Only when the government is sincere enough in its motives and is thoroughly pursuing the policies of change, will it be plausible for Burma to realize Article 25 of the Universal Declaration of Human Rights. ■

Open Society Foundation Programs in Southeast Asia

Open Society Foundations activities in Southeast Asia aim to help Burma transition to an open society and support efforts by civil society groups in other countries in the region to improve human rights, promote good governance, strengthen media freedoms, and effectively participate in initiatives such as the Association of Southeast Asian Nations

Comprehensive information on our work in the region, including grants, reports, and expert profiles, is available at: www.opensocietyfoundations.org/topics/southeast-asia

OSF programs which operate within Southeast Asia are:

- Burma Project
- Southeast Asia Initiative
- Open Society Fellowships
- Open Society Justice Initiative

OPEN SOCIETY VOICES

Open Society Voices is the Open Society Foundations blog that aims to showcase the ideas, opinions, and thoughts of the people and groups we work with. By giving our experts and grantees a platform to present their issues, Open Society Voices helps sharpen their thinking, and engage with a wider public in conversations about advancing open society values around the globe. Read more at: <http://www.opensocietyfoundations.org/voices>

Alumni Updates

The following snapshots provide a brief update of the activities, research interests, and professions of Open Society Scholarship Programs' alumni across the world. Email addresses have been published where permission has been given.

Asia Pacific Scholarship Consortium

2008

Chaw Su Su KHAING (Burma) is a public health analyst at the 3 MDG Fund in Myanmar. chawsskhaing@gmail.com

Nyunt WIN (Burma) is an editor with the Journal of Human Rights and Democracy published in Myanmar. nyuntwin81@gmail.com

2009

Kheang THIDA (Cambodia) is currently working for UNESCO in Cambodia and is mainly responsible for teacher education, technical and vocational training, and education for sustainable development. kheangthida@yahoo.com

2010

Zaw OO (Myanmar) is a project manager at the Burnet Institute. stephenzaw@gmail.com

Phanisone SAMOUNTRY (Laos) is a government officer at the Ministry of Agriculture and Forestry in Lao PDR. Phanisone is currently working on integrated watershed management planning for sub-watersheds in the Nam Ngum river basin region. pnsamountry@gmail.com

2011

Myo Min LWIN (Burma) is a nutrition officer at an NGO. drmmmlwin007@gmail.com

Seng Aung Sein MYINT (Burma) is a Gender-Based Violence Officer coordinator at the UNFPA working to improve health and psychosocial care access for Kachin state. sengaung24@gmail.com

Cambridge and Oxford Hospitality Program

2004

Aleksandra GRUEVSKA-DRAKULEVSKI (Macedonia) is an assistant professor at the Law Faculty of the University of St. Cyril and Methodius. aleksandrgruevska@yahoo.com

2005

Irena GRUBICA (Croatia) is a lecturer at the English Department of the Faculty of Humanities and Social Sciences, University of Rijeka. igrubica@gmail.com

2010

Yuriy LOBODA (Ukraine) is a post-doctoral researcher at the Institute of Philosophy of the National Academy of Sciences in Ukraine. yuriy.loboda@yahoo.co.uk

Civil Service Awards

2012

Mihail BELOUSIUC (Moldova) is head counsellor at the State Chancellery.

DAAD/OSF Program

2005

Julia BURAYEVA is an economic adviser at the Representative Office of German Economy in Belarus where she develops and promotes trade and economic relations between German and Belarusian companies. julia_burajewa@yahoo.de

Salome KVAVADZE (Georgia) is researching the areas of civil crisis prevention, official development assistance, universal health coverage, and disaster risk management at VENRO. salome_k@ymail.com

Tamar TSOPURASHVILI (Georgia) is an associate professor of philosophy at Ilia State University. Tamar is currently working on human rights

and gender studies issues. tamar.tsopurashvili@iliauni.edu.ge

2006

Nana PRUIDZE (Georgia) is a senior consultant at Ernst & Young in Stuttgart, Germany. nanuka_pruidze@yahoo.com

2006

Yevgen ZARUDNYEV (Ukraine) is a CEO of a law firm, Zilver, in Ukraine. Yevgen is currently undertaking research in German business law.

