

6-21-2011

## Situating the Tuberculosis Epidemic in the Russian Federation's Prison Systems

Lisa Doktor

*The University of Western Ontario, ldoktor@uwo.ca*

Mbaka Wadham

*The University of Western Ontario, mwadham@uwo.ca*

Follow this and additional works at: <http://ir.lib.uwo.ca/totem>



Part of the [Social and Cultural Anthropology Commons](#)

---

### Recommended Citation

Doktor, Lisa and Wadham, Mbaka (2011) "Situating the Tuberculosis Epidemic in the Russian Federation's Prison Systems," *Totem: The University of Western Ontario Journal of Anthropology*: Vol. 19: Iss. 1, Article 9.

Available at: <http://ir.lib.uwo.ca/totem/vol19/iss1/9>

This Article is brought to you for free and open access by Scholarship@Western. It has been accepted for inclusion in Totem: The University of Western Ontario Journal of Anthropology by an authorized administrator of Scholarship@Western. For more information, please contact [kmarsha1@uwo.ca](mailto:kmarsha1@uwo.ca).

---

# Situating the Tuberculosis Epidemic in the Russian Federation's Prison Systems

## Keywords

tuberculosis, TB, prisons, medical anthropology, social disease, marginality, Soviet Union, Russia

## Creative Commons License



This work is licensed under a [Creative Commons Attribution-Noncommercial-No Derivative Works 3.0 License](https://creativecommons.org/licenses/by-nc-nd/3.0/).

## Situating the Tuberculosis Epidemic in the Russian Federation's Prison Systems

Lisa Doktor and Mbaka Wadham

*I am firmly persuaded that a great deal of consciousness, every sort of consciousness, in fact, is a disease.*  
—Fyodor Dostoyevsky (1821-1881) in *Notes from the Underground* (2008:10)

### *On the origin of diseases*

Tuberculosis (TB) has become a world-wide epidemic that continues to escalate seemingly uncontained in certain areas. Not only are TB cases increasing, but so is the complexity of the disease. The emerging types of TB are multi-drug resistant TB (MDR TB), which does not respond to the first-line drug treatments (Lafontaine et al. 2004:246), while extreme drug resistant TB (XDR TB) does not respond to the majority of drugs used in treatment. As such, containing this disease is becoming increasingly difficult with these new types of TB. Due to the global nature of this epidemic, our focus will be on the prison system in the Russian Federation where we posit that the adverse prison conditions coupled with the deficient healthcare system have propagated the TB epidemic in the prisons.

The Russian Federation continues to lead countries with one of the largest number of prisoners, as it did when it was the Soviet Union. In a book detailing the penal system in the Soviet Union, Shifrin (1980) wrote:

We are speaking of innocent human beings persecuted for thinking differently; reading 'forbidden' philosophical, political, or religious books; posting up notices; putting up a flag; demanding private instruction for their children; or undertaking a private commer-

cial initiative. These are the 'crimes' for which a Soviet citizen can be imprisoned (9-10).

This passage is an example of how unjust the political system was in the Soviet era. The aforementioned criteria for arrest led to large numbers of people being incarcerated during this period. With such a high prison population, it is then plausible to assume that the Soviet penal system was unable to accommodate such numbers, leading to adverse prison conditions.

To understand the prevalence of tuberculosis in the Russian Federation prison system today, we will examine the socio-cultural and political factors in effect in this region. Additionally, a brief history of the prison system prior to and following the formation of the Soviet Union will be provided in order to further understand the contemporary conditions in the Russian Federation prison system. Further, the political state of the region will be explored prior to addressing infectious diseases in prisons.

The spread of disease often follows along the fault lines of inequality, and the tuberculosis epidemic in the Russian Federation prison system is no exception. The long period of political unrest that occurred in the Russian Federation greatly contributed to the tuberculosis epidemic. We will briefly examine TB, focusing on the symptoms of a patient and how the disease is spread throughout a population. The conditions of the correctional facilities have had a vast impact on the rapid spread of the disease and will be explored in this work through a series of fictional accounts from prisoners who represent different time periods in the history of the Russian penal system as created by the authors of this paper.

