



WAGING

PEACE

AROUND

THE

WORLD



THE
CARTER CENTER



1992-93

Message From President Jimmy Carter Chairman Of The Board Of Directors

When Rosalynn and I founded The Carter Center in 1982, we envisioned it as a place where people could come together to resolve their differences. Today, the Center's activities are focused on this and more: democratization and development, global health, and urban revitalization, encompassing 13 core programs in more than 30 countries. But while our scope of activities has expanded, our mission remains the same: to bring ideas and resources together to improve people's lives.

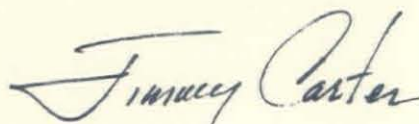
The Carter Center has grown into an internationally respected nongovernmental organization dedicated to fighting disease, hunger, conflict, poverty, and oppression in America and abroad. Its reputation is a tribute to our dedicated staff and to the generosity of the partners who support our efforts.

Our method everywhere is twofold. First, we identify creative ways to address problems that affect the most vulnerable people—those who have access to the fewest resources. Then we build partnerships to implement solutions that achieve lasting improvements.

We are alert to situations where limited action now can prevent future disasters and their far-reaching consequences. Because the Center and its programs are not aligned politically with any particular party, group, or government, we can step in where governments and other agencies cannot go and mobilize world leaders and other eminent people to effect change.

On September 1, 1994, The Carter Center will take another important step in its development. Our four separate entities—The Carter Center Inc., The Carter Center of Emory University, Global 2000 Inc., and The Carter-Menil Human Rights Foundation—will be brought together into a single charitable organization simply called The Carter Center. In addition, the Center will become a separately chartered, independently governed part of Emory University, with which it has been linked since its founding. These changes will ensure that The Carter Center will continue with its mission and basic character after Rosalynn and I no longer are active.

As president of the United States, I was uniquely placed to take measure of the terrible problems plaguing our world. But I also had the opportunity to see that solutions can be found—solutions that sometimes fall little short of extraordinary. The Carter Center is committed to forging the links among people and ideas that make such progress possible.



Carter Center Mission Statement

The Carter Center brings people and resources together to promote peace and human rights, resolve conflict, foster democracy and development, and fight poverty, hunger, and disease throughout the world. The nonpartisan Center, which is affiliated with Emory University, builds partnerships to address complex and interrelated problems. By drawing on the experience and participation of former U.S. President Jimmy Carter and other world leaders, by fostering collaboration and avoiding duplication of existing efforts, and by combining effective action plans with research and analysis, the Center can achieve goals beyond the reach of single individuals or organizations. The Center is guided by the principle that people, with the necessary skills, knowledge, and access, can improve their own lives and the lives of others.



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Introduction

As the 21st century approaches, the world is in constant transition. Old walls have been torn down, but many barriers remain that keep people from living healthy, productive lives. The challenge is to create a world that gives every man, woman, and child the opportunity to live in peace.

The nonprofit Carter Center was established by Jimmy and Rosalynn Carter in 1982 to further this vision. Building on the strong academic base at Emory University, the Center forges partnerships and provides access to resources that change lives. In the developing world, the Center brings parties in conflict to the negotiating table, monitors multiparty elections in countries working to build democracies, works to alleviate human rights abuses, fights debilitating disease, and teaches farmers to grow more food on the same amount of land. At home, the Center is leading a citywide effort in Atlanta to address problems associated with urban poverty and decay and is sharing those results with cities across the United States.

"I have watched The Carter Center's programs unfold and have been quite overcome by the extraordinary energy that President Carter brings to his work," said former Emory President James Laney, now U.S. ambassador to South Korea. "That energy can only be fed by someone who is living out his deepest convictions."

President Carter offers his own view. "If The Carter Center could be remembered for one thing, I would like it to be for the promotion of peace and human rights for all peoples."

THE CARTER CENTER AT A GLANCE

The Carter Center is dedicated to fighting disease, hunger, poverty, conflict, and oppression through collaborative initiatives in the areas of democratization and development, global health, and urban revitalization. Former U.S. President Jimmy Carter and Rosalynn Carter founded the Center in 1982 and remain deeply involved in its activities.

STRUCTURE AND SCOPE

The Center is a nonprofit organization consisting of four separate entities: The Carter Center Inc., Global 2000 Inc., The Carter Center of Emory University, and The Carter-Menil Human Rights Foundation. It also houses and works closely with The Task Force for Child Survival and Development.

The Carter Center currently operates 13 core programs and initiatives active in more than 30 countries, including the United States. The Center:

- is nonpartisan and nonsectarian.
- avoids duplicating the efforts of other agencies or institutions.
- forms partnerships with and among institutions working on the same problems.
- translates academic and "think tank" research and analysis into programs that directly improve people's lives.

Programs are directed by resident experts, many of whom hold academic appointments at Emory University. These experts design and implement activities in cooperation with President and Mrs. Carter, networks of world leaders and other eminent people, and partners in the United States and abroad.

The Center's 18-member Board of Advisors and 114-member Board of Councilors provide its programs with the advice and support of prominent national and regional figures (see page 37 for members).

On September 1, 1994, The Carter Center will expand its board of directors into a board of trustees with 22 members. Concurrently, its four constituent entities will be consolidated into a single charitable organization called The Carter Center. It will become a separately chartered, independently governed part of Emory University, with which the Center has had a long-standing affiliation.

MAJOR ACHIEVEMENTS

In the United States:

- Launching The Atlanta Project, a grass-roots effort to fight urban social problems through initiatives in health, housing, education, public safety, and community and economic development.
- Working to erase the stigma of mental illness for the 50 million Americans who experience mental disorders every year.
- Establishing a network of faith groups in major U.S. cities to promote preventive health care in their communities.

Internationally:

- Monitoring multiparty elections in Haiti, Ghana, Mexico, Panama, Paraguay, Guyana, Zambia, Nicaragua, and the Dominican Republic.
- Orchestrating the global campaign to eradicate Guinea worm disease by December 1995 (only the second time, after smallpox, that a disease affecting people will have been eliminated).

- Forming the International Negotiation Network of world leaders to help resolve civil conflicts peacefully in areas and countries like Sudan, Burma, Liberia, Ethiopia, and the Korean Peninsula.
- Working in Ethiopia, Zambia, and Guyana to strengthen the economic and institutional foundations of their nascent democracies.
- Establishing The Carter-Menil Human Rights Foundation Prize with Dominique de Menil to honor proponents of human rights around the world.
- Helping families in Benin, Ghana, Sudan, Togo, Nigeria, and Tanzania to increase corn and wheat yields.
- Collaborating with The Task Force for Child Survival and Development to:
 - lead a strategy that increased the worldwide immunization rate for children from 20 to 80 percent.
 - coordinate the distribution of the drug Mectizan[®] to 10 million people in Africa and Latin America to prevent river blindness.

(President and Mrs. Carter's participation in Habitat for Humanity is independent of The Carter Center.)

LOCATION AND FACILITIES

The Carter Center is located in a 35-acre park approximately 2 miles from downtown Atlanta. Four circular interconnected pavilions, totaling nearly 100,000 square feet, house offices for the former president and first lady and the Center's programs. The complex includes the nondenominational Cecil B. Day Chapel, other conference facilities, and administrative offices. The Carter Center also owns the nearby Kirbo Building, which provides additional office space.

The Jimmy Carter Library, which adjoins The Carter Center, is owned and operated by the National Archives.

FUNDING

Construction of the Center's facilities was financed by private donations from individuals, foundations, and corporations. These donors, together with multilateral development assistance programs, also support the current annual operating budget of \$25 million.

STAFF

The Center employs approximately 250 persons, based primarily in Atlanta. Field representatives have been stationed in Guyana, Liberia, Ethiopia, Nicaragua, and other countries.

INTERNSHIPS

More than 100 undergraduate and graduate students, mostly from Emory University, work with Center programs year-round for academic credit or practical experience. (For more information, see page 41.)



“The resolution of conflict is not just a matter of mediation and negotiation skills. It’s a matter of conducting a democratic process in which opponents learn to deal with each other in peaceful ways.” – Harold Saunders, director of international affairs, Charles F. Kettering Foundation, and Carter Center INN

Core Group member. • Peace and freedom are precious commodities requir-

DEMOCRATIZATION

ing special care and nurturing. At The Carter Center, programs in conflict res-

olution, human rights, African governance, Latin American and Caribbean

studies, and global development collaborate to achieve and maintain democra-

AND DEVELOPMENT

cy. By monitoring elections, the Center helps oversee formal transitions to

democracy in the Western Hemisphere and Africa. After elections, Center

staff work with new democracies to secure freedom by strengthening the econ-

omy, establishing institutions to safeguard human rights, improving agricultur-

al production and health care, and promoting sustainable development.



photo by Anthony Allison

AFRICAN GOVERNANCE PROGRAM

"A parallel vote tabulation (PVT) conducted by Z-Vote from 350 randomly selected voting sites confirmed what voters and observers were gradually but with some astonishment coming to realize had occurred—a landslide victory for the MMD (Movement for Multi-Party Democracy). The PVT confirmation of the results was instrumental in facilitating a rapid handover of power from the vanquished to the victors."
— Africa Report, Winter 1992

*"Elections are important and should be emphasized because they represent a revealing moment in a country's democratizing history."
— Keith Klein, director of programs for Africa and the Near East, International Foundation for Electoral Systems*

The African Governance Program of The Carter Center of Emory University (CCEU) promotes democracy in sub-Saharan Africa by monitoring multiparty elections and by working with governments to build solid institutional and social foundations for emerging democracies. In his role as a private citizen, Jimmy Carter is often called upon to communicate with individuals or governments to break down barriers. Projects to date include:

- Zambia: In October 1991, President Carter led an international observer team to monitor registration and voting processes and to verify the first free and fair multiparty elections in Zambia's history. The program continues to assist Zambia's new government.

Thousands of Zambians celebrated free elections in October 1991. Elections were held under the watchful eye of an international monitoring team led by President Carter.

- Ghana: Post-election projects to consolidate democracy are under way in Ghana, where, in November 1992, a CCEU observer team monitored that country's first democratic presidential elections in more than 30 years. CCEU staff have promoted dialogue between the government and opposition parties, which boycotted subsequent legislative elections. CCEU plans to take part in a similar project in Uganda that will lead to monitoring general elections.
- Liberia: CCEU staff are helping Liberian civic groups and the electoral commission prepare for democratic elections. They are providing technical assistance on elections, civic and voter education, training for local election monitors, and advice on post-election consolidation. In November 1993, CCEU staff negotiated the release of nine Liberians and one Nigerian held by rebel forces in Liberia for six weeks.

LELAND FELLOWS EAGER TO HELP REBUILD LIBERIAN HOMELAND

"There are many people back home who get up early every morning, anxious to improve their lives, improve the conditions of their country. I am jealous of them now, anxious to return home and continue my work," said Samuel Sarbagh, one of six 1993 Mickey Leland Fellows from Liberia. Like his colleagues, Mr. Sarbagh was hopeful about the peace agreement signed in July 1993 to end three years of civil war in his country.

The Mickey Leland Community Development Fellowship Program brings participants from developing countries to Atlanta to develop organizational, leadership, and consensus-building skills. The eight-week program is named for the late Texas congressman who advocated development and emergency aid to Africa. Fellows participate in internships, workshops, seminars, tours, and discussions with nongovernmental and nonprofit community programs, in and around Atlanta. Once the Fellows return to their countries, they use the teaching tools, workshop models, and new relationships with U.S. organizations to help them manage the community projects they oversee.

Like Mr. Sarbagh, Leland Fellow Ellen George-Williams is using her new skills as executive director of the Christian Health Association of Liberia. One of her most valuable experiences was exploring ways to build trust and respect among citizens.

"There is a great lack of trust because of the war in Liberia," she said. "If I listen to your problems and you listen to mine, we can find solutions. But we have to listen."

DEMOCRACY IN ZAMBIA: AN ONGOING PROCESS

In 1991, Zambian President Kenneth Kaunda and opposition party leaders invited President Carter to observe the country's forthcoming elections. CCEU's African Governance Program helped design the international monitoring program known as Z-Vote for the elections held that fall.

