

asia and the pacific

More than 3.5 billion people live in Asia and the Pacific. The region is home to bustling, cosmopolitan cities and quiet villages of thatch-roofed huts. It is a region of great progress and potential, yet some 25 percent of its residents live below the poverty line. In Bangladesh, for example, 78 percent of the population lives on \$2 a day or less.

CARE's programs seek to improve conditions in poor communities by confronting poverty at its roots. In fiscal year 2001 (FY01), CARE USA supported projects in Asia and the Pacific totaling almost \$149 million to help create lasting solutions to poverty in 16 nations: Afghanistan, Bangladesh, Cambodia, China, East Timor, India, Indonesia, Laos, Myanmar, Nepal, North Korea (country office since closed), the Philippines, Sri Lanka, Tajikistan, Thailand and Vietnam.

As CARE continues to grow and evolve, so do our approaches to fighting poverty.

"There are many underlying causes of poverty: poor health care, lack of education, lack of reliable

access to food and lack of opportunity to earn a secure living," says John Ambler, Asia regional director for CARE. "Most often, poverty also has roots in political and economic decisions. CARE believes everyone has a right to food, shelter, clean water, health care and education. So our programs are now beginning to use different and innovative ways to address these basic rights."

Improving Health is Key

"Without good health you can't affect poverty or sustain change," says Susan Ross, assistant country director for CARE in Bangladesh. In Asia, a major threat to health is the spread of HIV/AIDS.

Since many of the people who die from HIV/AIDS are in their prime working years, their loss drives communities further into poverty. Thus, CARE's efforts in the region focus on both stemming the rate of infection as well as dealing with its effects.

"CARE's programs in Bangladesh are at the forefront of work to stop the spread of HIV/AIDS," says Ross. "Both the World Bank and the government of Bangladesh recognize CARE's approach as the best way to fight the disease."

Three major factors in the HIV/AIDS crisis are threatening to overwhelm Asian nations: the commercial sex industry, a large number of drug users who share needles, and migration.

To help prevent the spread of HIV/AIDS, CARE promotes safer sexual practices among commercial sex workers and migrant workers by striving to create a more supportive cultural environment, and by providing facilities that offer access to condoms, treatment for sexually transmitted diseases and needle exchange programs.

In Cambodia, for example, more than 200,000 people are living with the virus and approximately 3,000 new cases of HIV/AIDS are reported every month. So, building awareness and understanding of prevention measures is a key component of CARE's HIV/AIDS programming. CARE works in Koh Kong, Cambodia, a major border crossing into Thailand, where the rates of infection are among the area's highest.

"CARE is the only international humanitarian organization working in this remote part of



(left) "Save the Sea, Save the Future" poster contest draws in Filipino children. (right) Indian women find modern markets for handicrafts and buyers to sell their goods.

Cambodia," says Neil Hawkins, country director for Cambodia. "For the past two years we have been working with the Koh Kong Provincial AIDS project to bring the numbers down by emphasizing HIV/AIDS education and providing prevention services. CARE also is helping people who have contracted the AIDS virus to live in dignity."

The stigma attached to the disease makes it all the more difficult to prevent and treat. An innovative CARE project in Vietnam uses the workplace to help combat this stigma.

"Within the coal mining industry, CARE has established a functioning, successful model for industries to use to help support people living and working with AIDS," says Brian Doolan, country director in Vietnam. "The idea is to take this working model and duplicate it in other parts of the country, with other industries."

Investing in Education

Illiteracy rates in South Asia are among the highest in the world. Yet studies have shown that education is the single best tool to empower people and promote their social and economic welfare.

In Afghanistan, roughly 4 million children do not attend school and only 15 percent of girls attend primary school. Traditional rural Afghan culture discourages girls' education, and decades of conflict have led to the collapse of the school system.

Active in Afghanistan for more than 30 years, CARE has helped bridge the education gap by working with villages to improve access to school for all students.

