



1 9 9 8 A n n u a l R e p o r t

enter

Site Map

- [Introducton](#)
- [Our Mission](#)
- [A Message from the Presdient and Chair](#)
- [Working Together Photo Gallery](#)
- [1998 CARE USA Overview](#)
- [1998 CARE USA Highlights](#)
- [Africa](#)
- [Asia and the Pacific](#)
- [Europe](#)
- [Latin America and the Caribbean](#)
- [CARE International](#)
 - [CARE International Countries](#)
 - [CARE International Overview](#)
 - [CARE International Officials](#)
- [Shaping Our World](#)
- [Telling CARE's Story](#)
- [Our Supporters](#)
- [CARE Board of Directors](#)
- [CARE Board of Overseers](#)
- [CARE Leadership](#)
- [A Financial Overview](#)
- [Financial Statements](#)
- [CARE Regional Offices](#)
- [Credits](#)



working together

[back](#)[site map](#)[next](#)



working together

In the summer of 1998, we set out to capture the essence both of CARE's work in the developing world as well as the work of the people we seek to serve. Donor/photographer Fred Housel and CARE staff visited CARE projects in Africa, Asia and Latin America. In each instance, people welcomed them into their communities and homes to document their labor and their lives. We are proud to bring you the results of this effort in a rich and commanding photo essay. The pages that follow tell of work in Mali, India and Bolivia, but they do more than that. They tell the story of work and life for much of humankind as

well. They are testament to the pride, the dignity and the fruit of labor. They are testament to the back-breaking effort of work, to the joy of work and to the hope and determination that drives people in their work. They also tell the story of your efforts through CARE to support the men, women and children who are working for a better future. They are testament to the fact that, working together, we can make a difference. Working together, we are making a difference.

[back](#)[site map](#)[next](#)

Our mission

CARE'S REASON FOR BEING IS TO AFFIRM THE DIGNITY AND WORTH OF INDIVIDUALS AND FAMILIES IN SOME OF THE POOREST COMMUNITIES OF THE WORLD.

WE SEEK TO RELIEVE HUMAN SUFFERING,
TO PROVIDE ECONOMIC OPPORTUNITY,
TO BUILD SUSTAINED CAPACITY FOR SELF-HELP,
AND TO AFFIRM THE TIES OF HUMAN BEINGS EVERYWHERE.

WE ARE COMMITTED TO PURSUING OUR MISSION
WITH EXCELLENCE
BECAUSE THE PEOPLE WHOM WE SERVE,
BENEFICIARIES AND DONORS,
DESERVE NOTHING LESS.

[back](#)[site map](#)[next](#)

A Message from the President and the Chair of the Board of Directors

CARE's work touches aspects of the human experience that go straight to the heart of life – food, shelter, community and opportunity. CARE's work is difficult and sometimes dangerous. It seeks to turn around the current prospects of the poorest people in the developing world. To provide hope and opportunity where little has existed. To overcome poverty and to ensure security for every family. It is work that springs from our donors' vision: to help people reap what they sow, to help them invest the fruit of their labor in order to provide new horizons for their families. Our strategy is to do this work alongside the people we seek to help. To labor in their fields. To live in their communities. To know their lives. This is CARE's work.



The mission we embrace seems daunting at times, and its completion is a long way off. But we believe that we can make a difference, with the commitment of our donors behind us and a consistent set of values to light our path. And as we undertake our work, it is increasingly clear that those values underpin our success. They tell us why we do what we do. And they tell us how.

While these values have been at the heart of CARE for more than 50 years, last year we sought to articulate them in words that our staff could embrace and our donors could endorse. They are simple, but their force is profound:

Respect **I**ntegrity **C**ommitment **E**xcellence

These values remind us – as we hope they do you – of why we go to work each day. We do not claim to embody them perfectly – but we do seek to do so. They characterize our work at its best. A look around the CARE world shows these values in action:

Respect for individual dignity. In the midst of Sudan's civil war, Pat Carey, senior vice president of programs, visited the beleaguered town of Wau. Thousands of Sudanese had walked for days to reach this town in a desperate search for food...

“He was emaciated, desperately thin. I think he was about 14 years old, and his sister about 5 or 6. The CARE worker handed him food in a calabash, and he drew his sister across his lap. He picked up a little bit of food. He had to open her mouth. He encouraged her. And he did it again and again, urging her to eat. He had taken nothing. I thought to myself: ‘This is humbling. He must be desperately hungry. I am witnessing incredible human courage.’

“And I knew it was absolutely right that CARE was there, helping in this.”

Integrity. Paul Barker, CARE's country director in Afghanistan, described integrity at work in the actions of a CARE staff member...

"Engineer Askar was working in Gardez when the ruling Taliban officials came and demanded CARE workers be given over to building projects set by the governor of that region. Askar, however, was determined that CARE would not compromise its programming principles. Usually we don't have to suffer physical abuse to uphold the integrity of our work, but Askar was beaten with a Kalishnikov rifle butt and imprisoned for several hours. We anxiously awaited news from doctors upon his release. Thankfully, he suffered no broken bones or serious injury."

Commitment to service. We are continually inspired by the determination of CARE staff to push through obstacles to do their work. On a trip to Bolivia to photograph our efforts there, a member of our communications staff met Ana Apaza, an agricultural extensionist. Apaza holds a degree in agronomy, but at the beginning of her CARE assignment she encountered resistance.

"They told me that a woman was too delicate for this kind of labor. They didn't think that I would want to get dirt on my hands. There was not only prejudice, but also difficult physical conditions. I, like all the other CARE field staff, live out among the people. The house that I lived in was overrun with bats. And I had no water. I had to go to the river and haul water for bathing, drinking and washing my clothes."

She persevered. And, over the months and years, farmers have come to rely on her advice.

"Though there are sacrifices and hardships that come as part of my job, there are also rewards," she says. "Even though I have to drive down dangerous roads, the road ends with families that show me love. They invite me into their homes, we eat together, we learn from each other."

And, finally, **excellence**. David Newberry, senior children's health advisor, saw this value in action in a child survival project in Siaya, Kenya.

"Consultants told Benta Ruth Osamba that the data her community health workers were collecting were too complex and too voluminous to be adequately interpreted. She is a training and communications officer for CARE. She thought her training programs probably had prepared the health workers – all members of the community – more thoroughly than the consultants expected. And she was right."

"In 1997, heavy rains caused by El Niño flooded the communities around Lake Victoria. Gathering data on a chalkboard, her health workers noted a doubling of diarrhea cases in just one month. Cholera was on the rise due to contaminated water, they reasoned. Because of their training, community health workers immediately provided critical case management to prevent deaths. No one died from cholera in the community Osamba had trained. Excellence saves lives."

**"THERE IS AN
EXPRESSION:
APRENDER
HACIENDO.
LEARN BY DOING.**

**WE LIVE THE
WORK WITH THEM.
WE WORK WITH
CHILDREN. WE
WORK WITH MEN
AND WOMEN.**

**WE SUGGEST
SOLUTIONS -
NOT PAT ANSWERS.
WE LEARN FROM
THEM AND THEY
LEARN FROM US.**

**WE CALL IT
CARE'S BRAND
OF APPROPRIATE
TECHNOLOGY.
THEIR GOALS
BECOME OURS."**

*- Javier Espinosa A CARE
agricultural worker in
Bolivia*

We are impressed by how CARE's core values give rise to solid achievement. How, for example, Osamba's expertise helped save lives. Our values animate our work and inspire us forward. We count you among us. As you peruse the following pages – the pictures and the stories of those we work alongside – we hope that you will feel the power of our shared effort. Thank you for doing your part.



Peter D. Bell, *President*



Lydia Micheaux Marshall, *Chair*

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

working together

Photo Gallery



Bolivia

Yola works on an assignment in an after-school girls' education program. An urban center on the outlying high plains near La Paz, El Alto bears the telltale scars of poverty. Girls like Yola often bear the brunt of its effects. CARE's assertiveness training and other coping mechanisms are vital life lessons. In this exercise, Yola lists her rights. "Here, we use what we learn for living. I have learned how to be careful, to respect and take care of myself," she says.

[back](#)[site map](#)[next](#)

1998 CARE USA Overview

(Fiscal year 1998 (FY98) runs from July 1, 1997 to June 30, 1998.)

CARE responds to the complex problem of poverty with a range of programs that are designed to meet people's basic needs. In crisis situations, CARE responds with emergency relief – often food or other desperately needed materials such as medical supplies. In developing countries during more normal times, CARE undertakes the task of long-term development, working with a range of partners – national and local government agencies, other nongovernmental organizations (NGOs) and the communities and families who themselves benefit – to improve access to food, health care, housing, education and a safe and healthy environment, and to strengthen people's ability to participate in decisions that affect their lives. CARE has identified these factors as essential for a family's economic and nutritional security, and the organization's programming is increasingly focused around this holistic approach that CARE calls Household Livelihood Security (HLS).

Today, CARE is one of the world's largest international relief and development organizations. The CARE International family has programs in more than 60 countries worldwide. In FY98, CARE USA supported programs in 51 developing countries across Africa, Asia and the Pacific, Europe, and Latin America and the Caribbean. These programs in agriculture and natural resources; basic and girls' education; children's health; water, sanitation and environmental health; integrated and other health; nutritional support; infrastructure; and small enterprise activity development helped 35.3 million men, women and children in their fight to overcome poverty and build a better life.

CARE USA's program expenses totaled more than \$339 million in FY98. The following pages offer a summary of those programs.