"The Zambian election was a watershed event in the democratization of Africa," said Richard Joseph, director of the African Governance Program. "It was the first major African country in which an internationally known incumbent leader and his party were defeated in national elections. The elections also were largely free of violence, and the transfer of power occurred smoothly."

But elections by themselves do not guarantee democracy. In April 1992, CCEU and the Zambian Election Monitoring Coordinating Committee convened a workshop in Zambia on the role of civil society in a plural democracy. Out of that workshop emerged the Foundation for Democratic Process, a Zambian organization that would oversee the new democratic system, monitor future elections, and promote human rights and civil liberties. Two months later, the Zambian government sent a delegation to The Carter Center for a conference on democracy, growth, and business opportunities in that country.

Today the country is looking ahead to national multi-party elections in 1996. "Zambia continues to enjoy considerable peace and stability in a troubled region," said Dr. Joseph. "Political scientists view the capacity of

nations to conduct two or three successive elections according to constitutional guidelines as the distinguishing characteristic of a consolidated democracy. Very few African countries have reached that threshold."



Democracy in Africa is on the move. The number of countries that The Carter Center classifies as having introduced pluralist democracies jumped from four in 1989 to 15 in 1993. The African Governance Program charts changes in government throughout the continent in its newsletter, Africa Demos.



photo by Billy Howard

COMMISSION ON RADIO AND TELEVISION POLICY

"Producers and others from 'Sesame Street,' The Nashville Network and U.S. religious programs all have the same goal—tap into the vast radio and television audience in the former Soviet republic." — The Atlanta Journal-Constitution, November 17, 1993

"Television penetrates even the most isolated corners of habitation and gathers audiences of unprecedented dimensions. Though by no means the only actor, it is central to the democratic process." — From *Television & Elections*, by Ellen Mickiewicz, director, Commission on Radio and Television Policy, and Charles Firestone, director, *Communications and Society Program*, The Aspen Institute

In 1990, as a result of talks between Jimmy Carter and former Soviet President Mikhail Gorbachev, the Commission on Radio and Television Policy was formed to address the social, political, and economic impact of television in the United States and abroad. Chaired by President Carter and Eduard Sagalaev, president of Russia's first independent television station and the Confederation of Journalists' Unions, the Commission includes prominent policy-makers and media specialists from the United States and all 15 New Independent States (NIS) of the former Soviet Union.

In 1992, the Commission added "radio" to its name to recognize the medium's role in disseminating information and training. Today, the Commission is a joint initiative

The 1993 meeting of the Commission on Radio and Television Policy focused on developing policy to nurture growth of free enterprise between media companies in the United States and the former Soviet Union. The Commission is led by Co-Chairs Eduard Sagalaev (left) and President Carter and Director Ellen Mickiewicz, Carter Center Fellow.

of The Carter Center of Emory University and Duke University. Highlights of the Commission's activities include:

- developing models of fair coverage of elections and of ethnic minorities for use by television stations and governmental policy-makers around the world in countries where new press freedoms are being introduced.
- co-publishing with The Aspen Institute the guidebook *Television & Elections*, which has been distributed worldwide in English, Russian, and Ukrainian. Editions in Armenian, French, Georgian, Kazakh, Lithuanian, and Spanish are forthcoming. The book *Television/Radio News & Minorities* also was co-published recently.
- drafting, at the request of independent stations in the NIS, a Charter of Media Independence.
- hosting a forum for media companies from the United States and the NIS to meet and discuss opportunities for collaboration.

The Commission recently invited its first three Visiting Media Policy Fellows from Armenia, Belarus, and Russia to participate in discussions at The Carter Center, CNN and Duke.

A GUIDING HAND FOR TELEVISION AND RADIO STATIONS IN THE FORMER SOVIET UNION

In the wake of the 1991 breakup of the Soviet Union, television and radio stations are springing up across the continent. Some 500 stations operate in Russia alone, and more than 100 television and radio stations are on the air in the Baltic states. While opportunity abounds, the new stations must learn how to secure funding, equipment, and programming to operate successfully.

To address these challenges, the November 1993 meeting of the Commission on Radio and Television

Policy focused on developing policy to nurture the growth of free enterprise among media companies in the United States and the NIS.

During the meeting, Commission Co-Chairs Jimmy Carter and Eduard Sagalaev announced formation of MIR, the first independent, multistation broadcast network in the former Soviet Union. The network originally operated three hours per week on radio and television in nine founding states and has increased to five hours per week.

"The length of the broadcasts will grow with time," said Commission member Gadilbek Shalakhmetov, chair of the International Television and Radio Broadcasting Co. "The difficulty is having our broadcast teams be in tune with each other, but we are getting there. So far, we are on the right track."

RUSSIAN PRESIDENT'S DECREE CITES COMMISSION'S WORK

Russian President Boris Yeltsin endorsed the Commission's work before the December 1993 national elections in Russia.

The endorsement was included in President Yeltsin's statute on information guarantees for the Russian election campaign. Signed in October 1993 at the Kremlin, the decree called for guarantees of democratic elections, the right to form election associations and campaigns for media exposure, and creation of a Citizens' Information Arbitration Tribunal to monitor access to and fairness of media coverage for the elections.

During the campaign, researchers from Russia and CCEU analyzed news coverage of the campaign. It was the first time in Russia's history that all registered parties had access to the country's major television stations to present their views. Researchers shared their results with the Tribunal.

"Virtually all the coverage at the national level was neutral, that is, without editorializing," said Ellen Mickiewicz, director of the Commission on Radio and Television Policy. "This stands in marked contrast to coverage of the April 1993 referendum, which was very partisan in favor of the government's position."

THE BIG PICTURE: TELEVISION, PEACE, AND QUALITY OF LIFE

"The United States, as well as the nations of [the former Soviet Union]—and indeed most of the nations of the world—are undergoing major, interrelated changes in their telecommunication systems. ...

"There is a need for governments, businesses, organizations, and citizens in all countries to develop long- and short-term strategies to address these transformations to enhance democracy and their economic, cultural, and intellectual well-being. ... Since the Commission's beginning, it has become increasingly obvious that the proper use of television is especially important to peace, racial and ethnic harmony, democracy, human rights, and the enhancement of education, health, and quality of life. This is particularly true where freedom of speech has risen to unprecedented levels."

— Excerpted from the "Report of the Commission on Radio and Television Policy," 1993

"Never, since the time of Peter I, has Russia acknowledged a foreign entity as the basis for inspiration within." — Eduard Sagalaev, co-chair, Commission on Radio and Television Policy



photos by Michael Schwarz

CONFLICT RESOLUTION PROGRAM

"Two prominent INN members, Archbishop Desmond Tutu of South Africa and former Costa Rican President Oscar Arias Sánchez, are among the Nobel Peace Prize winners in Thailand this week. On Thursday, Bishop Tutu and Mr. Arias traveled to refugee camps on the Thai-Burmese border to hear refugees' tales of murder, torture, and rape at the hands of government soldiers." – The Atlanta Journal-Constitution, February 19, 1993

"The suffering of children in war—through death, injury, trauma, disruption of education, and drop in basic health—bleeds the country's future. This human suffering has an impact on a war-stricken society for many generations to come." – Lisbet Palme, chairperson, Swedish National Committee for UNICEF, and Carter Center INN Council member

The Carter Center of Emory University's (CCEU's) Conflict Resolution Program marshals the expertise of peacemakers worldwide to address the suffering caused by armed conflicts. Through its International Negotiation Network (INN), the program monitors conflicts weekly and, upon request, offers advice and assistance to resolve disputes. The INN includes world leaders and experts from international organizations, universities, foundations, and others who seek peaceful ways to end conflict. The INN Council, a small group of well-known peacemakers, and the INN Core

The INN Council draws on the experience of its members to address the suffering caused by war. Council members include (clockwise from left) Marie-Angélique Savané (Senegal), Olusegun Obasanjo (Nigeria), Desmond Tutu (South Africa), and Lisbet Palme (Sweden).

Group of advisers provide direction and leadership to the program.

The INN focuses on the resolution of civil conflicts, which constitute most of the deadliest wars. Guided by Jimmy Carter, the INN has brought experts together in annual consultations to address conflicts in Angola, Armenia, Azerbaijan, Burma, Cyprus, Haiti, the Korean Peninsula, Kosovo, Liberia, Macedonia, Sudan, and Zaire. Program activities to date include:

- In 1989, President Carter and the INN hosted peace talks between the Eritrean People's Liberation Front (EPLF) and the Government of the People's Democratic Republic of Ethiopia (PDRE) in Atlanta and in Nairobi, Kenya. CCEU currently is working with the transition government and opposition parties in Ethiopia to build strong human rights protections, to prepare for the country's first democratic elections, and to improve public health.
- The Carter Center hosted a meeting in 1993 with the Sudan People's Liberation Army United (SPLA-United) to explore possibilities for reconciliation with the SPLA, another southern Sudanese faction. President Carter and CCEU staff continue to communicate with all parties to the conflict.
- Since 1992, the INN has worked to increase international attention on Burma as a step toward resolving the conflict there. During a 1993 consultation, INN Council members Archbishop Desmond Tutu and former Costa Rican President Oscar Arias Sánchez traveled with other Nobel laureates to Thailand to urge the release of fellow laureate Daw Aung San Suu Kyi, held under house arrest in Burma since 1989.
- The INN has begun a project on preventive diplomacy to reduce ethnic tensions in the Baltic States and with Russia. The goal is to identify solutions to problems before they escalate into major conflicts.

THE INN COUNCIL

- Oscar Arias Sánchez**, former President of Costa Rica and Nobel Laureate (1987)
- Tahseen Basheer**, former Egyptian Ambassador to the Arab League of States and former spokesman for Anwar Sadat
- Jimmy Carter**, former U.S. President
- Hans Dietrich Genscher**, former Foreign Minister, Germany
- Olusegun Obasanjo**, former Head of State, Nigeria
- Lisbet Palme**, Chairperson, Swedish National Committee for UNICEF
- Javier Pérez de Cuéllar**, former U.N. Secretary-General
- Marie-Angélique Savané**, former Special Adviser to the U.N. High Commissioner for Refugees
- Sir Shridath Ramphal**, former Secretary-General, Commonwealth of Nations
- Desmond Tutu**, Anglican Archbishop of Cape Town, South Africa, and Nobel Laureate (1984)
- Cyrus Vance**, U.N. Special Envoy to Macedonia and former U.S. Secretary of State
- Elie Wiesel**, Founder, Elie Wiesel Foundation for Humanity, and Nobel Laureate (1986)
- Andrew Young**, former U.S. Ambassador to the United Nations

INN CORE GROUP

- Tommy Koh**, Director, Institute of Policy Studies, National University of Singapore
- Christopher Mitchell**, Professor of International Relations and Conflict Resolution, George Mason University
- Robert Pastor**, Director, Latin American and Caribbean Program, The Carter Center
- Kumar Rupasinghe**, Secretary-General, International Alert
- Harold Saunders**, Director of International Affairs, Charles F. Kettering Foundation
- Brian Urquhart**, Scholar-in-Residence, International Affairs Program, Ford Foundation

Vamik Volkan, Director, Center for the Study of Mind and Human Interaction, University of Virginia

Peter Wallensteen, Professor, Department of Peace and Conflict Research, Uppsala University

CARTER CENTER SUPPORTS PEACE IN LIBERIA

CCEU has played an ongoing role in the Liberian peace process. After civil war began in December 1989, CCEU began working through the INN. During the early peace process, an INN representative attended summit meetings in Yamoussoukro, Côte d'Ivoire. Representatives from Liberia attended the 1992 INN consultation held at the Center. President Carter, Rosalynn Carter, and representatives from the Conflict Resolution and African Governance programs also have met with leaders in Liberia.

Liberians became hopeful in July 1993 when warring factions signed a peace agreement in Cotonou, Benin. But the fighting continues. CCEU has formed a consortium of U.S.-based nongovernmental organizations known as Project Liberia: Peace, Elections, and Democracy. Members include the African-American Institute, Friends of Liberia, the International Foundation for Electoral Systems, and the National Democratic Institute for International Affairs.

"The Carter Center has been closely involved in assisting the peace process in Liberia. We expect to play a major role, together with other U.S. and international organizations, to promote reconciliation, civic education, and free and fair elections under the terms of the Cotonou agreement."