The fictional accounts were written in order to humanize the hard facts within

this paper. Often people's stories can get lost within the formal lines of research; we wanted to make them heard. Finally, we will explore the correlation and implications between the spread of HIV/AIDS and TB in prisons through the integration of the World Health Organization's TB prevention program, Direct Observation of Treatment (DOTS).

\* \* \*

***Pyotr Zakharov***

*February 27, 1998*

*Privet.* My name is Pyotr Zakharov and I have tuberculosis or TB. I am being interviewed because people are interested in finding out where I contracted TB. You know, when I was much younger a lot of my friends had TB. Some of the lucky ones are still around today but most have passed away. Oh no... that is not where I got TB from. Today, I hear a lot of people complaining that more people in the communities are contracting TB, and that it is coming from prisons. Everytime I hear that, I cannot help but wonder if things are ever going to change. It does not surprise me much that TB is being passed along in the prisons and later in the communities when people are released from the prisons. To understand what is happening, you have to know the history of this prison system.

Where was I born? I was born right here in 1920, a few years after the Russian Revolution had happened, which actually lead to the creation of the Soviet Union. My Papa Sasha told me that after the Revolution, things just seemed to take a turn for the worst. With Vladimir Lenin as the founder, the Bolsheviks—the Marxist Russian Social Democratic Labour Party—introduced a different kind of penal system. Although they incorporated changes into the judiciary system, it remained fairly similar to its predecessor. With the Bolsheviks in power, my family thought that things would

improve; people would no longer be thrown into prison for no apparent reasons. I guess things changed at face value; the police supposedly arrested only guilty individuals, and conducted investigations to obtain damning evidence as well. Whether true or not I do not know, but I do remember thinking that the sentences for petty crimes seemed to be absurdly long. It all depended on the judge, as well as the conditions in the prison. For example, Dyadya Andrei, my Papa's younger brother, was thrown into prison for stealing some bread although he was only seventeen years old and dirt poor! Papa told me that Dyadya Andrei was in prison for four years and eventually made some long-term friends. He learned from his friends that some prisoners were nice people who were forced to steal things in order to survive, while others had committed serious crimes like murder. I remember growing up with Dyadya Andrei advising me to avoid trouble or I might do something stupid that would land me in jail. One time after one of these talks, he mumbled something like, "not that it will even matter because murderers get off after six months". When I asked Papa about it, he told me that Dyadya Andrei was still upset because a man in prison had been released after six months although he had committed murder. Dyadya Andrei later found that it was all because they did not have enough space for him. Some people have even suggested that he was released mainly because he belonged to the upper class, and he got special treatment. Can you believe that? Of course this was not fair, but that was the way things were.

Where was I? Oh yes, the history of the prison system. From what I have heard, to survive in prison you had to know people. Basically prison life reflected real life outside the cells because the upper class somehow managed to have it easier than everybody else. Listen to me going on without telling you about one of the most

memorable—and not for good reasons—prison systems here. Have you heard of the Gulag? Well, Gulag is an acronym for Glavnoe Upravlenie Lagerei or Main Camp Administration<sup>1</sup>, which was part of the government. In simpler terms, the Gulag was in charge of putting prisoners to work. It used prisoners like work horses! Along with Stalin, members of the Gulag strongly believed that prisoners could be reformed by putting them to work. This way of thinking proved inhumane because many people died working for the Gulag in all those harsh conditions. I know I make it sound like people had choices, but they did not at all. Although I am describing this, it is very difficult to speak of it. It is bringing back memories that I wanted to forget.

I just remembered that you wanted to know how I got TB. Well I got it from my friend Mikhail who narrowly managed to leave that death-hole they call prison. Those prisons were horrible...just horrible! How did they think they could do that to people? Did I tell you about my Dyadya's experience? Yes? You know old age...I guess I forgot.

\* \* \*

The fictional account of Pyotr Zakharov contains facets concerning life in the then-called Russia, which later became the Soviet Union after the Revolution of 1917. Prior to the Revolution, Russian prisons contained a large number of prisoners, primarily young, poor male peasants. Most of these peasants were convicted of crimes against the state and/or against religion (Jakobson 1993:1). Between 1910 and 1915, the number of prisoners convicted on the above grounds rose steadily from 16,000 to 35,000 (Jakobson 1993:10). With such numbers, it is evident that wrongful and unjust convictions must have occurred in such an oppressive environment. However, not all prisoners fared terribly in

these conditions. It was observed that the social strata inside prisons mirrored those outside the prisons in that convicts from the upper classes maintained certain rights as opposed to the common prisoner. Through bribes and other means, the upper class criminals were separated from the commoners and were able to purchase their own clothing and food (Jakobson 1993:11). The prison system merely propagated the social inequality that existed outside when it had the potential to effectively balance this inequality.