2007

Nina KHUCHUA (Georgia) is a PhD candidate at MARUM/GLOMAR at the University of Bremen in Germany and is undertaking research on the role of the Black Sea Commission in protecting the Black Sea against environmental pollution. n.khuchua@gmail.com

2008

Corina AJDER (Moldova) has worked as a local coordinator at the European Roma Rights Centre in Hungary and Ukraine and coordinated a community-based empowerment program for stateless and illiterate Roma. corina.ajder@gmail.com

Yuliya DENYSHCHYCH (Ukraine) is currently a senior advisor at PwC Luxembourg, specializing in antimoney laundering and internal controls.

Rustamdjan HAKIMOV (Kyrgyzstan) is a PhD candidate and researcher at WZB in Berlin.

Ziliara KOMROWSKI (Kyrgyzstan) is an associate technical consultant at deltamethod GmbH. Ziliara is developing algorithms for data analysis.

Halyna SEMENYSHYN (Ukraine) is currently a PhD student in political economy at Kassel University. Halyna is conducting research on German public banks and financial crises. halynasemenyshyn@yahoo.com

2010

Roman MELNYK (Ukraine) is interested in public telecommunications law, public construction law, and the law of peaceful protests. Roman is a professor at the Administrative Law Department of Taras Shevchenko National University in Kyiv.

Zarina MUKHTOROVA (Tajikistan) is a coordinator for monitoring at the PR and BCI Project at Sarob Cooperative (GIZ Project) in Tajikistan. celinezm@gmail.com

Kire VASILEV (Turkmenistan) is researching the Euro crisis and wealth and poverty disparities. vasilevkire@gmail.com

2011

Elina GUSEYNOVA is researching energy politics, EU gas diversification policy, and options and limitations. elina.guseynova@gmail.com

European Studies Program

2010

Kateryna RUSKYKH (Ukraine) is an analyst and program officer at the Center for Social and Economic Research (CASE) Ukraine.

2011

Nino NIKOLEISHVILI (Georgia) is a resident twinning advisor assistant at the EU Twinning Project.

Faculty Development Fellowship Program

2008

Tamar MAKHARADZE (Georgia) is an associate professor at the Ivane Javakishvili Tbilisi State University. tamunamakharadze@hotmail.com

2008/2009/2010

Tamar ALPENIDZE (Georgia) is working on a project about Georgian monasteries during the Ottoman Empire.

Fellows Help Social Work Bloom in Central Asia and the Caucasus

Lesha GREENE, Program Manager, Open Society Scholarship Programs

Open Society Scholarship Programs champion the power of the individual. One of our programs, the Social Work Fellowship, which began in 1999, has funded individuals with the aim of developing the field of social work in post-Soviet countries.

The design was simple: enable those in the region in related fields to obtain a master's degree in social work from Columbia University or Washington University in St. Louis. At its peak, the Social Work Fellowship Program operated in seven countries—Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Mongolia, Tajikistan, and Uzbekistan—offering 16 scholarships a year.

The development of a field that didn't exist or existed in a rather simple form is no easy feat. In some countries, the political situation did not lend itself to any endeavors that challenged the status quo; in others, there seemed to never be enough cohesion among the individuals for them to become a force. When we interviewed potential candidates for the program, we would try to gauge the applicant's dedication to the field and assess if he or she would go beyond what most would do. It was a calculated risk.

For the most part, it's a risk that has paid off. The recent success of the Azerbaijan Social Work Public Union (AZSWU) led me to think about how change occurs and how the Social Work Fellows have changed the landscape of social work in many countries. Alumni in Mongolia and Georgia have formed thriving associations that have not only raised the profile of social work within their respective countries, but also developed social work education.

By contrast, development in Azerbaijan had been slow. When I met with alumni during interview trips, it was easy to see their frustration with the system. For every step forward, there would be several back. For example, the success of getting funding to develop a department of social work at one of the leading public universities

was crippled by the university's bureaucracy and politics.

Progress, however, has happened when we least expected it. First came membership of the Azerbaijan Social Work Public Union in the International Federal Association of Workers. This was followed by an article published in the Guardian on the work of the AZSWU to develop social work and address disability rights.

I couldn't help but feel a bit of maternal pride. We would first meet the potential candidates during the interview process, then again at the pre-departure orientation where they would express the fears and excitement that come with leaving one's family and friends for two years to study in a language and country that are not one's own. Before they'd return to their home countries, they would share their anxiety and eagerness to return.

“The development of a field that didn't exist is no easy feat”

We would watch them graduate and send them off with a reminder about the program's goals and mission. When we visited their countries to check in with the now alumni, we heard about their progress (or lack thereof) and their criticism of seemingly unwieldy systems, but also their optimism. Although at times things seemed rather bleak, and it would have been easier for alumni to leave their countries and get jobs elsewhere that would fully utilize their skills, they did not. They forged ahead.