[back](#)[site map](#)[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

1998 CARE USA Highlights

In FY98, CARE USA improved the lives of 35.3 million people in 51 countries in Africa, Asia and the Pacific, Europe, and Latin America and the Caribbean. Below are some of the changes CARE's generous and committed supporters helped make possible:

*More than 667,000 farmers in 31 countries increased their livestock and crop yields through projects aimed to ensure food security and increase incomes.

*More than 520,000 people benefited from natural resource conservation programs, including agro-forestry, integrated pest management and soil conservation.

*More than 9.3 million trees were planted on both community and private lands.

*More than 250,000 people, 39 percent girls and women, received non-formal, literacy, primary and other basic education in 18 countries.

*15.6 million people in 19 countries received food through programs in school feeding, food-for-work and community kitchens.

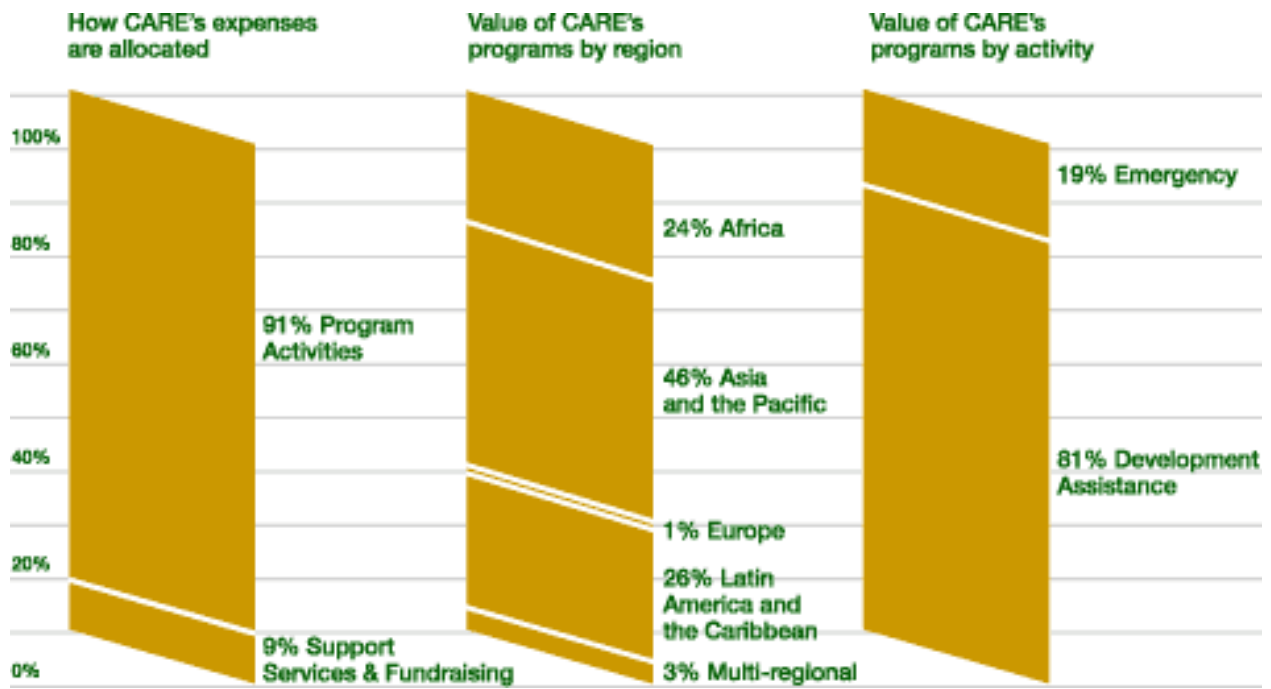
*More than 5.4 million women and children benefited from children's health projects in 14 countries.

*1.4 million people in 30 countries gained access to clean water and sanitation services through the construction of wells, latrines and sewers and through the protection of watersheds.

*84.9 million men and women benefited from family planning, maternal health and STD/HIV interventions in 22 countries.

*More than 85,000 kilometers of roads were repaired through food- or cash-for-work programs.

*Nearly 270,000 people in 25 countries were helped through projects in credit, savings and income-generating activities. More than \$25 million in loans were disbursed with a repayment rate exceeding 90 percent.



[back](#)

[site map](#)

[next](#)

Africa

Of the 758 million people on the African continent, nearly 50 percent are living in poverty. And despite previous indications of an economic expansion in 1998 and aspirations of an emerging “African renaissance,” economists are now predicting that Africans’ per capita income will drop in 1999.

In FY98, CARE USA supported programs totaling more than \$82 million in 22 sub-Saharan and two North Africa/Middle East countries. These programs helped individuals and communities make sustainable progress toward the alleviation of poverty. The following report describes CARE’s work in Africa according to its two operational units: Southern and West Africa and East Africa and the Middle East.

EAST AFRICA AND THE MIDDLE EAST

In East African and Middle Eastern countries, decades of drought, political unrest and social upheaval have resulted in chronic food insecurity. This means the region’s people are unable to obtain basic nutritional requirements.

Conflict and instability have led to mass population movements and breakdowns in the social fabric and physical infrastructure. Weak markets and unbalanced production patterns compound the problem and, when combined with low government spending, mean that farmers do not have access to seeds and tools. High population growth rates, environmental degradation and fluctuating weather patterns are exacerbating factors.

Despite the region’s problems, there are positive trends. To a limited but growing extent, liberalized economies have allowed a freer flow of people, goods and services both within and between countries. The establishment of social, political and economic alliances for common interests gives reason for optimism. This trend can be seen in the unprecedented number of local nongovernmental organizations (NGOs) willing – and increasingly able – to address the development challenges faced by their countries.

In FY98, CARE USA’s programs in Burundi, Egypt, Ethiopia, Kenya, Rwanda, Somalia, Sudan, Tanzania, Uganda and the West Bank/Gaza capitalized on these positive trends while addressing the problems that underlie food insecurity.

Seeds of Peace

In agrarian countries recovering from war, the agricultural sector must be rebuilt in order to improve food security. In Rwanda, women have always produced food for their families, yet agricultural programs have traditionally been aimed at men, who grow cash crops such as tea,

bananas and coffee. As a result of the genocide in Rwanda in 1994, the number of households headed by women has risen dramatically. These households are typically the most vulnerable to food insecurity. Since 1995, CARE's **Women's Agricultural Recovery**

Project has worked with more than 4,000 woman-headed households in Gikongoro Prefecture to produce and "loan" seeds. Seed banks run by women's associations have consistently achieved a repayment rate of more than 90 percent, and revolving seed credit means that additional women are able to benefit from the program each year.

The same project also aims to help create the conditions for building a lasting peace. It addresses a wider social phenomenon: that of helping to build new social norms based on shared solutions to shared problems. In Gikongoro, program participants have abandoned ethnic labels. They wish to be known as Rwandan women working together for a better life.

Girls' Education Is Key

A major obstacle to achieving a secure livelihood is illiteracy, which limits people's ability to earn a living. Attacking illiteracy is a long-term strategy in the struggle against food insecurity; its results are not immediate, but they are far-reaching. Experience has shown that educated women have healthier and fewer children and are better able to provide for them.

In the Upper Egyptian regions of Fayoum and Sohag, CARE supports community-based education for women to improve their ability to earn a living and to influence domestic and civic affairs. The **Community Action in Support of Education (CASE) Project** links 40 local organizations, such as parent-teacher associations and women's groups, to increase women's participation in community education and heighten awareness of the critical roles women play in society.

Partners in Strength

People in Somalia are creating their own humanitarian agencies to address the problems of food insecurity and poverty. CARE works with four groups of Somali NGOs, enhancing their ability to respond to the needs of the communities in which they work. One of the four groups specializes in methods to improve food production, credit opportunities, primary health care services and water systems. A second group is made up of NGOs managed by Somali women for Somali women. The third promotes peace initiatives between communities that have traditionally been rivals. The fourth group of NGOs is learning to respond to emergencies.

In October and November 1997, Somali NGOs proved their mettle by responding to the El Niño disaster, which brought heavy rains and torrential flooding to the Juba and Shabelle river valleys in southern Somalia. Scores of people died, and more than 200,000 were left homeless. The



In Kirchamba, Mali, a local women's group took a loan from CARE to buy a rice-husking machine, reducing the two to three hours to husk a basket of rice into a five-minute operation. These women can now spend more time on income-generating activities such as basket weaving.

floods inundated crops and roads, drowned livestock and destroyed people's access to food, clean water and health care. Together, CARE and its Somali NGO partners provided timely assistance to isolated regions, distributing food, blankets and medical supplies to 65,000 people in need.

SOUTHERN AND WEST AFRICA

The Southern and West Africa region encompasses countries in every phase of the development spectrum, from those traumatized by recent war to those making economic progress and democratic reform. Despite their many differences, the countries of the region where CARE works share three general trends. First is rapid urbanization and the challenges it poses. One-third of the population in sub-Saharan Africa now lives in cities, and urbanization rates continue to rise.



"I am proud to wield my hoe, to be a peasant," says Agali Aberi, a rice farmer in Mali. In his village of Chirfiga, along the Niger River, CARE partnered with citizens to build irrigation canals and install a motor pump.

While people move to cities in search of jobs, economic security and educational opportunities not available in the countryside, the urban areas they flock to cannot meet the basic needs of the existing population. The ranks of people swelling African cities often live in poverty and economic deprivation.

Given the difficulties governments face in meeting the basic needs of their citizens, many people today are taking new initiatives to improve and develop their lives and the lives of their families. CARE sees this second regional trend of citizen action as a positive one. The third trend in the region is the growing number of complex transitions from emergency to rehabilitation in war-torn countries.