Prior to the Revolution of 1917, the Bolsheviks were so strongly opposed to the government that they considered persons convicted for crimes against the state as their allies. Once in power, Bolsheviks viewed the same prisoners as counter-revolutionaries because they had dared to oppose the state. As such, they were separated from the socialists (Jakobson 1993: 19). This proved problematic once the Bolsheviks had to employ literate prisoners to act as guards and wardens in the prisons due to lack of funding for the penal system. These literate prisoners were the counter-revolutionaries and, in return for the preferential treatment given to the socialists, the counterrevolutionaries exacted revenge on the socialist prisoners. Unfortunately, some of the positions were later filled by prisoners who in turn maltreated other prisoners as had been modeled by the counterrevolutionaries (Jakobson 1993:26). Such behaviour set precedence for all guards and wardens to come, leading to the further maltreatment of prisoners. The following personal account by Aleksandr Wills is an illustration of the treatment that prisoners received upon incarceration.

\* \* \*

***Aleksandr Wills***

*May 17, 1998*

I understand that this interview is about prison systems. It is not? Well, it makes sense that I would automatically think prison systems when you mention the political state of the Soviet Union. When did I become involved in politics? You can say that I was born into politics. When you grow up seeing injustices all around you with seemingly no hope for a better life, you either choose to fight or remain passive and let things happen to you. I have watched other people let things happen to them. The funny part is that regardless of whether or not they fought or let things happen to them, people almost always ended up in the same place: suffering.

I remember this like it was yesterday. It was a Sunday and I was walking around the neighbourhood with my girlfriend Amaliji Dashkova. We were very, very close. Actually we wanted to get married. We were discussing how exactly that would happen because the only family she had left was her brother, who just happened to be in prison. Amaliji was adamant that her brother be present at her wedding. I remember looking at her and saying, "I wish this government would stop arresting innocent people. They need to arrest one another for their corruption". Almost out of nowhere, there were police officers arresting us for committing a crime against the state. I was furious, but more importantly I was trying to tell them that Amaliji had nothing to do with it. She had not said anything except that she wanted her brother to be at her wedding. Of course it was set in their minds that we were both guilty and they carted us off to prison. Although they arrested us for no apparent reason, they conducted an investigation that "indubitably" proved our guilt. I still do not know how they determined that, but that was how things were during that time. This all

happened sometime in August of 1925, and it turns out that it would be last time I would ever see Amaliji.

I had absolutely no idea the amount of suffering waiting for me in that prison. I knew of people in prison who said the conditions were horrible but nobody can ever prepare you for the conditions. From the get-go, the place was horrible. The guards were mean and there was barely any space in the cells. You have to remember that at this time the Gulag was in full-swing, operating under the auspices that re-educating the prisoners would ensure that they did not commit further crimes after their release. In truth, I believe it was a way of getting free labour from the prisoners. We were told that we had to work. So very early in the morning, even when the temperatures were extremely cold, we were told to go outside and work. We were told that the harder we worked, the easier we would have it back in the cells. What that means is that you would get a little more food than those who did average work. After some time, the classification of average work changed, so that people who were not seen to work hard were denied food. Those who could not handle the conditions died, but the lucky ones managed to live to see another hard day.

\* \* \*

Arrests such as those of Aleksandr Wills and Amaliji were not uncommon once the Gulag discovered that it could use prisoners as workers on construction projects. It was observed that political prisoners were subjected to harsher treatment than ordinary criminals (Weiler 2004:33). As such, the prison conditions that Aleksandr mentions were rather commonplace. While recognizing its inhumanity, the Gulag believed that it had the potential to re-educate the prisoners while improving the Soviet Union at the same time. However, the

Gulag realized that it did not have a sufficient number of prisoners, which led to targeted arrests. Young, healthy males were favoured as convicts because they would be able to withstand the atrocious conditions that they would face upon incarceration (Jakobson 1993:119). Additionally, Caucasians and dark-skinned individuals were targeted as “the fourteen non-Russian republics were forced to endure the Soviet leadership’s brand of colonialism and ethnocentrism” (Weiler 2004:89). With such procedures in place, specific groups of people were being placed in dangerous situations with the potential for contracting infectious diseases such as TB. As such, certain groups—young healthy males as well as Caucasians and dark-skinned people—had a higher likelihood of contracting diseases in prisons than others.