— Former President Jimmy Carter



photo by Ken Moore

GLOBAL DEVELOPMENT INITIATIVE

"The most successful cases of development assistance have involved deployment of assistance in a coordinated manner for the development of human and institutional capacity. ... A sustained partnership among private foundations, universities, aid agencies, and international institutions has been its essential feature."
— Uma Lele, graduate research professor of Food and Resource Economics, University of Florida, and director, Global Development Initiative, CCEU

"A new vision of development is emerging. Development is becoming a people-centered process whose ultimate goal must be the improvement of the human condition."

— U.N. Secretary-General Boutros Boutros-Ghali

Traditionally, the success of providing aid to developing nations is measured by economic growth. Political, environmental, social, and cultural factors are considered less important. In addition, aid is often coordinated inadequately. To compound these shortfalls, developing nations are often ill-equipped to use the aid they received. Persistent problems in the developing world, shrinking aid budgets, and a changing global environment have increased the need for new models of development cooperation.

In December 1992, U.N. Secretary-General Boutros Boutros-Ghali and President Jimmy Carter co-chaired a conference involving international donor agencies, recipient countries, and other interest groups to explore ways to improve the development aid process. Held in collaboration with the Carnegie Commission on Science, Technology, and Government, the meeting led to creation

Guyanese President Cheddi Jagan congratulates President Carter upon receiving the Order of Excellence, Guyana's highest honor. President Carter received the award for his contribution to the restoration of democracy there.

of the Global Development Initiative (GDI) at The Carter Center of Emory University (CCEU). GDI seeks to marshal support among international donors and recipient countries to better coordinate and deploy development aid. The goal is to help developing nations address their needs in partnership with the donor community.

The first collaborative effort is underway in Guyana. There, GDI staff are working with the government to create a strategy for sustainable development in consultation with all interest groups: nongovernmental organizations; environmental, social, political, and industry groups; and the university and scientific communities. International donors also are cooperating with GDI and the government of Guyana to ensure the plan succeeds. A similar project is under way in Ethiopia, and another is planned in Albania.

GUYANA: A CASE FOR SUSTAINABLE DEVELOPMENT

Free and fair elections are not enough to help nations achieve and sustain democracy.

"You have to make sure that the new democratic government, if it has little experience in governing, is capable; that its long-range plans are comprehensive; and that it works in harmony with other elements within the country," said President Carter while in Guyana to attend the recent Caribbean Group for Cooperation in Economic Development (CGCED) meeting. President Carter led an international delegation to observe 1992 national elections in Guyana.

The CGCED meeting was an opportunity for international financial institutions, bilateral donors, and others to take a comprehensive look at development in Guyana. President Carter also called on the nation's political parties, private businesses, environmentalists, students, women, and ethnic groups to help chart a path toward sustainable development.

"I am here to help my friends in Guyana and my friends in the donor community to understand one another and to build upon the good work that The

World Bank, the International Monetary Fund, and others are doing," President Carter said.

The meeting was successful. In a surprise decision, bilateral donors agreed to commit \$320 million in new aid to Guyana over the next three years.

President Cheddi Jagan hailed the development as the "successful end" to an important conference and thanked President Carter and his delegation for the "excellent" help they gave Guyana at the forum.

REASONS FOR GLOBAL COOPERATION

"...Three realities define the case for reformed and invigorated partnerships for international development. First, the Cold War has ended, and with it the distortion of international relations and economic cooperation that it brought. The 1990s offer the opportunity to shift assistance from the cause of political and military alliances toward the goals of global development.

"Second, a massive restructuring of the world economy is under way. ... In literally scores of countries in Asia, Africa, and Latin America as well as Eastern and Central Europe, this change creates enormous opportunities to raise economic efficiency, enlarge participation in development, and strengthen freedom.

"The third reality is that terrible gaps in human progress persist, both within and among countries. Desperate needs in health, food, education, and other areas must be met.

"Understanding these three realities is the path to resolving the puzzle of 'why cooperate?'"
- Excerpted from "Partnerships for Global Development: The Clearing Horizon," Carnegie Commission on Science, Technology, and Government, 1992

"Only when social and economic progress is widespread and durable will new democracies become deeply rooted and stable. And only then will newly free peoples be confident that the risks they have taken in turning toward the future will buy them the rewards of lasting liberty and prosperity." - From "Partnerships for Global Development: The Clearing Horizon," Carnegie Commission on Science, Technology, and Government, 1992

"We want Guyana placed proudly among those countries which have been able to carve out for themselves a nation ready to meet the trials and prospects the new millenium will so bring." - Guyanese President Cheddi Jagan



photo by Rick Diamond

HUMAN RIGHTS PROGRAM

"I want to take this opportunity to extend [thanks] to you and The Carter Center for the humane and godly task you all have done to give us life and hope once again. ... We all are very happy now that we have reunited with our parents in a safe environment. We owe you and The Carter Center all the credit for your love and concern for the human race." – From a letter to a Human Rights Program volunteer written by a 15-year-old refugee from Liberia

"What should move us to action is human dignity: the inalienable dignity of the oppressed, but also the dignity of each of us. We lose dignity if we tolerate the intolerable." – Dominique de Menil, co-founder, The Carter-Menil Human Rights Foundation

Respect for basic human rights is essential to peace and democracy. To enhance those rights, The Carter Center of Emory University's (CCEU's) Human Rights Program provides technical assistance to help countries establish human rights safeguards and engages in action-oriented interventions, policy research, and public education. A unique feature of the program is intervention by Jimmy and Rosalynn Carter on behalf of individuals who are being persecuted and consultations with human rights activists and government leaders.

Human Rights staff are working with the Transitional Government of Ethiopia to write human rights protections into its new constitution. Guyanese leaders have asked The Carter Center to conduct police training workshops on human dignity and community policing

Dominique de Menil co-founded The Carter-Menil Human Rights Foundation with President Carter in 1986. Like President Carter, Mrs. de Menil has long been a champion of peace and human rights.

based on the Human Rights Program's success in Ethiopia. The Program also is forming an International Human Rights Council to promote collaboration among organizations and world leaders who have demonstrated their commitment in the field.

In 1993, the Human Rights Program and other non-governmental organizations shaped dialogue for the U.N. World Conference on Human Rights in Vienna and advanced proposals for making the United Nations more effective in enforcing international human rights standards. The Program and other agencies supported creation of the new post of U.N. High Commissioner for Human Rights, established in 1993.

SAFEGUARDING HUMAN RIGHTS IN ETHIOPIA

Human Rights, African Governance, and Conflict Resolution program staff are collaborating to help Ethiopians incorporate human rights principles and standards into their emerging democracy.

In 1993, CCEU staff traveled to Ethiopia to lead a symposium on drafting a new constitution. The symposium is one of several projects developed by The Carter Center to ensure that human rights safeguards are established and protected in that nation. Other efforts in Ethiopia are included below:

- Ethiopia's chief justice joined 50 participants in a judiciary workshop, led by CCEU staff and other international experts. They discussed the judiciary as an independent institution, insulation of lawyers and judges from undue influence, and other issues.
- Fifty-five senior officers attended two police training workshops. The police force is attempting to incorporate human rights protections into a new code of conduct.
- The minister of education and officials in charge of curriculum development and teacher training

attended a workshop on human rights standards in education. A human rights library is being developed as a resource for educators. As a follow-up, Program staff traveled to Ethiopia to explore plans for a human rights education campaign.

- Another workshop explored the feasibility of creating a human rights ombudsman in Ethiopia.

"Each of these initiatives reflects the direction the Program is taking in promoting human rights," said Harry Barnes, director of the Program. "Such techniques are proactive instead of reactive. They promote implementation of human rights safeguards on a fundamental and institutional level by preventing abuses instead of only reacting to them."

THE CARTER-MENIL HUMAN RIGHTS FOUNDATION

President Carter and Dominique de Menil established The Carter-Menil Human Rights Foundation in 1986 to promote the protection of human rights. The foundation regularly awards The Carter-Menil Human Rights Prize, a \$100,000 gift to individuals or organizations for their outstanding efforts on behalf of human rights, often at great personal sacrifice. The award enables human rights activists to continue their work and focuses global attention on their struggles for justice. Carter-Menil winners share their thoughts:

"We interpret this as an honor conferred on the whole of the oppressed people of our country who face a regime that is exacting a terrible price on all engaged in the struggle for a truly democratic and nonracial South Africa." – *Max Sisulu on behalf of the Sisulu Family, 1988*

"I have two young sons. I am trying to endow them with universal humanistic values . . . I don't want my sons to grow up to be oppressors and violators of human

rights." – *Zehava Gal'On, executive director of B'Tselem, Occupied Territories, Israel, and co-winner with al-Haq, Palestinian human rights organization of the West Bank, 1989*

"The penalty for expressing one's views, or acting according to one's conscience, or even simply trying to go about one's daily business could be death." – *Suriya Wickremasinghe, founding member and secretary of the Civil Rights Movement of Sri Lanka, and co-winner with The Consejo de Comunidades Etnicas Runujel Junam (CERJ) of Guatemala, 1990*

"It is our turn to make sure that the poor will be able to participate fully, to be heard, to enjoy the right to organize, and to cast ballots without fear. The poor have the right to be the authors of their own destiny." – *Father Miguel Estrada representing the University of Central America in El Salvador, 1991*

Other Carter-Menil Award recipients include:

- The Native American Rights Fund of Boulder, Colo., 1992
- The Haitian Refugee Center of Miami, Fla., 1992
- La Vicaría de la Solidaridad of Chile, 1987
- Yuri Orlov of the Soviet Union, 1986
- The Group for Mutual Support of Guatemala, 1986

The Foundation also gave a special award to the people of Norway for their contributions to world peace. The award included dedication of the Tony Smith sculpture "Marriage" to the people of Norway and a \$100,000 prize to the Institute of Applied Social Science in Oslo. The Norwegians' efforts led to the September 1993 peace agreement between Israel and the PLO.

"I am writing to you to extend my great appreciation for your letters in support of my case on a humanitarian basis. Your intervention was very helpful, especially in the last period, when I nearly lost hope of being released for medical treatment and my health situation was rapidly deteriorating in prison." – *From a letter to President Carter written by a Palestinian human rights field worker released from prison to seek medical treatment in the United States*



photo by Ben Serrato

LATIN AMERICAN AND CARIBBEAN PROGRAM

"What happened in Nicaragua this week was not just a remarkable election. It was a victory for a new approach to intractable conflicts, turning them from bloodshed to the democratic political process. Three presidents made it possible: Oscar Arias, Jimmy Carter and George Bush." – The New York Times, March 2, 1990

"The United States and Latin America share a hemisphere but have often approached problems as if they inhabit two different worlds. The challenge of studying or solving problems in inter-American relations is to find a common language between the two perspectives." – Robert Pastor, director, Latin American and Caribbean Program, CCEU

The Latin American and Caribbean Program of The Carter Center of Emory University (CCEU) specializes in inter-American relations and U.S. policy toward that region. The program is headquarters for the Council of Freely Elected Heads of Government, a group of 24 current and former leaders from the Western Hemisphere who promote democracy and the peaceful resolution of the region's conflicts.

The Council is a pioneer in mediating and observing elections. To date it has observed elections in Panama, Nicaragua, Haiti, the Dominican Republic, Guyana, and Paraguay. Members collaborated with the United Nations, the Organization of American States (OAS), the National Democratic Institute for International Affairs, and the National Republican Institute on several election observer missions.

Another long-term project is democratization in Mexico. In July 1992, the Council sent representatives to witness the observation of elections in two states in Mexico; in November 1992, the Council invited Mexican representatives to observe the U.S. presidential election.

In February 1990, President and Mrs. Carter met with Nicaraguan President Daniel Ortega during the country's first free elections accepted by all parties.

The Council also works on post-election consolidation of democracy and promotes hemispheric cooperation. In this regard, the Latin American and Caribbean Program has played an important role in analyzing and promoting the North American Free Trade Agreement and its expansion in the hemisphere. It also has convened major consultations to address economic development, security, and human rights in the Americas.

