

east africa



The people of East Africa are uniting in one community after another to solve their most threatening problems. In fiscal year 2001 (FY01), CARE USA and our local partners supported a variety of programs in nine African countries, totaling \$54 million. Working with local organizations to strengthen their capacity, CARE has helped ensure that each small victory over poverty will last long after CARE's projects are complete.

In the East African nations of Burundi, Ethiopia, Eritrea, Kenya, Rwanda, Somalia, Sudan, Tanzania and Uganda, CARE focused on health care, conservation and conflict resolution.

Combating Drought

The African climate presented its share of challenges in FY01. In Burundi, Ethiopia, Kenya,

Somalia and Sudan, years of unreliable rainfall led to drought and malnutrition; in Sudan, the misery was compounded when drought was followed by flooding. However, through improved monitoring and communication systems, CARE and our local partners were able to provide emergency assistance to the most vulnerable communities – helping avert a full-blown humanitarian disaster.

In Burundi, CARE and partner organizations distributed maize, beans, oil and salt to the most vulnerable people, including refugees returning to their villages. CARE asked community members to participate in the food distribution project to ensure that food was given to those who needed it most. With one urgent need satisfied, families were able to concentrate on rebuilding their communities and livelihoods.

Fighting Disease

In south Sudan, CARE and the Centers for Disease Control and Prevention partnered on a sleeping sickness project that saved thousands of lives. Infection rates had shot up to nearly 20 percent in some villages and were averaging in the high teens; anything over 2 percent is considered epidemic. Between 1997 and 2001, the program reduced rates to less than 1 percent. The lasting result has been a reduced strain on family incomes and community health resources, particularly precious commodities in this region.

In Rwanda, where extreme poverty has exacerbated the impact of HIV/AIDS, a CARE initiative slowed the spread of the disease through a combination of peer education and food security projects. The projects aided some of the most vulnerable Rwandans, including those in child-headed households, who often have been orphaned by AIDS or genocide.

Influencing Social Policy

In Kenya, CARE worked to better connect people with their government's plans for long-term development. Throughout FY01, CARE gathered the comments and recommendations of the country's poor to help guide the drafting of the Kenya Poverty Reduction Strategy Paper, a key document that will influence national economic policy for

Water projects in Rwanda (left) and Burundi (right) improve community health and free up time for other activities, such as going to school or market.

years to come. CARE then returned to communities throughout the country to gauge people's reactions to the paper. This process is giving the poor in Kenya an unprecedented opportunity to shape the course of their nation, and their own lives.

Building Peace

In Burundi, CARE worked with local partner organizations to help people resolve conflict and work together toward a promising future. Weekly radio programs and locally written and produced dramas, presented in villages by local players, emphasized that the keys to peace are found in communities and households, as well as with social and political leaders.

"We're creating real dialogue among citizens," says Alain Pillet, country director. "Peace building begins at the community level, and these programs are encouraging people to trust and work with their neighbors and local leaders."

Preserving Threatened Environments

The world's coral reefs are threatened by global warming and human exploitation. On the Tanzanian island of Zanzibar, CARE worked with local communities to find ways within their traditional belief systems to preserve the reefs. Not only did this effort help a fragile and endangered ecosystem, it also helped ensure the survival of culturally significant areas – and important sources of local tourist income.

Providing Emergency Relief

CARE continued to meet urgent food requirements in southern Somalia. The recent harvest was minimal throughout the country. Despite continued security concerns, CARE successfully distributed nearly 20,000 metric tons of food to people in these areas in FY01 and expects to surpass that level of aid next fiscal year.

Emergency needs were greatest in the Gedo region, where CARE distributed an average of more than 750 metric tons of grain per month. In Lower Shabelle, however, the success of previous food-for-work projects allowed CARE to phase out food distribution in the region. The projects concentrated on canal rehabilitation, returning more than 2,300 miles of canals to service. This has greatly increased maize production, resulting in a surplus for the area.



southern and west africa

With nearly 130 million people and more than 50 languages, including French, English and Portuguese, the diverse region of Southern and West Africa is complex and fascinating, as well as challenging.

Of the 14 countries where CARE USA works in this region, all but three (Ghana, South Africa and Zimbabwe) are among the world's least developed; the United Nations considers them most at risk of remaining in poverty and requiring the international community's greatest support in their development efforts. Yet, in spite of these obstacles and the effects of natural disasters, war and HIV/AIDS, communities in these countries are working with CARE to realize lasting victories over poverty.