There are now registered professional associations in Azerbaijan, Georgia, Mongolia, and Tajikistan founded and developed by alumni of the Social Work Fellowship Program. While the program no longer exists as a stand-alone initiative (its last intake of students from the post-Soviet states was in 2012; we're offering scholarships to students from Jordan through 2013), I would categorize it as a success. It wasn't always easy, and progress came at different rates, but program alumni have shown what dedication to the field can achieve. ■

2009/2010/2011

Munkhseleuge PUREVDORJ (Mongolia) is a lecturer at the School of Foreign Service of the National University of Mongolia. Munkhseleuge just began a PhD at Central European University.

2010/2011/2012

Narantuya DANZAN (Mongolia) is an associate professor at the National University of Mongolia. Narantuya has published a book on qualitative research and is currently studying social change in Mongolia. dnaran608@yahoo.com

2011/2012/2013

Ramaz KURDADZE (Georgia) is a linguist at Ivane Javakhishvili Tbilisi State University. Ramaz is currently undertaking research studying cultural and anthropological aspects of the Georgian language. ramaz_k@yahoo.com

Georgia Scholarship Program for Education Professionals

2007

Natia ANDGULADZE (Georgia) is an assistant professor at Ilia State University. natia_andguladze@yahoo.com

2008

George ZEDGINIDZE (Georgia) is a Director of Environmental and Social Performance (ESP) at the Millennium Challenge Account in Georgia.

Global Faculty Grants Program

2013

Ablet KAMALOV (Kazakhstan) is an assistant professor at Turan University.

Global Supplementary Grant Program

2010

Milena OGANESYAN (Georgia) is an invited lecturer at the University of Georgia. Milena is researching identity processes of mixed couples in Georgia. milena.oganes@yahoo.com

Mongolian Professional Fellowship Program

2002

Dayan-Ochir KHISHIGBUYAN (Mongolia) is a project coordinator at the Rural Education and Development Project.

Muskie/FSA Graduate Fellowship Program

1999

Lela KIRIA (Georgia) is a lecturer at the Ivane Javakhishvili Tbilisi State University.

2004

Aida ALYMBAEVA (Kyrgyzstan) is a researcher at the Center for Innovative Education "Peremena." aidarochester@yahoo.com

Myanmar Master's of Health Program

2009/2010

Aye Thiri KYAW (Burma) is working on a short-term consultancy contract for a women's leadership assessment at the Gender Equality Network in Myanmar. ayethiri21@gmail.com

2010

Aung Zaw MOE (Burma) works for a non-formal education program for marginalized children in Bago, Myanmar, and previously had an Open Society alumni grant in 2012. aungzawrain@gmail.com

Palestinian Faculty Development Fellowship

2006

Nasser ABU-EL-NOOR (Palestine) is working as an assistant professor at the College of Nursing of the Islamic University of Gaza. Nasser's research interests include quality of life, spiritual care, end of life care, and health ethics. nia1@zips.uakron.edu

Ziad ZAGHROUT (Palestine) is an assistant professor at Birzeit University. Ziad is currently teaching in both the finance and public administration departments. zzaghrou@birzeit.edu

2010

Abdul Naser ARAFAT (Palestine) is an assistant professor at the Birzeit University, Department of Geography.

Palestinian Rule of Law Program

2004/2005

Hisham Abu NADA (Palestine) has worked since 2005 as an office manager in a USAID rule of law program in Gaza. Hisham was then appointed as a judge in the Gaza courts and as a part time lecturer in the law school of the Islamic University. hishamnada63@hotmail.com

2009

Motaz ALNAOUQ (Palestine) is a PhD candidate at the University of Zurich in Switzerland and is currently working on a project focusing on the protection of the right to life and human dignity.

2011/2012

Abeer HASHAYKA (Palestine) is a Child Rights Governance Officer at Save the Children in Palestine.