In Southern and West Africa, CARE USA increases the impact of its programs by combining approaches to help families address the multiple causes of poverty. In FY98, CARE USA's programs in Angola, Cameroon, Democratic Republic of Congo, Ghana, Lesotho,

Madagascar, Mali, Mozambique, Niger, Sierra Leone, South Africa, Togo, Zambia and Zimbabwe focused on growing trends of escalating urbanization, citizen group participation in development and the complex transitions from emergency response to rehabilitation.

Combating Urban Poverty

A prime example of the problems associated with rampant urbanization is taking place in Antananarivo, the capital of Madagascar. The urban population there has grown an average of 5.8 percent each year since 1980. The majority of unskilled, poorly educated people who migrate to the city cannot find employment in the tight job market, nor do they have the capital to establish their own businesses. Though there is plenty of food for sale in the city's markets, poor families struggle to afford their daily bowl of rice. An estimated 60 percent of the city's

residents are not served by sewage or drainage systems, and residents of the overcrowded shantytowns suffer from diarrhea, tuberculosis and plague. The rising number of street children in Antananarivo is testament to people's inability to provide for their families.

CARE's Urban Health and Urban Household Food Security Projects help residents in 30 poor neighborhoods of Antananarivo learn how to make inroads against poverty and improve their quality of life. CARE-trained health workers provide people with improved access to preventive health care, including immunizations and family planning. Ten thousand

people build simple drainage and sewage systems in exchange for food, and 200,000 residents benefit from the resulting improved sanitation. Community groups learn to organize, plan and carry out small-scale improvements of their own. Program participants also receive job skills training and self-employment help, and learn about their legal rights. Armed with knowledge, skills and confidence, the people of Antananarivo are improving their lives and the lives of their children.

Strength in Community

In Niger, a citizens group works for sustained change by and for women. *Mata masu dubara* means "ingenious women make things happen" in the Hausa language, and the women of CARE's **Mata Masu Dubara Project** in rural Niger have proved the phrase correct. Here, women are solely responsible for raising children, and if a woman wants to send her children to school or buy them medicine, she must raise the money to do so. Yet tradition – from the land tenure system favoring men to the low value placed on educating women – severely limits her ability to earn money. Largely by-passed by banks and other formal financial institutions, women have had two avenues to capital: the moneylender with high interest rates or the sale of productive assets such as small livestock. Mata Masu Dubara helps women mobilize resources through savings and loan associations. These associations, managed by the women themselves with training from CARE, collect savings through contributions of fixed amounts and make short-term loans at reasonable interest rates. In Tahoua District, CARE and program participants have formed more than 800 successful savings and loan associations with more than 28,000 members. They invest in their families by purchasing productive assets such as goats and chickens and by building improved grain storage to reduce food losses. The money saved or earned through these investments gives them a source of revenue to spend on their children. The women of Tahoua report that they feel greater self-confidence – and are accorded greater respect in their communities – as a direct result of participating in this program.



Traditionally, the children of Mali have spent their days toiling instead of going to school. Nationally, 39 percent of boys and 25 percent of girls attend primary school. Now, a community school program sponsored by CARE gives people more ownership of their schools and makes the curriculum more practical and appropriate to citizens' needs.

From War to Recovery

In order for Angola to recover from a decade of civil war, hundreds of thousands of displaced people must return to their farms and replenish the land, revitalize markets, clear more than a million land mines and rehabilitate water systems, schools and hospitals. Angola cannot meet these challenges without assistance.

CARE and the rural population of the *planalto*, or high plains, are working together to begin the recovery process. The **Livelihood Enhancement and Assistance Program**, or LEAP, is made up of separate activities that build on each other to help participants in the transition from relief to the rehabilitation of their lives. First, families resettle on their farms with short-term food assistance to carry them through to their first harvest. Next, more than 10,000 households work to restore their abandoned agricultural lands with a one-time gift of seeds and tools. CARE also helps them organize farmers' associations and seed credit and seed growth plans, and farmers learn new techniques from agricultural extension agents trained by CARE agronomists. When the work of clearing fields and planting is over for the season, farming families turn their attention to the rehabilitation of roads, bridges and culverts in exchange for payments in grain. In this way the farms are again linked to rural markets. LEAP works in close conjunction with CARE's land mine removal project, in which demobilized soldiers from both sides of the war are trained to remove the dangerous mines that were sown so liberally during the war. Angola's farmers are sowing a peaceful crop this year.

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

Asia and the Pacific

Although still home to the majority of the poor in the developing world – 515 million people in South Asia and 445 million in East and Southeast Asia – most Asian countries have experienced an economic upswing in recent years. In 1975, one out of three East Asians lived on less than \$1 per day; today it is one out of five. In fact, over the past two decades, the economies of East and Southeast Asia were among the fastest growing in the world, attracting more than 60 percent of foreign direct investments worldwide. Countries in South Asia – India, Sri Lanka, Bangladesh and Nepal – though still lagging behind East Asia in economic development, were taking heed of their neighbors’ success, and foreign investments were on an upswing.

But in mid-1997, natural and economic “firestorms” exploded across Asia, sparked by a market collapse on the far eastern shores, civil conflict at the far western boundaries and a natural catastrophe in the southwest archipelagoes. The economic crisis soon became a social and environmental crisis.

In FY98, CARE USA supported programs totaling \$157 million in 16 countries of Asia including Afghanistan, Armenia, Azerbaijan, Bangladesh, Cambodia, Georgia, India, Indonesia, Laos, Nepal, North Korea, Philippines, Sri Lanka, Tajikistan, Thailand and Vietnam. These programs focused on helping people rebuild their livelihoods and their social safety nets for a more stable future. CARE addressed the needs of girls in Afghanistan, cyclone victims in India, farmers in Nepal, factory workers in Thailand and small children in North Korea. From emergency food rations, seeds and tools for families in drought- and fire-besieged Indonesia to employment opportunities for destitute women in Bangladesh, CARE empowered people with the tools and opportunities to overcome adversity.

Natural Adversity

On the tails of a financial market collapse, natural forces wreaked havoc throughout the autumn and winter in Southeast Asia. The drought in Indonesia, for example, resulted in a shortfall of over 3.5 million metric tons of cereal crops as well as a pall of soot and smoke from an outbreak of forest fires. In a matter of months, the percentage of Indonesians living in extreme poverty soared from 11 percent to nearly 60 percent. Food shortages and rising unemployment set off social unrest and by the spring of 1998, people were rioting in the streets of the capital city of Jakarta.

To try to minimize the damage to people’s lives, CARE began infrastructure and natural resource rehabilitation projects in communities on Indonesia’s eastern islands of Irian Jaya, Timor and Flores. With a \$12 million grant from USAID’s Office of Food for Peace, CARE

began food-for-work programs to distribute 18,000 metric tons of rice, enough for 25,000 households for 12 months. Seeds and tools helped farmers reclaim their farm lands and stop soil degradation and erosion caused by the drought. Working in close collaboration with local nongovernmental organizations (NGOs) and international agencies, the most urgent food needs were being met by the end of FY98.

The Road to Independence

Bangladesh is one of the poorest and most densely populated countries in South Asia – about the size of the state of Wisconsin, but with 23 times the population. Life expectancy is 57 years, and eight out of every 100 babies born in

Bangladesh do not survive to their first birthday. About 20 percent of all households are headed by women, yet two-thirds of all Bangladeshi women are illiterate, and fewer than 50 percent of girls who enroll in school make it past the fourth grade. A widowed or divorced woman in rural Bangladesh has very few prospects for supporting her family.

CARE identified high unemployment and low educational levels as two points for intervention in 1998. The **Rural Maintenance Program (RMP)** weaves these issues together and addresses the needs of women through a successful, three-year project directed at the poorest rural women, many divorced or widowed. Employing more than 40,000 women to maintain 82,000 kilometers of dirt roads around the country, RMP provides them with income and training to become self-sufficient in the long term.

Rising at dawn, the women travel to the roads connecting their rural villages. Pounding out ruts, filling potholes and taking care of all necessary repairs, these women earn their living. They may use their savings from this work to purchase a dairy cow or banana tree, or to invest in items such as soap and cooking oil to set up a kiosk. Many of the participants use their wages to buy the supplies and clothing necessary to keep their children in school.

Their villages also benefit. With well-maintained roads, everyone has better access to clinics and markets. More than 64,000 women have passed through this program – saving as they earn, receiving training in basic business skills and graduating to become self-sufficient and valuable community members.

Nourishing the Land to Feed Themselves

Approximately three-quarters of the world's poor live in rural areas and rely on agriculture for their livelihoods. More than 500 million of these people live and farm on land that is ecologically fragile and low in productivity. The food



Kaza Begun sits at her sewing machine making clothes that her husband will sell in nearby Hyderabad, Andhra Pradesh. Begun is an active member of CARE's savings and loan program, which helps her to support her five children.



A young Indian boy folds his paper into a tablet during class. Through an integrated health project, CARE provides students like this boy with breakfast six days a week.

security of these families is precarious. Even small declines in food availability have a dramatic effect on their quality of life. A single season of failed crops can send a family struggling with poverty into a downward spiral.

Since the 1970s, when pesticides and new technologies were introduced on a wide scale in the developing world, food productivity has increased, but so have food prices. In fact, the scale and scope of this type of agricultural production have done little for the poor, small farmer. In some instances, the use of pesticides by small farmers has actually contributed to a decline in food security. New generations of pests grow

resistant to the pesticides, and the chemical backwash kills the most damaging pests' natural predators. Soil and water are contaminated, and crop production is reduced.

