



U.S. AGENCY FOR
INTERNATIONAL
DEVELOPMENT

Bureau for Legislative
and Public Affairs

file

Lessons Without
Borders

JUL 29 1996

TO: Melanne Verveer, Deputy Chief of Staff
Patty Solis Doyle, Scheduler

FROM: Karen Anderson, Director of Public Liaison *Ken*

RE: Invitation to the First Lady

Attached please find copies of invitations to the First Lady to participate in an upcoming *Lessons Without Borders* conference in Baltimore. Specifically, we are inviting Mrs. Clinton to participate in two separate, yet consecutive, events on the evening of Monday September 16, 1996.

In the first event, the First Lady would address approximately 300 - 400 development professionals from around the country, along with another 500 members of the faculty and student body of Johns Hopkins University at Shriver Hall which has a capacity of 900. Immediately following is a special dinner with approximately 200 senior executives from US philanthropic, business, medical and government organizations honoring the gains in global health made by US-based public and private organizations and individuals.

Specifically, the dinner is being held to increase the awareness of and financial support for the important work of the International Centre for Health and Population Research in Bangladesh visited by Mrs. Clinton last year. While the dinner is not specifically a fundraising dinner, it is hoped that it will engender support on the part of potential corporate and foundation donors. We would like to recognize Mrs. Clinton for her commitment to improving global health and advancing the efforts of institutions like the Centre.

I hope you will strongly consider the First Lady's participation in these two events for the following reasons:

First, Mrs. Clinton is very committed to the work of USAID and on numerous occasions has expressed interest in participating in *Lessons Without Borders*;

Second, the Centre in Bangladesh is an important research institution that has saved the lives of millions of women and children in the developing world and its research has important implications for health issues here at home. Support from the Administration would greatly enhance its ability to continue this important work;

Third, this conference provides an opportunity for the First Lady to address a diverse audience - from students to corporate CEOs - of more than a thousand people from across the country.

And last, while *Lessons* is intended to provide a forum for technical exchanges between domestic and international experts, the conferences have taken on a broader dimension that provides a unique opportunity for the Administration to articulate important domestic policies: maternal and child health, microenterprise, the role of government in building sustainable communities and reinventing government, to name a few.

In a recent conversation with Nicole Rabner, she suggested that in addition to inviting Mrs. Clinton to be the honored guest, we ask her to serve in some capacity (perhaps honorary chair) in the Centre's fund-raising effort. Brent Berwager will be contacting you to obtain further clarification of the First Lady's interest in that regard.

I will contact you in the next few days to discuss this further. In the meantime, if you have any questions please call me at 647-7546. Thank you for your assistance and I look forward to talking to you.

cc: Nicole Rabner

- Development professionals
- Student body / faculty.



U.S. AGENCY FOR
INTERNATIONAL
DEVELOPMENT

JUL 29 1996

The Administrator

Mrs. Hillary Rodham Clinton
The White House
Washington, D.C. 20500

Dear Mrs. Clinton:

September 15-17, 1996, the U.S. Agency for International Development (USAID), the City of Baltimore and Johns Hopkins University will host the first national *Lessons Without Borders* conference. On behalf of Mayor Schmoke and other conference sponsors, I want to invite you to participate in two aspects of the program.

* On Monday, September 16, approximately 300 development professionals from around the country will participate in a series of workshops focusing on microenterprise and health issues. We would be honored if you would close the workshops by addressing the 300 *Lessons Without Borders* participants along with members of the faculty and student body of Johns Hopkins University. This event will take place at Shriver Hall which has a capacity of 900.

Immediately following the workshops, USAID and the Discovery Channel are hosting a dinner to celebrate the gains in global health made by the U.S. government and by the philanthropic activities of U.S.-based foundations, corporations and individuals. In particular, the program will focus on the accomplishments of the International Centre for Diarrheal Disease Research in Bangladesh (ICDDR,B), which you visited last year during your trip to South Asia. Approximately 200 executives from the U.S. business, foundation and medical communities will be in attendance. You are invited to give a keynote address at this dinner.

This national *Lessons Without Borders* conference will bring together hundreds of development professionals from private sector organizations as well as federal, state and local

governments from around the country. In addition to grassroots organizations, we are working with HHS, HUD, the interagency working group on Beijing, the microenterprise initiative and the Habitat II working group to plan the workshops. Our focus will be on health, economic empowerment and community participation and how government can better meet the needs of the community.

A tentative agenda, for both the conference and the ICDDR,B dinner, is enclosed along with press articles on the *Lessons Without Borders* program. As you can see, this initiative has not only garnered a great deal of positive media coverage, it also has resulted in tangible benefits to the communities involved.

I hope you will consider joining us. Karen Anderson on my staff will contact your office to discuss this further. I look forward to speaking with you soon.

Sincerely,



J. Brian Atwood

Enclosures: a/s

cc: Kurt L. Schmoke, Mayor of Baltimore
Dr. Demissie Habte, Director, ICDDR,B
John Hendricks, Chairman & CEO, Discovery Communications
Donna Shalala, Secretary, HHS
Henry Cisneros, Secretary, HUD

D R A F T Agenda
For Discussion purposes only

Lessons Without Borders
National Conference - Baltimore Maryland
Johns Hopkins University
September 15 - 17, 1996

Sunday September 15

5:00 - 7:00 PM Opening Ceremony - Glass Pavillion, JHU
Welcome by Mayor Schmoke

Monday September 16

8:00 AM Registration

8:30 AM Welcome and Introductions
Mayor Schmoke, J. Brian Atwood, MD delegation
Keynote - Vice President Al Gore* (INVITED)
Shriver Hall**

9:30 - 12:00* Workshops/Break-out sessions

12:00 - 1:30PM Lunch

1:30 - 4:30PM Workshops/Breakout sessions continue

4:30 - 5:30PM Closing Remarks - Mrs. Hillary Rodham Clinton (INVITED)
Shriver Hall**

6:00 PM *Discovery Channel/USAID Dinner:*
"A Celebration of Advances in Global Health"
Renaissance Hotel, Baltimore Harbor
First Lady Hillary R. Clinton, Honored Guest Speaker

Tuesday September 17

9:00 - 12:00 Panel Presentation on Capitol Hill - potential hosts include
Maryland delegation, members Labor and Health committees and
other interested members

Presenters to include combination of front-line development
practitioners and public and private policymakers.

* After giving opening address, Vice President Gore may tour an
empowerment zone project with Mayor Schmoke, federal agency representatives
(HHS/HUD) and Brian Atwood.

** Shriver Hall - Johns Hopkins University - Capacity 900

**LWOB
ICDDR,B Dinner**

Program Outline

Event Basics:	Registration, reception, dinner, assigned seating, table service, rounds, head table, presentations from head table.
Theme:	Celebration of the global achievements in health fostered by the U.S. government, and also by corporate, foundation and individual philanthropies.
Special Focus:	ICDDR,B.
Secondary Focus:	Individual/institutional donors making especially significant contributions to global public health.
Sponsor:	Discovery Communications, <i>USAID</i>
Coverage:	C-Span, et al.
Speaker Roster (Examples):	Mrs. Hillary Rodham Clinton Vice President Al Gore Mr. Brian Atwood Ms. Susan Berresford (Ford Foundation) Dr. William Richardson (Kellogg) Dr. Demissie Habte
Donor Recognitions (Examples):	Robin Chandler Duke (Packard Bd., Amer. Home Products) Warren/Susie Buffet (Berkshire Hathaway) Levi Strauss (Robert Haas) Rockefeller (Peter Goldmark) Ford (Susan Berresford) John C. Whitehead (Mellon, Asia Soc., Int'l. Rescue, Fed. Res. Bd of NY) David A. Hamburg (Carnegie)

Weather

Today: Warm, humid, thunderstorms.
High 84. Low 68. Wind 8-16 mph.
Tomorrow: Very warm, humid.
High 85. Low 68. Wind 8-16 mph.
Yesterday: Temp. range: 72-84.
AQI: 33. Details on Page D2.

The Washington Post

FINAL

Inside: Washington Business
Today's Contents on Page A2

119th Year No. 108

MONDAY, JUNE 10, 1996

Prices May Vary in Areas Outside
Metropolitan Washington (See Box on A2)

25¢

Baltimore, U.S. Cities Find Community-Building Models in Developing Countries

By Kelly Couturier
Special to The Washington Post

ISTANBUL—What works in Kenya also works in Baltimore, and that's why Mayor Kurt L. Schmoke came to the U.N. Habitat II conference on cities that opened in Istanbul last Monday.

Baltimore adopted methods used in a Kenyan immunization program to improve its schoolchild immunization rate from 62 percent to 96 percent since 1994, city officials report.

Schmoke and his staff learned about the Kenyan program through the U.S. Agency for International Development's "Lessons Without Borders" program, which shares information with U.S. cities on urban improvement techniques used overseas.

"Lessons Without Borders" fits well into a central theme of the U.N. conference: the value of sharing information about successful local

efforts against infant mortality, childhood illness, unplanned birth, sexually transmitted diseases, poverty and inadequate shelter.

Schmoke dismissed Sen. Jesse Helms's criticism of U.N. conferences as wasteful and unnecessary. "If the senator had spoken to mayors, he would have learned that we learn a great deal from these contacts," Schmoke said. "There are some common solutions that are being devised. We need to share some of the things that are successful."

Schmoke is among hundreds of municipal leaders attending Habitat II, aimed at creating more livable cities for the 21st century, when most of the world's population will be urban dwellers.

The Baltimore mayor described the day in 1994 when he learned that the child immunization rate in Kenya was better than in his city—much better.

After being briefed by aides who had trav-

eled to Kenya to learn about the AID-assisted vaccination program there, Schmoke replied, "That's great, but we are doing a great job with immunization."

An uncomfortable silence ensued, Schmoke said, and then a staff member gently told him that Kenya's rate of child immunization was 80 percent while Baltimore's was 62 percent.

"I was actually stunned that we had children in our schools who were not immunized when there is a state law" that required it, he said.

Baltimore adopted an outreach approach for its immunization drive, sending neighborhood workers into the community to administer services instead of waiting for people to seek services on their own, Schmoke said.

A lending program set up in Baltimore to help women who would not normally qualify for credit to finance small businesses was inspired by a similar program in Kenya, as were changes

to the city's Healthy Start program to include fathers-to-be in prenatal programs.

"Redesigning the program to include fathers has made an enormous difference," Schmoke said. "Men are now more involved with the lives of their children."

AID officials, concerned about the survival of their agency, whose budget has been slashed in recent years, say the "Lessons Without Borders" program is one way to promote the agency's work among skeptical U.S. taxpayers.

A conference exhibit called Best Practices describes dozens of urban improvement schemes in which local governments worked with private businesses and nongovernmental organizations. It will be turned into an electronic databank that will be available soon on CD-ROM and computer diskette sets after Habitat II, exhibit organizers say.

The initiatives include a program to provide low-income housing in Brazil, a private wom-

en's bank in India that gives small loans to self-employed women to improve their working materials, and the "Don't Move, Improve," urban revitalization initiative in New York's south Bronx neighborhood.

Reuters news agency reported from Vatican City:

Pope John Paul, saying he was "speaking for those who have no voice," urged those attending the global conference on the city to focus on marginalized and homeless people.

Referring to the U.N. conference in Istanbul, the pope called on delegates "to place at the center of their attention the poor, the children, women, the old and the marginalized."

"The right to a house, to an honest job, form part of one plan for living together which should ensure dignified living conditions for everybody, without discrimination. Every city must feel committed to becoming a city for all," the pontiff said.

Shocking Statistics

- Global GDP, in real terms, increased more than fourfold between 1960 and 1991 with the world's per capita income almost tripling during this period. With only a few exceptions the nations with the lowest per capita income in 1960 were the same with the lowest per capita incomes in 1991. Most of those whose per capita income declined were in sub-Saharan Africa.
- The world's total population was 5.7 billion in 1995. The total population of Asia is more than 60 percent of the world's total. Between 1950 and 1990, the population of the U.S. increased by 65 percent to reach nearly 250 million. In Canada it increased almost 95 percent to reach over 27 million.
- During the same period the population living in U.S. urban centres increased from 64 to 82 percent, while the Gross National Product increased twenty-fold to \$5 trillion (in constant 1982 dollars.)
- Sub-Saharan African country governments spend on average less than US\$17 per person on water supply, sanitation, drainage, garbage collection, roads and electricity. Other comparative figures are: South Asia (US\$15), East Asia (US\$72.5), Latin America and the Caribbean (US\$48.4), Eastern Europe, Greece, North Africa and the Middle East (US\$86.2), West Europe, North America, Australasia (US\$656).
- Percent of the world's population who over a five-year period were the victims of crime: 61 percent, with Asia weighing in with the lowest overall crime rate at 44 percent. Nearly 29 percent of the world's population experienced vehicle theft during the same period.

[Source: Global Report on Human Settlements 1996]

Baltimore Mayor Says U.S. Cities Face Same Problems As Third World

By JENNIFER GRIFFIN

As U.S. Senator Jesse Helms continues his effort to shut down the U.S. Agency for International Development (USAID), at least one U.S. city mayor says his city has benefited from a USAID programme originally designed for Kenya.

Baltimore Mayor Kurt Schmoke says in 1994 his city implemented an immunization programme that he learned about through "Lessons Without Borders", a programme USAID started to share its best development practices overseas with American city mayors.

In a mere three months last year Baltimore's immunization rate for school children was raised from 62 to 96 percent by applying simple lessons gleaned from a health project being run by Kenyan women. The project's books, which included pictures of children being given shots rather than long written explanations that many of the target group could not read, were being published near Baltimore and being sent to Kenya, but none of the city's officials knew about the successful programme.

"Aid and lessons do not have to just flow from the first world to developing countries," said David Hales, director of USAID's Global Environment Center and a leading member on the U.S. delegation to Habitat II.

During a meeting with his aides two years ago, the Baltimore mayor was congratulating them on the city's rate of immunization for children. "There was dead silence," said Schmoke, who was recently elected to his third term. "They said, 'Well, Mr. Mayor, we have compared the numbers and you are not doing as well as they are in Kenya.'"

As soon as the shock wore off, "I said, 'How did this happen?'" said Schmoke, during a meeting with journalists Wednesday. "I was just stunned."

Kenya's rate of immunization for two-year-olds (80 percent) was far greater than Baltimore's (which was then 56 percent). Prior to this, the highest immunization rate for any U.S. city was 58 percent in Boston.

After learning about the city's problem, Schmoke launched a city-wide immunization effort and a private health firm sponsored a team from Baltimore to go to Kenya to see what other lessons they could learn.

"There was a recognition that in parts of our city, we were suffering from similar problems as third world countries," said Schmoke, a former Rhodes scholar at Oxford University. "Rather than reinventing the wheel, it's better to see what's happening in other countries."

The team soon found other programmes to implement at home. They were immediately impressed by a micro-enterprise working in the Nairobi slums in which women pooled their money to give small loans of about 300 dollars to other women wanting to start their own businesses. These Kenyan women wanted to start simple businesses, such as clothing or shoe repair services, but they didn't have any collateral other than their promises to repay the loans.