The use of prisoners in construction projects demonstrated its success through the completion of the White Sea-Baltic Sea and Moscow-Volga canals (Jakobson 1993:119). However, the Gulag failed to realize that these construction projects would adversely affect cities in the Soviet Union in the years to come. Industrialization begun by the Gulag created a new source of contamination as factories and public buildings had to dispose of the waste, mainly into local canals, ponds and rivers (Filtzer 2010: 26). Filtzer’s (2010) detailed study of living conditions between 1943 and 1953, with a focus on health, hygiene and living conditions, described the four interrelated elements required to keep a city clean: water, sewers, waste treatment, and removal of all those wastes that could not go into the sewers (26). The cities in the Soviet Union suffered from a lack of sufficient water and sewerage systems making the cities unsanitary and unbearable. Filtzer detailed that it was not uncommon to see mounds of human excrement flowing through the streets, a condition which

persisted well into the 1950s (Filtzer 2010: 25). In fact, Moscow was described as a city that “had all the ingredients necessary for an outbreak of a major epidemic” (Filtzer 2010: 32). The lack of sewerage systems polluted the lands on which people lived, work and travelled, while also increased the exposure to pathogens. The existence of such unsanitary and unsafe living conditions outside of prisons can be used as another measure by which to judge the far worse conditions within the Soviet penal system. In the following section, Borys Petrovski’s account will shift the focus towards the impact of the Gulag and its penal system on the present-day penal system in Russia.

### *Health in post-Soviet Russian correctional facilities*

The collapse of the Soviet Union and the establishment of the Russian Federation in 1991 caused the end of the Gulag penitentiary system. Their economy was completely revamped into a market-based one which significantly lowered government budgets that went towards public health (Spiegelburg 2007:35). The country’s government was in pieces but there was an attempt to create a new judiciary system. The system immediately began to strictly eliminate any support for the KGB<sup>2</sup> by handing out lifetime sentences to anyone who even discussed it in public. There was a severe deficit of judges and attorneys to attend to the thousands of cases of accused men; consequently, they were thrown into the prison system and into limbo (Garret 2000:185). These correctional facilities were so overcrowded that the average amount of cell area per convict was approximately three square metres (Bobrick et al. 2005:36). Although this average was the legal space requirement, few facilities could actually provide it. Hundreds of thousands of inmates served their sentences in cells as small as thirty square meters. Spending an

entire jail sentence sardined in a miniscule cell gives ample opportunity for an infectious airborne virus to spread to as many host bodies as possible. The rate of prison deaths caused by tuberculosis reached 49.2% by 1997 (Bobrick et al. 2005:38). A high percentage of people can house the disease without showing any symptoms yet continue to pass it along through innocent breaths. As such, many prisoners who were released back into their communities were infected with tuberculosis which rapidly spread through the civilian population. It is thought that up to 20% of visible civilian tuberculosis cases and 57% of smear-positive cases originated from contact with ex-prisoners (Bobrick et al. 2005:31).

The unstable situation within the Russian prison system was not easily amenable to change. Unfortunately, due to a high rate of mutation, the strains of tuberculosis that were circulating in the prison systems by the 1990s had become resistant to all available treatments. Lack of consistent treatment schedules and prevention techniques caused tuberculosis to evolve into an undefeatable ailment. This left many prisoners infected with multidrug-resistant (MDR) and extensively drug-resistant (XDR) tuberculosis which is nearly impossible to treat effectively. The treatment of these two viruses demands a closely monitored program that the system could not provide (Bobrick et al. 2005:43).

The aforementioned information will be explained by Borys Petrovski, a fictional convict who was placed in the Russian Prison system in 1993.