In Sri Lanka, CARE launched the **Integrated Pest Management (IPM) Project** to reduce exposure to hazardous chemicals among small farmers by showing them how to adopt pesticide safety and nonchemical practices. Farmer field schools were set up to provide training in safe pesticide handling, chemical testing and the use of natural pest control. Working with more than 33,000 farmers in six provinces, these efforts are coming to fruition.

After two seasons of planting, every farm participating in the IPM project showed a higher crop yield and higher profits than nonparticipating farms. Farmer-to-farmer news of this outcome has caused a multiplier effect for IPM practices in Sri Lanka. The practices are now being promoted by the government.

Partnering for Financial Stability

Compounding the challenges facing the poor in the developing world is a lack of reliable business financing – only 2 percent to 5 percent of the world's poor have access to any form of institutional credit.

In the Philippines, the **Micro-Enterprise Assistance Project (MAP)** works with 40 NGOs and cooperatives in 16 provinces to provide credit, loans and business training to men and women running small businesses in poor urban areas.

Working with existing cooperatives, women's associations and other local organizations, MAP develops partnerships to serve as a conduit for credit and loans, promotes savings and provides technical training. More than 90 percent of MAP's participants are market vendors selling everything from fruit and vegetables to shell crafts and potholders.

The success of the project has been remarkable. Since its inception, more than 6,000 entrepreneurs, 82 percent women, have received credit and savings services through MAP and cumulative loans totaling \$4 million. Loan repayment rates are 97 percent.

Leading Famine Relief

In 1997, CARE began work with four other international relief and development organizations to help relieve the famine in North Korea. Over the past four years, as many as one million North Koreans may have died in the famine. Drought, flood, then a typhoon in 1997 led to rampant malnutrition, extensive crop damage and eroded or contaminated farm lands.

Facing a food deficit of over a million tons of corn and rice, the North Korean government requested assistance from CARE in February 1997. In FY98, as lead member of an aid consortium, CARE monitored distribution of 130,000 metric tons of food to children and the elderly and provided food-for-work programming for nearly one million workers. The consortium has also distributed medicines and equipment to more than 3,000 children's centers and nurseries and to 1,400 hospitals.



From left, Amrutha and Lakshmi sit on a woven mat and calculate the week's bank deposit for their business partners. CARE's savings and loan program gives these women the opportunity to own businesses that will help support their families.

COMMONWEALTH OF INDEPENDENT STATES

In FY98, CARE USA supported programs in Armenia, Azerbaijan, Georgia and Tajikistan. Struggling with a large, crumbling public infrastructure, widespread unemployment, low agricultural productivity and ongoing civil strife, CARE set agricultural development and support for private sector expansion as priorities in these countries.

The **Small-Business Strengthening Project** in the Imereti and Kartli regions of Georgia, for example, is working with 600 small businesses to increase their marketing and management capabilities. From a small shoemaking enterprise in one family's living room to a slightly larger auto parts factory, these ventures not only provide income and security to business owners, but also create desperately needed jobs.

Working with local banks, CARE provides credit to increase inventory, upgrade or update machinery, or purchase materials that were previously beyond the reach of these businesses. CARE also provides training and technical assistance to project participants on how to operate successful shops and factories in a changing economic and legal environment.

In Georgia, low agricultural productivity is also a dire problem. Coupled with this is the small amount of available arable land – only a third of an acre per capita. For Georgian farmers, especially the poorer small farmers, assistance is needed to improve agricultural production.

The **Small Farmer Support Project** in the remote, high mountain areas of northern Georgia works in 145 villages, providing technical assistance and training to 20,000 farming households. New techniques in irrigation and crop management, the use of better seeds and training in integrated pest management have contributed to a 30 percent increase in harvest yields.

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

Europe

The dismantling of the Soviet Union in 1991 brought a dramatic redrawing of national borders throughout Europe. In Eastern and Central Europe, internal and cross-border conflict erupted, producing thousands of refugees and internally displaced people. The lives of whole communities were disrupted – leaving social and economic chaos and uncertainty. In FY98, CARE USA supported programs in Bosnia-Herzegovina, Bulgaria and Croatia totaling approximately \$2.5 million.

CARE's **Trauma Healing and Peaceful Problem Solving Project** in Bosnia-Herzegovina focuses on healing the psychological rather than the economic wounds of war. The ethnic conflict that brutalized the former Yugoslavia from 1991 to 1995 brought devastating physical and psychological hardship to the local population. Mental health experts estimate that 1 million people in Bosnia-Herzegovina alone suffer from traumatic stress, depression, personality disorders, or alcohol and drug abuse. The project is helping hundreds of 11- to 13-year-olds recover from trauma and learn to deal with conflict in constructive, peaceful ways. Through drama-in-education (role-playing, theater and artwork), journal writing and family and community improvement projects, CARE helps young people explore the personal and social issues surrounding trauma, bias, prejudice and conflict. Project partners include local ministries of education, the Mostar Youth Theater and UNICEF.

[back](#)[site map](#)[next](#)

Latin America and the Caribbean

The countries of Latin America and the Caribbean have made sizable advances in terms of economic and social well-being over the past two decades. Nevertheless, 24 percent



An Aymara woman in Bolivia carries her 3-year-old son on her back in a traditional aguayo tied at her chest. This keeps her son close and keeps her hands free for work.

of the region's 479 million people still struggle to survive on less than one dollar a day. The problems facing poor families are varied and include environmental degradation, lack of income, limited access to quality health care and widespread illiteracy, especially among women. Natural disasters, such as the El Niño phenomenon that struck Ecuador and Peru in 1997, occur all too frequently and can undo years of development work overnight.

Despite these challenges, democracy and political stability continue to deepen, and economic liberalization and privatization of government enterprises

are on the rise. There is also a growing trend of stronger municipal governments that are increasingly taking a role in development activity. Whenever possible, CARE works to increase joint ventures with partner organizations in Latin America and the Caribbean because participation by town and county governments, as well as local nongovernmental organizations (NGOs), helps to ensure sustainability. Also key to CARE's programming in the region is implementing household livelihood security (HLS), a holistic approach to meeting a family's basic needs.

In FY98, CARE USA supported programs totaling approximately \$88 million in eight countries in the Latin American and Caribbean region. In Bolivia, Ecuador, El Salvador, Guatemala, Haiti, Honduras, Nicaragua and Peru, CARE focused on programs that meet families' basic needs, provide new opportunities and expand and deepen partnerships.

Working for Nutrition, Employment and Health

Using the HLS framework, CARE designed a three-pronged intervention in Honduras, for example, that is having a dramatic impact on the lives of people there. A thorough assessment of

people's living conditions revealed that programs to improve access to health services, provide better nutrition and develop a community's economic activities would achieve a more profound, sustainable and measurable impact. As a result, the **Agricultural Extension for Food Security, Rural Employment and Development and Community-Based Health Services Projects** are each working together in extremely poor municipalities of western and southern Honduras to improve food security in a sustainable manner.

Fostering Business Development

People's desire to work and earn money to support their families is thwarted by a lack of knowledge and skills and the credit necessary to start or expand a small business. Few institutions are willing to lend to the poor, leaving them prey to moneylenders whose annual interest rates are typically more than 100 percent. Working within the community, CARE sets up financial services programs to help meet this need for credit and bring people closer to economic independence.



A young boy stops to pose with his sheep on his way down a dusty mountain road in Bolivia. Every day, he takes this sheep and four others for water at a nearby stream. With CARE's help, his family is learning new farming techniques to bolster productivity on their small farm.

In Guatemala, for example, CARE's **Women's Village Banking Project** is helping to improve the economic status of women by teaching them business skills and making financial services accessible. The program establishes women's village banking groups – managed by the participants themselves – to provide small-business loans. CARE also provides business and leadership training and technical assistance to the participants. In FY98, more than 8,200 Guatemalan women benefited from small-business loans of this type. Average on-time repayment rates usually surpass 98 percent. After several years of assistance from CARE, many village banks have “graduated” to become self-sufficient lending groups. CARE is then able to move on to support the development of new village banks.

Peacetime Rebuilding

The successful resettlement of refugees and internally displaced people and the reintegration of ex-combatants into civilian society are enormous challenges, especially in Central America. In many instances, people are starting over again, with few or no assets to build upon, and they face tremendous obstacles. CARE works not only to meet people's immediate needs, but also to provide them with the opportunity to make long-term improvements in their lives.

In El Salvador, for example, CARE's **Proseguir** (to proceed) **Project** is working to organize and develop more than 81,000 acres of land in the eastern part of the country. Project activities begin with organizing communities into associations to undertake the tasks of development. More technical activity, including land surveying and titling, ensures secure land ownership. Then, in coordination with CARE, community development associations prepare development plans. As part of the community development initiatives, CARE works in partnership with the government and local NGOs to provide basic services, including housing, schools, health

clinics, water and sanitation systems, road repair and construction and credit and technical assistance. CARE has found that, once organized, many of the community development associations are empowered and galvanized to continue work on their own.

Sexual Education for Better Health

The ability of women to gain control over their lives and improve their social and economic status is fundamental to development. This includes having the ability to make informed, voluntary choices about the number and timing of their children. For millions of women, access to reproductive health services is denied or severely hindered because services are unavailable or of poor quality, or because women lack the information to make informed decisions. As a result, at least 585,000 women die every year worldwide from complications related to childbirth and pregnancy.

In addition to reproductive health problems, sexually transmitted diseases (STDs) and HIV/AIDS are taking a toll on the health of men and women. In some countries of the developing world, the effects of AIDS are reversing decades of gains in social, economic, health and educational development. CARE's family planning and reproductive health projects increase the accessibility, quality and use of reproductive health services. Every effort is made to work with local partners to expand their capacity.