Baltimore has implemented several programmes now based on the lessons they learned in Kenya and also Jamaica, including a prenatal and postnatal health program that involves fathers as well as mothers.

In the past, few U.S. government officials have been willing to accept that many of the problems facing American inner cities (high rates of AIDS, infant mortality and illiteracy) are the same problems faced by developing countries such as Kenya. But Schmoke seems to be one of the few mayors willing to learn from developing countries.

The Boston Globe

THE BOSTON SUNDAY GLOBE • MAY 26, 1996

OFF THE CUFF **Q&A** With Gail Price, Lessons Without Borders project director

Lessons Without Borders, a nationwide initiative of the US Agency for International Development, brings lessons learned in health care and development overseas to communities in this country. Gail Price, Lessons Without Borders project director at Management Sciences for Health, oversees a Boston program - Community Health Volunteers Initiative - created in January from lessons learned in Bangladesh. Report by Tatiana M. With spoke with her last week.

Q. What is the Community Health Volunteers Project?

A. The Community Health Volunteers Project is basically a program to train lay people to provide health education in communities and community-based agencies. The volunteers assist paid community health workers. Half of our volunteers are AFDC (Aid for Mothers Dependent Children) recipients who are doing volunteer work to comply with the community service requirement of AFDC. We also have residents who are interested in helping their neighbors receive better health care services.

Q. What do the volunteers do?

A. Many go with community health workers into homes to teach residents about available health services and to encourage them to seek preventive care at neighborhood health centers instead of waiting until they are sick and going to the emergency room. Some of the volunteers work with newly-arrived im-

migrants and walk them through the complicated US health care system in order to receive the services that they need.

Q. What are the program's goals?

A. Among our goals is helping the women on AFDC to develop career opportunities and job skills and to strengthen their self-esteem and get employment. We also aim to give community health workers the opportunity to work as someone's supervisor.

And, of course, we have a community goal to provide services to people who may be afraid to come into health care institutions by themselves.

Q. So, you are working with local agencies?

A. One of the strengths of the project is that we created collaborative relationships with agencies. We are working with the Codman Square Health Center, the Latino Health Institute, Project LIFE and the Immigrant and Refugee program of the Massachusetts Department of Public Health. We are only four months into the program and have just 16 volunteers, but we are also now working with the Boston Initiative for Teen Pregnancy Prevention, training community health volunteers to work in family planning in schools and youth centers.

Q. What kind of training do the volunteers get?

A. The training we provide includes self-esteem building, communication skills, working with a supervisor. Our initial training is five, half-day sessions.

Q. Usually, successful US programs are exported to developing countries. Why is the reverse true for this project?

A. Many developing countries do a better job of providing basic health services than the United States. Some have higher immunization rates, for example. They are able to accomplish this, to a large extent, by working with people in community settings, relying on community health workers and volunteers. The Bangladesh program, called the Local Initiative, is the largest nongovernment family-planning program. They have over 30,000 community health volunteers, who are supervised by community health workers, going to peoples' homes to talk to them about family planning. Our program is broader than family planning and includes all aspects of public health: AIDS prevention, immunization.

Boston already has many community health workers' programs. What we added was having the workers supervise volunteers to extend their reach in the community and to get the volunteers new skills.

Q. Who funds the program now?

A. We received an initial grant of \$54,000 from the Cabot Family Charitable Trust. And we just received another grant from the Rockefeller Foundation.

For more information, call any of the agencies involved in the project. AFDC recipients should contact their case worker.



GLOBE PHOTO/ENL

GAIL PRICE

May 17, 1996

Rocky Mountain News
Editorials

Benefits without borders

What if you held a conference on foreign aid and nobody came?

Actually, more than a few people did show up for "Lessons Without Borders," an event held last week at Denver University and sponsored by such groups as CARE, the Colorado Council of International Organizations and Peace Corps Alumni of Colorado.

But no political heavyweights of Denver or Colorado put in an appearance, and precious few members of the media.

Nonetheless, some of the facts and figures that were discussed might well come as news to many people. Poll after poll suggests that Americans believe that up to 20% of their tax dollars are being sent overseas as foreign assistance. The real figure is less than one-half of 1% of the federal budget. And in inflation-adjusted terms, foreign aid programs are at their lowest level in 50 years.

Kelly C. Kammerer, representing the U.S. Agency for International Development, pointed out that almost 80% of USAID's contracts and grants go directly through American organizations either for services or commodities that are then sent to developing nations. That gives a boost to American farmers, manufacturers and other free market types.

In fiscal year 1994, he noted, USAID spent \$80 million in Colorado alone. And Colorado also happens to be a relatively strong international trading state, earning more than \$5 billion annually from the sale of goods and

services abroad. At least some of that trade was with nations that used to receive foreign aid from Washington but no longer need it.

Kammerer pointed out that between 1990 and 1995, American exports to "transition and developing countries increased by \$98.7 billion. This growth supported roughly 1.9 million jobs in the United States." And foreigners aren't just buying hamburgers and milkshakes. They're buying computers, communications equipment, pollution control devices and expert services, too.

Not all nations are equally prepared to make use of foreign assistance. Based on every historical precedent, those that choose a statist development path are going nowhere and should be allowed to proceed without any help from U.S. taxpayers.

But countries that encourage economic freedom may successfully utilize the assistance we provide; if they do, it will redound to our benefit. As Kammerer observed, we now "export more in a single year to South Korea than we ever gave that nation in foreign assistance." In 1994, we exported "over \$17 billion to Taiwan, more than 15 times what we ever gave that nation."

One of the lessons that was taught at DU last week was that foreign aid - if it's carefully managed and targeted - can be a good deal for both giver and receiver. That may not be news, but in a year when Ross Perot, Pat Buchanan and others are taking to their soap boxes, it bears repeating.

U.S. Agency Uses Foreign Aid Expertise to Help Reopen a D.C. Health Clinic

By Michael A. Fletcher
Washington Post Staff Writer

After their popular health clinic was closed abruptly by city budget cuts more than a year ago, the people of Arthur Capper housing development in Southeast Washington futilely looked to government and foundations for help.

Now, they may have found what they need in an unlikely source.

The community is linking arms with the Agency for International Development, an arm of the U.S. government founded more than three decades ago to attack social and economic problems in Third World countries. Together, they intend to devise a plan to resurrect the clinic.

It might seem odd for an agency used to operating in the most impoverished corners of the globe to be working in the capital of the world's wealthiest nation. But, as it turns out, the union is an opportunity for both AID and the people of Capper.

For AID, the program offers another way to prove its worth to an increasingly skeptical Congress. Meanwhile, Capper, like many impoverished U.S. communities, finds itself in a desperate fight to save crucial services amid deteriorating social conditions depressingly similar to those in the Third World.

"If their methods worked over there, I feel they will work here," said Madge Fields, a 30-year Capper resident whose two school-age daughters were treated at the health center before it closed. "I always thought that in the Third World they had worse problems than we did. But they are telling me that is not necessarily the case."

J. Brian Atwood, administrator of AID, said: "We thought it was just a good idea to take some of the lessons we had learned abroad and apply them at home. We almost felt it was an obligation."

It also happens to be good politics. For years, AID has been a target of lawmakers who call the \$6 billion agency bloated, wasteful and unnecessary. The assault has intensified with Republicans running Congress, and Sen. Jesse Helms (R-N.C.), chairman of the Foreign Relations Committee, is leading an effort to eliminate the agency.

AID has been fighting back by highlighting the long-term value of foreign aid and, increasingly, its efforts on the domestic front. Washington is the fourth U.S. city to which AID has come since launching its Lessons Without Borders program 18 months ago. The program teaches relatively simple, inexpensive ways to improve economic and social conditions in poor neighborhoods.

Although the program may be winning AID support in U.S. cities, it has done little to silence its critics on Capitol Hill.

"AID has done for the Third World what the Great Society has done for America's inner cities, and that is spend billions of dollars on wasteful programs that have done little or nothing to lift people out of poverty," said Marc Thiessen, a spokesman for the Senate Foreign Relations Committee.

Others are more hopeful. In Baltimore, AID's intervention inspired a city effort that dramatically increased child immunization rates. It also helped a job training program there launch a small loan fund for participants unqualified for other credit. In Boston, the success of AID programs

in Bangladesh and Bolivia persuaded local officials to train neighborhood leaders as health educators. And in Seattle, leaders are planning an environmental awareness initiative patterned after AID programs in distant parts of the world.

Over the next several months, almost a dozen AID specialists will spend part of their time at Capper, a drab collection of mid-rise buildings adjacent to the Carrollsburg housing development between the Southeast Freeway and the Washington Navy Yard. About one-quarter of the development's family units are vacant, and family incomes average \$7,600 a year.

Despite Capper's poverty, AID officials are confident that they can help the community reopen the health clinic, which once had 6,000 clients. AID is prohibited by law from funding programs in the United States, but is permitted to share its expertise domestically through its public education component. The agency plans to marshal its expertise—in essence, working as an unpaid consultant—to develop a business plan and find outside funds that will put the clinic back in business.

David I. Gilmore, the court-appointed receiver who oversees public housing in the District, said he welcomes AID's help, although he cringes at the inevitable comparisons to the Third World.

"That somehow implies that the poor are a separate segment of society," he said. "That's bull. They're among us, part of us. But it's pretty clear that this agency brings some expertise we don't have, and they're willing to share it. And that is hard to come by these days."

The program was conceived nearly two years ago in a conversation between Atwood and Marian Wright

Edelman, head of the Children's Defense Fund. Atwood said that it became clear the United States was behind many developing countries when it came to child health care and that his agency could help.

Atwood quickly turned that notion into an offer that was seized by Baltimore. Other cities were not far behind, and AID says it is evaluating requests from several more.

For the places that have sought AID's help, the biggest hurdle has been acknowledging the unflattering truth: that they have problems—including infant mortality, joblessness and teen pregnancy—resembling those in developing countries.

"We have some neighborhoods where the health problems looked more like those of a Third World country than a product of our democracy," Baltimore Mayor Kurt L. Schmoke said at a recent meeting of Capper residents.

For example, only about 60 percent of Baltimore's school-age children had all their documented immunizations before last year. The rates are much higher in some impoverished nations, including Kenya, where the immunization rate for 2-year-olds is about 80 percent.

But before the current school year began, Baltimore made immunizations a priority. It closely enforced an often neglected requirement for schools to check children's vaccination records. It established mass immunization sites like those used in the developing world. It trained neighborhood volunteers to knock on doors and spread the word. Now, the city's documented childhood immunization rate is 97 percent for schoolchildren, which it touts as the best rate among big U.S. cities.

Baltimore officials said immunizations became a high-profile issue only

because of a trip several officials took to Kenya to observe AID programs in action.

Women Entrepreneurs of Baltimore (WEB), a federally funded program that trains women to run businesses, established a "peer lending" initiative for its graduates, an idea that crystallized with the help of the AID trip to Kenya.

"We had known for a long time that we wanted to do something like this, but we were never really sure how to do it," said Amanda Crook Zinn, director of WEB. "But after we saw the incredible positive impact that access to capital provided entrepreneurs in Kenya, it really spurred us on."

WEB graduates now organize themselves into lending groups, review one another's credit applications and are responsible for repaying loans should any member default. The capital is provided by the Morris Goldaeker Foundation, of Baltimore.

Although the first loans are only \$500, officials say the program is making a critical difference to the graduates, who need to money to launch their businesses. One member brought a new engine for a car used in her catering business. Another bought a sewing machine for a tailoring business. A third graduate used her loan to buy a computer software package for her bartering firm.

"These loans make a huge difference for these women, because they can't go to a bank," Zinn said. "They have no collateral, no business history, no credit history. But so far, we've had a 100 percent pay-back rate."

In the District, the hope is that AID can transform the Capper community's enthusiasm for its health center into a sustainable plan for reopening it. Before AID was invited, residents had invested a lot of time but still not decided how to reopen the clinic.

But AID is confident that it can make the difference, if only because it has a long history of doing more than

less. "There may be some comparison but this isn't the Third World by any means," Atwood said. "More people here are literate. They have a facility for the clinic. But this is a poor community where government is beginning to pull away resources, and people increasingly are going to have to fend for themselves."

U.S. Foreign Development Agency Turns Attention Toward Urban American Problems

By Angie Cannon
Knight-Ridder Newspapers (KRT)

BALTIMORE — In her quest to reduce infant mortality, Daisy Morris traveled thousands of miles to Kenya and discovered the perfect book on family planning.

It had no words, just drawings of couples trying various birth control methods — far more practical than her health center's slick, but wordy brochure.

The greatest irony: The book was produced only a few miles away from her center by Johns Hopkins University for the U.S. Agency for International Development.

Over the last 30 years, the AID has doled out foreign aid and helped impoverished countries immunize youngsters, prevent deadly diarrhea and promote birth control.

But now, in a reflection of the desperate conditions in America's cities, the agency that has helped the Third World is turning its attention toward urban America through the "Lessons Without Borders" project.

"There are problems in American communities that resemble the developing world," said Howard Salter, an AID spokesman. "Our goal was for American cities to use us as a resource for new and innovative ideas."

While mayors may cringe at Third World comparisons, cities are grateful for the help as they struggle with staggering problems that transcend borders.

"We are a very blessed country with resources and talent, yet we are plagued with some of the same problems of countries that don't have the resources or technologies," said Morris, operations director of a center trying to reduce infant mortality in a destitute section of West Baltimore.

With foreign aid a favorite target of the Republican-controlled Congress, AID officials admit the "Lessons Without Borders" program is a way to build support at home with skeptical taxpayers.

"When you are the biggest and richest,

there is a tendency to think everyone else doesn't have much to offer," said Richard Cash, a fellow at the Harvard Institute for International Development. "But the United States can learn a great deal from other societies. Information no longer simply flows from the rich to the poor."

The project was born partly through the modern miracle of C-SPAN.

In late 1993, AID Director J. Brian Atwood was on the air holding forth about how he wanted to apply overseas lessons to help American cities.

An aide to Baltimore Mayor Kurt Schmoke happened to hear him. "I called cold and said if he wants to do anything we would be delighted," said the aide, Lee Tawney.

What evolved was a conference in June 1994 that brought together about 200 Baltimore and AID health and social workers at Morgan State University, with Vice President Al Gore giving the keynote address.

There were more workshops, and then nine Baltimore professionals traveled to Kenya and Jamaica to tour AID sites. The project expanded. A conference in Seattle focused on community development and environmental issues; in Boston community health workers will be trained based on a Bangladesh model.

And now, cities across the country are clamoring for AID expertise, including Louisville, Newark, New York, San Diego, Los Angeles and even Lake Tahoe.

"We Americans have a tendency to be somewhat arrogant and think we have all the answers," said Amy Solomon, a community activist involved in the Seattle conference. "But there is something to discovering that people two-thirds of the way around the world are struggling with the same sorts of human problems."

Legally, AID is not allowed to fund programs in the United States. Instead, in the Lessons Without Borders project, it is offering advice.