Social Work Fellowship Program

2000

Nazim HABIBOV (Azerbaijan) is an associate professor at the School of Social Work, University of Windsor. mail@yahoo.com

2002

Erdenechimeg TSERENDORJ (Mongolia) is the executive director of the Center for Social Work Excellence. chimeeshinee@hotmail.com

2004

Aytakin HUSEYNLI (Azerbaijan) is a founder and executive director of the Azerbaijan Social Work Public Union. aytakin@gmail.com

2006

Aygun GANDILOVA (Azerbaijan) is a child protection and advocacy manager at World Vision International in Azerbaijan. Aigunchik@yahoo.com

2007

Sholpan PRIMBETOVA (Kazakhstan) is a director of operations at the Columbia University Global Health Research Center of Central Asia in Kazakhstan. Sholpan is currently involved in research on HIV, TB, and drug abuse. sprimbetova@yahoo.com

2009

Janyl MOLDALIEVA (Kyrgyzstan) is a program development officer in the International Resources Group of the Kyrgyz Republic Transition Initiative (KRTI), part of USAID's Office of Transition Initiatives. Janyl is working with KRTI on governance and health issues. janyl.moldalieva@gmail.com

2010

Kanykei ERGESHEVA (Kyrgyzstan) is the conflict sensitivity and monitoring and evaluation expert at the Peace Building Program of the UNDP. Kanykei is currently doing an extensive analysis of all UNDP programs on conflict sensitivity. kanykei.ergesheva@gmail.com

Kanykei LATIPOVA (Kyrgyzstan) is a national family strengthening advisor at the SOS Children's Villages, Kyrgyzstan. klatipova@gmail.com

2011

Sevinj ABDULLAYEVA (Azerbaijan) is the youth development program manager for the U.S. Peace Corps.

Supplementary Grant Program Asia

2003

Aung Tu NBAWT (Myanmar) is a project manager at the Community Health and Development Center/Institute. nbawtaungtu2009@gmail.com

2004/2005/2006/2007/2009

Hsar Doe Doh MOO (Burma) works with a Karen education and environmental organization based in Thailand, and is currently undertaking research and a correlational study of post-12 refugee students' academic motivation and achievement. hsardoedoh101@gmail.com

2005/2006/2007/2008/2009

Aye Aye KHIN (Burma) works at Multimedia University, Malaysia. Aye's research focuses on developing agricultural sector modeling, forecasting and capacity building for Malaysian agricultural sector policy analysis. ayeaye5star@gmail.com

2005/2007

Aung Tu NBAWT (Burma) is a social development professional at the Community Health and Development Center in Myanmar. Aung Tu is currently leading psychosocial counseling activities in the IDP camps in Kachin State. nbawtaungtu2009@gmail.com

2006/2007

Mi Mi Aung KHIN (Burma) is a health and social scientist and helps Myanmar adolescents increase their knowledge on reproductive health and sexuality.

2006/2007

Mi Mi Aung KHIN (Burma) studied health and social science, and has applied this knowledge by working for a local NGO.

2007/2008

Nway Nway MAR (Burma) has been an office/finance manager at the Open Society Institute (Burma) since 2012. nwaymar@gmail.com

2007/2008/2009/2010

Naw Hser COO (Burma) is an interpreter for the UNHCR in Thailand. lovehsercoo@gmail.com

2008

Hnin Pwint SOE (Burma) is doing thesis research for an MA in Education in Auckland, New Zealand, and is conducting research on the perceptions of teachers and students of the role of extracurricular activities in higher education. joylayy86@gmail.com

2008/2009/2010

Sai Sam Phoon SENG (Burma) is the education and foreign affairs officer of the Shan Nationalities League for Democracy.

2009/2011/2012

Su Zar MON (Burma) is a mental health supervisor at Première Urgence - Aide Médicale Internationale. Su's research is about job burn-out and the organization effect on Myanmar's mental health social workers.

2010

Aye Thet OO (Burma) is a project monitoring and database associate at the Internal Organization for Migration in Myanmar, and is currently monitoring Global Fund project activities in Mon state.

2011/2012

Luiz KIADTIKHUNPHAIBUN (Burma) is a peace and political analyst at the Karenni National Progressive Party in Myanmar. Luiz is currently working with a youth group on peace monitoring in Karenni State. kaypoe@gmail.com

2011/2012

Maung Seng LAWN (Burma) is researching the challenges of nation-building in Burma.

UK Programs

2002

Ines SUCIC (Croatia) is a research associate at the Institute of Social Sciences Ivo Pilar.