In fiscal year 2001 (FY01), CARE supported 80 programs totaling approximately \$46 million in Angola, Benin, Ghana, Lesotho, Madagascar, Malawi, Mali, Mozambique, Niger, Sierra Leone, South Africa, Togo, Zambia and Zimbabwe. Programs included agricultural production, natural resource protection, economic development, education, health, water and sanitation, and short-term projects such as emergency relief.

Confronting HIV/AIDS

More than 25 million people in sub-Saharan Africa are living with HIV/AIDS; millions more already have died. While the total impact is impossible to quantify, HIV/AIDS has taken a devastating toll on the region beyond the people it has sickened and killed; children have lost parents, families have lost breadwinners and entire communities have lost their support systems.

CARE is committed to helping communities cope with and prevent the spread of HIV/AIDS through a wide variety of projects in six countries in Southern and West Africa. For example, CARE works with miners in Ghana, who are considered high risk for HIV/AIDS because of their living and work environments.

Local CARE health advisors visit mining communities wearing easily recognizable bright yellow "safe sex" T-shirts and carrying condoms to distribute. The advisors gather the miners to chat about sexually transmitted diseases and HIV/AIDS. CARE's campaign is widely publicized in the region, on billboards, bumper stickers, pamphlets and the radio, so the message is getting out. Due to the combined work



(left) Men in Madagascar repair their fishing boats, essential to their livelihoods. (right) In Niger, women have turned traditional crafts into new businesses.

of CARE, the government and other organizations, awareness of HIV/AIDS in the region is high, roughly 96 percent, estimates a CARE project manager.

“People are beginning to talk about sexuality, because most of the AIDS issues border around sex,” says Maud Nyaney, a reproductive health information and education specialist. “We are becoming more open to talking about sex. In our part of the world, that is not easy. It’s a first step, a big step.”

Saving Lives

In several countries, people have struggled with the effects of war and natural disasters. Angolans and Sierra Leoneans have been displaced and impoverished due to years of conflict in their countries. Mozambique, Madagascar and Zambia were battered in the last year by cyclones and floods.

When overflowing river basins flooded the coast of central Mozambique in early 2001, CARE staff encountered crocodiles, hippos and other challenges to bring supplies to families cut off by flood waters. In rented boats, the team traveled 36 hours upstream to deliver food, plastic sheeting, water-treatment supplies and plastic cans to store drinkable water.

“It was a logistical nightmare,” says Marc de LaMotte, country director in Mozambique. “It took creativity and innovation to respond.”

In Mozambique and elsewhere in the region, CARE provided emergency assistance with an eye toward longer-term, sustainable solutions. In Sierra Leone, where CARE has helped families rebuild their communities, “peace and rights days” offer them a chance to discuss problems, air grievances and learn about their rights. In Angola, CARE assists with landmine removal and education, while helping to increase crop yields by providing families with seeds and tools. And in Madagascar, CARE is working with organizations and communities to identify and protect the areas most vulnerable to natural disasters.

Moving from Rural to Urban

Rapid urbanization throughout Africa means that humanitarian agencies must increasingly address the issues faced by city dwellers. As greater numbers of people move to urban centers, infrastructures are stretched beyond their capacity. People with limited means often go without water, sanitation and other services while struggling to make ends meet.

In Zambia, a CARE project demonstrated the impact



of a community effort to secure access to safe drinking water. For the past four years, CARE worked with residents of urban communes in Lusaka to provide water services. More than 300,000 residents organized into groups to implement and pay for a water-delivery system they wouldn’t otherwise have.

“The payoff comes when you visit a village two years after residents participated in a project,” says Chris Conrad, director of CARE’s Southern and West Africa region. “Kids are healthier and there are other improvements, such as new schools or paved roads.”

CARE also is addressing the need to generate income. After seeing the success of savings and loan activities in rural areas, CARE Mozambique started similar projects in cities. For the first time, hundreds of people working in Beira’s vibrant markets have access to credit to expand their fledgling businesses and support their families. More than 700 people borrowed money from a community-managed fund CARE helped set up. The default rate was zero.

“This is the war we are fighting now – to eliminate poverty. The question is when it will finish,” says Domingo Luis, manager of the project. “I haven’t the answer. But my opinion is that within five years, many things will change.”