\* \* \*

***Borys Petrovski***

*November 29, 1998*

Sweat dripped down the back of Borys Petrovski's neck as he leaned against the cement wall of his cell. This was day three of an unforgiving fever which had

drawn all of the energy from his body and the cold wall was the only comfort which soothed him. As a beam of sunlight came piercing through his tiny bare window, he focused on keeping his eyelids tightly shut; if they opened, his skull would shatter in pain. He was surrounded by the stench of bodies which had gone unwashed for weeks, and achingly sharp whiffs of excrement crept into his nostrils every time he inhaled. He felt proud of the location he had claimed; wall space was scarcely available, and he had traded his designated washing time for its access. After five years in the system, he was used to sharing his life with people he barely knew and could hardly stand to be around. He could stand the putrid smells and the way his body reacted to one small meal of meek cabbage stew per day. He never got used to the waiting. He waited for his turn to use a real bed for those precious six hours a week; he waited to be shuffled through to the work area chaperoned by guards who were equipped with AK-47s and vicious dogs; and he waited for the end of his sentence.

It was almost time for Borys' daily meal, and he was working up the appetite to force it down. He slowly drew in stale air through his clenched teeth; it was all he could do to stop himself from dry heaving at the thought of yesterday's meal. "It's just tinned cabbage", he thought to himself. "Pretend it is Anna's cabbage".

The thought of his ex-wife gave him slight relief from his fever. She was the reason he was trying to endure this wave of illness. His prison sentence was over in twenty-seven days, and he would be free after almost five years of the same cell, the same food. The same guards who peered down at him over their guns with their judging sneers. If any of the guards discovered his fever, he would be shuffled to another cell crowded with sick men. If he was diagnosed with tuberculosis, he would

be kept there and most likely ignored for weeks. His paperwork would almost certainly be lost, and he could be left behind for weeks, if not months past his release date.

Borys' feeding group was finally summoned, and the small group of men were escorted to the eating area. Along with a bowl of stew, the men received a tiny paper cup that contained a large red pill. Yesterday's pill was yellow, he recalled as he washed the lozenge down with his equally small cup of water. After ten minutes the men were then led back to their cell, yet again having to reclaim a spot to continue to sit. And wait.

*December 26 1998*

He was finally out.

His first few gulps of unrestrained icy Siberian air caused him to recoil in pain as his lungs harshly rejected the eager breath. The chronic cough was wearing his muscles down and he struggled to recover from the stark open air. He almost longed for his miniscule prison cell, the walls as his strength which kept him from falling apart and revealing his illness. Instead, he composed himself and climbed aboard the old van which would take him back into town.

He could go home.

\* \* \*

### ***HIV/AIDS and the tuberculosis epidemic***

Borys' case is similar to thousands of others and these prisoners face another deadly epidemic related to the spread of new strains of tuberculosis. In the post-Soviet era, HIV/AIDS has led to the increase in Russian prison tuberculosis cases; it causes the deterioration of the host body's immune system, therefore making the host highly susceptible to contagious bacterial diseases. Alongside the emergence of the tuberculosis epidemic in the early 1990s was one of

HIV/AIDS, both of which were fuelled by the catalyst of political unrest (Schwalbe et al. 2008:155). HIV/AIDS, a blood borne virus, is most commonly spread through unprotected sexual intercourse and intravenous drug use with shared needles. Prison systems have extremely high rates of intravenous drug users who do not have constant access to sterilized needles; often when one inmate acquires a needle, they will use it and then immediately share it with others from the prison community. However, many prevention programs to curb the HIV/AIDS epidemic in Russian prisons have focused on the distribution of condoms. Some programs do demonstrate the importance of cleansing syringes with bleach, though this has not been proven to abolish the virus; regardless of its efficacy, this technique is not widely used. No prevention programs include a clean needle exchange program as stigmas about drug users and convicts still control the expenditure of the prevention programs' funds. This will continue until those in charge realize that the only way they can effectively impact the spread of the virus is by providing the prisoners (and civilian drug users) with consistent access to clean needles.