2005

Bahija ALIYEVA (Azerbaijan) is a program analyst on gender issues at the UNFPA Azerbaijan. behije_alvan@yahoo.co.uk

Olimjon BOBOKALONOV (Tajikistan) is a value chain development specialist at GIZ/AFC Consultants International GmbH in Tajikistan. Olimjon is currently working on private sector development project supporting small and medium enterprises and business development services providers countrywide. olim.bobokalonov@giz-psd.de

Zornitsa VLADOVA (Bulgaria) has been working as an economist in the Economic Research and Forecasting Directorate of the Bulgarian National Bank since 2007. Zornitsa is currently head of the monetary and financial research division. zornitsa_vladova@yahoo.com

2006

Fajar ANUGERAH (Indonesia) is currently working with Hivos as a project manager for their SWITCH-Asia project for sustainable consumption and production in Indonesia and the Philippines fajar.anugerah@gmail.com

Olena BOYTSUN (Ukraine) is the founder and president of the All-Ukrainian Charity Foundation, Chess for Children, which aims to discover the potential of every child through engagement with the game of chess. olena.boyt-sun@gmail.com

2007

Nurzhan DZHUMABAEV (Kyrgyzstan) is a social safeguards specialist at the Asian Development Bank in Kyrgyzstan. Nurzhan is also involved in various land and agriculture-focused research projects across the country. nurdzhan_db@hotmail.com

Ziyoda KURBANOVA (Tajikistan) is researching international development issues in Central Asia. She is currently pursuing her second MA from the Graduate Institute of International and Development Studies in Switzerland.

Martin OSSIKOVSKI (Bulgaria) is currently working as an assistant professor at the University

of National and World Economy. Currently, Martin's research interests are in the field of history of pre-modern economic thought and media ethics. ossikovski@gmail.com

Marjan PETRESKI (Macedonia) is an assistant professor and vice-dean for research at the University American College, Skopje. Marjan is doing research in monetary and development economics and recently won a Japanese award for outstanding research. marjan.petreski@uacs.edu.mk

Osman RRACI (Kosovo) works for the Enterprise Growth Program in Kosovo operated by the European Bank for Reconstruction and Development. Osman has been published in the Eastern European Economics Journal and has been awarded the Olda Radzyner Award. mrraci@hotmail.com

Arie RUHYANTO (Indonesia) is a researcher at the Faculty of Social and Political Universitas Gadjah Mada, Indonesia. Arie's research area is regional development, with a current focus on Eastern Indonesia. arry_96ers@yahoo.com

2008

Aigul KASYMOVA (Kyrgyzstan) is an independent analyst working in the area of human rights and transitional justice.

Aya MARAQA (Jordan) is currently working as a grant officer at the Foundation for the Future. ayamaraqa@hotmail.com

Ester Dina SIHOMBING (Indonesia) is an education UK program manager at the British Council-Indonesia in Jakarta. esterdina@yahoo.com

Margita SOLDI (Croatia) is a learning and development manager and founder of Linguistified of Croatia. Linguistified is a business specializing in translation and preparation courses for Cambridge ESOL exams and e-learning in the language field. margita@linguistified.com

2009

Marija BRUJIC (Serbia) holds a PhD in ethnology and anthropology from the University of Belgrade, and is also a research assistant there. Maria's current areas of interests are the Europeanization of Serbia, migration studies, and visual anthropology. jabuchica011@gmail.com

Mihail BURUIANA (Moldova) is a senior lecturer in the Faculty of Law at Moldova State University. mburuiana@gmail.com

Ketrina CABIRI (Albania) is working on the research topic of "Internal Democratization of Political Parties in Albania and Kosovo" and has published a monograph on constitutional law in Albania. ketrina9@yahoo.com

Aliya ISKAKOVA (Kazakhstan) is working on a comparative study of quality assurance in higher education in Kazakhstan and the United States. ali209@yandex.ru

Yauheni PREIHERMAN (Belarus) is the policy director at the Discussion and Analytical Society Liberal Club (Belarus). Yauheni is currently working on a public administration reform project and developing a concept for the future of EU-Belarus relations. yauheni.belarus@gmail.com

Nara RAKHMATIA (Indonesia) is interested in researching APEC issues and diplomacy.

Tijana STEVANOVIC (Serbia) is an architect and PhD researcher at Newcastle University, UK. Tijana is currently researching architectural theory and criticism about New Belgrade's post-Yugoslav context for architectural production. tijana.stevanovic@gmail.com

Elena TERZI (Moldova) is a public policy consultant at the National Participation Council, a leading policy research and advocacy platform in Moldova. Elena works in the fields of good governance, institutional development, and human capital policy.