COUNCIL OF FREELY ELECTED HEADS OF GOVERNMENT

Jimmy Carter, former U.S. President and Council Chairman

George Price, former Prime Minister of Belize and Council Vice Chairman

Patricio Aylwin Azocar, President of Chile

Jean-Bertrand Aristide, President of Haiti

Rafael Caldera, President of Venezuela

John Compton, Prime Minister of St. Lucia

Luis Alberto Lacalle, President of Uruguay

P.J. Patterson, Prime Minister of Jamaica

Erskine Sandiford, Prime Minister of Barbados

Raúl Alfonsín, former President of Argentina

Carlos Andrés Pérez, former President of Venezuela

Oscar Arias Sánchez, former President of Costa Rica

Nicolas Ardito-Barletta, former President of Panama

Fernando Belaunde Terry, former President of Peru

Rodrigo Carazo, former President of Costa Rica

Vinicio Cerezo, former President of Guatemala

Joseph Clark, former Prime Minister of Canada

Gerald Ford, former U.S. President

Oswaldo Hurtado, former President of Ecuador

Alfonso López Michelsen, former President of Colombia

Michael Manley, former Prime Minister of Jamaica

Julio María Sanguinetti, former President of Uruguay

Edward Seaga, former Prime Minister of Jamaica
Pierre Trudeau, former Prime Minister of Canada

ELECTIONS MONITORED BY THE COUNCIL

Elections in Nicaragua (1989-90) and Haiti (1990) were the first free elections accepted by all parties in both nations' histories. In Nicaragua, the election marked that country's first peaceful transfer of power from an incumbent government to its opposition. Voters elected Violeta Chamorro to replace Sandinista President Daniel Ortega.

"Mr. Carter and his Carter Center and Latin American associates helped significantly to set the tone for the campaign's closing days and Sunday's balloting. ... The high standard Mr. Carter set for the Nicaraguans turned out to be a magnificent and self-fulfilling prophecy." – The Atlanta Journal-Constitution, February 27, 1990

Although Panama's opposition candidate won the majority of votes in the May 1989 presidential election, military dictator Manuel Noriega chose to destroy the official records. The day after the election, President Carter examined vote summaries and declared them fraudulent. He sent a letter to the OAS asking it to take action against Gen. Noriega. On May 17, the OAS condemned the "grave events and the abuses by Gen. Manuel Antonio Noriega in the crisis and the electoral process in Panama."

"The White House said Monday the 14-member team saw 'actual fraud'—including pre-marked ballots and padded voter lists. The winner will be second-in-command to strongman Gen. Manuel Noriega.

"And former President Carter, a member of the international team that observed the election, said Monday that Noriega was 'stealing this election from his own people.'

"The vote, he said, was 'nothing more than a hoax.' "
– USA Today, May 9, 1989

"International observers attributed the irregularities to pro-government forces who allegedly stole or destroyed local tally sheets representing tens of thousands of votes. ...

"President Carter, who . . . was in Panama to monitor Sunday's election, said Monday that Noriega's soldiers had seized legitimate election returns and that the results being provided were counterfeit." – The Boston Globe, May 11, 1989

In the fall of 1990, Guyanese President Hugh Desmond Hoyte and opposition party leaders agreed to major reforms recommended by a Council delegation led by President Carter. In October 1992, the Council observed Guyana's first free and fair elections in 28 years. The Carter Center and the Council continue to work with the government of Guyana to strengthen and preserve the electoral process.

"I have monitored elections in El Salvador and Namibia, but never have I witnessed such a high quality of preparation and such skillful use of observers. You got the best out of each one of us. It was a model of masterful management."
– Angier Biddle Duke, president of the Council of American Ambassadors, in a letter about elections in Guyana

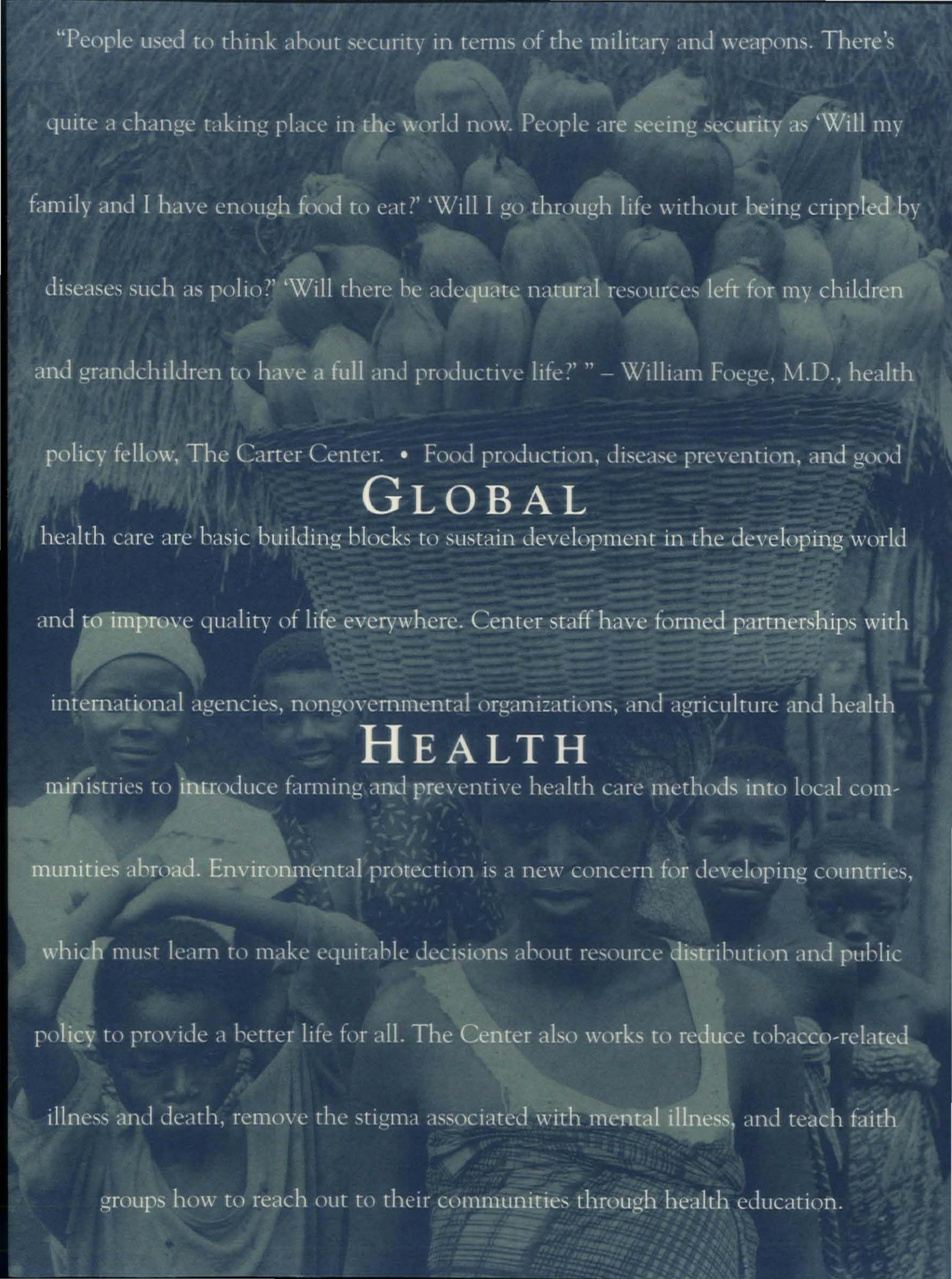
In May 1993, voters in Paraguay elected Juan Carlos Wasmosy as the country's first civilian president in four decades. To assure fairness, President Carter led a 31-person international delegation to observe the elections.

"Paraguayans streamed to the polls Sunday to chose a civilian president in the country's first truly democratic election in 182 years of independence.

"For 53-year-old Sixto Zaracho and thousands of others, voting was not just a novelty. It was deeply satisfying personally.

"For the first time, no one handed Zaracho a ballot he was expected to use. No one looked over his shoulder as he marked it. And he left the voting booth without already knowing who would win.

"This means something," Zaracho said, holding up his ink-stained finger that proved he had voted. 'Before, we would vote, but we knew who would win.' " – The Associated Press, May 10, 1993

A large woven basket filled with coconuts is the central focus of the image. In the background, a group of people, including children and adults, are visible, some looking towards the camera. The overall scene is set in a rural, possibly agricultural, environment.

“People used to think about security in terms of the military and weapons. There’s quite a change taking place in the world now. People are seeing security as ‘Will my family and I have enough food to eat?’ ‘Will I go through life without being crippled by diseases such as polio?’ ‘Will there be adequate natural resources left for my children and grandchildren to have a full and productive life?’ ” – William Foege, M.D., health

policy fellow, The Carter Center. • Food production, disease prevention, and good

GLOBAL

health care are basic building blocks to sustain development in the developing world

and to improve quality of life everywhere. Center staff have formed partnerships with

international agencies, nongovernmental organizations, and agriculture and health

HEALTH

ministries to introduce farming and preventive health care methods into local com-

munities abroad. Environmental protection is a new concern for developing countries,

which must learn to make equitable decisions about resource distribution and public

policy to provide a better life for all. The Center also works to reduce tobacco-related

illness and death, remove the stigma associated with mental illness, and teach faith

groups how to reach out to their communities through health education.

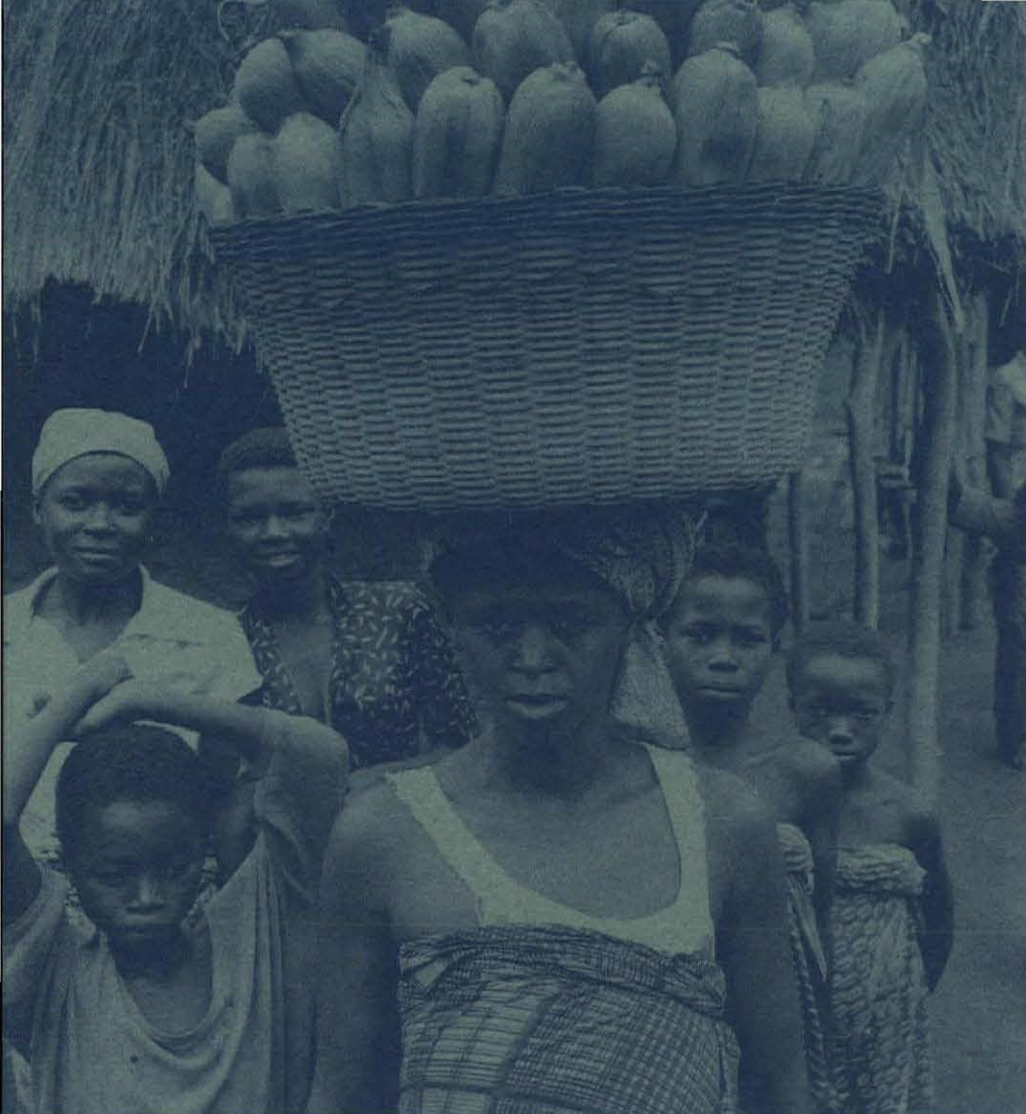


photo by Tony Freeth

A woman in Adoye, Ghana, shows some of the corn harvest that SG 2000 helped her family raise.