For Penny Borenstein, a big benefit of her trip to Kenya was getting Mayor Schmoke's ear afterward.

As Baltimore's immunization program director, Borenstein broke the bad news to him: Kenya had better child-immunization rates than Baltimore.

In Kenya, 80 percent of the 2-year-olds were vaccinated, compared with 56 percent in Baltimore. Only 62 percent of Baltimore's school-aged children had all their documented immunizations.

"I straightforwardly told him they are doing a better job in immunization coverage in Kenya than we are in Baltimore," said Borenstein, a pediatrician.

She remembers Schmoke leaning forward with a furrowed brow and saying: "I have to tell you I am very disturbed by what you are telling me."

With the mayor's political muscle, a massive immunization campaign was launched this year. Some 39,000 school-aged children were either immunized, or more-complete records were collected for them. The bottom line: The rate of documented immunizations now is 96 percent.

Borenstein also saw first-hand that simple pictorial messages -- such as a baby getting a shot -- were more effective than slick advertising campaigns.

In Baltimore, like many cities, many residents do not use the available social programs. And part of the problem is illiteracy. An earlier immunization campaign, for example, was not a rousing success because it relied too much on the written word.

"We had an advertising firm that produced all this material, but no one could read it," said Tawney. "The folks we really wanted to get were illiterate. These posters and bumper stickers didn't mean a hoot to them."

Morris, who found her perfect family planning book, agreed. "It clicked to me that we put so much emphasis on the written word," she said. "We think in jargon. The more basic we can become, the better."

Morris saw other things in Kenya that she is replicating here, such as training neighborhood residents to go door-to-door to identify pregnant women and bring them in for early prenatal care. She also was impressed by the involvement of Kenyan men in family planning, a role she is encouraging here. "In Kenya, the responsibility for family planning is truly a family matter," Morris said.

Tom Hobgood, an administrator at the AID mission in Kenya, showed the Baltimore participants how group lending, known as "micro-enterprise," is working in Nairobi slums. Participants, mostly women, pool their money and lend each other sums of about \$300 to finance businesses, such as shoe repair and making clothing, without collateral.

Prompted by the Kenya visit, Amanda Crook, head of Women Entrepreneurs of Baltimore, set up a peer-lending program to help women finance businesses ranging from catering to family day care.

"The whole mission staff was very excited and humbled by that realization that our programs overseas could address needs at home," Hobgood said in a telephone interview from Kenya. "There are indeed lessons learned from overseas to fight poverty."

A U.S. City Gets Some Healthy Tips From Africa
Lessons Without Borders / 'Barefoot Doctors'
in Baltimore

BY Barry James

International Herald Tribune (8/16/95)

Daisy Morris, a health worker in inner-city Baltimore, went to Kenya almost a year ago and had her eyes opened.

"I thought, 'Wow'," she said, noting how with fewer resources Kenya had a better record on infant immunization and family programs than her own community.

"In Kenya, you figure they have got every problem you can imagine, yet their immunization rate was, like, three times better than ours. So we came back saying, 'Now what's our excuse really?'"

Ms. Morris's experience exemplifies a trend. Wrestling with shrinking budgets, health administrators and social workers in the United States and other industrialized countries are looking to developing nations for solutions that are cheaper, but not necessarily less effective, than their own.

Donald O. Fedder, director of the Enable project, a neighborhood action program in Baltimore, borrowed the Chinese "barefoot doctor" idea to provide care to chronically ill poor people.

He looks for people with a strong involvement in their communities and teaches them basic skills, like how to monitor blood pressure and glucose levels. Their job is to check on patients, make sure they take their medication and get them to visit clinics when necessary.

The program is good value, Mr. Fedder said, because if the patients are followed on a regular basis, they can often avoid expensive hospital stays.

Overall, he said, "the level of care is actually better than if it comes from a highly trained health worker, who may be more interested in the case than the person."

The experience of people like Ms. Morris and Mr. Fedder has led to an uncommon accord between the World Health Organization in Geneva and the state of Maryland, whose governor, Parris N. Glendening, announced the agreement on Tuesday.

"To merge our talents and experiences," Mr. Glendening said, "will lead to preventive strategies that address social as well as health problems. Similar challenges exist in developing countries and in America's urban and rural areas where

environmental, educational and social ills have contributed to a poor standard of health."

For three years, Maryland will cooperate with WHO to share expertise and experience to improve the health of the poorest both in the developing world and at home.

Centers of learning like Johns Hopkins University and the University of Maryland have long been involved in foreign programs, which meant that Maryland was receptive to the idea from the start.

But what gave the initiative impetus was the first "lessons without borders" conference organized by the U.S. Agency for International Development in Baltimore in June 1994.

"America has done a better job in some instances combatting difficult social problems abroad than we have done in our own backyard," says the agency, which promotes the idea of global solutions to common problems.

It argues that many initiatives in the developing world are equally applicable to U.S. inner cities. These include lessons from Jamaica on teen pregnancy and prevention of violence, and self-financing primary health care clinics in Bolivia.

In October last year, the agency sent Ms. Morris to Kenya with a delegation of Baltimore officials. She is director of operations for a city-wide program called Healthy Start, which provides prenatal and infant care and family planning advice.

"We used to be focused on women, because when they came in for deliveries, oftentimes they came alone," she said. "And the assumption was that because they were not legally married, the men were not participants. The system did nothing to encourage the men to participate."

"What I saw in Kenya was just the opposite. There, every opportunity is taken to engage the father. What I learned is that we can do the same here, even in a nonmarriage situation. Regardless of the formalization of the relationship, the father is still involved in the life of the mother nine times out of 10."

Ms. Morris said that the Kenya experience made her realize that American black society is not as matriarchal as it looks from the outside. As a result, Healthy Start programs have been redirected not just at women but at "mom, her significant other and the children."

Going to Kenya also reassured Ms. Morris that some of the ideas already adopted by Healthy Start

like using volunteer workers from the community were on the right track.

"It validated a lot of the concepts that we were trying to use here," she said. "Before, I was committed, but in a vacuum. I asked, 'Is anyone else doing this in the world?' Now I am more committed than ever."

Maryland's agreement is with a branch of the World Health Organization that gets kudos for direct and efficient action in the world's poorest countries. It is called Intensified WHO Cooperation with Countries and Peoples in Greatest Need, and its deputy director, John Martin, believes that the United States has a lot to gain from the program.

"It may come as a surprise and a shock to many Americans to learn that U.S. inner city immunization rates are often lower than those of West Africa," he said. "One has to ask oneself how and why this can be true."

From his own long experience in the developing world, Dr. Martin, an Irish physician, has little time for the capital-intensive, top-down programs that pass for foreign aid in some countries.

Sending a scanner to an African country ill-prepared to use it, he said, is almost "a crime." What is often needed more, he said, is soap to improve hygiene, and seeds to create kitchen gardens and improve nutrition. Indeed, Dr. Martin argues, many of the problems of the developing world are more the result of poverty than lack of medical resources.

"We are convinced from our experience in the developing world that a purely medical approach will not work," he said. "We think this is true also of inner-city populations."

But this approach requires hard thinking about the root causes of poverty unemployment, lack of education and drugs. Ms. Morris noticed less of a drug problem in Kenya, although she said the country does have a serious problem with alcoholism. And Baltimore's high rate of infant mortality 20 deaths per 1,000 live births, or more than double the national average can be directly traced to poverty, she said.

"Our technology in terms of keeping babies alive?" she said. "Hey, we're cream of the crop." But despite the high-tech equipment, babies still die, she said, because of inadequate prenatal care, poor nutrition and, often, drugs.

With a more cohesive social structure, tighter families and a hunger for education, Kenyans appear better able to cope with poverty.

"If we could take some of that fortitude over here, it would do us all a world of good, myself included," Ms. Morris added.

The agreement with Maryland will involve the state's Department of Health and Mental Hygiene and various partners in collaborative programs, like community health, immunization strategies and disease control. It is specifically open for participation by private enterprise at all levels.

How this might work is illustrated by two recent WHO-sponsored visits to Sierra Leone by Jonathan R. Foley, chief of primary care services for the state Department of Health.

In the United States he obtained laboratory equipment donated by U.S. public health authorities that was badly needed in Sierra Leone. At the same time he suggested computer training and software projects in Sierra Leone for which Maryland companies would be capable of bidding.

Although a major donor to the World Health Organization, the United States does not contribute to this particular program.

Dr. Martin said he hopes the cooperation with Maryland will help the United States realize that it also can benefit from WHO programs. Other industrialized countries, including Britain, Germany and Canada, make much greater use of the organization's experience and technical expertise.

Dr. Martin said that although the United States pays a good part of WHO's overall budget, it has a poor understanding of what the organization can offer in return, while grumbling about the inefficiency of the United Nations system.

"We want to create an awareness of what we can do," he said, "because we cannot understand why the United States does not take advantage of what it has a right to."

Asia environmental market entices, intimidates small firms

BY GAGANDEEP SAINI
Journal staff reporter

Not long ago, environmental firms didn't have to look abroad for business, the domestic market providing them with all the work they could handle.

But with the flattening of markets in the United States, and the explosion of demand for environmental technologies and services globally, more and more companies are casting wistful glances overseas, especially to the developing regions of Asia and the Pacific Rim.

For many small- and medium-sized businesses, however, the vision is unclear and carving out a niche in an expanding but muddled pond can be too costly and risky a venture to pursue.

Chasing false leads, getting the cold shoulder because of their size from diplomats and others 'in the know,' learning the intricacies of doing business with another culture and in a different language, defending proprietary technology in foreign markets from those looking to copy it without just compensation, are some of the biggest hurdles industry inside cite as reasons to stay close to home.

They don't have to be, says Michael Seldon, who as a business consultant in the West Coast office of the United States Agency for International Development (USAID), provides information on foreign markets and trade opportunities, and taps U.S. businesses into programs that can help them introduce their products and services in other countries.

"These firms, particularly smaller ones, need to know about all of the resources that are available to help them go global...They would become much more involved in solving environmental problems around the world, creating jobs domestically in the process," Seldon says.

Seldon and USAID were in town late last month hosting their *Lessons Without Borders* initiative, which brought international technical experts into Seattle to exchange

advice on pollution prevention, community empowerment, urban sustainability, and natural resource management.

The agency's business forum entitled "Developing Environmental Technologies Overseas: The Asia Potential" fits in perfectly with the overall initiative because environmental problems and concerns truly transcend national boundaries.

Big pond

The global market for environmental technologies is now estimated at \$200 billion to \$300 billion, according to the Organization of Economic Cooperation and Development (OECD) and the Environmental Business Journal (EBJ), respectively, and some analysts predict that it will double by the year 2000.

Much of that growth is in developing countries, where environmental concerns, which for decades have taken a back seat to the push towards industrialization, are now being addressed because of public pressure both globally and nationally in the Asian marketplace.

In a report entitled U.S. Industrial Outlook 1994, the Department of Commerce, International Trade Administration, says markets for environmental technologies around the world are blossoming because more stringent laws and enforcement procedures are being enacted in industrialized and industrializing nations.

The results are showing.

Between 1989 and 1991, U.S. exports from the environmental industry increased by 70%, according to a July 1993 Environmental Protection Agency report.

Much of this growth, however, has been dominated by large firms and multinational operations with the financial resources to set up satellite offices and establish the ties necessary for business success in other parts of the world.

David Welsh, executive director of the Oregon Environmental Technology Association, says that of the roughly 200 OETA member firms, less than 5 percent are doing work internationally, and aside from a

few large firms like CH2M Hill, there is virtually no work being done in Pacific Rim nations — a natural market for the Northwest.

"Most of our member companies are really small and they don't see how they can play over there," Welsh says.

British environmental firms have been able to capitalize on this vacuum, utilizing the century-old political structures and ties in place as
(Continued on Page 6, Column 5)

Asia environmental market

(Continued from Page Three)

remnants of the colonial era, to introduce their products and services, many of which are years behind U.S. technology, into markets like Malaysia.

A former British colony, the country has a large English-speaking populace, making it a prime target. Ironically, Malaysia recently established a "Buy British Last" policy. Both factors combine to make this an ideal starting point for many American companies.

India is another global hotspot for U.S. environmental technologies because of its Democratic government, a middle class of 100 million to 200 million people, and an industrial sector that is in the top 10 worldwide in terms of output. The country also has three of the top 10 most polluted cities in the world.

Air and water pollution control and waste treatment processes are in high demand in both markets.

The growth in the electronics industry in Southeast Asia, and the attendant environmental problems, also provide opportunities such as industrial solvent recycling — a natural market for Northwest environmental firms serving the local high technology sector, says Seldon.

Small fish

Environmental industry veteran Terry McNabb remembers well his companies' past speculative dabbling overseas: expensive ventures, sporadic results.

McNabb is president of Resource Management Inc. (RMI), a Turnwater company that uses aerial environmental assessments for developing maps and reports to delineate water quality problems on a watershed level. He is also part-owner of Aquatics Unlimited, which develops environmental response vessels and equipment to deal with those problems.

"We've had a number of miserable experiences over the last five to ten years," he says.

One bogus lead in particular typifies McNabb's frustrations.

After spending two or three years in work and investment to get a letter of intent from the Egyptian government to clear the Nile River of a weed species that was causing irrigation and health problems, the prospect "sort of vaporized into thin air," he recalls.

"As a small business, we really can't afford that."

RMI's fortunes in the global market turned in 1993, when USAID contacted the firm about getting financial and technical assistance to penetrate markets in Asia and other developing regions. USAID also identified RMI's technology as one that has a real competitive advantage in those parts of the world.

"That kind of floored me because it's not often that a government agency calls you and says they would like to help you improve your business," notes McNabb.

He says USAID's support took years of the learning curve for doing business in Asia, matching RMI's capabilities with pre-qualified leads and getting the company in touch with foreign government and private sector contacts as well as non-governmental organizations (NGOs) facilitating trade and technology transfer.

With an \$18,000 matching grant

obtained through the agency's U.S.-Asia Environmental Partnership (US-AEP) program, McNabb went to Malaysia in 1993 on a marketing and reconnaissance mission and found it a good match.

"For a country about the size of Washington state, the money going through there is mind-boggling," McNabb says.

The Turnwater company then signed on with US-AEP's Environmental Technology Network for Asia (ETNA), which links environmental businesses with customized opportunities gathered by US-AEP representatives based in nine Asia cities.

"Now we are seeing two or three project a month that we would like to go after, and they come right into the office via fax," he says.

McNabb's companies have garnered \$13 million in sales since hooking up with USAID, with another \$12 million in potential deals. As a result, RMI anticipates adding 24 new employees within a year.

Navigating tools

American companies looking to take the global plunge have access to a number of USAID-based navigating tools, says Timothy Titus, managing director of partnership and outreach for US-AEP.

An initiative promoted by USAID core funding of \$100 million over five years, US-AEP coordinates the participation of 25 U.S. governmental departments and agencies, numerous business and NGOs — these "partners" provide \$400 million in leveraged cash and in-kind contributions — to work with 34 countries and territories in Asia and the Pacific.