### ***Post-Soviet Russian public health measures***

Although the rates of tuberculosis in the Russian prison system were astronomically high in the 1990s, in 2000 there was a sharp decline in reported cases and deaths (Bobrick et al. 2005:38). Several factors could have affected the collection of data for this year. First of all, a large amount of infected prisoners may have been released before the sampling was done and they may have died after they were released, excluding them from the data (49). Second, as seen in Borys Petrovski's case, many prisoners could have slipped through the

cracks and were not properly tested for the disease. Although all of these factors may have contributed to the decline in numbers, there was also a significant development in prevention and detection programs.

The World Health Organization (WHO) has a designated universal program for the prevention of tuberculosis called DOTS. The Russian Federation has implemented this program but has yet to reach the ideal control rates of 70% case detection and 85% cure rates (WHO 2006:6). In order to achieve those goals, DOTS tries to change how the public health system functions as well as related government policies regarding tuberculosis treatment and the ways in which tuberculosis is diagnosed and treated, so that there is a higher chance that treatment will be properly executed. For example, a sputum smear test would be offered which targets the populations whom are most at risk and ensures that those who test positive report for secondary tests to monitor the disease. The program also mandates the installation of a treatment program of standardized chemotherapy which is strictly monitored and has been shown to successfully lower the risk of patients acquiring MDR or XDR tuberculosis. A program used to tabulate and interpret data contributes to the quality of patient care as they are monitored throughout their treatment.

In countries that demonstrate a link to HIV/AIDS and tuberculosis epidemics, DOTS establishes beneficial links between the two disease prevention programs (Maher 1999:8). Although the Russian Federation has implemented this program, there are still many fundamental flaws which continue to minimize its effectiveness. The doctors who supervise the programs are not able to competently lead as they have no management training, resulting in the slow and inefficient distribution of treatment and education (Mosneaga, 2008:176). Politicians

have also attempted to minimize the importance of negative statistics in order to prevent a negative impact on the government's social morale. Monseaga et al. (2008:184) have proposed recruiting primary health care workers to solve these issues. These workers would directly influence at-risk populations by working with individuals and small groups; they would offer information concerning prevention techniques and provide them with direct health care (184). Another research team pointed out the lack of focus on the penal system; Cegielski et al. (2007) stated that the DOTS program needs to specifically address MDR tuberculosis among high risk populations such as the prison system (38). They also urged national commitment to band together to assist the Russian Federation with this issue (Cegielski et al. 2007).

### ***Conclusion***

The social and political conditions in place prior to and after the formation of the Soviet Union, specifically in prisons, set precedence for the conditions in prisons today. Due to a corrupt political and judicial system, numerous people were convicted of crimes that could be considered questionable or were not crimes at all. As such, prisons were soon overflowing with prisoners. Furthermore, the forced labour camps of the Gulag enabled the government to use prisoners for construction projects. The prison conditions were less than humane, exposing the prisoners to several diseases.

Through our fictional accounts, we wished to illustrate the suffering people have endured by assigning the suffering to specific voices. Lila Abu-Lughod (1991) criticized the concept of "culture" as it worked to enforce separations among groups of people while creating coherent, bounded and discrete ahistorical communities (138). She believes that the term denies differences

within cultures as it is assumed that people within a culture are all the same and unchanging. In this paper, the use of personal narrative works to provide a voice to the experience without homogenizing it to the entire community.

The fall of the Soviet Union due to political instability resulted in drastic changes. These changes caused many important issues to go unnoticed for almost a decade. Many social issues such as poverty, malnutrition, homelessness, and unemployment were subsequently neglected. The lack of funding for the Russian Federation's public health system alongside of the abhorrent prison conditions caused the absence of a consistent tuberculosis treatment program, alongside poor surveillance techniques and outdated knowledge of the disease.

The hundreds of thousands of Russian citizens who were imprisoned during the 1990s were exposed to a treatable bacterial disease, simply because of their place in society. The majority of the prisoners who entered the system came from marginalized groups and many were unemployed. The government was placing the majority of its funding on the health of the Russian civilians, instead of focusing on the root of what was spreading the bacterial diseases. The actual prison health program is a distinct system from the public health program, and more emphasis is placed on the system which caters to free citizens (Schwalbe 2008:161). A large prejudice was placed on prisoners as they were considered to be of lesser worth than the free population, and so their health and wellbeing was overlooked. The techniques the health system used to detect the disease were not effective; the government issued a mass screening of tuberculosis but failed to screen the groups of people who were most at risk (Schwalbe 2008:162). Furthermore, the Russian population housed a deep stigma

against people who had contracted tuberculosis as it is a disease associated with the poor and the convicted members of society. It took the deaths of prison staff from the disease to enact effective prevention programs. Since they were members of the free population, their health and well-being sparked some media interest and urged change at a quicker pace.