AGRICULTURE

"Reducing hunger by half in the 1990s is a realistic objective for the world. We can act meaningfully to end hunger in the short run without losing sight of the continuing need in the long run to address its basic causes."—The Bellagio Declaration on Overcoming Hunger in the 1990s

"Our job is to show farmers what is possible. And when the heat gets turned on around the feet of politicians, then they will listen. That is the way to change the world."—Nobel laureate Norman Borlaug, president of Sasakawa Africa Association and senior consultant to Global 2000

Several developing countries have seen remarkable progress in health and agriculture thanks to the efforts of Global 2000, a separately incorporated nonprofit organization of The Carter Center. The program supports initiatives to increase cereal grain production in Africa by distributing the best available technologies to resource-poor farmers.

Since 1986, Global 2000 has collaborated with the Sasakawa Africa Association (SAA) and African ministries of agriculture to teach more than 150,000 farmers the value and proper use of improved seeds, fertilizers, and farming practices. Nobel laureate Norman Borlaug, one of the architects of India's "Green Revolution," leads the effort to transfer agricultural technologies from research facilities to village plots.

This approach works. In Ghana, farmers increased national corn production by about 143 percent from 1985-93. In Sudan, farmers raised 500 percent more wheat in 1991-92 than in 1986-87. SAA-Global 2000 (SG 2000) is meeting farmers' practical needs by teaching them to be self-reliant.

Global 2000 also serves as the secretariat for the Agricultural Council of Experts (ACE), formed in January 1992 to advise President Carter and Dr. Borlaug on economic and agricultural issues in Africa. The 14-member council includes agronomists, agricultural economists, and experts on women's issues. ACE members review SG 2000 projects to help countries formulate national policy that ensures farmers' continued success.

SOWING ONE SEED AT A TIME

Sub-Saharan Africa poses the planet's most stubborn and urgent agricultural challenge. One-fourth of its people are underfed, and village farming with hand-held hoes and sickles is used in more than 75 percent of Africa's food production.

SG 2000's strategy for transferring technology to farmers is simple: Start small. To begin, SG 2000 and ministry of agriculture experts survey local farming technology and assemble "recommended production packages" for corn, cassava, sorghum, legumes, or wheat. Packages include:

- locally produced, high-yielding seeds.
- moderate amounts of fertilizer.
- improved farming and grain storage methods.

Extension agents work with farmers in a few villages to fine-tune the production packages. They learn by growing one-acre Production Test Plots (PTPs) in their own fields. In turn, the farmers agree to share their experiences with at least 10 neighbors throughout the growing season. When crops are harvested and sold, farmers repay the cost of the seed and fertilizer.

PTPs provide three rewards for farmers:

- They learn new growing methods.
- They earn income for their families.
- They become enthusiastic supporters of the new technology.

Since 1986, farmers in Ghana, Sudan, Zambia, Tanzania, Benin, Togo, Nigeria, and Ethiopia have cultivated more than 200,000 PTPs to learn more about growing corn, sorghum, soybeans, wheat, cowpeas, and millet.

HELPING FARMERS HELP THEMSELVES

Ngiresi, Tanzania – Why is the corn always greener—and taller and plumper—on Loi Bangoti's side?

Other farmers in the hills beneath cloud-capped Mt. Meru know: Bangoti has joined the "green revolution." His little acre is getting some big help.

"Before, I was harvesting no more than five bags of corn," Bangoti said. "Now I'm expecting more than 15 bags. The others want to copy what I'm doing. ..."

To an Iowa farmer, the methods are elementary. In Tanzania, they're radical. Average fertilizer-per-acre use in the country is less than 10 percent of the U.S. level, and only one in 10 cornfields is planted with improved seed.

Success has been quick: Corn yields have tripled or quadrupled.

"The farmers were amazed to see what could be done," said Dixon Akyoo, secretary of Mbuguni, a nearby lowland village where 15 farmers are now buying high-yield seed and fertilizer on their own.

The district council for Ngiresi, impressed with SG 2000 acreage, lent Bangoti the money for fertilizer and seed. "I'll be able to pay off the loan and show a profit," he said. – Excerpted from *The Associated Press*, February 24, 1993



photo by Billy Howard

GUINEA WORM ERADICATION PROGRAM

"I can't think of anything more exciting than being a part of eradicating a disease." — Prince Bandar Bin Sultan, Saudi Ambassador to the United States, upon presenting the first of four \$1.9 million annual donations from King Fahd to help eradicate Guinea worm disease

"As a military officer, it is a pleasure for me to be involved in planning the strategy and tactics of a campaign designed not to kill people but to heal them." — Gen. Amadou Toumani Touré, head of the Guinea worm eradication effort in Mali

Only one disease—smallpox in 1977—has been eradicated from the earth. By December 1995, The Carter Center's Global 2000 program hopes to make Guinea worm disease (*dracunculiasis*) the second to be eradicated.

As of 1990 this painful parasite infected as many as 2 million people per year in India, Pakistan, and 16 African countries and put more than 100 million people at risk. People become sick when they drink water contaminated with microscopic Guinea worm larvae, which migrate through the body before emerging a year later as thin, threadlike worms up to 1 yard long. No effective treatment exists, but health education and water purification can break the worm's life cycle.

Global 2000 works with national health ministries to identify where cases occur and then focus on eradication—the same strategy used by the U.S. Centers for Disease Control and Prevention (CDC) to fight smallpox. Local health workers monitor cases, prevent infected villagers from contaminating drinking water sources, and apply

A Guinea worm program volunteer examines one of several worms emerging from a young boy in northern Ghana.

larvicide to stagnant pools. They also teach neighbors how to filter and boil drinking water.

Eradication efforts have captured the imaginations and goodwill of corporations like DuPont, Precision Fabrics, and American Cyanamid, which invented special drinking water filters and provided in-kind donations of larvicides and education materials. As a result, the annual incidence of Guinea worm disease in all endemic countries was reduced by 80 percent from 1989-93.

TAMING THE FIERY SERPENT

In 1994, the 117.5 million people living in Pakistan will be free of the "fiery serpent"—a Biblical term for Guinea worm. Only two cases were reported in 1993, thanks to assistance provided by Global 2000 to Pakistan's Guinea Worm Eradication Program (GWEP), beginning in 1986.

The West African nations of Ghana and Nigeria also have made giant strides toward eliminating the affliction. From 1989-93, the two countries reduced Guinea worm disease by 90 percent from 820,000 to 82,000 cases. Before the eradication project began, Ghana and Nigeria ranked first and second worldwide in numbers of cases of the disease.

Annual emergence of the worm and resulting secondary infections can cause permanent scarring and crippling similar to polio. In highly endemic areas, 50 percent or more of the population may become disabled for weeks or months.

As a result, the disease devastates local economies and education. A study in southeast Nigeria revealed \$20 million in lost profits annually to rice farmers and a school absenteeism rate up to 60 percent during the Guinea worm season, which coincides with the rice harvest in that region.

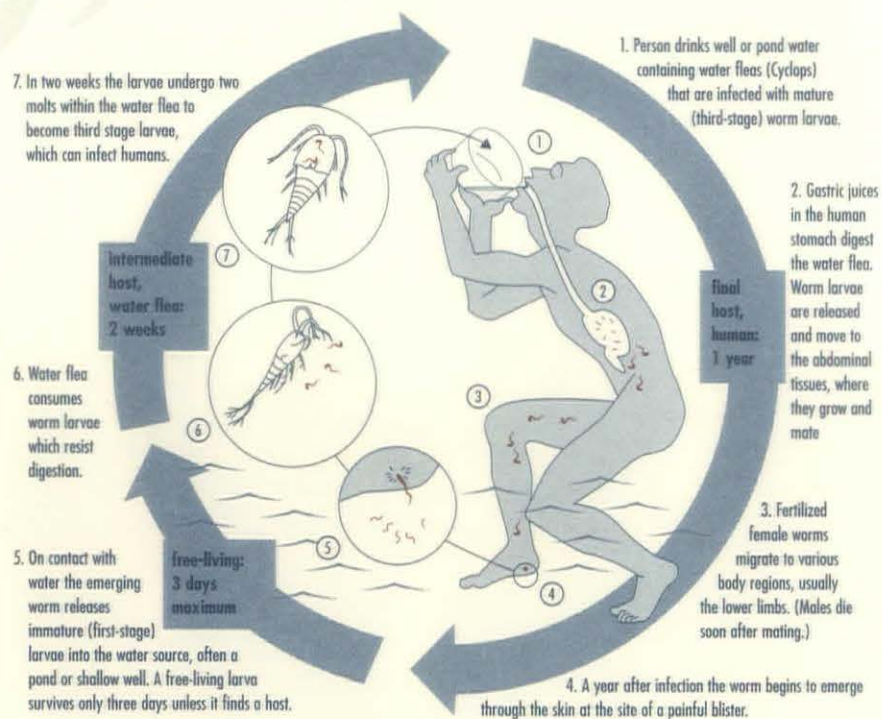
"Pakistan is symbolically important because it will become the first country affected by Guinea worm in recent years to completely eradicate the disease, and it was the first country that the Guinea Worm Eradication Program became involved in."
 - Donald Hopkins, M.D., senior health consultant, Global 2000

PROGRESS DATA FOR GHANA, NIGERIA, AND PAKISTAN

Country	Year	Number of Cases	Change (%)
Ghana	1989	179,556	
	1990	123,793	(31.0% decrease)
	1991	66,697	(46.0% decrease)
	1992	33,464	(49.8% decrease)
	1993	17,918	(46.0% decrease)
Nigeria	1988	653,492	
	1989	640,008	(2.0% decrease)
	1990	394,082	(38.4% decrease)
	1991	281,937	(28.4% decrease)
	1992	202,917	(28.0% decrease)
1993	59,545	(71.0% decrease)* provisional figure	
Pakistan	1989	534	
	1990	164	(69.3% decrease)
	1991	106	(33.8% decrease)
	1992	23	(78.3% decrease)
	1993	2	(91.3% decrease)

All percentage decreases based on the previous year's figures.

Life Cycle of the Guinea Worm



Source: 1992 Medical and Health Annual, Encyclopaedia Britannica Inc.



photo courtesy of Georgia Tech Telephoto

ENVIRONMENTAL INITIATIVE

"The Carter Center and Georgia Tech have launched global TV advertising with a powerful new twist: putting peer pressure on world leaders to achieve global change. ... The commercials ... potentially open a new door to influencing global politics." – The Gwinnett Daily News, May 15, 1992

"Human beings are the center of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with nature." – The Rio Declaration on Environment and Development, UNCED, June 1992

Many global trends threaten mankind's ability to pursue healthy and productive lives in harmony with nature. In some regions of the world, particularly sub-Saharan Africa, food production is failing to keep up with population growth. And the world's forests, which are home to more than half the world's plant and animal species and are essential for sustaining life on earth, are disappearing at a rate of more than 40 million acres each year. Concern about these issues and others led The Carter Center and Global 2000 to form the Environmental Initiative in 1991. The Initiative helps build awareness of how environment and development are related. Its goals are:

- to prevent and reverse environmental degradation.
- to promote equitable and environmentally sound public policy.
- to encourage sustainable population policies.

In its first year, the Initiative focused on the 1992 U.N. Conference on Environment and Development

The Carter Center co-sponsored 16 public service "advertorials" featuring key leaders from around the world to educate the public and policy-makers about the 1992 Earth Summit in Brazil.

(UNCED) in Rio de Janeiro. A key activity was producing an award-winning Earth Summit Television Campaign in partnership with Georgia Tech and others to raise public awareness and to educate policy-makers about the conference. This campaign produced 16 public service "advertorials" about the summit that were broadcast on CNN in 140 nations. Similar ads aired on U.S. television and radio stations. Global 2000 plans to co-sponsor similar campaigns to focus attention on other U.N. meetings, including the International Conference on Population and Development in Cairo in September 1994.