"Through sales, joint ventures and license agreements, we hope to take that half billion dollars, and turn it into \$5 to \$10 billion in incremental exports from the environmental sector that wouldn't have been here before," says Titus.

An additional 100,000 to 200,000 U.S. jobs are also expected, he says.

USAEP has also formed a partnership with the National Association of State Development Agen-

cies (NASDA) to establish a fund that provides matching grants of up to \$20,000 for businesses in the environmental/energy sector. The money can be used for engineering and technology workshops, technology and equipment demonstrations, business development missions, professional exchange programs, and promotional and marketing opportunities.

Another important resource is the Trade in Environmental Services and Technologies (TEST) project which provides resources for U.S. firms to draw upon in the pursuit of environmental transactions and sustainable business linkages in India. TEST is implemented by the Industrial Credit and Investment Corporation of India (ICICI), the country's premier development finance institution.

USAID has provided ICICI with \$20 million for loans, grants and other assistance to Indo-U.S. environmental ventures.

Further information on these resources and all other USAID programs may be obtained from the Center for Trade & Investment Services (CTIS), a Washington D.C.-based information center providing small- and medium-sized firms with a central point of contact on the agency's programs and activities in development-related sectors such as the environment, energy, agribusiness, health, and training.

It is set up as an information clearinghouse with regional analysts specializing in USAID-assisted countries in Asia, Africa, Latin America and the Caribbean, Near East, Eastern Europe and the New Independent States.

Clients ranging from U.S. and developing country firms, private voluntary organizations, other U.S. government agencies, international organizations and foreign governments, can access CTIS at: (800) 872-4348 (phone), (202) 663-2670 (fax), or gopher.info.usaid.gov (Internet address). The mailing address is USAID, G/BO/CTIS, SA-2, Room 100, Washington, DC 20523-0229.

LOCAL PROBLEMS, GLOBAL SOLUTIONS

LESSONS WITHOUT BORDERS

by Hugh C. Minor IV

Many Americans often ask, "Why do we contribute to foreign aid?". To address this issue the U.S. Agency for International Development has begun a series of workshops traveling throughout the country. The major focus of the Lessons Without Borders workshops is to share lessons learned in development environments overseas with community-based organizations in the U.S. If these programs work in developing communities, why can't we adapt them to situations in our own?

Childreach, U.S. member of PLAN International, participated in a recent workshop in Boston, Massachusetts. The theme is best summed up by the subtitle: Local Problems, Global Solutions. This workshop served to present lessons learned by international development organizations to local community organizations in Boston in the areas of Health, Education-Literacy, Housing, Economic Growth, Sustainable Communities, and Partnerships. Members of the Boston community hoped to benefit from years of practice in developing communities. For Childreach, this conference provided a great opportunity to share over fifty years of international experience with domestic groups.

PLAN's health advisor, Dr. Remi Sogunro, presented a case study of immunization from one of our programs in Delhi, India. In discussing this

project, Dr. Sogunro related PLAN's efforts to train local community health workers to establish schedules of immunization and vaccination for hard to reach children. The program's success depended upon the commitment of volunteers as well as PLAN's part-

learned better job skills. While in day-care, children received their regimen of shots. This system worked to provide education, skills training, and health care and could be easily duplicated here.

2.) People must take responsibility for



nership with local organizations CASP (Community Aid and Sponsorship Program) and Love & Care.

Many issues were raised that relate directly to problems of domestic organizations.

1.) Health and immunization must be combined with other sectors. There must be integration with skills training and education. In PLAN's Delhi project, mothers brought their children to daycare while they worked or

their own health. Decisions must not be made by a supervising government but left for communities to decide. Organizations must begin by building trust and establishing credibility if they plan to have long-term sustainable programs.

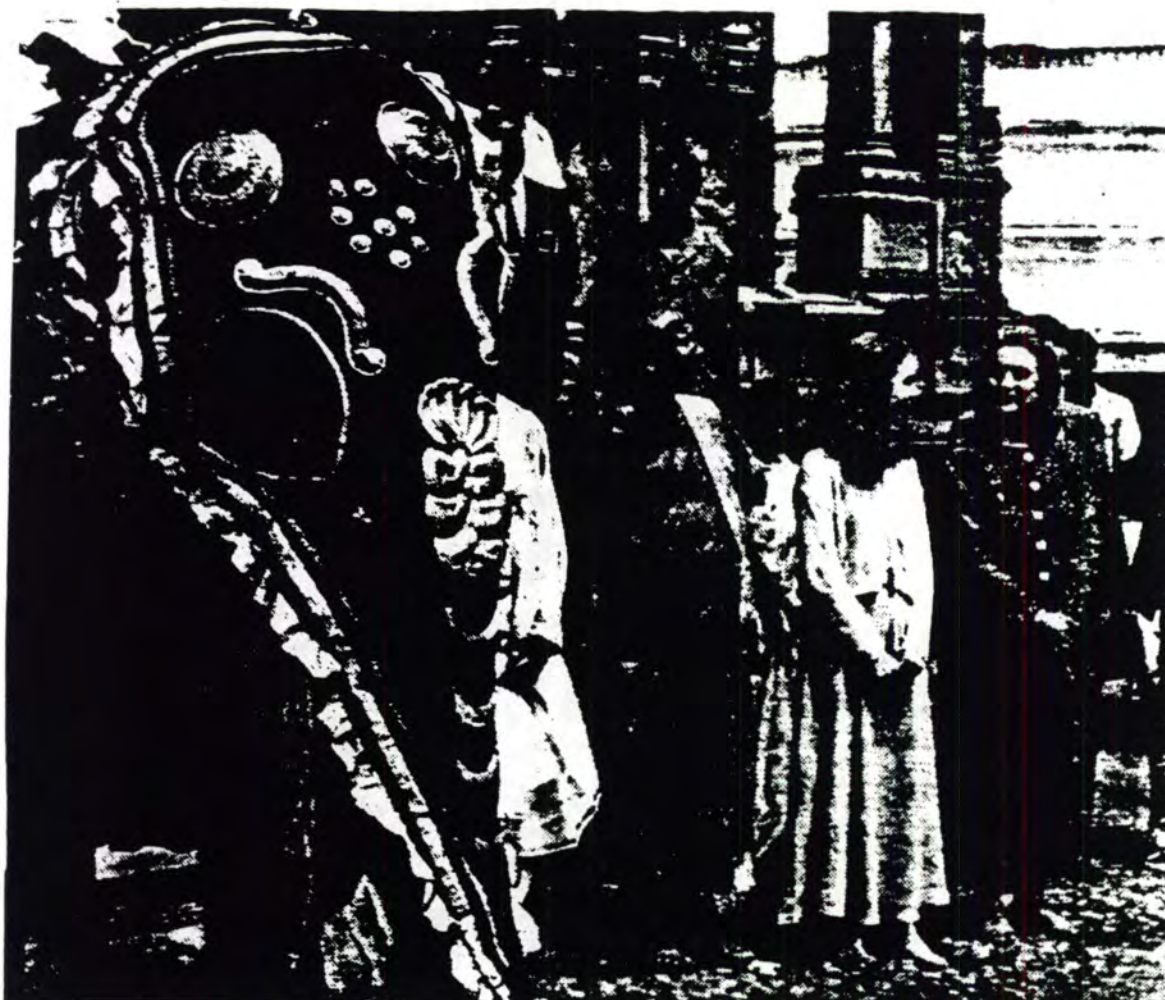
3.) Local groups must be partnered for maximum success. Groups often overlap and may learn from one another.

4.) Populations must be understood and strategies must deal with each tar-

get group. Often programs fail because some aspect is not appropriate to its audience. It is essential to enlist local community leaders who know their members and to depend on these members for guidance and advice when establishing an infrastructure. Communities frequently know what is best but lack access to resources. Sometimes the greatest help is provided by connecting them to these resources.

Other issues raised include (1) the mentality that poverty is overwhelming, (2) the unusual difficulties posed by an immigrant population, and (3) the fact that long-term funding of projects is often difficult to find. The next step for most of these local groups is to get organized and apply these lessons to their daily practice. In local communities across the country, empowered groups are beginning to collaborate to fill in the gaps created by inefficient public policy. New organizations are forming that resemble the efforts PLAN has witnessed overseas for years.

U.S. AID has engaged in a mammoth task by trying to share its experience with local communities. This idea is long overdue and its acceptance by people who actually spend their days working in communities is apparent. It is for these people that Childreach is proud to lend a hand in helping to make a difference.



Associated Press

Hillary Rodham Clinton, with her daughter, Chelsea, outside the Kelaniya Temple in Colombo, Sri Lanka.

Hillary Clinton a Traditional First Lady Now

By TODD S. PURDUM

COLOMBO, Sri Lanka, April 5 — A year ago, Hillary Rodham Clinton was visiting the biggest, most advanced hospitals in the Western world, proposing to change radically the way they did business. Last Friday, she sat in a tiny clinic in the shadows of the Himalayas and learned about its latest innovation: the "Safe Home Delivery Kit."

Inside a small cardboard box were the tools intended to reduce infant mortality in a country where more

than 10 percent of the 700,000 babies born each year die within 12 months: A plastic sheet to provide a sanitary surface, a bar of soap, a plastic disk to rest the umbilical cord on, a shiny razor blade to cut it and a clean cord to tie it.

The kit was a small step that might make a big difference, the kind Mrs. Clinton has witnessed over and over again on her 12-day goodwill tour of southern Asia, which ends today. It was also something of

a metaphor for the First Lady's newest role, for if Mrs. Clinton is still thinking globally, she is acting more locally than ever.

In stop after stop, she has played the traditional role of First Lady as wife and mother, emphasizing the importance of educating girls and women, with her 15-year-old daughter, Chelsea, almost constantly by her side.

She has dressed in long sleeves and ankle-length skirts to avoid offending Islamic sensibilities. At teas,

WORLD'S GREATEST RED & WHITE WINE 8878
delivered anywhere in U.S.A. 212-684-3827 — ADVT.

Continued on Page A7, Column 1

Continued From Page A1

in speeches and visits to schools and hospitals, she has taken such pains to avoid old controversies that she actually created some new ones, leading *The Calcutta Telegraph* to dismiss her as "singularly insensate and solely decorative."

Mrs. Clinton elliptically acknowledged her shifting tone in an interview with reporters traveling with her here, as she reflected on her meetings with women ranging from untouchables and ragpickers to prime ministers and presidents like Benazir Bhutto of Pakistan and Chandrika Bandaranaike Kumaratunga of Sri Lanka.

"I think that you have to keep true to your own beliefs about what is important, and you have to say it over and over again," Mrs. Clinton said. "But you always have to be open to new ways of saying it that perhaps are understood better. And I think that is truly what's at stake in lots of these settings around the world."

But the First Lady rejected any suggestion that by emphasizing what she calls the "human issues" of women and children she had somehow forsaken the concerns about human rights and economic development that plague this part of the world.

"I think by talking about girls and women, you're talking about human rights," she said. "I think there's an absolute correlation there."

"I don't think girls and women get as much attention on a regular basis as some of the well-publicized other instances of human rights concerns, and I believe we have to emphasize as much as possible that the denial of education, the denial of basic health care, the denial of choices to girls is a human rights issue," she said. "Because it is the human potential that we are attempting to develop, and the denying of it, I think, does violence to the spirit of the person and to the larger community."

If Mrs. Clinton has sought to make any broader political point here, it is that a region often thought of as backward and hopeless has not only benefited greatly from American aid, which helped create programs like the Nepalese birthing kit, but that people here also have much to teach America and the world.

Before leaving Bangladesh on Monday, Mrs. Clinton toured the International Center for Diarrheal Disease Research, a pioneering hospital that developed an oral rehydration solution of salts, sugars and grains that saves an estimated one million

lives a year worldwide among victims of cholera and diarrhea and that is much less costly than standard intravenous solutions used in the United States.

"Too many people at home don't know the positive results that come from investments like this, and don't know that something developed in Bangladesh can save lives in Louisiana," Mrs. Clinton said in an implicit rebuke of demands by some leading Congressional Republicans to scale back foreign aid.

Mrs. Clinton also said she hoped to find new ways to replicate models from here in the United States. Those include the microcredit lending of the Grameen Bank in Bangladesh, which makes loans to poor people with no collateral in exchange for proposals to generate income, to the Self-Employed Women's Association in India, which has organized poor women into unions of cigarette rollers and vegetable vendors and created its own bank.

Mrs. Clinton is honorary chairman of the American delegation to the fourth annual United Nations conference on women, to be held in Beijing in September, and she hopes to be able to go if United States-China relations remain stable.

"I think you could help create a consensus around some certain basic principles, staying off a lot of the political disputes that are going to be between nations and between groups of people," she said. "You know, even if there are disputes of a political nature, there ought to be some effort to work toward providing these basic opportunities."

But experience has shown that many voters tend to look askance when Mrs. Clinton plays too great a policy role in the day-to-day affairs of the Administration, and she doubtless will have to continue to walk a fine line between pretending she wields no influence and being seen as too powerful. It is a dilemma she is used to, and one that she suggested her exposure to women who have suffered great hardships in this part of the world has helped to place in perspective.

"If you venture forth in the world, whether you are a man or a woman, you are going to encounter difficulty," Mrs. Clinton said. "I mean, there is no easy way to live a life of action and commitment. And certainly when I think about the women who've been imprisoned, tortured, discouraged, barred from involvement in educational or professional opportunity — what any of us in America go through is minor in comparison."

First Lady 'Moved,' 'Overwhelmed' On Asian Journey of Self-Discovery

By Molly Moore

Washington Post Foreign Service

COLOMBO, Sri Lanka, April 5—In a Bangladeshi village of the lowest of low-caste Hindus—often called "untouchables"—dozens of children stretched their arms to touch the hands of a beaming Hillary Rodham Clinton, the woman they'd been told was Queen of the World.

In villages like Moishahati, where government officials and high-caste Hindus—much less foreigners—seldom venture, it is believed that just touching someone of higher caste will bring more respect and honor to a person at the lower end of the social scale.

But in a reversal the villagers couldn't possibly comprehend, it was the poor inhabitants of the mud and straw huts of the rice-paddy community who won the respect of the first lady of the United States.

"I've come away overwhelmed," Clinton said of the Bangladeshi villagers and dozens of other women she encountered in a 12-day visit, ending today, across the Indian subcontinent. "What any of us in America go through is minor in comparison."

In the first few jet-lagged days of her journey through India, Pakistan, Nepal, Bangladesh and Sri Lanka, Clinton recited numerous parallels between programs and problems in the United States and those in South Asia, often sounding as though she were plugging her husband's policies on the campaign trail in Middle America, half a globe and worlds away.

But this was alien to the daily lives of most of her Asian audiences. Before a group of Indian women ragpickers and junk dealers—most of whom had never ridden in a car—she mentioned a White House proposal to take away drivers' licenses as punishment for certain offenses.