"The Community Organized Primary Education (COPE) project builds upon local educational models and traditions," says Sally Austin, assistant country director for CARE in Afghanistan. "COPE empowers communities by enabling them to get involved in decisions over their children's education. CARE helps communities get their say over who teaches their girls and boys and where they will be taught. This is crucial to successfully rebuilding Afghanistan."

COPE expanded access to education by establishing nearly 200 schools in FY01. Teachers from the community instructed more than 20,000 children – 43 percent girls – in reading, math and language classes. The program operates in seven provinces in southeast Afghanistan.



From Relief to Lasting Solutions

While survival must come first in an emergency, CARE is always mindful to include lasting solutions to underlying causes of poverty when providing relief. For example, when a massive earthquake devastated the Indian state of Gujarat on January 26, 2001, CARE immediately provided emergency assistance. At the same time, efforts were initiated to provide the long-term development assistance Gujarat would need to recover from the disaster.

Community participation is crucial to the success of this assistance, so CARE involved communities from the very beginning. CARE launched a new partnership with the Federation of Indian Chambers of Commerce and Industry (FICCI) to help rebuild Gujarat. The partnership increases the resources available for rebuilding, drawing on the talent and support of India's top architects, builders and engineers.

"The CARE-FICCI project is doing more than laying bricks and mortar for houses and schools," says Tom Alcedo, country director for CARE in India. "The project is partnering with communities to build skills that are essential for people to earn a living and work toward a future of their own making."

europa and the middle east

EUROPE

CARE's work in Europe in fiscal year 2001 (FY01) emphasized expanding social programs in the Balkans, as that area continued to rebuild itself and overcome ethnic conflict.

In FY01, CARE USA provided almost \$10 million in support of programs in Albania, Bosnia-Herzegovina, Macedonia and Yugoslavia, including the province of Kosovo.

As political tensions began to ease and armed conflict subsided, CARE's focus in the region shifted from emergency relief to longer-term goals. In Kosovo, CARE continued programs that addressed the needs of children traumatized by war, helping ensure that the next generation is willing and able to continue the peace process.

In the city of Prizren, a program designed to educate teachers and health professionals about trauma was followed by a second phase that spanned five communities and eventually trained 81 primary school teachers and 16 local psychologists. More than 2,100 children participated in therapeutic workshops in music, theater, poetry, art and video.

In June 2001, CARE began a campaign to raise community awareness about the threat of family

violence. With media spots on local television and radio, the campaign brought the issue to the forefront and emphasized the long-term negative effects of violence on children.

CARE also completed the first phase of its project to help train 45 social workers in several municipalities to better meet the needs of vulnerable families.

"Transitioning from emergency relief to economic and social advancement remains an ongoing process, sometimes two steps forward and one step back," says Nick Webber, country director for Kosovo. "Maintaining an emergency-response capacity is crucial, given the fragile peace agreements in the region. Yet it is imperative the mission continue to reinforce the importance of both transitional authority and civic institutions."

CARE's activities in the Caucasus focused on strengthening local communities to identify and overcome the greatest obstacles to their development.

In Georgia, CARE operated a community mobilization project to ease suffering of residents and people displaced by conflict and economic crisis. CARE helped local officials gather resources for those in immediate need, and trained communities to eventually provide those resources themselves.

MIDDLE EAST

In Egypt, the West Bank and Gaza, and Yemen, CARE's work included health care, emergency response and education, with programming totaling more than \$9 million in FY01. Ongoing conflicts in the West Bank and Gaza continued to limit the potential for economic recovery.

Addressing Health

In the West Bank/Gaza, CARE's programs included significant work on health care issues. A two-year, emergency medical assistance project addressed the funding problem that threatens the Palestinian health care sector. The project provided assistance to health clinics, training in trauma care for medical professionals, and support to rehabilitation centers.



(left) Kosovars work to rebuild their homes and livelihoods. (right) Farmers in Egypt grow better-selling crops and increase family income.