2010

Anera ALISHANI (Kosovo) works as a researcher at ILIRIA College in Kosovo. Anera is interested in researching labor market studies, education, financial crises, and other topics in Kosovo and the Western Balkans. anera.alishani@gmail.com

Fitri Adi ANUGRAH (Indonesia) is a communication manager at United Cities and Local Governments in Indonesia. fitri.adianugrah@gmail.com

Nemanja DZUVEROVIC (Serbia) is an assistant professor at the University of Belgrade in the Department of International Relations.

Safet HADZIMUHAMEDOVIC (Bosnia and Herzegovina) is an anthropologist researching landscape and memory in Bosnia. Safet is currently completing a doctoral thesis and is teaching part-time at Goldsmiths, University of London.

Bermet IMANBERDIEVA (Kyrgyzstan) is a national HIV coordinator at USAID's Quality Health Care Project in Kyrgyzstan. bermet.iman@gmail.com

Mahboobullah ILTAF (Afghanistan) is president of Jawan Parmakhtag Consulting Company and project design advisor with Ministry of Agriculture, Irrigation and Livestock. He is currently writing a white policy paper on governance and democracy. mahboob.iltaf@gmail.com

Shpend KURSANI (Kosovo) is a senior researcher at the Kosovar Institute for Policy Research and Development-KIPRED. Shpend's research focus

at the institute is on Western Balkans regional affairs and foreign affairs and security. shpendole@gmail.com

Albana MERJA (Albania) is a research fellow at the Group for Legal and Political Studies, a think tank based in Kosovo. Albana is concentrated on European conditionality for Kosovo and has a special research interest on the visa liberalization process for Kosovo. albanamerja@hotmail.com

Milica STOJNIC (Serbia) is a teaching assistant at the Faculty of Economics and Engineering Management in Serbia. Milica is currently undertaking the project under the EU Lifelong Learning Programme for Serbia. milicastojnic85@gmail.com

Answer STYANNES (Indonesia) is a program officer at the Asian Human Rights Commission in Hong Kong. Answer's work covers torture, freedom of religion, and other human rights issues in West Papua and different parts of Indonesia.

2011

Ochir ALTANSUKH (Mongolia) is an associate professor at the National University of Mongolia and is currently researching environmental science. altansukh22@yahoo.com

Mariam ASANISHVILI (Georgia) is currently working for a local NGO in Montenegro called MANS, where she is a project assistant in their Freedom of Information Project. mariam_asanishvili@yahoo.com

Gulden Gursoy ATAMAN (Turkey) is currently pursuing a PhD in journalism and working as a research assistant at the University of Ankara. Gulden is undertaking research on "Human Rights in Public Discourse in Turkey in the 1990s." guldengursoy@gmail.com

David CHIGHOLASHVILI (Georgia) works at GeoAIR, a contemporary art organization/residency in Tbilisi. David is also doing a PhD in anthropology at Tbilisi State University, working predominantly in visual and urban anthropology.

Nino EDILASHVILI (Georgia) is a research intern at the Bulgarian Gender Research Foundation in Sofia. Nino is currently undertaking research on gender stereotyping in media and advertisements in Bulgaria. nedilashvili@gmail.com

Nino GACHECHILADZE (Georgia) is a research analyst at ACT, a research company in Georgia. Nino is currently working on a research project about societal attitudes toward gender equality in Georgia, implemented upon request by the UNDP. ninogachechiladze@act-gr.com

Gulnaz ISABEKOVA (Kyrgyzstan) is a manager at Naryn LLC in Kyrgyzstan. Gulnaz is one of the founders of HOME (Housing Opportunities

Meals Empowerment) Initiative Group, which supports the homeless in Bishkek. gulnazka.isabekova@gmail.com

Mochammad Faisal KARIM (Indonesia) is a lecturer at the Department of International Relations, Bina Nusantara University.

Spiro LAZAROSKI (Macedonia) is a teaching assistant at the Faculty of Economics in Prilep, Macedonia. Spiro is currently working on a PhD dissertation. spiro.lazaroski@gmail.com

Kamila LUKPANOVA (Kazakhstan) is a guest-editor at the first online magazine in Kazakhstan. Kamila also works as a PR consultant in the sphere of branding, promotion, and marketing strategy. kamila.lukpanova@gmail.com

Nino MACHARASHVILI (Georgia) is a journalist and project manager for Visualizing the News in Georgia and researches data journalism and data visualization. ninka.ma@yahoo.com