In Guyana, the Environmental Initiative and other Center programs are working to combine environmental protection with economic and social development. With its small population (802,000 in 1991), abundant resources, newly democratic government, and with 90 percent of its original forests intact, Guyana is in an excellent position to make sustainable development a reality. Global 2000 is working with the University of Guyana and others to sponsor a land use conference. The meeting will involve the Guyanese government, non-governmental organizations, industry, indigenous leaders, citizens' groups, and the academic community in policy decisions about their environment and natural resources.

THE EARTH SUMMIT TELEVISION CAMPAIGN

World leaders interviewed for public service announcements included:

- Boutros Boutros-Ghali, U.N. Secretary-General
- Gro Harlem Brundtland, Prime Minister of Norway
- Jimmy Carter, former U.S. President
- Vaclav Havel, President of Czechoslovakia
- François Mitterrand, President of France
- Carlos Andrés Pérez, President of Venezuela
- Jerry Rawlings, President of Ghana
- Oscar Arias Sánchez, former President of Costa Rica
- Noboru Takeshita, former Prime Minister of Japan
- Margaret Taylor, U.S. Ambassador to Papua New Guinea
- Desmond Tutu, Archbishop of South Africa



INTERFAITH HEALTH PROGRAM

"All of you know we can't keep a society healthy that's ignorant. We need you to help us get early childhood education. You've got the resources. We want to use your faith network to reach all our citizens to make a difference." —Joycelyn Elders, U.S. Surgeon General, speaking to the IHP conference at The Carter Center

"We are conducting reverse epidemiology. Where most programs study the outbreak of disease, we are committed to interventions leading to an epidemic of good health." — Gary Gunderson, director of operations for the Interfaith Health Program, CCEU

A surprising gap exists between the current level of public health and the potential to improve the length and quality of life. To fill that gap, the Interfaith Health Program (IHP) of The Carter Center of Emory University (CCEU) was created in 1993 to help U.S. faith groups provide health education in their communities. It also encourages them to be leaders in the nation's health care revolution.

Traditionally, faith groups have led the way in establishing hospitals and healing agencies. Today, the battle for good health also is waged through education, prevention, and public policy. IHP provides faith groups with information about creative community health models and preventive health care. It also matches experienced leaders with new programs seeking advice and counsel. The goal is to reach disadvantaged people with information about health care and disease prevention that they may be missing in the current health care system. IHP recently hosted its first major conference at The Carter Center. More than 100

From starting health clinics to teaching AIDS prevention, faith groups can reach out to their communities through programs like Baltimore's Young People's Health Connection, where teenagers can learn about birth control and prevention of sexually transmitted diseases.

members of faith groups—Christian, Jewish, Muslim, and others—attended to discuss what congregations can do to promote health in their neighborhoods. The conference also marked the debut of *Faith & Health*. This quarterly newsletter provides faith groups with practical information about successful preventive health programs.

THE 10 LEADING MEDICAL CAUSES OF DEATH...

Heart Disease	720,000
Cancer	505,000
Cerebrovascular Disease	144,000
Accidents	92,000
Chronic Pulmonary Disease	87,000
Pneumonia and Influenza	80,000
Diabetes	48,000
Suicide	31,000
Liver Disease, Cirrhosis	26,000
AIDS	25,000
TOTAL	2,148,000

... AND LIFESTYLE FACTORS LEADING TO HALF OF THEM

Tobacco	400,000
Diet, Sedentary Lifestyle	300,000
Alcohol	100,000
Infections	90,000
Toxic Agents	60,000
Firearms	35,000
Sexual Behavior	30,000
Motor Vehicles	25,000
Illicit Drug Use	20,000
TOTAL	1,060,000

Sources: National Center for Health Statistics, estimates for 1990 by the U.S. Department of Health and Human Services, The Carter Center.



photo by Michael Campbell

MENTAL HEALTH PROGRAM

"In 1993, the nation will spend about one-tenth of its \$900 billion annual health care budget on mental health services. State and local governments provide about \$30 billion of that money—29 percent—which is twice the percentage taxpayers contribute to meet other medical needs. Studies show that taxpayers bear more of the burden of paying for mental health services because insurance companies have steadily reduced their coverage of those services." — The Atlanta Journal-Constitution, June 25, 1993

"If we are going to have health care for all Americans, there is no way we can leave out those suffering from mental illness. That is not providing health care for all Americans."

— Former First Lady Rosalynn Carter, chair, Mental Health Task Force, CCEU

Today, more than one in five Americans has a diagnosable mental disorder. Yet most of these people do not seek help because they do not understand mental illness, fear the stigma associated with it, or lack access to treatment.

The Carter Center of Emory University's (CCEU's) Mental Health Program addresses public policy issues through activities of the Mental Health Task Force and the annual Rosalynn Carter Symposium on Mental Health Policy. Former First Lady Rosalynn Carter has been the driving force behind the program. Her long career in public service as an advocate for mental health began when Jimmy Carter was governor of Georgia and continued with her appointment as active honorary chair of the President's Commission on Mental Health from 1977-78.

Mrs. Carter initiated the annual symposia so that members of mental health organizations nationwide

Former First Ladies Rosalynn Carter and Betty Ford held a press conference in Washington, D.C., recently to raise public awareness about mental health and substance abuse benefits in health care reform.

could meet and coordinate their efforts on critical issues of common concern. Held at The Carter Center, the symposia have examined topics such as:

- Mental illnesses and the elderly.
- Emotional disorders of children and adolescents.
- Support to families of patients with mental illness.
- Financing mental health services and research.
- Treating mental illnesses in the primary care setting.
- Stigma and mental illness.
- Mental health in health care reform.

Mrs. Carter established the Mental Health Task Force in 1991. The Task Force identifies major mental health issues; convenes meetings involving consumers, family members, professionals, and advocates; and develops initiatives to reduce stigma and discrimination against people with mental illness and to promote the mental health of Americans. Priorities set by the Task Force include:

- Equitable inclusion of mental health in health care reform.
- Early intervention and prevention programs for children and their families.
- Accurate portrayal of mental health issues in the media.
- Improving treatment services and support to people with mental illnesses and their families.

THE REALITY OF MENTAL ILLNESS

Clinicians agree on a given diagnosis for mental illnesses 80 percent of the time. Yet people from all sectors of society continue to believe that mental illness is a vague concept. Statistics dispel that. As of 1993:

- More than one in five Americans (approximately 50 million people) will experience some kind of mental disorder.

- More than 5 million of those will be disabled by schizophrenia, bipolar depression, and other severe illnesses.
- Twelve percent of children in the United States experience severe emotional problems. Less than 20 percent of children with serious emotional illnesses get help.
- Approximately two-thirds of the elderly in U.S. nursing homes suffer from major depression or some other mental disorder.
- More than one in 14 prison inmates have a mental illness.

Source: Center for Mental Health Services

STEREOTYPES ABOUT MENTAL ILLNESS ARE CHANGING BUT . . .

Susan B. became manic-depressive in her teens and attempted suicide twice by age 20. After proper medication and therapy, she is doing well and plans to enter a seminary to share her faith and resolve with others.

Her story illustrates a decade of progress in understanding the forms of mental illnesses and development of more effective treatments for them. But public policy has not kept pace with these advances. Some still believe that mental illness is a sign of weak character or that no effective treatments exist. "We are still hampered by the old stereotypes and stigma that have plagued people with mental illness throughout history," said John Gates, director of CCEU's Mental Health Program.

Still, public perception is beginning to change. A recent national survey conducted by the Bazelon Center for Mental Health Law revealed that two out of three Americans understand that including mental health benefits in health care reform will provide access to treatment. Of those surveyed, 85 percent felt it was critical that mental health problems of children be covered.

"These findings indicate that the American public is

changing its attitude toward mental illness," Dr. Gates said. "We still have a long way to go. But perhaps the day is not far off when we can finally end the discrimination against people with mental illness."

SUMMARY OF FINDINGS FROM A NATIONWIDE POLL FOR THE BAZELON CENTER FOR MENTAL HEALTH LAW

- An overwhelming 82 percent of U.S. voters agree that someone with a mental illness is as sick as someone with a physical illness.
- Sixty-two percent agree that mental health and substance abuse treatment should be covered to the same extent as physical treatment under national health care reform.
- Voters overwhelmingly want to see children with mental health problems covered. Eighty-five percent consider it important.
- Eighty-one percent favor covering outpatient and clinical services as alternatives to hospitalization. In addition, 73 percent said they want to see these services covered to the same extent as hospitalization.
- Voters do not want arbitrary limits on mental health benefits, such as limiting the number of days of treatment. They also want coverage to be flexible so that the mental health professional can decide the proper coverage. Thus, voters support a process that regularly will review treatment to determine if the patient is receiving appropriate care.
- Voters reject a high co-payment. They think requiring individuals to pay 50 percent of the cost of each treatment is too much.

Conducted by Mellman, Lazarus, Lake Inc. of Washington, D.C., among 800 registered voters nationwide. Margin of error: +/- 3.5 percent.

TOBACCO CONTROL PROGRAM

"We're trying to get people to see that they have a future, that their actions can affect their health. We want them to think in terms not just of today, but of tomorrow."

— John Hardman, M.D., executive director, The Carter Center

"The tobacco use problem among children will not go away on its own. Failure to act decisively to control tobacco use will allow millions of our young people each year to become addicted to cigarettes and compromise the very health we have promised to protect." — Former U.S. Surgeon General Antonia Novello

The U.S. Centers for Disease Control and Prevention (CDC) estimates that direct use of tobacco kills more than 8,300 Americans each week. This is roughly double the total of all deaths caused by alcohol, car accidents, AIDS, suicide, homicide, fires, crack cocaine, and heroin.

The Carter Center of Emory University's (CCEU's) Tobacco Control Program seeks to prevent tobacco-related disease and promote smoke-free societies through health education and advocacy discouraging tobacco use. Recently, the Center has worked to raise awareness of the need for a higher excise tobacco tax to deter tobacco use, especially among teenagers. In Canada, tobacco tax increases have resulted in a sharp drop in the number of teenage smokers. While the real price of tobacco increased by 158 percent from 1979-91, teenage tobacco use fell by 60 percent.

Developing countries have responded openly to tobacco control ideas as well. The CDC, the World Health Organization, and CCEU have shared models

of tobacco control legislation with African nations interested in developing their own tobacco control programs. In addition, CCEU and its partners have encouraged these nations to develop school health curricula to fight the "brown plague." Teaching young children about the dangers of tobacco before they start smoking is an effective way to decrease deaths.

TOBACCO USE HITS CLOSE TO HOME

"The single most effective way to reduce tobacco use and nicotine addiction, especially among children, is to increase substantially the price of tobacco products. ... Health groups estimate that a \$2-a-pack increase would reduce smoking rates enough to save nearly 2 million lives—more than the total lives lost in all U.S. wars combined.