By tour's end, however, what Clinton first billed as a trip to learn

about different cultures and countries became a journey of self-discovery both for her and her daughter, Chelsea. "Chelsea has been writing many postcards to her friends to explain in words what this meant to her," Clinton said.

As for Chelsea's mother, she still seemed to be struggling to come to terms with the sensory overload she experienced on a trip that took her from extravagant palace dinners to medical research centers where emaciated children writhed with the pain of malnutrition and dehydration.

Clinton said she and Chelsea were "overwhelmed... by the conditions some of the people we met were living in, but also very moved by how people were attempting to make the most of [their] situation... knowing they have so few of the advantages we take for granted."

She listened as Zahanara Begum told her how the local Muslim religious leader in her Bangladeshi community refused to pray for the dead children of women who defied his wishes and joined the Grameen Bank, which provides loans to some of the world's poorest people.

She watched as a Pakistani woman, her arms coated in brown goo, smashed cow dung into smelly patties to fuel her cooking fires.

She watched elementary school girls acting out a scene repeated often in their homes: a mother telling a daughter she can't go to school because she is a girl and is valued less than her brothers.

As she prepared to end her journey, Clinton said she was impressed by having "seen women who are beginning to find their own voice." She was particularly taken by a poem composed in her honor by New Delhi teenager Anasuya Sengupta, and she rewrote her last scheduled speech here to incorporate part of it:

*Too many women
In too many countries*

*Speak the same language
—Of silence.*

But it was also clear that Clinton was using this trip to readjust her own voice, which has been criticized as much too loud in her husband's administration. The trip was a very public pronouncement that she will spend the second half of her term focusing on matters more traditionally associated with first ladies—women's and children's issues.

Responding to suggestions that she ignored an opportunity to discuss human rights abuses with leaders of nations notorious for them, she said, "I think by talking about girls and women, you're talking about human rights."

"I don't think girls and women get as much attention on a regular basis as some of the well-publicized other instances of human rights concerns," she continued. "I believe we have to emphasize as much as possible that the denial of education, the denial of basic health care and the denial of choices to girls is a human rights issue."

Still, in nations sensitive to outside criticism—particularly by Americans—Clinton found herself cloaked in some of the same silence the teenager addressed in her poem. She also witnessed the paradox of nations run by some of the world's most powerful women that still offer girls less education, food and health care than boys.

In Pakistan, where only 28 percent of the nation's girls are allowed to reach the fifth grade, an ancient fort was transformed into a magical fairyland to entertain the first lady.

She rode elephants in the misty shadows of the Himalayas in Nepal, which has some of the world's most breathtaking scenery but where one of every five girls will die before the age of 5 and one woman in 18 will die during pregnancy or childbirth.

In India, she toured the Taj Mahal, a sublime work of architecture in a nation in which 40 percent of its 900 mil-



Hillary Rodham Clinton and daughter, Chelsea, right, carry trays of flowers to place at a Buddhist temple in Colombo. ASSOCIATED PRESS

lion people live in destitution, according to U.N. criteria.

The first lady also grappled with paradoxes in her own life. As she preached education and self-sufficiency to women in villages, towns and college lecture halls, she seemed uncomfortable with a question posed by a woman member of Bangladesh's Grameen Bank: "Do you earn your own income?"

"I am not earning my own income now that my husband is president," she replied, noting that in pre-White House days she sometimes earned more than her husband. And, she was quick to add, "I will later again earn my own income."

Seattle Post-Intelligencer

Agency chief on the stump for foreign aid

Congress won't listen, he says, so he takes case to the people

By Christopher Hanson
P-I Washington Correspondent

WASHINGTON — Taking his case to the public because he says Congress won't listen to him, the chief of the Agency for International Development is pleading to spare foreign aid from congressional ax-wielders.

AID Director Brian Atwood planned to be in Seattle today with this message for the Northwest:

Foreign aid is a wise investment that will save you money, help you make money and help protect the environment to boot.

Atwood, who will be meeting with trade and business groups in Seattle, has seen his agency come under attack from North Carolina Sen. Jesse Helms, chairman of the Foreign Relations Committee, and other conservative Republicans, who say foreign aid is money down a rat hole.

Given the deficit squeeze, foreign aid is under intense pressure in the Republican Congress. Atwood is fighting back with a public campaign.

He says his congressional critics have tuned him out, and so he will be taking his message to communities around the country, hoping they will

come to AID's defense and perhaps bring pressure on Congress.

"I've had maybe in the past two weeks five or six appointments canceled, and I find it very hard to go in to see some of the freshman members because they just don't want to hear. I don't have any choice but to go to . . . the people," he said.

Foreign aid "isn't a giveaway. It's not a charity. It's an investment in the future . . . in developing markets. That's a very practical argument to make in the Northwest. I think the people of the Northwest are very aware they are living in a global economy. They do an awful lot of trade with Asia," Atwood said.

See FOREIGN AID, Page A5

Foreign aid: A payoff in markets

From Page 1

in an interview.

"The foreign aid program, wherein we made investments 30 years ago, has now paid off in huge amounts of exports that are going to Asia — Korea, Thailand, Indonesia."

He also said Seattle will be the site in April of a major conference, organized by AID, at which teams from foreign countries will discuss how foreign aid has helped battle environmental problems worldwide. It is one of several regional conferences the agency is planning.

Sen. Mitch McConnell, R-Ky., chairman of the Senate Foreign Affairs subcommittee that oversees foreign assistance, has proposed reducing aid to poorer countries, especially in Africa, by up to 20 percent. GOP critics have equated such aid with welfare, and some argue it is wrong to cut domestic programs without cutting foreign ones.

Atwood's response is that it is in U.S. interests to provide aid even to desperately poor regions of Africa. He argues that aid promotes stability and economic growth, and eventually provides markets for American goods. Aid also helps forestall civil wars that often cost America for emergency aid and peacekeeping, he said.

"Africa is today what the Latin American and Asian markets were a generation ago. It is the last great developing mar-

ket," he said in a recent newspaper column in the Christian Science Monitor.

Given the chronic instability and tribal-based warfare that has plagued much of Africa, some analysts think such an assessment is overly optimistic. There is qualified optimism about South Africa, which has a first-world economy, among many investors. But assessments about the economic future of such countries as Somalia,

Even if all foreign aid were scrapped, it would do little to help with the daunting deficit problem.

Libya, Rwanda and Liberia, which have suffered from intense tribal conflict and civil strife, tend to be bleak.

According to a recent CIA estimate, 59 percent of the population of Rwanda and 74 percent of that of Liberia are at risk of death from starvation and disease.

On the question of deficit reduction, Atwood cited opinion surveys that suggest the public is misinformed about the size of the foreign aid program. According to a recent University of Maryland poll, a majority believe it is over 15 percent of the

federal budget. In fact, it is only one-half of 1 percent.

Even if all foreign aid were scrapped, it would do little to help with the daunting deficit problem, he said.

Atwood said the AID conference in Seattle April 17-20 will make a further point: Foreign aid promotes environmental protection, which helps the United States, because air and water pollution and global warming are problems that cut across borders.

"The environment doesn't know borders, and it does impact on us. We spend \$150 billion to protect against emissions created by our own industry, and yet we only spend \$600 million overseas to guard against emissions that will impact our environment. By the year 2010 we will have more emissions coming into our environment from overseas than we are generating internally," he said.

Glenn Prickett, an Atwood aide, said the conference would bring in teams from foreign countries for talks with industry, labor and environmental groups in the Northwest on forest preservation and other topics.

Among the visitors will be a team from southern Africa which, with AID assistance, has worked to save endangered elephants and rhinos. They will discuss lessons learned with a group called Long Live The Kings, which is working to protect threatened salmon runs.

1993-94 NASW AUDIT RELEASED

A REPORT on the financial audit of NASW for fiscal year 1993-1994 is available to members upon request. For a single copy, send a stamped (\$.78), self-addressed 9" by 12" envelope to: Paul O'Donnell, Director, Accounting and Budget, NASW, 750 First St., N.E., Suite 700, Washington, DC 20002-4241.

40TH ANNIVERSARY MEMENTOS SOUGHT

NASW SEEKS social work memorabilia to help commemorate the association's 40th anniversary. Items needed include buttons, pins, photographs with identifications, conference programs, ribbons and souvenirs of all types.

The material will be displayed at NASW's conference in Philadelphia this October and at other events throughout the year.

Donated items will not be returned; they will become part of NASW's archives.

Not needed are issues of the NASW NEWS, books, minutes of meetings and other documents likely to be in the archives already.

Send material to: NASW 40th Anniversary, 750 First St., N.E., Suite 700, Washington, D.C. 20002.

Third World Lends a Hand to U.S. Cities

MENTION FOREIGN AID and most people think of U.S. donations to the Third World. But at an October conference in Boston, the roles were neatly reversed, with know-how from countries like Bangladesh being used to address problems of U.S. inner cities, such as housing, child health and nutrition, illiteracy and economic stagnation.

The Lessons Without Borders conference, sponsored by the U.S. Agency for International Development (A.I.D.) in conjunction with the Healthy Boston coalition and the Alliance for Global Community, drew some 300 participants, including NASW members, A.I.D. officials and community organizations' representatives. The alliance is a group of more than 100 organizations, including NASW, that seeks to promote greater awareness of the developing world.

Participants examined successful programs developed by A.I.D. and other groups in the Third World and studied how such strategies could be applied to U.S. communities.

"It is helpful to know what other social workers are doing around the world," said Jane Crosby, an advisory panel member for NASW's Violence and Devel-

ence. "We have things we can learn from people in developing countries. Because they have fewer resources, they have had to be more resourceful in their ideas, their use of materials."

Among the programs discussed:

- *Childhood Immunizations* —

Boston's 58 percent rate for immunization of children under age 2 is the highest among major U.S. cities, but still lags behind rates of 90 percent in Malaysia and

oral rehydration could save lives at a fraction of the cost of in-hospital intravenous treatment. In the U.S., diarrhea kills up to 600 children and sends thousands to the hospital each year.

- *"Microenterprise"* — Loans to small, often family-owned businesses in Bangladesh and Latin America — even \$10 to buy a sewing machine — have enabled start-up concerns to succeed and create jobs. Organizations such as

Working Capital in Massachusetts are following the same model, providing loans to small businesses in New England that often have trouble obtaining conventional financing. Working Capital, like several of its counterparts overseas, boasts a 98 percent loan-repayment rate.

The first Lessons Without Borders conference was held in Baltimore last summer. Additional conferences are planned for



NASW's Jane Crosby, with A.I.D. Administrator J. Brian Atwood, in Boston.

more than 70 percent in Egypt, India and Sri Lanka. Participants sought ways to apply those countries' immunization outreach and service-delivery strategies in the United States.

- *Oral rehydration therapy* — An effective, low-cost home treatment developed in Bangladesh for children with serious diarrhea saves millions of lives worldwide. Now being tested in Boston,

Seattle and other locations this year. The Oregon, Washington, and Idaho NASW chapters, designated as a Project Center under NASW's Violence and Development Project [May 1994 NEWS], will participate in the Seattle event.

For information on the Alliance for Global Community: (202) 667-8227; by e-mail: alliance@interaction.org

Baltimore delegation reports from Nairobi, Kenya

Special to the AFRO

NAIROBI, Kenya—Late on the evening of Nov. 1, 1994 seven weary travelers arrived in Nairobi, Kenya, as part of the Lessons Without Borders project. The project, sponsored by the US Agency for International Development (USAID), was developed to apply the knowledge accumulated abroad to problems at home. The agency hopes that sharing this information will benefit cities throughout the country. The delegation, appointed by Mayor Kurt Schmoke, was sent to Kenya to find solutions to problems that plague the urban core of Baltimore by studying programs in health and economic development.

Though the group had been briefed about Kenya, no one was prepared for the astounding beauty of the country and the warmth of its people. The group was particularly surprised with the size and urban character of Nairobi, the Capital of Kenya which serves as a major trade and tourist center for all of East Africa.

While the group was racially diverse, they found there were more similarities among them than differences. These similarities created a strong bond among them as Americans traveling throughout Kenya.

The group, after spending seven days in briefings and field trips, formed several impressions about what they had experienced. Specifically, Dr. Penny Borenstein, Baltimore City Health Department, was impressed with the obvious attempt to coordinate the delivery of health services in single locations.

In addition, she found that the Kenyan health programs are able to do more with less. Male involvement in family life decisions was evident as observed by Daisy Morris, Director of

Healthy Start. Ms. Morris and other team members visited the Nairobi Family Planning Clinic where they talked with the men about their role and responsibility in the family planning process.

The trip was made possible by Dr. Gustav Voigt, President of the Chesapeake Health Plan Foundation which funded the delegation. Dr. Voigt and his wife Sarah were also members of the delegation.

Dr. Voigt, a very reflective and compassionate physician noted in Nairobi, there is extensive poverty coupled with a high birthrate. These

conditions present significant obstacles for a developing country moving towards prosperity.

In Nairobi alone, there are slums with populations nearing 500,000 people. However, the good news is that Kenya has a national policy for population growth which supports its economic development strategy.

USAID has funded innovative micro-enterprise projects in Kenya. These projects have provided financing for very small businesses in Nairobi and surrounding areas.

Amanda Crook, President of Women Entrepreneurs of Baltimore,

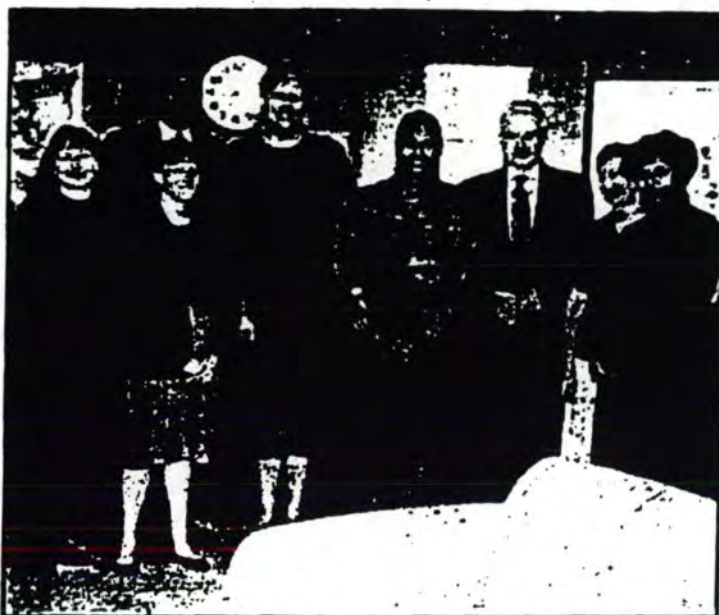
was very excited when the team had the opportunity to visit a Peer Lending program in Machakos Town. The program conducted by PRIDE/Kenya supports small businesses with financing. The repayment rate in this program is 100 percent which reflects the participants pride in business ownership and themselves.

Michael Gaines, President of the Council for Economic and Business Opportunity (CEBO), another member of the delegation looking at micro-enterprise, was impressed with the number of people who have started and operated businesses. He noted that the entrepreneurial spirit is a way of life in Kenya.