Dragana MILEUSNIC (Serbia) is a research fellow at the Center for Entrepreneurship and Economic Development in Podgorica, Montenegro. Dragana is currently undertaking research studying climate change and energy policies in the Balkan region. draganamileusnic@hotmail.com

Salome MINESASHVILI (Georgia) is a research intern at the Center for Social Sciences, a think tank in Georgia. Salome is researching Georgia's foreign policy for the organization's Foreign Policy and Security Program. sminesashvili@gmail.com

Marjan PETRESKI (Macedonia) is an assistant professor and research vice-dean at the University American College, Skopje. marjan.petreski@uacs.edu.mk

Ereza Pula (Kosovo) is a research fellow at the Group for Legal and Political Studies in Kosovo. Ereza's research is concentrated in the economic sphere, specifically in unemployment and the gender pay gap. erzapula@gmail.com

Budiarti RAHAYU (Indonesia) is a research officer at Strategic Asia Indonesia, a public policy consulting firm. Currently, Budiarti is working with the Asian Development Bank for an education project and UNDP for a decentralization-related project. budiartirahayu@gmail.com

Nita SHALA (Albania) works as a legal associate for the KLG law firm and as an expert at the Ministry of Integration in the Republic of Albania. Nita is now a Phd candidate in International Law at the University of Geneva. nitashala@gmail.com

Natasha STAMENKOVIKJ (Macedonia) is conducting a six-month internship at the Humanitarian

Law Center as a scholar of the OSF Human Rights internship program. nstamenkovikj@yahoo.com

Arevik STEPANYAN (Armenia) is an assistant lawyer at the Registry of the European Court of Human Rights in Strasbourg, France. stepanyanarevik@hotmail.com

Berat THAQI (Kosovo) is a researcher at the GAP Institute in Kosovo. While working at GAP, Berat has undertaken research in different fields of economic issues in Kosovo. berat.thaqi@hotmail.com

Edin ZORONJIC (Montenegro) is a business analyst in Porto, Montenegro. edinvz@gmail.com

2012

Elona TOSKA (Moldova) is a PhD student at Oxford exploring the sexual practices of HIV-positive adolescents. Since 2012, Elona has been the executive director of the Albanian chapter of United World Colleges, an international education movement. elona.toska@gmail.com

Undergraduate Exchange Program

2005

Marko AKSENTJEVIC (Serbia) is a project coordinator at MikroArt. marko.aksentijevic@gmail.com

2007

Ivan PANDZIC (Croatia) is a trainee at the the Institute of Croatian Language and Linguistics in Croatia. ivan.pandzic@gmail.com

2008

Danijela CVETKOVIĆ (Serbia) is an MA candidate in sociology at the University of Belgrade, Serbia. Danijela studies human rights and changing identities and practices under the experience and influence of national and transnational movements. daniyela.cvetkovic@gmail.com

Miloš DJERIĆ (Serbia) is an MA candidate in sociology at the University of Belgrade, Serbia and is interested in studying the diaspora coming from the former Yugoslavia region. milos.djeric@gmail.com

Igor DOBROSAVLJEVIC (Macedonia) is currently undertaking research about linking business incubation in Europe and Africa at a university of applied sciences in Germany.

2009

Milana LAZIC (Serbia) is a human security coordinator within the Social Inclusion and Poverty Reduction Unit in Serbia. Milana is studying for an MA in international security and writing a thesis on concepts of social exclusion and security. milanalazic@gmail.com

2010

Aleksandra SIMOSKA (Macedonia) is a board member at the Youth Can association. a.simoska@yahoo.fr

2011

Anastasiia GRYSCHCHUK (Ukraine) has received a BA in international economic relations in Ukraine. The topic for Anastasiia's thesis was "The Impact of Globalization on Financial Systems of Countries in Southeast Asia." nastik@fromru.com

Anastasiia KRYZHANIVSKA (Ukraine) is head of the NGO FRI. Mykolaiv FRI recently implemented more than 10 social projects in different spheres. Anastasiia is currently undertaking research and focusing on English translation and interpretation. anastasiya@yandex.ru

Ognjen KOJANIC (Serbia) graduated from the Department of Ethnology and Anthropology at the University of Belgrade. Ognjen is starting an MA in sociology and social anthropology at Central European University in fall 2013. ognjenkojanic@gmail.com

Dana MUNTEAN (Moldova) is a national communication consultant at the Diaspora Relations Bureau. dana@grape.md

Sandra RADULJ (Bosnia and Herzegovina) is graduating from the economics department at the University of Banja Luka and has an interest in the economy of Bosnia and other countries in the region. sandraradulj@yahoo.com