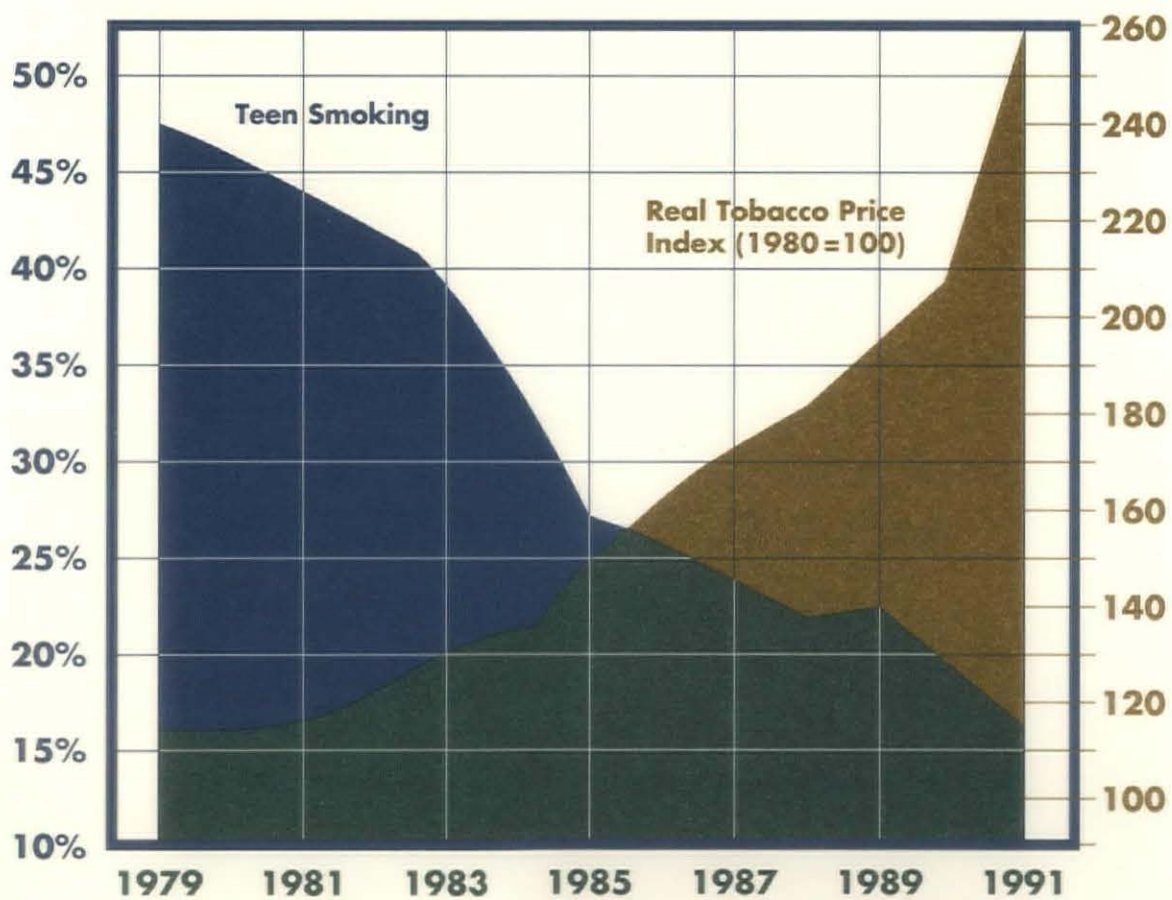
"This proposal would raise more than \$30 billion a year in new revenue, which could be put to good use paying for health care reform, childhood immunization efforts, and other high priorities. In this way, tobacco could begin to pay its fair share of the tremendous costs it imposes on our society." — Excerpted from an editorial written by Jimmy Carter in *The New York Times*, February 16, 1993

FACTS ON SMOKING AMONG TEENAGERS

- By age 18, about two-thirds of young people in the United States have tried smoking. About 25 percent of 17- and 18-year-olds regularly smoke.
- Among persons who have smoked daily, more than 70 percent do so by age 18. One-third to one-half of young people who try cigarettes become daily smokers.
- The average age when smokers first try a cigarette is 14.5 years.
- About one in five high school males uses smokeless tobacco. Most users try it before the 8th grade.

Source: U.S. Department of Health and Human Services, "Preventing Tobacco Use Among Young People: A Report of the Surgeon General."

Tobacco tax increases in Canada have resulted in a sharp drop in the number of teenage smokers. From 1979-91, the real price of tobacco increased by a total of 158 percent; teenage tobacco use fell by two-thirds.



Reprinted with permission from "World Smoking & Health," American Cancer Society. Source: Statistics Canada, Labour Force Survey, 1991; Canadians and Smoking: An Update. Health and Welfare, Canada, 1991.

"The Atlanta Project provides the citizens of the

Atlanta metropolitan area with an opportunity

URBAN

to unite with one another to

REVITALIZATION

improve the quality of life for us all."

ATLANTA
PROJECT
A PROGRAM OF THE CARTER CENTER

– Jane Smith, program administrator, TAP



photo © Michael Schwarz for TAP

THE ATLANTA PROJECT

"The notion that each of us has the ability to make life better, not only for ourselves but for others, is the basis of The Atlanta Project." – Johnnetta Cole, president, Spelman College

The Carter Center's Atlanta Project (TAP) was created in 1992 to help urban communities gain access to the resources they need to solve the problems that most concern them. This unprecedented grass-roots project has brought together thousands of volunteers, who are working with residents in 20 "cluster" communities to identify needs and to create avenues for change in education, housing, community development, economic development, public safety, and health. Hundreds of small, personal meetings have been held with community leaders and existing organizations to target problems and listen to ideas.

At the community level, TAP has hired cluster coordinators, set up offices, and formed steering committees in each cluster. Primary partnerships have been developed between the clusters and 24 major corporations and 23 colleges and universities that can offer resources, advice, or assistance.

TAP's first cluster-wide initiative, the 1993 Immunization/Children's Health Initiative, brought together on one weekend 7,000 volunteers who identified nearly 17,000 preschool children to either receive free shots or have their vaccination records updated. Other projects off the ground include an effort to renovate vacant public housing and an anti-violence campaign known as TAP Into Peace. And in cluster neighborhoods, hundreds of individuals and groups are teaming up to help residents help themselves.

President Carter visits with children in Atlanta's Perry Homes neighborhood as volunteer Flossie Mae Grier interviews a mother during the April 1993 "Neighbor-to-Neighbor Community Walk-Through" to identify preschoolers who needed vaccinations.

TAP INITIATIVE REACHES 17,000 CHILDREN

Nadine Solomon of College Park, Ga., was among hundreds of Atlanta residents who took their best shot during TAP's Immunization/Children's Health Initiative.

But her 4-year-old son, Cornelius, was a little too young to appreciate his mother's efforts. He screamed and jumped up and down as nurse Lamora Stephens prepared his two shots and oral polio vaccinations.

"This will be your last one until the year 2003," Ms. Solomon said in a futile attempt to calm her son.

Cornelius was just one of the nearly 17,000 children to receive free shots or be certified as up-to-date during the weeklong campaign in April 1993.

"The response was overwhelming," said David Allen, M.D., TAP health coordinator. "Our goal was to reach 6,000 children."

The initiative began with a "Neighbor-to-Neighbor Community Walk-Through." Some 7,000 volunteers went door-to-door in the clusters to identify children under age 6 and provide information about vaccinations to protect them from preventable childhood diseases. By the time the immunization week ended, volunteer numbers had swelled to 12,000; 60 percent were residents of TAP clusters.

"The immunization program exceeded our wildest dreams," said Dan Sweat, TAP program director. "Now that we have a strong base of support, residents can tell us about other problems in their neighborhoods and how TAP can help."

ATLANTA HOUSING AUTHORITY AND TAP TEAM UP TO RENOVATE PUBLIC HOUSING

Sixteen families moved into new homes in fall 1993 thanks to corporate managers, church workers, building professionals, Atlanta Housing Authority (AHA) staff, and other volunteers who renovated vacant public housing units in Atlanta's Bankhead Courts community.

The "Housing Reoccupancy Initiative" was a pilot effort by TAP, AHA, and the Bankhead Courts Residents Association to restore vacant public housing citywide. Bankhead Courts is located in Harper Cluster, one of 20 clusters in the TAP area.

Over a period of eight weekends, more than 700 volunteers donned tool belts, work gloves, and hard hats to renovate 16 apartments. Skilled workers and other volunteers from throughout Atlanta helped to paint walls, replace damaged water pipes, rebuild kitchen cabinets, and repair electrical outlets.

A group of 40 J.W. Marriott Corp. volunteers and Bankhead residents was the first to complete renovation of an apartment. Their efforts brought a joyful response from new resident Laura Garrett, a mother of five, who was next on AHA's list of applicants awaiting housing.

"I am so happy to be here and grateful for your help," she told Marriott volunteers on move-in day. "When I get settled, I'm going to help do an apartment, too."

CLUSTER RESIDENTS EMBRACE TAP

The heart of The Atlanta Project is the cluster communities. More than 300 activities have been undertaken by the clusters in partnership with thousands of volunteers and hundreds of businesses and service providers. Some examples:

- Job training has been a major effort throughout TAP, with corporate sponsors like Georgia Power (Washington Cluster), NationsBank (Southside Cluster), and Bank South (Decatur Cluster) offering opportunities for residents in their respective clusters.
- Washington Cluster volunteers aid in the criminal rehabilitation process by serving as volunteer probation officers. In addition, the cluster stands to benefit from the Computers-in-Classroom program, where teachers will use computers for grading, attendance records, and lesson plans.
- Southside Cluster joined a food co-op to sell groceries to residents at discounted prices. The co-op is manned by an all-volunteer staff from the cluster.
- Brown Cluster residents can get credit counseling from the NAACP Community Development Resource Center, which began as a cluster initiative.
- Positive Generations, in the Central DeKalb Cluster, works to improve care of children born to single mothers by uniting both birth parents in the child-care process.

- Needy children benefit from the Forest Park Cluster's Operation Christmas, which distributes gifts to "adopted" children during the holidays.
- Recreational centers in the Therrell Cluster provide youth with an alternative to crime through seminars, workshops, forums, and after-school activities.
- Volunteer instructors help Douglass Cluster residents stay fit by teaching free aerobics classes at the local high school.
- North Clayton residents banded together to build a special bathroom in the home of a disabled child. TAP pitched in with materials, while the cluster came through with a host of volunteers.
- Local furniture outlets contributed to a Youth Entrepreneur Program in the Crim Cluster, where teenagers gained hands-on experience by running their own furniture business. Another economic endeavor in the West Fulton Cluster paired teenagers and young adults with mentors in the workplace.

"This is a project about listening. President Carter already has enabled people who don't usually communicate with each other to sit down together to give us something money can't buy: the combined will to make people's lives better." – Neil Shorthouse, executive director, Georgia Cities in Schools Inc.

A photograph of a group of people, including a woman in a white headscarf, looking at a document together. The image is in a dark, monochromatic color scheme, possibly sepia or dark blue. The text is overlaid on the image.

AFFILIATED PROGRAMS OF

THE CARTER CENTER

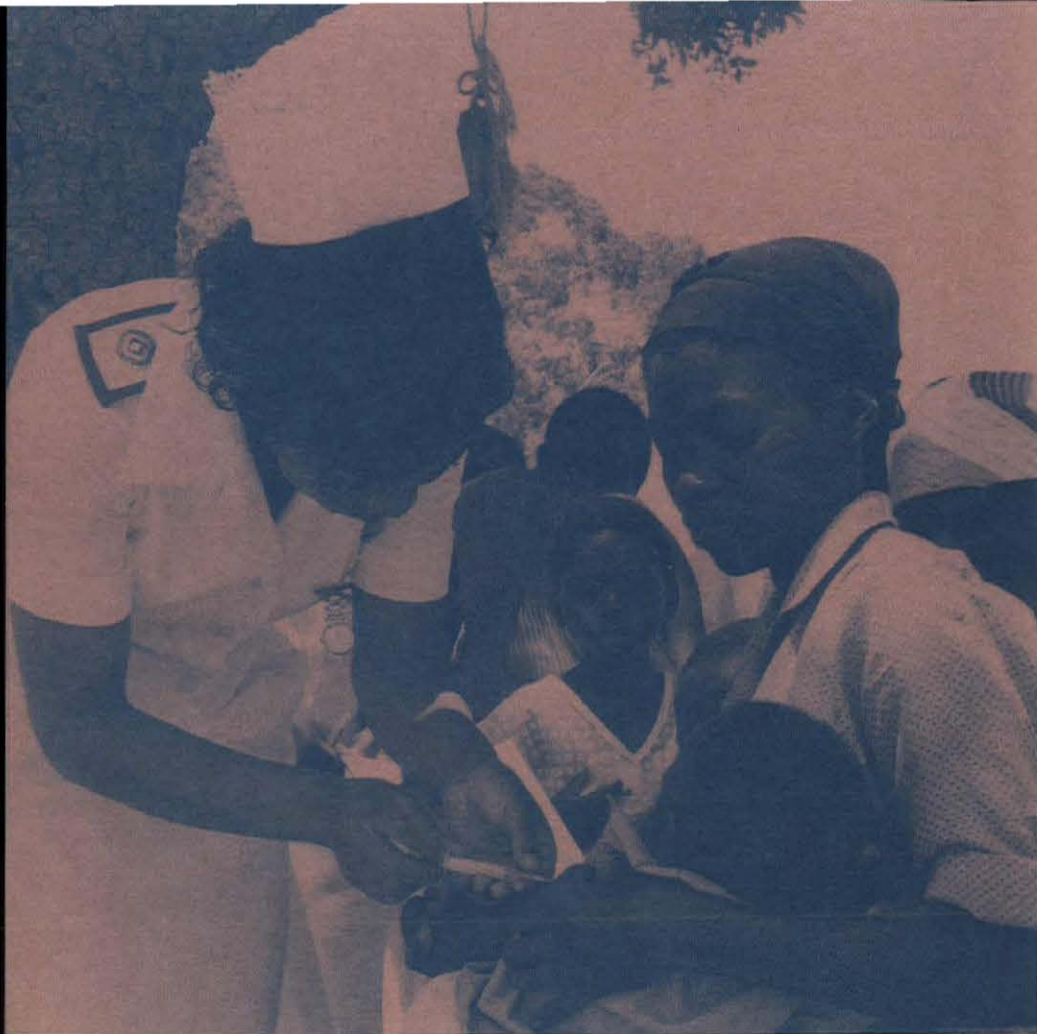


photo by UNICEF/Carolyn Watson

TASK FORCE FOR CHILD SURVIVAL AND DEVELOPMENT

"Vaccinating our children is vital to their survival. But it is also vital to the survival of our world. An investment in global child survival is an investment in population and environmental control." – William Foege, M.D., executive director, Task Force for Child Survival and Development