Men and women find a way to make money to support their families by making furniture, shoes or dresses to sell. Daily survival depends on the drive of the individual to support themselves because there are no other choices. In Kibera, a slum area near Nairobi, he and the team witnessed families living in extreme poverty, yet, not unlike many in Baltimore, surviving through legitimate entrepreneurship.

The delegation found one of the most inspiring moments to be in a meeting with Aurelia Erskine Brazeal, United States Ambassador to Kenya, the first African American woman appointed to Kenya. Ambassador Brazeal believes strongly that Kenyans can eventually get off foreign aid and use trade and investment instead. Her thoughts were in keeping with the lessons that can be learned in the states from programs overseas. "Debate on urban programs in America needs to be held to determine the proper role for government in the design of services which lead to sustainability of effort," said Ambassador Brazeal.

The delegation returned to Baltimore this week preparing for a conference on Nov. 30.



Members of the Baltimore delegation to Kenya are shown with some of the people they met in that African nation. Left to right; Amanda Crook, president, Women Entrepreneurs of Baltimore; Penny Borenstein, Baltimore City Health Department; Michael Gaines, president, Council for Economic and Business Opportunity; US Ambassador Aurelia Erskine Brazeal; Daisy Morris, Director of Healthy Start; Dr. Gustav Voigt, President of the Chesapeake Health Plan Foundation, and Mrs. Voigt; Nikia Jaspert, AID.

BALTIMORE, MD

Copy right by the AFRO-AMERICAN Company

50 CENTS

AFRO-AMERICAN
BALTIMORE

November 19, 1994



4 plan African fact-finding safari

Health, economy will be examined

By Richard O'Mara
Sun Staff Writer

What can Baltimore learn from Africa?

The answers should be in by mid-November when four Baltimoreans — two health professionals and two others involved in grass-roots economic development — return from a visit to Kenya.

The four, who will leave today for Africa, will tour health and economic development projects there run by the United States Agency for International Development and Catholic Relief Services.

Their trip may be the most concrete result to flow from the decision made last spring by J. Brian Atwood, AID director, to apply the knowledge his agency has accumulated abroad over the years to problems at home.

Amanda Crook, head of a non-profit agency called Women Entrepreneurs of Baltimore, which helps poor women start businesses, has an idea what she might learn in Africa.

"I'm really hoping to see how peer lending works," she said.

She described peer lending as a financing system popular in African villages in which very low income women pool their money and lend it to each other. "These are women who have no credit. It is very successful in Third World countries, but it has not been replicated in the U.S. very much."

The reason?

"We don't have many very small villages where peer pressure acts as a social collateral. In urban areas we can't keep track of people," and the pressure to repay loans, absent the "social collateral," is weaker.

"We want to find out how it works, how to overcome those problems," she said.

Penny Borenstein, head of the immunization program at the city Health Department, hopes to find in Africa a way to raise Baltimore's child immunization level.

Figures show that only about 55 percent of Baltimore's children under two have all their shots.

The reasons, she said, have to do with the failure of pediatricians to give the shots regularly enough, and the failure of parents, especially younger parents who have never seen a case of polio or diphtheria, to take their children to get them.

"We have an immunization van. We offer services in communities and often times we don't get much of a response," Ms. Borenstein said.

"I think they are probably doing a better job [in Kenya] than we are in mobilizing community thought on the importance of immunization, that they have found a way of convincing parents this is important, to get your shots on a routine basis," she said.

Michael Gaines, who runs a group called the Council for Economic and Business Opportunity, will be looking at AID-sponsored micro-enterprises in Kenya. CEBO trains and finances aspiring small businesses in Baltimore.

He said he is particularly interested in learning how small scale entrepreneurs in Kenya operate within a social context much poorer than here. "In this country we have a safety net — welfare and unemployment insurance. In developing nations there isn't a formal social security net," he said.

He suspects the absence of such protection might engender a different, maybe even a more helpful, kind of attitude.

Daisy Morris is going to East Africa as a representative of Healthy Start, a quasi-public agency which is trying to bring down infant mortality levels in the worst parts of Baltimore.

Those levels — 19 deaths per 1,000 live births in Sandtown-Winchester and Harlem Park — match or exceed those of many Third World countries.

"It's pretty bad," said Mrs. Morris. "What we would like to see is closer to 9 or 10 percent. Our goal is to reduce the infant mortality rate by 50 percent over the next five years."

And what does she think she might see in Kenya to help her reach that goal?

"They work with dads over in Kenya. We work with young fathers, and part of the things we teach them is to be good parents. To the extent we can talk to other cultures that have a major commitment to using dads to participate in family planning... that would be truly great," she said.

For decades AID has helped poor countries design immunization and literacy programs, financed farms and small businesses.

A part of the agency's motivation since its inception sprang from a need to win friends for this country in the Third World in the competition with the former Soviet Union.

With that no longer a factor, a reconsideration of AID's mission was ordered.

In June, a conference was held at Morgan State University, attended by Vice President Al Gore and about 200 health and social workers, people from charities and public officials.

Lee Tawney, an assistant to Mayor Kurt L. Schmoke, secured a \$55,000 grant from the Chesapeake Health Care Foundation.

With it he brought the AID experts back to Baltimore this month for the first of two workshops, and arranged to send the four Baltimoreans to Africa for two weeks.



AMY DEPUTY/SUN STAFF PHOTO

Four Baltimoreans, Amanda Crook (left), Penny Borenstein, Michael Gaines and Daisy Morris, will be going to Africa to study health services and they hope to bring back ideas to implement locally.

BALTIMORE Afro-American

BALTIMORE

PUBLISHED BY THE AFRO-AMERICAN COMPANY

EVENTS

A14 THE BALTIMORE AFRO-AMERICAN OCTOBER 29, 1994

THE VOICE OF BLACK AMERICA SINCE 1892

Local delegation takes off for Kenya in search of answers

On Monday, Oct. 31, a four-member delegation appointed by Mayor Kurt Schmoke will leave for Kenya to see first hand how development projects operate in third world or developing nations, with the idea of transforming that experience to local inner city neighborhoods where residents may live in extreme poverty.

The delegation includes Darryl Moore, Healthy Start Director, Amanda Cook, president of Women

Entrepreneurs of Baltimore (WEB), Dr. Penny Borenstein, Baltimore City Department of Health, and Michael Gaines Sr., president of the Council for Economic and Business Opportunity (CEBO).

Funding the visit is the Chesapeake Health Plan Foundation which was established to identify and fund programs that will improve the delivery of services to city residents. Dr. Gustav C. Voigt, president of the foundation, and his wife, will also be members of the delegation.

The delegation, which will return in mid November, will be filing reports from Kenya that will appear in this newspaper.

In commenting on the basic mission of the delegation, which is to identify creative and innovative ideas and then help develop a mechanism for implementing them as local policy or programs, Mayor

information is critical to developing solutions to problems that we all face in U.S. cities."

The genesis for the Kenya

trip goes back to a televised discussion between E. Brian Atwood, administrator of the U.S. Agency for International Development (AID) and

Marrion Wright Edelman, president, Children's Legal Defense Fund, in which they agreed the expertise AID has gleaned from funding



Dr. Gustav C. Voigt, president of the Chesapeake Health Plan



Information on how the U.S. program of providing aid to third world and developing countries through its Agency for International Development might have relevance for domestic problems, was exchanged at this meeting at Johns Hopkins University. Left to right: Margaret Neuse, deputy director, Office of

development projects overseas could be shared and utilized by institutions in this country.

Among the program's viewers was Lee Tawney, an aide to the mayor, he shared the idea of using experience gained overseas to deal with domestic problems with the mayor and shortly thereafter "Lessons Without Borders" was inaugurated in the city.

One of the first steps was to hold a conference in June at Morgan State University that involved over 200 professionals from Baltimore, AID and other cities in the U.S. to focus on family health and economic empowerment issues.

The conference included presentations from local professionals in family health and economic development and AID. While this was the first of its kind, other conferences will be held around the country in cities such as Chicago, Atlanta and New York.

Vice President Al Gore launched the effort here in Baltimore and was the key note speaker. Mr. Gore recognized that this country has sent thousands of workers to foreign countries to provide an array of services in family health, housing, hunger relief and small business development. Since the early 1960's.

America has spent billions of dollars addressing the plight of third world nations and has learned a great deal from these efforts. Mr. Gore said "It is time to bring this knowledge back home."

Other speakers included Mayor Schموke, Mr. Atwood, U.S. Senator Paul Sarbanes and U.S. Representative Kweisi Mfume.

Following the conference a workshop was held at the Johns Hopkins School of Public Health, to provide an opportunity for professional line staff to discuss program issues with SAID professionals in micro enterprise development and family health planning. Representatives from CEBO, WEB and the Healthy Start program in Sandtown/Winchester attended.

The Hopkins' Lessons Without Borders workshop also served as a prelude to the

Tuesday, October 25, 1994

THE CHRISTIAN SCIENCE MONITOR

THE MONITOR'S VIEW

"First the blade, then the ear, then the full grain in the ear."



Microenterprise Gains

ONE of the lessons for anyone looking at the issues of jobs and income considered in the space above is how vast and diverse the United States economy really is.

Not everyone works for IBM and General Motors; some people work at enterprises so small they barely show up in the statistics at all.

We were reminded of the quiet progress microenterprise is making in the US last week: Boston was the site of a conference called "Lessons Without Borders," sponsored by the United States Agency for International Development.

The conference considered how cost-efficient health, education, and economic development programs that have worked abroad can be adapted for use in the US: "Reverse technology," they like to call it. Microenterprise - providing jobs and opportunities for those without access to the usual capital and information sources - was a major element.

One microenterprise organization represented was Working Capital, in Cambridge, Mass., which operates throughout New England. It made \$ 203

million in loans last year, averaging \$ 503 each, with a 98 percent repayment rate.

The lessons don't always transfer perfectly smoothly. Abroad, development officials work with "solidarity organizations" in different cultures - groups of housewives who take turns receiving loans from pooled funds, for instance.

But these organizations have no real counterpart in the US; development experts have to invent something like them to do the job, including providing the peer pressure that gets loans repaid.

It is not always easy to separate the entrepreneurial mind-set from the social-service agency mentality; the loan committees must make some clear-eyed assessments of their neighbors' abilities to repay loans. And microenterprise can't be seen as a quick fix to the welfare crisis.

But microenterprise has a populist, grass-roots quality that endears it to the social and political left, as well as an inherent conservatism that makes it appealing to top-down organizations like the World Bank.

Lessons without borders

JANET GREEN

WASHINGTON

Boston is in the First World; Bangladesh is in the Third World. Yet when it comes to immunizing children, supporting small entrepreneurs and providing innovative low-cost health care, Boston doesn't even rank a close second.

Most Americans think of the United States as richer, wiser and more developed than the nations of the developing world. Regardless of what one thinks about foreign assistance to these countries, the issue is usually framed as a question of charity — the extent to which the United States should help, teach or protect its less successful neighbors. Rarely do we consider what these nations can teach us.

But that's changing. Boston is now hosting an innovative conference that will show Americans how the developing world's success in dealing with its problems can help us tackle ours.

Known as "Lessons Without Borders," the conference is sponsored by the US Agency for International Development and hosted by Mayor Menino's Healthy Boston project.

The conference will address the issues of hunger, poverty, environmental decay and political instability that plague many nations. These problems have the potential to touch every American.

Past attempts to involve Americans in international development issues have had limited success because they haven't made these issues relevant to people's everyday lives.

Pictures of starving children or huddled refugees can move people to tremendous generosity, but they can also lead to superficial analyses and fickle commitments. Nor are relief and development organizations innocent of preaching to the choir. Too often, well-meaning groups produce dense, jargon-riddled materials that mistakenly presume a captive audi-

ence aching for enlightenment.

But that's all changing. "Lessons Without Borders" will focus on what successful overseas relief and development strategies can teach Bostonians about improving housing, medicine, employment and self-esteem in run-down, economically hard hit areas of the city.

Consider what the developing world can teach us about:

■ **Immunization.** Boston has the best early-childhood immunization rate in the United States, with 58 percent of its under-2-year-olds protected against major diseases. Not bad, until you learn that the rate in Malaysia is 90 percent.

■ **Job creation.** Microenterprise programs, which give loans to small business owners, have helped create jobs and expand businesses throughout the developing world. They are now providing a much-needed economic boost to impoverished communities across New England.

■ **Health care costs.** Simple, cost-effective medical techniques perfected in the developing world offer effective alternatives to much more expensive treatments. A pediatric team at Boston City Hospital is testing a new type of oral rehydration therapy originally developed in Bangladesh that will encourage US parents to treat diarrhea-stricken children at home rather than in the hospital. Intravenous treatment of dehydration costs \$800 per day; the new home solution costs only pennies per dose. In addition to saving lives, it could help reduce US health costs by \$1 billion every year.

In our increasingly interdependent global community, we need to recognize that the seemingly distant nations of the Third World are in fact our neighbors and that foreign aid is really world aid. If we heed carefully the lessons of the developing world, we'll find that charity not only begins at home but can also lead us back there.

Janet Green is the director of the Alliance for a Global Community.

The Boston Globe

WILLIAM O. TAYLOR, *Chairman of the Board and Publisher*

BENJAMIN B. TAYLOR, *President*

MATTHEW V. STORIN, *Editor*

H.D.S. GREENWAY, *Editor, Editorial Page*

STEPHEN E. TAYLOR, *Executive Vice President*

HELEN W. DONOVAN, *Executive Editor*

WILLIAM B. HUFF, *Senior Vice President*

GREGORY L. MOORE, *Managing Editor*

Founded 1872

CHARLES H. TAYLOR, *Publisher 1873-1922* WILLIAM O. TAYLOR, *Publisher 1922-1955* WM. DAVIS TAYLOR, *Publisher 1955-1977*

JOHN I. TAYLOR, *President 1963-1975*

LAURENCE L. WINSHIP, *Editor 1955-1965*

THOMAS WINSHIP, *Editor 1965-1984*

Thinking globally, lending locally

When the US Agency for International Development and the Healthy Boston Coalition convene a conference today to address immunization, literacy and economic development, the discussions will not focus on the problems of the developing world. "Lessons Without Borders" will look at Third World solutions to problems that exist right here at home.

In Bangladesh and Latin America, "micro-enterprise" loans have helped fledgling enterprises grow. When Blanca Consuelo Rodriguez wanted to sell stuffed animals in her marketplace in Guatemala, there was no small-business loan to apply for, no business school to attend. But ACCION International, which is dedicated to developing tiny businesses in Latin America, loaned Rodriguez \$40 to buy a sewing machine and build an inventory. She now has two machines and two employees.

This model has been successful in the United States as well. Working Capital, an organization

that has adapted the ACCION model, provides \$500 to \$5,000 loans, networking opportunities and business training to New England entrepreneurs. ACCION and Working Capital boast that their loan programs enjoy 98 percent repayment rates.