In Bolivia, CARE's **Reproductive Health and Prevention of HIV/AIDS and Other Sexually Transmitted Diseases Project** aims to improve the quality and availability of reproductive health services for more than 46,000 men and women in Yacuiba, Entre Rios, Villamontes and surrounding towns and villages. CARE works directly with local health authorities, forming part of a multi-disciplinary team including the Bolivian Ministry of Health and the Latin American Institute for Preventive Health Education (ILPES).

In FY98, the gay community and commercial sex workers in Yacuiba, Bolivia, found support through *La Sala* (the living room), where they have access to a safe education and support program. *La Sala* puts on workshops and other educational activities on sexuality, homophobia and gender and health issues for participants including gay men, commercial sex workers, health providers, local law enforcement officers and local political representatives. Personal development activities help improve confidence and self-esteem, and the program overall works for the respect of human rights and for the provision of appropriate health and social services to prevent the transmission of STDs.



Ana Apaza, an agricultural extensionist, examines a terraced garden carved into the subtropical Yungas region of Bolivia. "The Perez family, like many families I work with, is eager to learn new farming techniques."

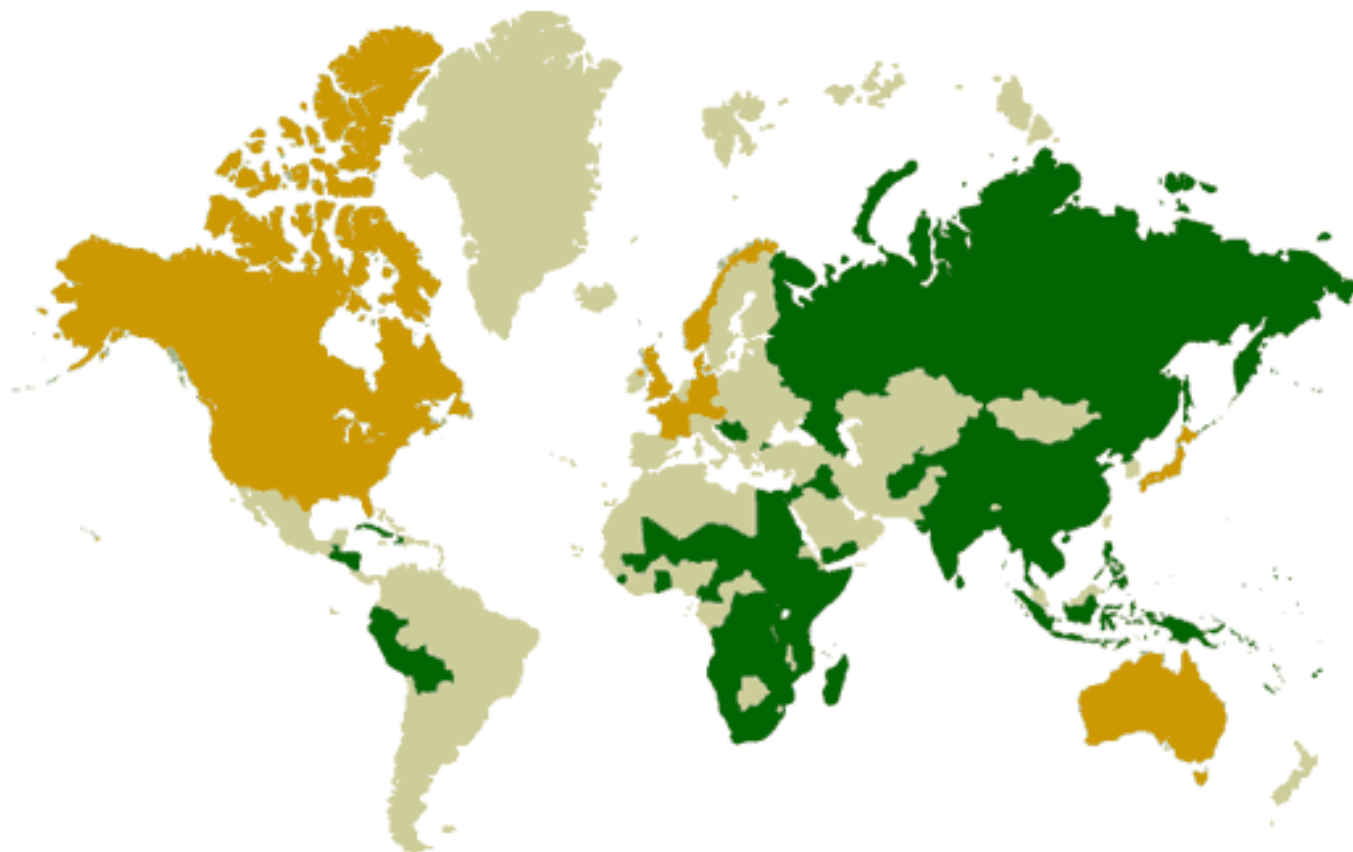
[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

CARE International



THIS MAP REPRESENTS THE WORLD OF CARE. In gold are the 10 partners of CARE International, the confederation that sponsors relief and development projects worldwide (see page 28 for more information). Displayed in green are the 64 developing and emerging nations where CARE International works. In order to coordinate operations, one country is designated as the lead member. CARE USA is the lead member in 38 countries, which are italicized below.

LATIN AMERICA AND THE CARIBBEAN

- | | | |
|------------------|----------------------|--------------------|
| 1 <i>Bolivia</i> | 4 <i>El Salvador</i> | 7 <i>Honduras</i> |
| 2 <i>Cuba</i> | 5 <i>Guatemala</i> | 8 <i>Nicaragua</i> |
| 3 <i>Ecuador</i> | 6 <i>Haiti</i> | 9 <i>Peru</i> |

AFRICA: Southern/West

- | | | |
|--------------------|----------------------|------------------------|
| 10 <i>Angola</i> | 16 <i>Lesotho</i> | 22 <i>Sierra Leone</i> |
| 11 <i>Cameroon</i> | 17 <i>Madagascar</i> | 23 <i>South Africa</i> |
| 12 <i>Chad</i> | 18 <i>Mali</i> | 24 <i>Togo</i> |
| 13 <i>Comoros</i> | 19 <i>Mozambique</i> | 25 <i>Zambia</i> |

- | | | | | | |
|----|------------------------------|----|--------------|----|----------|
| 14 | Democratic Republic of Congo | 20 | Namibia | 26 | Zimbabwe |
| 15 | <i>Ghana</i> | 21 | <i>Niger</i> | | |

AFRICA: East/Middle East

- | | | | | | |
|----|-----------------|----|----------------|----|-----------------------|
| 27 | Burundi | 32 | Kenya | 36 | <i>Tanzania</i> |
| 28 | <i>Egypt</i> | 33 | <i>Rwanda</i> | 37 | <i>Uganda</i> |
| 29 | <i>Ethiopia</i> | 34 | <i>Somalia</i> | 38 | <i>Gaza/West Bank</i> |
| 30 | Iraq | 35 | <i>Sudan</i> | 39 | Yemen |
| 31 | Jordan | | | | |

ASIA AND THE PACIFIC

- | | | | | | |
|----|--------------------|----|--------------------|----|--------------------|
| 40 | <i>Afghanistan</i> | 47 | <i>Georgia</i> | 54 | Papua New Guinea |
| 41 | <i>Armenia</i> | 48 | <i>India</i> | 55 | <i>Philippines</i> |
| 42 | <i>Azerbaijan</i> | 49 | Indonesia | 56 | <i>Sri Lanka</i> |
| 43 | <i>Bangladesh</i> | 50 | Laos | 57 | <i>Tajikistan</i> |
| 44 | Cambodia | 51 | Myanmar | 58 | <i>Thailand</i> |
| 45 | China | 52 | <i>Nepal</i> | 59 | Vietnam |
| 46 | Fiji | 53 | <i>North Korea</i> | | |

EUROPE

- | | | | | | |
|----|--------------------|----|--------------------|----|-----------------------|
| 60 | Bosnia-Herzegovina | 62 | Croatia | 64 | Serbia and Montenegro |
| 61 | Bulgaria | 63 | Russian Federation | | |

CARE International Member Countries

- | | | | | | |
|----|-----------|----|---------|----|----------------|
| 65 | Australia | 69 | France | 72 | Norway |
| 66 | Austria | 70 | Germany | 73 | United Kingdom |
| 67 | Canada | 71 | Japan | 74 | United States |
| 68 | Denmark | | | | |

Click "next" below to view more CARE International information.

[back](#)

[site map](#)

[next](#)

CARE International

President

Sir Harold Walker

Secretary-General

Guy Tousignant

Member Nations and Directors

Australia

Charles Tapp

Canada

A. John Watson

Danmark

Niels Tofte

Deutschland

Manuela Rossbach

France

Jean-Claude Buchet

Japan

Taiji Yamaguchi

Norge

Karin Gulichsen

Österreich

Franz Schmid

United Kingdom

Will Day

United States

Peter D. Bell

The 10 members of the CARE International confederation work together to fight poverty and respond to emergencies around the world. Each member of CARE International raises funds in its own country for relief and development programs in the developing world. And in each developing country where CARE works, one member of the confederation is designated the “lead member” and oversees the management of programs in that country. The CARE International Secretariat – the governing body of the confederation – is located in Brussels, Belgium. Together, the members of the CARE International confederation provided approximately \$422 million in aid to poor families in more than 60 countries worldwide in FY98.