### Acknowledgements

We would like to thank everybody who has helped to pave our ways in anthropology thus far. Special thanks to Dr. Jorgensen for making us believe in ourselves and to Dr. D for continuously challenging us. Lisa, thank you for wanting to take the chance.

### Notes

<sup>1</sup> Applebaum 1964: xv

<sup>2</sup> From 1954 to 1991, the KGB operated as the national security agency of the Soviet Union who during the Cold War was instrumental in sending many political and ideological dissidents or those viewed as such to camps run by the Gulag.

### Works Cited

- Abu-Lughod, Lila 1991. "Writing Against Culture" In *Recapturing Anthropology: Working in the Present*. Richard Fox (ed.) Pp. 137-162. Santa Fe: School of American Research Press.
- Applebaum, Anne 1964. *Gulag: A History*, 1<sup>st</sup> edition. New York: Doubleday.
- Bobrick, Alexey., Kirill Danishevski, Ksenia Eroshina et al. 2005 "Prison Health in Russia: The Larger Picture" *Journal of Public Health Policy* 26(1): 30-59.

- Cegielski, Peter J., Lakhbir S. Chauhan, Daniel P. Chin, et al. 2007. "The Global Epidemiology and Control of Tuberculosis" In *New Topics in Tuberculosis Research*. Donald D. Spielgelburg (ed.) Pp. 1-70. New York: Nova Science Publishers.
- Dostoyevsky, Fyodor 2008. *Notes from Underground*. Maryland: Serenity Publishers.
- Filtzer, Donald A. 2010. *The Hazards of Urban Life in Late Stalinist Russia: Health, Hygiene, and Living Standards, 1943-1953*. New York: Cambridge University Press.
- Garret, Laurie 2000. *Betrayal of Trust: The Collapse of Global Public Health*. New York: Hyperion.
- Jakobson, Michael 1993. *Origins of the GULAG: The Soviet Prison Camp System, 1917-1934*. Lexington, KY: University Press of Kentucky.
- Lafontaine, Dominique., Andrei Slavuski, Natalia Vezhnina et al. 2004. Reckoning the After/Math of War in Guatemala. *The Lancet* 363 (9404): 246-247.
- Maher, Dermot 1999. What is DOTS? World Health Organization. Accessed November 30, 2010. [http://whqlibdoc.who.int/hq/1999/WHO\\_CDS\\_CPC\\_TB\\_99.270.pdf](http://whqlibdoc.who.int/hq/1999/WHO_CDS_CPC_TB_99.270.pdf)
- Mosneaga, Andrei., Elana Yurasova, Richard Zaleskis, et al. 2008. "Enabling Health Systems in Tuberculosis Control: Challenges and Opportunities for the Former Soviet Union Countries" In *Health Systems and the Challenges of Communicable Diseases*. Richard Coker, Rifat Atun, and Martin McKee (eds). Pp. 154-170. New York: McGraw Hill Press.
- Schwalbe, Nina., Jeffrey Lazarus and Olusoji Adeyi 2008. "HIV/AIDS and Tuberculosis Control in Post-Soviet Union Countries" In *Health Systems and the Challenges of Communicable Diseases*. Richard Coker, Rifat Atun, and Martin McKee (eds). Pp. 154-170. New York: McGraw Hill Press.
- Shifrin, Avraham 1980. *The First Guidebook to Prisons and Concentration Camps of the Soviet Union*. Uhdlingen: Stephanus Edition
- Weiler, Jonathan D. 2004. *Human rights in Russia: A Darker Side of Reform*. Boulder, Colorado; London: Lynne Rienner Publishers
- World Health Organization 2006. The Stop TB Strategy. Accessed November 30, 2010. [http://whqlibdoc.who.int/hq/2006/WHO\\_HTM\\_STB\\_2006.368\\_eng.pdf](http://whqlibdoc.who.int/hq/2006/WHO_HTM_STB_2006.368_eng.pdf)