Micro-enterprise is just one of the creative, low-cost initiatives to be discussed at this weekend's conference. Sophisticated advertising and grass-roots health workers have raised immunization rates in Zambia, Pakistan and Egypt. In Mali, informal community-based adult literacy programs have helped break the cycle of illiteracy.

"Countries with far fewer resources than we have manage to take those resources and accomplish more through community empowerment and produce better, sustainable results," says Judith Kurland, founder of Healthy Boston.

We hope the conference will mark the beginning of an ongoing international dialogue that provides solutions to problems at home and abroad.



U.S. MAYOR

In "Lessons Without Borders," USAID Shares What It Has Learned with U.S. Cities

By Mike Brown

This summer, the U.S. Agency for International Development launched a nationwide series of events designed to share with domestic practitioners some of the knowledge it has gained in more than 30 years of delivering health, economic growth, family planning, housing, environmental and humanitarian aid programs overseas.

Entitled "Lessons Without Borders: Local Problems, Global Solutions," the opening event in Baltimore in June was judged a success by local officials there,

and by news organizations which promoted and covered it. The second event, set for October 21 and 22 in Boston, will build on the Baltimore success, examining case studies of social initiatives successfully implemented in developing countries and exploring their applicability to similar problems in Boston and other domestic settings. The third event has been scheduled for December in Seattle.

According to USAID Administrator J. Brian Atwood, "By examining models of successful international programs in health, housing and economic

determine how those models might be applied to address similar problems here at home."

Covered on the Boston agenda will be: (1) Education — Methods to overcome the problems posed by illiteracy and language barriers in order to provide access to basic services for city residents; (2) Economic Growth — Microenterprise as a means to economically empower individuals and small businesses; (3) Health — Strategies to expand immunization coverage, creative approaches to delivery of a basic need; (4) Housing — Examining alternative methods of ownership and exploring flexible housing standards to improve access to housing for low income families; (5) Building a Sustainable Community — Empowering individuals and strengthening local capacities in an integrated and comprehensive fashion; and (6) Partnerships — Structuring relationships between communities and public-private funders to

resources and improves the delivery of services.

As a follow-up to their June USAID conference, Mayor Schmoke's office has established a demonstration project which includes workshops for professional service delivery staff, access to USAID staff, internships for staff members in Kenya and other countries with USAID missions, and a national conference next June for all cities participating in the USAID initiative. Funding for the project is being provided by the Chesapeake Health Plan Foundation. An October 5 workshop in Baltimore linked health service delivery and microenterprise — business and job development — bringing together practitioners in both areas to collaborate on solutions to community problems.

USAID is currently holding discussions with mayors wishing to sponsor future "Lessons Without Borders" events in their cities. Information is available from Karen Anderson at (202) 647-

Foreign A.I.D. comes to JP

On June 27, J. Brian Atwood, Director of the U.S. Agency for International Development (A.I.D.), visited Boston with an offer that cities across the country, Baltimore being the first, have lined up to take advantage of. Why not use the bank of knowledge that A.I.D. has accumulated through its work providing foreign aid and support in developing countries to combat similar issues in American cities?

The idea, called "Lessons without Borders," seemed to appeal to agencies represented at a meeting with Atwood held in Egleston Square. Ted Landsmark, Executive Director for Healthy Boston stated, "We've learned a great deal from how developing nations have addressed health care needs, particularly for infants, children and young families. The exchange of ideas that will be opened by this visit will help us better apply lessons already learned about immunization and family health."

Some of the "lessons" A.I.D. has learned are about innovative ways

to get around obstacles illiteracy represents for people in need. They have used visual communication such as cartoons and soap operas, paying local villagers to recruit people to health services and having truck drivers deliver condoms as they deliver beer.

Members of The Egleston Square Coalition were as impressed as Mayor Schmoke of Baltimore by these outcomes. The Coalition, represented by Jackie Jenkins-Scott, Dimock Community Health Center; Mossik Hacopian, Urban Edge and Dick Jones, Boston Community Loan Fund, expressed their enthusiastic support for the citywide effort. The Coalition hopes the initiative will be launched this fall with a conference in Egleston Square, one of the key communities that the project will serve. Scott, speaking on behalf of the group, said, "Many of the issues that confront area families that we're trying to respond to in the community are the same issues that A.I.D. has addressed in third world countries."

28 June 1994

The Boston Globe

WILLIAM O. TAYLOR, *Chairman of the Board and Publisher*

BENJAMIN B. TAYLOR, *President*

MATTHEW V. STORIN, *Editor*

H.D.S. GREENWAY, *Editor, Editorial Page*

STEPHEN E. TAYLOR, *Executive Vice President*

HELEN W. DONOVAN, *Executive Editor*

WILLIAM B. HUFF, *Senior Vice President*

GREGORY L. MOORE, *Managing Editor*

Founded 1872

CHARLES H. TAYLOR, *Publisher 1873-1922* WILLIAM O. TAYLOR, *Publisher 1922-1955* WM. DAVIS TAYLOR, *Publisher 1955-1977*
JOHN I. TAYLOR, *President 1963-1975* LAURENCE L. WINSHIP, *Editor 1955-1965* THOMAS WINSHIP, *Editor 1965-1984*

Foreign aid for US cities

With foreign aid increasingly unpopular in Congress, the US Agency for International Development has resorted to creative, low-cost approaches to help the poorest nations improve health care and economic opportunities. Now it is willing to teach these same techniques to Boston and other cities throughout the United States.

The lessons of Calcutta and Cairo may seem to have little relevance for Boston residents. Yet in this medical and educational metropolis the immunization rate for children under 2 is only 58 percent, which is still the highest rate among 19 major US cities. In Egypt, India, Sri Lanka and Indonesia the immunization rate exceeds 70 percent. In some sections of Boston it is difficult to start and sustain a new business. The Grameen Bank in Bangladesh has had great success in providing small loans to start-up entrepreneurs.

J. Brian Atwood, director of USAID, was in Boston yesterday to promote "Lessons Without Borders." He hopes to hold a conference here in September similar to the one held in Baltimore earlier this month, which was enthusiastically supported by Mayor Kurt Schmoke.

The program is partly a publicity device to gain USAID wider support at home. Few Americans get a chance to see its programs in action overseas. Most who have are impressed with the way food is distributed and health care information disseminated among a poor, often illiterate population.

As would be expected of an agency whose mission lies overseas, USAID cannot finance any of these programs at home. If they are to succeed they must be endorsed and promoted by private foundations and local governments. Ted Landsmark of Healthy Boston, the city's outreach program to improve human service access, is working with USAID officials to make the September conference a success.

Boston Mayor Thomas Menino, who is not shy about adopting unconventional ideas, would do well to take an active role in the conference. USAID's Atwood is wise to spread the experience of his agency to people who would otherwise not realize the similarities of their problems with those of millions of other urban dwellers around the world.

The Washington Post

AN INDEPENDENT NEWSPAPER

Foreign Aid Comes Home

THE "Lessons Without Borders" program launched by Vice President Gore in Baltimore this week is supposed to be a winning proposition for all. The idea, generated by the U.S. Agency for International Development, is to bring to America's poor communities some of the lessons AID has learned while operating programs in the developing world. Baltimore Mayor Kurt Schmoke volunteered his city to be AID's opening act. His reasons for doing so were candid and telling about America today.

"It is an unfortunate fact of life," said Mayor Schmoke, "that we have in certain parts of our city health problems, housing problems, that resemble those in Third World countries." Those words could have been spoken by any big-city mayor in America.

The similarities of conditions in the developing world and American inner cities and rural communities are mortifying. There are poor neighborhoods around the country with infant mortality rates that rank right up there with countries where Peace Corps volunteers and American aid workers are being dispatched to work. We think of children who die from diarrhea as being only found in countries like Bangladesh or Burkina Faso. In America's inner cities and in rural

communities, however, hundreds of our own children are dying or being hospitalized each year from this disease.

Vice President Gore noted that only 39 percent of inner-city children were immunized against measles in 1990. Stack that up against poverty-ridden Egypt, where AID reports a 90 percent immunization rate, or India's 80 percent or the 88 percent immunization rate achieved in the Philippines. The sad fact is that some of what ails the most devastated countries on earth also afflicts communities within our own borders: illiteracy, poor nutrition, little or no prenatal care, disease, joblessness and, ultimately, hopelessness.

The Agency for International Development can't be expected to solve problems on American soil; the law prevents AID from doing that. But perhaps the agency—taking a page from the developing world—can lend a helping hand by advising hard-pressed U.S. communities how they can use techniques from the Third World to address their own problems. After decades of work abroad, AID has learned many lessons. This experiment can usefully teach Americans another lesson: Images of Third World deprivation are universal; they can be even found on U.S. soil.

THE



SUN

LATEST
NEWS &
SPORTS

HOME DELIVERY: 25¢ per week • NEWSSTAND: 50¢

BALTIMORE, MARYLAND

Lessons from the Third World

For more than three decades, the United States has been sending small armies of people to poor countries to aid economic development efforts. Now, when Americans have plenty of reason to be concerned about their own economic well-being, many voters are beginning to look askance at the money spent on foreign aid. The partnership inaugurated this past week between Baltimore and the U.S. Agency for International Development is aimed at finding ways to apply the lessons learned in development efforts overseas to some of America's urban ills.

The lessons abound: Haiti may be poor, miserable and desperate. But in many areas it does a better in immunizing its children against common childhood diseases than some parts of Baltimore. Could we learn something from their approach?

Bangladesh also has enormous misery and deprivation. But through its innovative Grameen Bank it has found a way to provide capital to millions of poor people, particularly women. In this country, poor people are caught in a credit bind, vastly limiting their ability to capitalize on their own initiative. Without money or other assets, it is hard to qualify for a loan.

The Grameen Bank has found that loans of even

\$10 and \$20 enable women to invest in spinning wheels or other equipment necessary to begin very small businesses, or "micro enterprises." By helping these people tap into their own energy and initiative, the bank enables them to magnify their household income and improve their family's standard of living. Programs modeled on the Grameen Bank have given similar chances to poor people here; how can we expand these efforts?

Anyone familiar with the lives of very poor people, whether in inner cities or rural areas, knows their problems transcend national borders. Their problems reach far beyond the daily challenge to maintain adequate food and shelter. From unanticipated pregnancies, infant mortality and unhealthy children to lack of jobs or no access to credit, the problems of poor people in Maryland look a lot like those faced by the poor elsewhere in the world.

It is refreshing to see that a federal agency charged with funding development programs in other countries can also recognize the importance of finding ways to share what it learns with people in this country. That not only enriches efforts to help poor Americans; it also helps to inform taxpayers about the vital role foreign aid can play in a dangerously unstable world.



Gore launches U.S. AID's help for city

By Richard O'Mara
Sun Staff Writer

Vice President Al Gore launched a partnership yesterday between Baltimore and the U.S. Agency for International Development designed to apply here the agency's expertise in helping people mired in poverty.

Speaking at a conference titled "Lessons Without Borders," at Morgan State University, the vice president referred to the efforts of the tens of thousands of health workers, literacy teachers and small business advisers sent abroad since 1961 to focus America's attention on the plight of the Third World.

"It is time to bring this knowledge back home," he said.

"The idea might sound strange but it's not," he added. "Whether developing a vaccination program in Malawi or Manhattan, some lessons are universal."

The partnership is the first of its kind, but other cities — Chicago, Atlanta, Boston — have expressed interest in drawing on AID know-how.

J. Brian Atwood, AID administrator, said, "It is people like those in Baltimore who invested in the foreign aid programs. Why shouldn't they benefit from it?"

The suggestion by Mr. Atwood, made on C-Span television late last year, was acted upon by Mayor Kurt L. Schmoke.

The vice president spoke to about 250 health and social workers and community activists at the Morgan conference, plus as many guests.

After that he visited the Family

Partnership targets Baltimore's poverty

Place on Ashland Avenue — which provides services to needy families, such as literacy training, prenatal care, nutritional information and vaccinations — and was shown around an immunization bus that roams Baltimore's neighborhoods inoculating children.

At Morgan State, Mr. Gore pointed out that in 1990, only 39 percent of American children were immunized against measles. (In Baltimore, fewer than half the city's two-year-olds are up to date with their immunizations, said Charlotte Crenson, a city health program administrator, who was on hand for the vice presidential visit to East Baltimore.)

Because of AID's skills abroad at propagating the importance of inoculations, a lot of developing countries are doing much better in immunization, he said.

AID marketing techniques also are effective at spreading the word in foreign countries about the protection against infant illness that breast feeding provides.

The agency encourages and underwrites banks in Third World countries to lend small amounts of money to poor people who have no collateral, but do have an idea for a business, or "microenterprise," Mr. Gore said.

AID also trains and deploys local community volunteers to assist professional health workers and com-

munity activists abroad.

The vice president called the use of volunteers "an excellent example of community empowerment, a technique we can use here. Something developed to help nations elsewhere can help here."

And the reverse can be true. Baltimore can teach AID a thing or two, agency officials said. For example, workers at Healthy Start, a prenatal care program, have devised strategies for dealing with substance abuse among the people it helps.

Healthy Start was founded in 1980 to help lower infant mortality rates in certain Baltimore neighborhoods that had reached Third World levels — 19 deaths per 1,000 live births in Harlem Park and the area around Johns Hopkins Hospital, according to Daisy Morris, who runs Healthy Start.

"When we began we found that substance abuse was a tremendous problem, between 30 and 35 percent of [expectant] moms" had it, Ms. Morris said. The experience in dealing with this, Ms. Morris believes, is "what gave us the edge on a lot of cities, because we understood our moms."

Margaret Neuse, deputy director of AID's Office of Population, who has visited Healthy Start, said, "We have a lot to exchange with Baltimore. We have met different problems."

Everyone who addressed the Morgan State conference stressed that the partnership would be more than a rhetorical one, a friendly gesture from a Democratic president to a po-



LLOYD FOX/SUN STAFF PHOTO

Vice President Al Gore watches as Marcus Sanford, held by mother Tiffany Sanford, waits while nurse Mae Lee prepares immunization.

litical ally in a nearby city. They insisted this was the case even though AID is prohibited by law to operate within the United States.

Other speakers included Mr. Atwood; U.S. Sen. Paul Sarbanes, a Maryland Democrat; and U.S. Rep. Kwesi Mfume, D-7th District.

Mr. Atwood announced that a working group would be set up with representatives from AID and the city to decide on reasonable expectations for the partnership.

Mr. Slater listed several likely AID initiatives. It would send field directors just returned from abroad to Baltimore to lecture and hold seminars; provide access to AID's enormous library to Baltimore health and nutrition workers; create internships for

social workers from the city; and send people in the local helping professions to visit foreign development programs. Later in the day, Mr. Gore went to the Social Security Administration headquarters in Woodlawn and continued a theme that he raised at Morgan State: the benign intervention of government.

"Twenty-five or 30 years ago, more than 70 percent of the American people felt that government would do the right thing in solving national problems. Now only 20 percent believe that," he said.

"We have to put the customers [citizens] first," he emphasized.

Sun staff writer Larry Carson contributed to this article.

EWING'S SLAM PUTS KNICKS INTO NBA FINALS, 1C

THE SUN.