The confederation also made important progress in forging a more efficient and effective alliance. Perhaps most notable was the decision to embark on a global visioning exercise that will set the course for cohesive action and will ensure continued success into the future. A number of other developments also will lay the groundwork for a stronger CARE International, including the introduction of a common financial system to streamline management and operations, the establishment of a project database to facilitate information sharing, and a decision to develop shared program standards to improve accountability and cooperation.

The confederation also worked together on public policy issues including land mines and the famines in North Korea and Sudan. On the 50th anniversary of the Berlin Airlift, CARE Deutschland and CARE USA partnered with the Berlin government to pay tribute to CARE’s role in that historic event. From the occupation of Berlin until the beginning of the airlift, CARE Packages® accounted for some 60 percent of total private foreign relief supplies brought into the city. In commemoration of the airlift, CARE Deutschland and CARE USA delivered CARE Packages® via Germany to children in Afghanistan and Bulgaria. U.S. President Bill Clinton delivered to Berlin an original CARE Package® to help launch a year-long series of commemorative events in Germany.

An Interview with Secretary-General Guy Tousignant

In the second quarter of FY98, Guy Tousignant became secretary-general of CARE International. A retired major-general in the Canadian armed forces and former force commander and assistant secretary general for the United Nations Assistance Mission for Rwanda during the 1994 emergency, Tousignant brought important organizational experience to CARE.

Tousignant is taking steps to ensure that CARE will enter the 21st century with the confidence, effectiveness and credibility required in an increasingly interconnected and, yet, disjointed world. "We see that decisions taken in the developed or industrialized world have important effects on the developing world, and vice versa. We also see wide disparities in the way life is lived and the resources people enjoy," Tousignant says. "It's therefore important that CARE be truly global.

"CARE's quality and track record qualify it to be a global organization. We should have a board that represents the four corners of the world. Only then," he says, "will we be able to have an impact with real potency for change."

Although CARE already works in the farthest reaches of the world, Tousignant's view of global is that CARE is of the entire world. He spells out three initial steps toward this goal: naming a board representing developing parts of the world; acknowledging that decisions made in one country can profoundly affect another region of the globe; and decentralizing CARE offices.

Essential to implementing these ideas is the process currently underway throughout CARE to "envision" the future.

Tousignant presides over CARE during a time of great energy and potential for constructive change. But one thing must always remain constant – as it has for 53 years. "We can never lose the ability to be passionate about what we do," he says.

Secretary-General of CARE International Guy Tousignant visits children in a CARE feeding center in Wau, Sudan.



Click "next" below to view more CARE International information.

[back](#)

[site map](#)

[next](#)

CARE International Officials

CARE Country Directors, Acting Country Directors and Representatives and CARE USA Regional Directors

Asia/Europe



Afghanistan
Paul Barker



CIS*
Ed Brand



Bangladesh
Leo MacGillivray



China
Kristian Whittaker



India
Thomas Alcedo



Indonesia
Brenda Cupper



Laos
Mike Carroll



Myanmar
Alan Smith



Nepal
Robin Needham



Papua New Guinea
Rob Shelton



Philippines
David Stanton



Sri Lanka
Steve Hollingworth



Thailand

Promboon Panitchpakdi



Asia/Europe

Isam Ghanim
Regional Director

Click "next" below to view more CARE International information.

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

Shaping Our World

The root causes of poverty are as much a function of politics as they are of failed economies or social structures. For this reason, CARE continues to expand its work of promoting national and multilateral policies that support the world's most impoverished citizens.

While there are hundreds of policies that affect our work, the organization is selective about which issues make it onto the public policy agenda each year. This task can prove challenging, given the spectrum of issues ranging from global concerns about food security to U.S. foreign policy to local laws and regulations.

Above all, the organization focuses its energies on influencing government policies that are vitally important to the communities in which CARE works and that allow CARE to draw from operational experience.

CARE must also choose the appropriate arena in which to target its advocacy efforts, whether in multilateral or domestic political circles or at a local level within the countries in which we work. Following are examples of CARE policy initiatives in FY98 at three different levels.

Sudan

More than one million people have died in Sudan during an ongoing, 15-year civil war. In 1998, the crisis swept the headlines. CARE helps those affected on both sides of the conflict and is thus well-positioned to provide an informed perspective on the humanitarian crisis in Sudan and the need for a political solution. In the spring of 1998, CARE and other international nongovernmental organizations (NGOs) established new relief programs in the crisis zone. Since then, CARE has made the point that humanitarian assistance alone, in a political vacuum, cannot solve the fundamental problems nor avert another famine if there is no peace settlement. The international community must give the highest priority to promoting peace, and the first steps involve an immediate long-term cease-fire and access to all people in need of assistance.

Family Planning

On the U.S. front, CARE works to broaden policymakers' understanding of the importance of international family planning programs as debate about this program has stymied efforts to pass the foreign aid bill. The message that family planning programs are an integral part of an overall plan to help families combat poverty is conveyed through briefings for members of Congress and their staffs. In April, CARE joined other organizations to promote a Safe Motherhood initiative aimed at halving the 1,600 daily maternal death rate by the year 2000. More than 99 percent of these deaths occur in the developing world. As part of the initiative, CARE educates policy makers and the public about how family planning programs help mothers plan healthy pregnancies and safe births.

Ecuador

CARE has been influencing policies at the country level for many years, leveraging good relationships with both community leaders and government officials. Some CARE offices, for example, support policy changes that will promote sustainable land-use practices. In Ecuador, CARE seeks to change national government policies and to empower local organizations to apply for titles to the land surrounding the Cotacachi-Cayapas Ecological Reserve in the northwest of the country. CARE trains community-based paralegal volunteers in legal issues concerning the environment, agrarian issues and community organizations. These volunteers help community organizations apply for land tenure from the government. CARE-trained paralegals have mediated conflicts over land titles between two ethnic groups and have obtained land titles for thousands of acres in nine communities.



Dr. Jorge Machicao examines a patient in a CARE reproductive health care clinic in El Alto, Bolivia. “What motivates me to do this work is that I work among a community of people and watch them grow,” he says.

[back](#)

[site map](#)

[next](#)

Telling CARE's Story

In 1998, CARE made outstanding progress in reaching the American public with its message of hope. Through public service announcements its website and in national and international television and newspaper coverage, CARE reached more people in 1998 than ever before.



In the CARE PSA "Child on Water," a young girl named Cassie and her family in Indonesia enjoy a water system built with help from CARE.

Award-Winning PSAs

CARE's public service announcement (PSA) campaign achieved a record year in 1998, with airings nearly doubling to 36,000 on national and local television stations for an estimated \$9 million in station-donated time.

This year, CARE's PSA campaign was produced entirely in-house with outstanding quality and exposure. Many of the spots were shot on location at CARE projects in Indonesia. A total of 15 new PSAs in varying lengths focused on the positive ways in which CARE's work is helping to shape the collective global future. From removing land mines to ensuring clean drinking water, CARE's life-changing work came alive on tape. The campaign received

three international awards for excellence: a Telly Award for the land mine spot "On Dangerous Ground" and Gold and Silver Awards at the Houston International Film Festival for "Beneath the Earth" and "A Part of Something." CARE also worked with International Humanitarian Award-winner Elton John and the Elton John AIDS Foundation to create an AIDS-awareness PSA.

www.care.org

Hits to CARE's website increased more than 400 percent in FY98 as people logged on for emergency updates from around the world, including the famine in Sudan, the volcano eruption in Guatemala and the effects of fighting on refugees in Sierra Leone. The website carried in-depth special reports featuring El Niño, the Berlin Airlift 50th anniversary, the environment and the AIDS crisis. CARE's PSAs also appear on-line. In addition, CARE negotiated an agreement with Barnes and Noble Booksellers for an on-line bookstore link. A percentage of each book sold online through www.care.org will support CARE's programming in the developing world.

The Media Covers CARE

The mainstream media devoted extensive coverage to reporting CARE's work in FY98, reaching more than 170 million people worldwide. Major stories appeared in *The New York Times*, *The Los Angeles Times*, Reuters, the Associated Press, *Newsweek*, *Forbes*, *The Economist*, and on CNN, ABC and MSNBC, among others. CARE was a trusted source for commentary on development and relief issues, and helped focus international attention on humanitarian concerns, including the flooding in Somalia, the civil conflict in Afghanistan, an epidemic of sleeping sickness in Sudan, the ongoing problem of land mines and the devastating effects of El Niño. CARE's staff continued to advocate issues of concern by writing op-ed pieces on the legitimacy of food aid and the need to fund de-mining activities. In addition, CARE's role in the Berlin Airlift received considerable press attention during the 50th anniversary celebration of that historic event. In May, newspapers around the world ran an Associated Press photo prominently featuring CARE Packages® behind President Clinton and German Chancellor Helmut Kohl as they addressed crowds gathered at Tempelhof Airport in Berlin.

[back](#)[site map](#)[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

Our Supporters

a profile in giving

She wears a jade bracelet on her left wrist.

The gentle green color of the stones belies the strength and durability of this age-old jewel. From time to time, she touches it, as a reminder of the man who gave it to her and of all the patients who come to her in pain and despair.

“It was a gift,” she explains, “from a gentleman who came to one of my clinics. It had been with him since he left China, some 50 years before.” Such gifts are common in Dr. Elizabeth Lutas’ life. It is a way for her patients – the homeless and those suffering from HIV/AIDS – to give back to this woman who gives them so much.

In her home, these tokens of appreciation take many forms. Teddy bears and plush beasts of all sorts occupy most of the seat cushions. Tabletops are mobbed by small objects – the graceful and the unusual – from many lands and cultures. Each signifies a single message: Thank you.