OPEN SOCIETY FELLOWSHIP

The Open Society Fellowship supports individuals seeking innovative and unconventional approaches to fundamental open society challenges. The fellowship funds work that will enrich public understanding of those challenges and stimulate far-reaching and probing conversations within the Open Society Foundations and in the world. For detailed information on the Open Society Fellowship and for grantee profiles, please visit: www.opensocietyfoundations.org/about/programs/open-society-fellowship

Contribute to the next Scholar Forum

COVER TOPIC

Social Movements

REGIONAL FOCUS

Eastern Europe

The 17th edition of *ScholarForum*, to be produced in early 2015, calls on Scholarship Programs' grantees and alumni to submit articles, opinion pieces, and short essays on the issues of Social Movements. The 17th edition will also focus separately on Eastern Europe, and writings about any topics related to this region are welcome as well.

COVER TOPIC: Social Movements

Social movements are alliances of like-minded individuals who hold the belief that their actions can encourage social change. These groups may be large or small and informal or cohesive collectives, but all hold the ability to influence the progress of a society. In recent years, social movements—from Occupy Wall Street in the USA to anti-Mubarak protesters in Egypt—have gained attention for their ability to captivate the attention of audiences and constituencies around the world. Some social movements gained attention for their cause but failed in their ultimate goals, while others have led to lasting institutional change. We invite our grantees and alumni to illuminate aspects of these movements through their research, experience, expertise, and opinions. Essays and photos are welcome and encouraged.

Length: 750–1000 Words

REGIONAL FOCUS: Eastern Europe

Recent months have seen massive change for Ukraine: from increasing economic ties to Russia, to Russian troops ensconced in Crimea. As a new phase in the country's future begins, we look to our grantees to continue expressing their thoughts on Ukraine and the surrounding region. We invite your opinions, essays and research pieces on social, political, environmental, and educational issues facing Ukraine or any of its neighbors, such as Belarus, Poland, Czech Republic, Slovakia, Hungary, Romania, Bulgaria and Moldova.

Length: 750–1000 Words

Personal Essays and Fictional Pieces

We welcome any thoughts you have on your experiences during your scholarship: your reflections, opinions, and photographs are welcome. Works of original fiction that can be serialized can also be submitted for editorial consideration.

Length: 300–750 Words

Alumni

Updates from Scholarship Programs' alumni are key to evaluating our work and provide inspiring material for future leaders in your countries and beyond. Please feel free to send us a brief note on your current professional activities, research interests, or any calls for collaboration at an upcoming event or conference.

Academic Showcase

To build on the wealth of knowledge and critical inquiry Open Society Scholarship Programs' grantees create during their scholarship and beyond, we invite all scholars to submit summaries or abstracts of their research to be published in the *ScholarForum*'s Academic Showcase section.

Submissions should be short and relate to an area of research undertaken as part of an MA or PhD degree, or to independent research conducted in the field. Due to space constraints, Scholarship Programs will only print a selected number of pieces, but will try to send comments from the editorial board to each author.

Guidelines for Academic Showcase submissions:

Abstracts:

Abstracts are concise texts encapsulating the whole body of research to be addressed in a longer paper or presentation to follow. Outline the topic of research, the main objective of the research or the research problem, the methodology employed, the main findings, and your conclusions.

Maximum length: 350 words

Research in Progress Essays:

Authors need to be cognizant of the educated but general nature of *ScholarForum*'s audience; therefore specialized terms and concepts should be concisely explained in simple language. Articles should include footnotes and references, and any ideas expressed by other authors should be referred to in Harvard-style citations within text.

Introduction: Include a brief statement on the thesis/rationale to be developed in the article, as well as a short summary of the findings and recommendations. Outline what the work is part of (i.e., PhD, MA, independent research).

Analysis and Discussion: Clearly and concisely explain any of the theories, concepts, and terminology, citing concrete examples. Keep in mind that the audience will be outside of your discipline.

Recommendations: Outline your recommendations or aspects for further study or research.

Conclusion: Concisely summarize the content of the work above. Maximum length: 1500 words

Letters to the Editor

Letters to the Editor regarding the content of *ScholarForum* are welcome and will be printed at the editor's discretion.

Maximum length: 300 words

Please feel free to enquire with the editors if you have any questions, or submit your work to scholarforum@opensocietyfoundations.org.

Deadline for all Submissions: June 30, 2014



ScholarForum

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