LATEST
NEWS &
SPORTS

MONDAY, JUNE 6, 1994

HOME DELIVERY: 25¢ (in most areas) • NEWSSTAND: 50¢

BALTIMORE, MARYLAND

Baltimore to try Third World remedies

By Scott Shane
Sun Staff Writer

City will be first to use tactics learned abroad for its ills

For decades, the U.S. Agency for International Development has sent Americans into the Third World to attack the problems of developing countries: infant mortality and childhood illness, unplanned births and sexually transmitted diseases, poverty and chronic unemployment.

Now AID wants to teach at home what it has learned abroad. In Baltimore and elsewhere, the agency wants to share remedies for the ills of urban America — infant mortality and childhood illness, unplanned births and sexually transmitted diseases, poverty and chronic unemployment.

Because Mayor Kurt L. Schmoke put aside boosterism and responded to AID's offer with a candid acknowledgment that the city needs help, Baltimore is the first U.S. city to be targeted by AID's "Lessons Without Borders" program.

"It is an unfortunate fact of life that we have in certain parts of our city health problems, housing problems, that resemble those in Third World countries," Mr. Schmoke says. "And, if there are some techniques that AID has used overseas that can be used here, I'd like to apply those problem-solving techniques."

"Lessons Without Borders" will debut today with a conference at Morgan State University that will bring together Baltimore officials and staff members from AID, the major distributor of foreign aid. Vice President Al Gore will be the keynote speaker.

By law, AID is not permitted to fund programs in the United States. But, by offering advice and cheerleading, the agency is seeking to be midwife at the birth of a new generation of U.S. social programs.

AID officials acknowledge that they hope "Lessons Without Borders" will help them sell skeptical American taxpayers on the value of foreign aid. But, budgetary motives aside, American specialists in Third World development say the initiative is a long-overdue recognition that creative programs being used to attack stubborn social problems in Africa, Asia and Latin America could be useful on U.S. soil.

Whether it is immunizations in Haiti — where in some desperately poor neighborhoods the rate of childhood inoculation is far higher than in Baltimore — random distribution in Central Africa or small-enterprise development in Bangladesh, Third World social programs have much to teach U.S. policy makers, say Americans who have worked abroad.

"A lot of us who've worked overseas have been waiting a long time for this to happen," says Julie Convisser, who runs an AIDS prevention project in Portland, Ore., based on a similar effort in Zaire. "As Americans we sometimes believe no other country has anything to teach us. We're wrong."

Portland's Project Action, the first U.S. effort of Population Services International, which operates in 24 other countries, is among a handful of successful transfers of Third World programs to this country. In Zaire, the battle against AIDS incorporated television soap operas promoting safe sex and condoms on sale for 2 cents apiece in every roadside bar or shop. In Portland, Project Action has produced MTV-style television shows for adolescents and placed 185 vending machines dispensing condoms at 25 cents each, Ms. Convisser says.

"Lessons Without Borders" was born of a conversation late last year between AID Administrator J. Brian Atwood, 51, who was a few months into his job, and Marian Wright Edelman, the longtime head of the Children's Defense Fund.

As Mr. Atwood described AID's work abroad and Ms. Edelman recounted disheartening statistics on child health and poverty in the United

States, they saw an opportunity. Mr. Atwood said last week by telephone from Geneva. He was returning from a tour of African famine areas undertaken at the request of President Clinton.

In a November appearance on C-Span, Mr. Atwood said, he "blurted out" the idea that AID hoped to consult with U.S. cities. Among the viewers was Schmoke aide Lee Tawney. He passed the word on to the mayor, who decided Baltimore should be part of the collaboration.

Mr. Atwood said AID has not previously sought to apply its expertise in the United States partly because the agency long felt beleaguered, a pawn in superpower politics that came under fire for dubious spending.

"During the Cold War, we did waste a lot of money to buy influence overseas," Mr. Atwood said.

The agency's budget peaked in the early 1980s at about \$12 billion, much of it directed to fighting communism in Central America and elsewhere. Today, the budget may be less vulnerable to political pressure to steer the aid to allies, but it is down to \$7 billion. "Lessons Without Borders" could protect that spending by providing visible evidence to Americans of the effectiveness of

Other developments make AID's initiative timely, public health experts say.

The debate over health care reform has given new urgency to cutting medical spending, and one way to do it is to get away from the high-cost approach traditional in this country.

"We Americans like the idea of being rushed to a high-tech hospital," says Dr. William B. Greenough III, professor of medicine and international health at Johns Hopkins. "A great many things can be done at lower cost and with equal efficacy in the community and not in the hospital. In countries with very limited resources, you have to save the patient and save money at the same time."

A striking example is treatment for dehydration caused by diarrhea, says Dr. Greenough, who worked for eight years in Bangladesh before returning to the United States in 1985.

For many years, doctors in Third World countries have treated the condition with "oral rehydration therapy," a packet of a few cents' worth of salts and sugars that can be mixed with water and drunk by the patient. If such a packet is not available, chicken and rice soup is a fine substitute, as Hopkins physicians have long pointed out.

Yet in the United States, severely dehydrated patients generally are hospitalized and hooked up to an in-

times greater than the low-tech alternative. Indeed, because diarrhea is dismissed as a triviality, Dr. Greenough says, it often goes untreated, leading to many unnecessary deaths, particularly among nursing home patients.

Remedies that can be administered at home "lack TV appeal" and are not considered real medicine by Americans, who have an almost superstitious belief in costly machinery. "Basically, our witch doctor's mask is a lot more expensive," says Dr. Greenough, who welcomes AED's push to bring in low-tech methods.

Elizabeth Holt, an assistant professor of international health at Hopkins, is another public health professional who has worked on both sides of the great divide between domestic and international programs: in a poor urban community outside Port au Prince, Haiti, and in Baltimore and elsewhere in Maryland.

In the Haitian community, Dr. Holt says, the rate of complete immunizations by 1 year of age reached 85 percent in the late 1980s. In Baltimore, while nearly every child is immunized by school age, the rate at 2 years of age is only 55 percent, says Dr. Peter Beilenson, Baltimore's health commissioner.

The problem, Dr. Beilenson says, is not a shortage of facilities for immunization and other preventive care. It's the failure of people to take advantage of what's available. That's why Baltimore's Healthy Start program, which seeks to reduce infant mortality and the incidence of low birth-weight babies, hires community residents to do outreach work, identifying pregnant women and bringing them in for early prenatal care.

Healthy Start may have something to teach AID, says Margaret Neuse, deputy director of the agency's office of population. "Lessons Without Borders" should be a two-way street, she says.

In Latin America, Africa and Asia, Ms. Neuse says, she has faced difficulty in getting people to use health services. "I just came back from a place in Ethiopia with a population of 30,000, where a program serves just 10 clients a day. We had a case in Nepal where you couldn't pay women enough to get them to go to a clinic."

Joe Bock, a former Missouri legislator who has worked for two years for Catholic Relief Services, says he sees great potential for transfer of programs outside the area of health care to U.S. soil.

Many programs in the U.S. war on poverty have "failed miserably," says Dr. Bock, who will soon take over Catholic Relief's operations in Pakistan. "We're looking around for new ideas."

One such idea, he says, is what development professionals call microenterprise: tiny, family-based businesses started with minimal capital. The Grameen Bank (rural bank) of Bangladesh, which has served more than 1 million poor women, has inspired a number of fledgling U.S. programs.

As the United States grapples with welfare reform, microenterprise offers an alternative approach to fighting poverty, one based on poor people becoming small-time entrepreneurs rather than cashing monthly checks.

"Unfortunately, we've had the idea of the U.S. riding in as a knight in shining armor to teach these countries," Dr. Bock says. "In fact, we can learn a lot from what they're doing."



U.S. AGENCY FOR
INTERNATIONAL
DEVELOPMENT

*Bureau for Legislative
and Public Affairs*

JUL 29 1996

Attached please find copies of invitations to the First Lady to participate in an upcoming *Lessons Without Borders* conference in Baltimore. Specifically, we are inviting Mrs. Clinton to participate in two separate, yet consecutive, events on the evening of Monday September 16, 1996.

In the first event, the First Lady would address approximately 300 - 400 development professionals from around the country, along with another 500 members of the faculty and student body of Johns Hopkins University at Shriver Hall which has a capacity of 900. Immediately following is a special dinner with approximately 200 senior executives from US philanthropic, business, medical and government organizations honoring the gains in global health made by US-based public and private organizations and individuals.

Specifically, the dinner is being held to increase the awareness of and financial support for the important work of the International Centre for Health and Population Research in Bangladesh visited by Mrs. Clinton last year. While the dinner is not specifically a fundraising dinner, it is hoped that it will engender support on the part of potential corporate and foundation donors. We would like to recognize Mrs. Clinton for her commitment to improving global health and advancing the efforts of institutions like the Centre.

- 2 -

I hope you will strongly consider the First Lady's participation in these two events for the following reasons:

First, Mrs. Clinton is very committed to the work of USAID and on numerous occasions has expressed interest in participating in *Lessons Without Borders*;

Second, the Centre in Bangladesh is an important research institution that has saved the lives of millions of women and children in the developing world and its research has important implications for health issues here at home. Support from the Administration would greatly enhance its ability to continue this important work;

Third, this conference provides an opportunity for the First Lady to address a diverse audience - from students to corporate CEOs - of more than a thousand people from across the country.

And last, while *Lessons* is intended to provide a forum for technical exchanges between domestic and international experts, the conferences have taken on a broader dimension that provides a unique opportunity for the Administration to articulate important domestic policies: maternal and child health, microenterprise, the role of government in building sustainable communities and reinventing government, to name a few.

In a recent conversation with Nicole Rabner, she suggested that in addition to inviting Mrs. Clinton to be the honored guest, we ask her to serve in some capacity (perhaps honorary chair) in the Centre's fund-raising effort. Brent Berwager will be contacting you to obtain further clarification of the First Lady's interest in that regard.

I will contact you in the next few days to discuss this further. In the meantime, if you have any questions please call me at 647-7546. Thank you for your assistance and I look forward to talking to you.

cc: Nicole Rabner



U.S. AGENCY FOR
INTERNATIONAL
DEVELOPMENT

JUL 29 1996

The Administrator

Mrs. Hillary Rodham Clinton
The White House
Washington, D.C. 20500

Dear Mrs. Clinton:

September 15-17, 1996, the U.S. Agency for International Development (USAID), the City of Baltimore and Johns Hopkins University will host the first national *Lessons Without Borders* conference. On behalf of Mayor Schmoke and other conference sponsors, I want to invite you to participate in two aspects of the program.

On Monday, September 16, approximately 300 development professionals from around the country will participate in a series of workshops focusing on microenterprise and health issues. We would be honored if you would close the workshops by addressing the 300 *Lessons Without Borders* participants along with members of the faculty and student body of Johns Hopkins University. This event will take place at Shriver Hall which has a capacity of 900.

Immediately following the workshops, USAID and the Discovery Channel are hosting a dinner to celebrate the gains in global health made by the U.S. government and by the philanthropic activities of U.S.-based foundations, corporations and individuals. In particular, the program will focus on the accomplishments of the International Centre for Diarrheal Disease Research in Bangladesh (ICDDR,B), which you visited last year during your trip to South Asia. Approximately 200 executives from the U.S. business, foundation and medical communities will be in attendance. You are invited to give a keynote address at this dinner.

This national *Lessons Without Borders* conference will bring together hundreds of development professionals from private sector organizations as well as federal, state and local

- 2 -

governments from around the country. In addition to grassroots organizations, we are working with HHS, HUD, the interagency working group on Beijing, the microenterprise initiative and the Habitat II working group to plan the workshops. Our focus will be on health, economic empowerment and community participation and how government can better meet the needs of the community.

A tentative agenda, for both the conference and the ICDDR,B dinner, is enclosed along with press articles on the *Lessons Without Borders* program. As you can see, this initiative has not only garnered a great deal of positive media coverage, it also has resulted in tangible benefits to the communities involved.

I hope you will consider joining us. Karen Anderson on my staff will contact your office to discuss this further. I look forward to speaking with you soon.

Sincerely,



J. Brian Atwood

Enclosures: a/s

cc: Kurt L. Schmoke, Mayor of Baltimore
Dr. Demissie Habte, Director, ICDDR,B
John Hendricks, Chairman & CEO, Discovery Communications
Donna Shalala, Secretary, HHS
Henry Cisneros, Secretary, HUD

D R A F T Agenda
For Discussion purposes only

Lessons Without Borders
National Conference - Baltimore Maryland
Johns Hopkins University
September 15 - 17, 1996

Sunday September 15

5:00 - 7:00 PM Opening Ceremony - Glass Pavillion, JHU
Welcome by Mayor Schmoke

Monday September 16

8:00 AM Registration

8:30 AM Welcome and Introductions
Mayor Schmoke, J. Brian Atwood, MD delegation
Keynote - Vice President Al Gore* (INVITED)
Shriver Hall**

9:30 - 12:00* Workshops/Break-out sessions

12:00 - 1:30PM Lunch

1:30 - 4:30PM Workshops/Breakout sessions continue

4:30 - 5:30PM Closing Remarks - Mrs. Hillary Rodham Clinton (INVITED)
Shriver Hall**

6:00 PM Discovery Channel/USAID Dinner:
 "A Celebration of Advances in Global Health"
 Renaissance Hotel, Baltimore Harbor
 First Lady Hillary R. Clinton, Honored Guest Speaker

Tuesday September 17

9:00 - 12:00 Panel Presentation on Capitol Hill - potential hosts include Maryland delegation, members Labor and Health committees and other interested members

Presenters to include combination of front-line development practitioners and public and private policymakers.

* After giving opening address, Vice President Gore may tour an empowerment zone project with Mayor Schmoke, federal agency representatives (HHS/HUD) and Brian Atwood.

** Shriver Hall - Johns Hopkins University - Capacity 900

LWOB
ICDDR,B Dinner

Program Outline

Event Basics: Registration, reception, dinner, assigned seating, table service, rounds, head table, presentations from head table.

Theme: Celebration of the global achievements in health fostered by the U.S. government, and also by corporate, foundation and individual philanthropies.

Special Focus: ICDDR,B.

Secondary Focus: Individual/institutional donors making especially significant contributions to global public health.

Sponsor: Discovery Communications, USAID

Coverage: C-Span, et al.

Speaker Roster
(Examples): Mrs. Hillary Rodham Clinton
Vice President Al Gore
Mr. Brian Atwood
Ms. Susan Berresford (Ford Foundation)
Dr. William Richardson (Kellogg)
Dr. Demissie Habte

Donor Recognitions
(Examples): Robin Chandler Duke (Packard Bd., Amer. Home Products)
Warren/Susie Buffet (Berkshire Hathaway)
Levi Strauss (Robert Haas)
Rockefeller (Peter Goldmark)
Ford (Susan Berresford)
John C. Whitehead (Mellon, Asia Soc., Int'l. Rescue, Fed. Res. Bd of NY)
David A. Hamburg (Carnegie)