In the clinic, she spends time talking with each client before proceeding to the medical examination. She feels it’s important to treat the whole person and not just the symptom. And, on certain days, some only need to talk, she says. With precision, however, she’s able to turn the conversation to the medical details: Is the insulin dosage effective for you? How long since you changed your bandage? Are the headaches better? The patients come in a steady stream. She smiles throughout, seeming never to tire.

Not only does Lutas give to the disenfranchised of New York City, she also gives to those the world over through CARE, donating 90 percent of her salary. “I remember seeing ads for CARE on television when I was a little girl,” Lutas says. “I promised myself that when I could afford it, I would give to CARE.”

If her life is a life of giving, it is patterned on her parents’ lives, she says. Her parents were devoted to each other and to their only child, Elizabeth, who was born after 20 years of separation forged by the Great Depression and World War II. Their generosity was a pattern she emulates. “But, you know,” says Lutas “the gifts are mine. What I receive is beyond value. They are gifts from God, and I am blessed to receive them.”



For 10 years, from dawn until dusk, Lutas has treated thousands of homeless people as a doctor for the city of New York. In the clinics of St. Vincent's Hospital near SoHo and at a private homeless shelter near the Port Authority, Lutas works among the poorest people who walk the streets of Manhattan. Each day, each patient is received with a quiet voice, a calming patience and a sure and knowledgeable hand.

It is striking to watch her work. She wears a pastel dress, passing easily among those in tattered jeans and faded flannel. She walks onto the linoleum floor of a homeless shelter with a wave and a wide smile. Some of her clients play checkers at a long folding table. Others pick up their heads from naps at the tables to smile. A few walk over to tell her the latest news of a small victory – or perhaps a setback – in their life on the street.

Her attitude and cheerfulness seem improbable in a city famous for its bustle and the “New York minute” attitude. But on the street, as she walks to catch the train home across the East River, she is revealed as an oasis of calm in the hurrying crowds. She swings her purse over her shoulder and heads toward the station. She hasn't walked half a block before a woman chases her down for a hug. They stand talking together at the corner as pedestrians swirl past like rushing water. Lutas reaches out her arm in a half embrace. The unhurried conversation continues even as the city moves ahead on fast-forward.

On May 7, 1998, CARE honored Dr. Lutas with the Global Philanthropy Award in recognition of her selfless dedication to bringing health and hope to thousands of people.

[back](#)

[site map](#)

[next](#)

CARE Boards of Directors and Overseers

BOARD OF DIRECTORS

Officers

Chair

Lydia M. Marshall

President

Peter D. Bell

Vice Chairs

Nancy S. Calcagnini
Lincoln C. Chen, M.D.
Glenn H. Hutchins

Treasurer

Bruce C. Tully

Secretary

Timothy D. Proctor

Assistant Secretary

Carol Andersen

Presidents Emeriti

Wallace J. Campbell*
Philip Johnston, Ph.D.

Directors

Peter Ackerman, Ph.D.

*Managing Director
Rockport Capital, Inc.*

Peter D. Bell

*President
CARE*

Samuel E. Bunker

*Former Administrator,
International Programs
Division
National Rural Electric
Cooperative
Association*

Nancy S. Calcagnini

*Former Managing Director
CS First Boston, Inc.*

Lincoln C. Chen, M.D.

*Vice President
Rockefeller Foundation*

W. Bowman Cutter, III

*Managing Director
Warburg Pincus*

Joan B. Dunlop

*Director
Women's Lens on
Global Issues
Rockefeller Brothers Fund*

William H. Foege, M.D., MPH

*Distinguished Professor,
International Health
Rollins School of
Public Health
Emory University*

Glenn H. Hutchins

*Senior Managing Director
The Blackstone Group*

Karen R. Johnson

*Former President
Entergy/GSU, Texas*

Mary Ellen Johnson

*Former Vice President
and Treasurer
Sara Lee Corporation*

Philip Klein

*Partner
Browning, Jacobson & Klein*

James T. Laney

*President Emeritus
Emory University*

Deborah Leff

Kenneth Lehman

*Former Co-Chairman
Fel-Pro Incorporated*

Lydia Micheaux Marshall

*Partner
Rockport Capital, Inc.*

Paul G. Matsen

*Senior Vice President –
Alliance, Strategy
and Development
Delta Air Lines, Inc.*

Gay Johnson McDougall

*Executive Director
International Human Rights
Law Group*

David M. Olsen

*Senior Vice President
Starbucks Coffee Company*

Timothy D. Proctor

*Director
Worldwide Human Resources
Glaxo Wellcome Inc.*

Bruce C. Tully

*Managing Director
BT Alex. Brown Incorporated*

A. Morris Williams, Jr.

*President
Williams & Company*

Alan Wheat

*Principal
Wheat & Associates*

*President
The Joyce Foundation*

All Directors are also members
of the Board of Overseers.

*Deceased (January 7, 1998)

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

CARE Boards of Directors and Overseers

BOARD OF OVERSEERS

Public Members

Charles H. Antholt
*Former Senior
Agriculturalist
The World Bank*

John J. Dooner, Jr.
*Chairman/CEO
McCann-Erickson
World Group*

Patrick Durkin
*Managing Director
Donaldson, Lufkin & Jenrette*

Jane C. Freeman
*Former National President
Girl Scouts of America*

Robert W. Frelick, M.D.
*Consultant
Christian Care
Hospital System*

Hal T. Hansen
*Managing Director
Viking Investor Services, LLC*

Edward H. Hoenicke
*Former Senior Vice President
and General Counsel
United Airlines*

Steven L. Isenberg
*Former Publisher
New York Newsday*

Ambassador Idriss Jazairy
*Executive Director
A.C.O.R.D.*

David Kaseman
Dallas, Texas

Peter H. Kaskell
*Vice President
CPR Institute for*

M. Peter McPherson
*President
Michigan State University*

David N. Pincus
*Chairman and CEO
Pincus Brothers-Maxwell*

Agustin Rivera
*President
Global Education Initiatives*

Hugh G. Robinson
*Chairman/CEO
The Tetra Group*

Merrill Rose
*Executive Vice President
Porter Novelli*

Norman Ross
*Former Senior Vice President
First National Bank
of Chicago*

David J. Scholes
*President and CEO
Rapp Collins Worldwide*

Paul Spray, M.D.
*Orthopedic Surgeon
Methodist Medical Center
of Oak Ridge*

Isabel Carter Stewart
*National Executive Director
Girls Incorporated*

Carl Ware
*Group President,
Africa Group
The Coca-Cola Company*

Edwin J. Wesely
*Senior Partner
Winthrop, Stimson,
Putnam & Roberts*

Andrew H. Young
*Co-Chairman
GoodWorks International*

Sally W. Yudelman
*Senior Fellow
International Center for
Research on Women*

Organizational Members and Delegates

American Federation of
Labor & Congress of
Industrial Organizations

Baptist World Alliance
Paul Montacute

Credit Union National
Association, Inc.
Pete Crear

General Federation
of Women's Clubs
Maxine Scarbro

Junior Chamber International
Benny Ellerbe

Land O'Lakes, Inc.
Martha M. Cashman

National Cooperative
Business Association
Paul Hazen

National Council of State
Garden Clubs, Inc.
Marvina Northcutt

National Farmers Union
Leland Swenson

National Peace
Corps Association

National Rural Electric

Dispute Resolution

James G. Losi
President
Charles Schwab
Corporation Foundation

M. Moran Weston, Ph.D.
President
National Association for
Affordable Housing, Inc.

Cooperative Association

Ruth A. Wooden
President
The Advertising Council

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

CARE Leadership



Peter D. Bell
*President and
Chief Executive Officer*



Katharine Day Bremer
*Senior Vice President
External Relations*



Pat Carey
*Senior Vice
President Program*



Jim Mathews
*Senior Vice President
Finance and Administration*



Milo Stanojevich
Chief of Staff



“Far and away the best prize
that life offers is the chance to
work hard at work worth
doing.”

– Theodore Roosevelt

Barbara Murphy-Warrington
*Senior Vice President
Human Resources*



[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

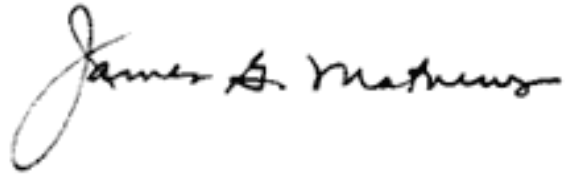
Report from Management

CARE USA strengthened its financial position during fiscal 1998 as shown in the accompanying statements and notes. Total support and revenue of \$379.6 million represented a 5.6 percent increase over the prior year and was the highest since 1995 when support for emergency activities added substantially to income. Funding from several sources advanced to record levels, including \$52.3 million from individuals, corporations and private foundations and \$47.0 million through other CARE International members. Government and other sources provided \$273.5 million in support, up 5.6 percent over fiscal 1997. Included in this result is \$156.0 million in cash grants and contracts, equaling the highest amount ever, and a 9.7 percent rise in agricultural commodities to \$115.7 million, reversing the downward trend in food resources seen in recent years.

While gratified by this modest increase in total support, CARE remained strongly focused on using available resources in the most efficient and effective manner. More than \$339 million provided by our donors went toward program activities during the year, representing 91 percent of the organization's total expenditures. Fundraising expenses were maintained very close to fiscal 1997 levels, allowing an increase in net revenue and lowering the average cost of raising public dollars. Headquarters costs as a percentage of overseas cash expenses, an important internal measure of administrative efficiency, declined slightly in spite of a nonrecurring charge to write off certain capitalized software. Clearly, such measures serve only as general indicators of our efforts to operate cost-effectively. CARE people view their commitment to good stewardship in more practical terms, however: Every dollar saved administratively in the U.S. increases the resources available to our overseas missions.