"The time has come... for the world to recommit itself to the task of ending the age-old evils of absolute poverty, malnutrition, illiteracy, and preventable disease..." – From "The State of the World's Children 1992," UNICEF

The Task Force for Child Survival, an independent organization that works in close partnership with The Carter Center, was formed in 1984 to coordinate and expand global immunization efforts. The challenge was to translate science and technology into policy and action. Working with its major sponsors—the World Health Organization (WHO), UNICEF, The World Bank, The United Nations Development Program (UNDP), and The Rockefeller Foundation—the Task Force helped raise the immunization rate of the world's children from 20 to 80 percent in six years.

Because of that success, the Task Force expanded its focus in 1991 to include "development" of the health and well-being of the world's children. Projects fall within broad categories related to sick children, well children, maternal health, and community wellness. Worldwide Task Force goals by the year 2000 include:

- global eradication of polio.
- a 90 percent reduction in measles cases and a 95 percent reduction in measles deaths.
- elimination of neonatal tetanus.
- a 70 percent drop in diarrheal deaths.

Through the collaborative efforts of WHO, UNICEF, The World Bank, UNDP, and The Rockefeller Foundation, the Task Force helped raise the immunization rate of the world's children from 20 to 80 percent in six years.

- a 25 percent decrease in deaths from acute respiratory infection in children under age 5.
- a 50 percent reduction in maternal mortality rates.

Advocacy and communication are key activities. The Task Force has begun to develop advocacy programs to sustain child survival efforts worldwide. Regular meetings and conferences provide a forum for sharing information and solving common problems.

The Task Force oversees other programs as well: the distribution of the drug Mectizan®, which prevents river blindness in Africa and Latin America; All Kids Count, a program that tracks child immunizations in the United States; Every Child By Two, a program that stresses early immunizations; and the Program Against Micronutrient Malnutrition (PAMM).

10 MILLION PEOPLE AVOID BLINDNESS WITH MECTIZAN®

Some 10 million people in Africa and Latin America are healthier thanks to Mectizan®, a drug that prevents river blindness.

Administered by the Task Force, the Mectizan® Donation Program began in 1987 when Merck & Co., an American pharmaceutical firm, made unlimited donations of the drug available. In turn, The Carter Center agreed to help facilitate the distribution of Mectizan® in Africa and Latin America.

River blindness derives its name from the fast-flowing rivers where blackflies that carry the disease breed. When they bite humans, the flies deposit the larvae of parasitic worms. As the worms mature, they produce millions of microworms that migrate through the body and cause inflammation. Mectizan® prevents blindness by killing the microworms, which can scar the eye. Just one dose of Mectizan® each year prevents the disease.

WHO rates river blindness (*onchocerciasis*) as a leading cause of blindness in Africa and Latin America. The disease affects some 18 million people and threatens 126 million more worldwide. To prevent the disease, the Task Force oversees Mectizan® distribution to community groups in 23 of 27 endemic countries in subSaharan Africa and all six endemic nations of Latin America.

MAKING SURE ALL KIDS COUNT

Several health sites across the United States are developing computer systems that will help improve the lives of children. Called All Kids Count, the program was developed at the Task Force in 1992 to support tracking of childhood immunizations. The need for such monitoring systems became clear in 1990 when a measles outbreak caused 44,000 hospitalizations and 64 deaths nationwide.

Many Americans don't realize that children should receive all the important childhood immunizations by age 2. The U.S. Centers for Disease Control and Prevention reports that only 44 to 63 percent of preschoolers are properly immunized. In some city areas, the rate is far worse—as low as 10 percent.

Through All Kids Count, 17 health sites have received funds to develop computer systems that will track all children under age 6. The systems will be linked to hospitals, schools, public health agencies, and doctors' offices. It is hoped that the systems will ensure that all children who are at risk for measles, mumps, rubella, polio, and other diseases will be vaccinated.

IMMUNIZING EVERY CHILD BY TWO

In 1991, former First Lady Rosalynn Carter and Betty Bumpers, wife of Arkansas Sen. Dale Bumpers, founded Every Child By Two to promote the importance of early immunizations. Their program educates parents, encourages health departments to expand access to immunization services, and promotes long-term policy changes to ensure vaccination for all U.S. children by age 2.

To date, they have started campaigns in more than 36 states, many in conjunction with governors' spouses. Every Child By Two also joined with the American Nurses Association to enlist more than 70 national organizations to become partners in the immunization campaign.

PAMM TACKLES MICRONUTRIENT MALNUTRITION

Three critical nutrients—Vitamin A, iron, and iodine—have a profound effect on child survival, women's health, learning ability, adult productivity, and general resistance to disease. At least 4 million children's lives could be saved each year by increasing their intake of Vitamin A alone. PAMM was developed to help countries control micronutrient malnutrition.

The Task Force, Emory University, the U.S. Centers for Disease Control and Prevention, and other PAMM partners concentrate on three areas:

- advocacy for national programs to eliminate micronutrient malnutrition (MM).
- interventions to improve MM status in targeted populations.
- monitoring the effects and progress of interventions.

TASK FORCE INITIATIVES HELP COUNTRIES FOCUS ON INCREASED IMMUNIZATION

In March 1984, 33 world leaders and public health experts concerned about worldwide child survival met in Bellagio, Italy, to discuss immunization programs for children. Their chief concern: individual programs were duplicating the others' efforts and were not immunizing enough children.

As a result of that meeting, the Task Force was formed to pool resources and coordinate childhood immunization among WHO, UNICEF, The World Bank, UNDP, and The Rockefeller Foundation. By coordinating their efforts, the Task Force has tackled the child immunization problem through increased research, awareness, and funding, allowing affected countries to better address their public health needs. Improved public health management and immunization planning brought about by Task Force initiatives sparked a fourfold increase in the worldwide child immunization rate from 1984-90.

In 1990 alone, vaccination efforts saved more than 3.5 million children from death brought about by measles, whooping cough, tetanus, diphtheria, and diarrhea. An additional half million were spared from developing polio.

There is still much work to do. More than one-fifth of children in developing countries lack all the immunizations they need. As a result, 2 million children die each year from measles, whooping cough, and neonatal tetanus. More than 100,000 cases of polio still occur. And an equal number of children are crippled, blinded, or mentally retarded.

"Alice King, First Lady of New Mexico, recalls how hard Bumpers and Carter worked when they visited her state last fall. 'They taped enough public service announcements for TV and radio for a year,' King says. 'Rosalynn even recorded the announcements in Spanish. They fired up the local Kiwanis Club, and now over 2,000 members are working to get children immunized.'" — Family Circle, July 21, 1992

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Ninety volunteers donate at least one day of their time each week to the Center. Volunteers give tours to guests, assist with special events, and work with Center programs. If you wish to volunteer, call (404) 420-5104.

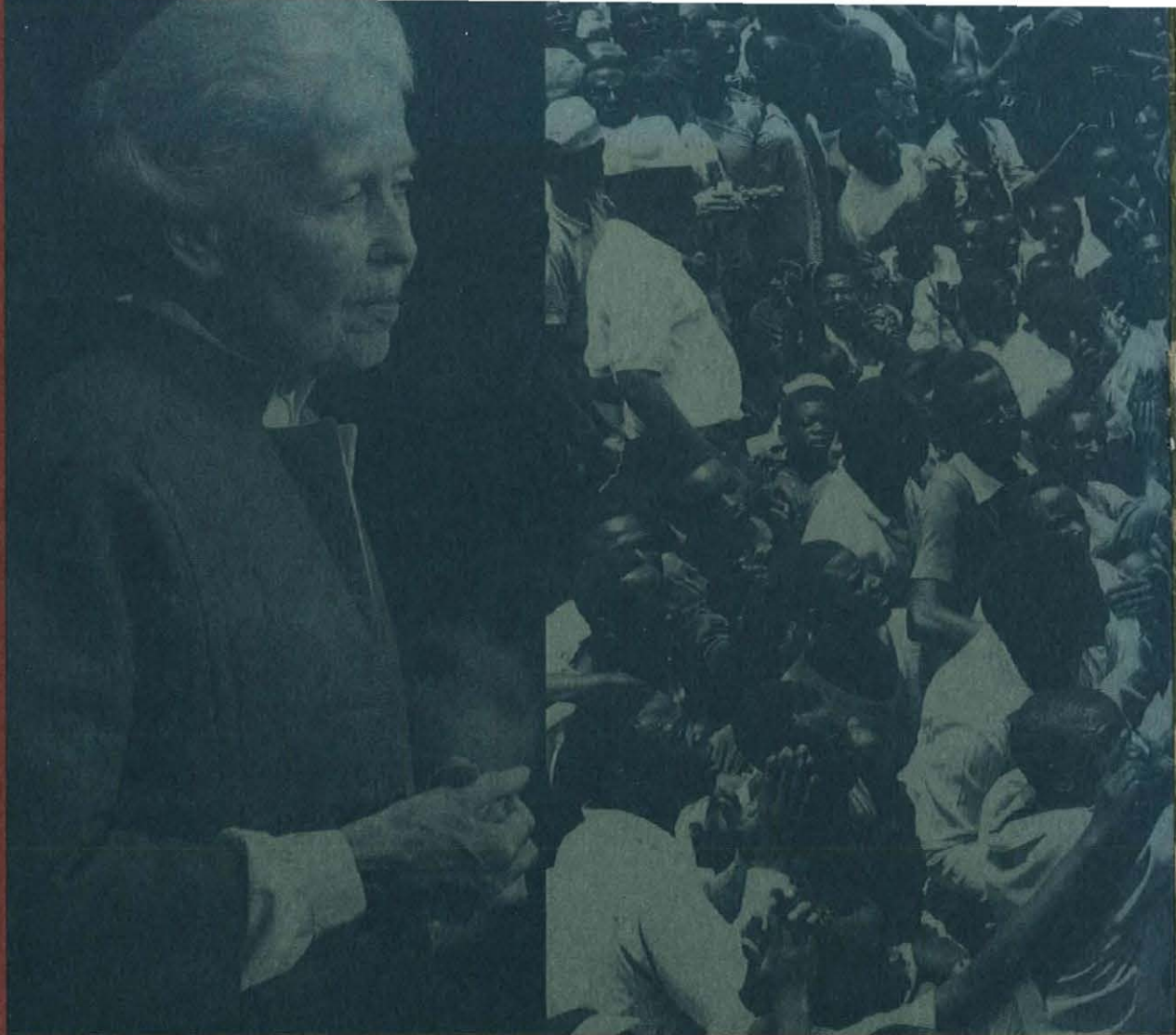
VISITORS

The Carter Center is open to the public only by business appointment or for special events. The Museum of the adjoining Jimmy Carter Library, which is operated by the National Archives, is open Monday through Saturday from 9 a.m. to 4:45 p.m. and Sunday from noon to 4:45 p.m. Call (404) 331-3942 for more information about The Jimmy Carter Library.



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