Many challenges lie ahead in the coming year, financial and otherwise. Significant resources will be dedicated to implementing information systems, including the first installations of an integrated financial information system in country offices and development of new software to support fund-raising efforts. Within CARE International, we will continue working to strengthen each of our partner organizations, recognizing that success in furthering the internationalization of CARE will depend on the financial health of its individual members. Under the direction of our board, we will consider further strategic uses of available net assets, an effort begun during fiscal 1998 that resulted in the establishment of a \$6 million Africa Fund. This review is intended to balance the need for a sustainable, financially strong organization with our commitment to maximize program impact overseas and engage in other important initiatives to which such assets may be applied.

Importantly, both the results achieved during fiscal 1998 and our objectives for the coming year are consistent with the key directions outlined in CARE's three-year strategic plan. Our stakeholders should find this particularly encouraging, as it illustrates that the financial principles employed in managing the resources provided by our donors are in full accord with the overall priorities of CARE.



Jim Mathews, *Senior Vice President Finance and Administration*

Click "next" below to view more CARE Financial information.

[back](#)

[site map](#)

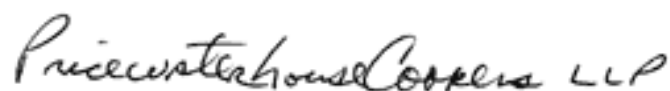
[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

Report of Independent Public Accountants

To the Board of Directors of CARE USA:

In our opinion, the accompanying balance sheets and the related statements of activities and cash flows present fairly, in all material respects, the financial position of CARE USA (a District of Columbia corporation) at June 30, 1998 and 1997 and the changes in net assets and cash flows for the years then ended, in conformity with generally accepted accounting principles. These financial statements are the responsibility of CARE USA's management; our responsibility is to express an opinion on these statements in accordance with generally accepted auditing standards, which require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for the opinion expressed above.



PricewaterhouseCoopers LLP

Atlanta, Georgia

August 17, 1998

CARE USA Balance Sheets

As of June 30, 1998 and 1997 In Thousands

	1998	1997
Assets		
Cash and cash equivalents (Note 2)	\$ 54,990	\$ 37,763
Investments (Note 4)	127,575	115,690
Receivables (Note 2)	20,572	20,350
Deposits and Other Assets	16,833	20,655
Property and Equipment, net (Notes 2 and 5)	7,027	6,264
Perpetual Trust Held by Third Party (Note 3)	98,682	78,431
Total Assets	\$325,679	\$279,153

Liabilities and Net Assets

Liabilities		
Accounts payable and accrued expenses	\$ 43,621	\$ 32,325
Program advances by government and nongovernment agencies	55,772	54,615
Annuities payable, pooled income fund, unitrusts (Note 2)	14,638	13,796
Benefits accrued for overseas national employees	9,727	9,016

Bonds payable	3,835	4,035
Total Liabilities	127,593	113,787
Net Assets (Note 3)		
Unrestricted	74,897	65,131
Temporarily restricted	19,894	17,541
Permanently restricted	103,295	82,694
Total Net Assets	198,086	165,366
Total Liabilities and Net Assets	\$325,679	\$279,153

The accompanying [notes](#) are an integral part of these financial statements.

Click "next" below to view more CARE Financial information.

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

CARE Regional Offices

HEADQUARTERS AND CARE CORPORATE COUNCIL

151 Ellis St., NE
Atlanta, GA 30303-2440
T) 404-681-2552
F) 404-577-6271

NORTHEAST REGION

NEW YORK (REGIONAL CENTER)

650 1st Ave.
2nd Floor
New York, NY 10016
T) 212-686-3110
F) 212-683-1099

BOSTON

37 Temple Place
3rd Floor
Boston, MA 02111
T) 617-338-6400
F) 617-574-7345

PHILADELPHIA

117 South 17th St.
Suite 413
Philadelphia, PA 19103
T) 215-564-3875
F) 215-564-2501

SOUTHEAST REGION

ATLANTA (REGIONAL CENTER)

151 Ellis St., NE
Suite 300
Atlanta, GA 30303-2440
T) 404-681-2777
F) 404-577-5557

WASHINGTON

1625 K St., NW
Suite 200
Washington, DC 20006
T) 202-296-5696
F) 202-296-8695

MIAMI

515 N. Flagler Drive

MIDWEST REGION

CHICAGO (REGIONAL CENTER)

70 East Lake St.
Suite 1430
Chicago, IL 60601
T) 312-641-1430
F) 312-641-3747

MINNEAPOLIS

1400 Hwy 101 North, #218
Plymouth, MN 55447-3064
T) 612-473-2192
F) 612-473-4042

SOUTHWEST REGION

LOS ANGELES (REGIONAL CENTER)

6100 Wilshire Blvd.
Suite 220
Los Angeles, CA 90048
T) 323-954-8063
F) 323-954-1973

DALLAS

3626 North Hall St.
Suite 504
Dallas, TX 75219
T) 214-522-2692
F) 214-528-1362

HOUSTON

3700 Buffalo Speedway
Suite 560
Houston, TX 77098
T) 713-621-5058
F) 713-621-2611

NORTHWEST REGION

SAN FRANCISCO (REGIONAL CENTER)

41 Sutter St.
Suite 300
San Francisco, CA 94104
T) 415-781-1585
F) 415-781-7204

SEATTLE



Ancient Mali's fame as a gold-rich kingdom is evident today in the cramped goldsmith and silversmith shops that dot the country's towns and villages. Smiths like this man from the city of Djenné create bracelets, rings and earrings by hand, hammering each piece over red-hot coals. Djenné's residents are supported by local health and education organizations that have been trained by CARE on leadership, literacy, governance and other issues.

Suite 300-P
West Palm Beach, FL 33401
T) 561-802-4194
F) 561-220-4162

1402 Third Ave.
Suite 912
Seattle, WA 98101
T) 206-464-0787
F) 206-464-0752

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)

Credits

Vice President

Marilyn F. Grist
*Director of Public Relations
and Publications*

Kathy Doherty
Senior Editor

Erin Burns
Associate Editor
Anne-Marie Fanguy

Design
Molly Smith,
PMS Design, Inc.

Production Coordinator
Rosemary Sicay-Perrow

Writers
Andrea Bigner
Douglas Clark
Joy DiBenedetto
Kathy Doherty
Wendy Driscoll
Katherine Pfeiffer
Rita Stone-Smith
Catherine Toth

Photo Editor
Suzy Hopper
Financial Statements
Kevin McCumber

Printing
Bennett Graphics

A Special Thanks to Photographer J.F. Housel

For six years, photographer Fred Housel has donated his time and talent to capture CARE projects and beneficiaries around the world on film. He has traveled to Peru, the Philippines, Angola and Mozambique and provided a wealth of images that have been used to illustrate CARE's work. For the *1998 Annual Report*, Housel profiled the daily work of CARE beneficiaries in Bolivia, Mali and India.



*Photographer Fred Housel takes a break
with members of the Djenné Farmers'
Association in Mali.*

"Each of my trips for CARE has been one of the great adventures of my life," says Housel. "I hope my photography does justice to the dignity and the strength I have seen. This year as I traveled for CARE, what emerged for me was the power of our common aspirations, a decent life for ourselves and our children, the means to earn a living and respect for each other. These are the values that CARE helps empower. I am proud to be considered part of that endeavor." CARE gratefully acknowledges Fred Housel for his generosity and commitment to our mission.

This edition of the CARE Annual Report is made possible in part by a generous grant from Delta Air Lines. Delta carried more passengers worldwide last year than any other airline. Delta, Delta Express, the Delta Shuttle, the Delta Connection carriers and Delta's Worldwide Partners operate 5,187 flights each day to 353 cities in 56 countries. Delta is committed to providing philanthropic support to organizations like CARE that promote assistance for families with young children, cultural understanding and economic development for communities worldwide.

 **Delta Air Lines**

Cover Photo: A young woman in Kirchamba, Mali, hoists water onto her head, cushioned only by a twisted roll of colorful cloth. The water is drawn from the village well into an animal-skin sack. A drought that has endured on and off for 30 years has made water Mali's most precious commodity. The village well in Kirchamba was built with help from CARE.

Site Map Photo: In an open field in rural Uttar Pradesh, India, Ramnaresh joins a team of men to cut rice by hand. What these farmers don't sell, they will use to feed their families. Community members in developing countries often depend heavily on each other, working together to bring important improvements to their lives. Community ownership and partnership are hallmarks of CARE's programs.

Our Mission Photo: Business partners. Support group. Friends. For the first time in their lives, these women are earning money through a CARE savings and loan program in Andhra Pradesh, India. Each of the 17 women in the group manages a small business, including making pottery, tending goats and growing vegetables. These women work together to build a solid financial base for their families – boosting their self-esteem and their status in the community along the way.

CARE salutes the resilient men, women and children around the world who work together to build a better future.

CARE® and CARE Package® are registered marks of the Cooperative for Assistance and Relief Everywhere, Inc. (CARE).

151 Ellis St., NE
Atlanta, Georgia 30303-2440
(404) 681-2552
www.care.org

[back](#)

[site map](#)

[next](#)

[HOME](#) | [SITE MAP](#) | [FEEDBACK](#) | [WHAT'S NEW](#) | [SITE SEARCH](#)
[PROGRAMS](#) | [INFO CENTER](#) | [INTERNATIONAL](#) | [SUPPORT](#) | [MARKETPLACE](#)