World Leaders Unite to Ban Corruption in Government

Eliminating corruption and promoting transparency in government were on the agenda when current and former heads of state from the Western Hemisphere gathered for the “Transparency for Growth in the Americas” conference at The Carter Center.

The early May conference, called by the Center’s Council of Freely Elected Heads of Government, considered a broad range of anti-corruption strategies, including implementation of international conventions against corruption, improving opportunities for civil society and the media to monitor government practices, and increasing accountability in government-business transactions.

“Nothing is so debilitating for the principles of freedom, democracy, honesty, and economic improvement as corruption. Corruption robs not only the resources of a nation, but also the confidence of people in their own government,” said former U.S. President Jimmy Carter in an address to the group.

Among the 100 participants were Belize Prime Minister Said Musa, Costa Rica President Miguel Angel Rodriguez, Ecuador President Jamil Mahuad Witt, President of Trinidad and Tobago Arthur Robinson, U.S. Treasury Secretary Robert Rubin, and Inter-American Development Bank President Enrique Iglesias.

In a final statement announcing their recommendations, the leaders said corruption should be recognized and acknowledged as a “policy decision,” and as such, can be “remedied by setting and enforcing rules that encourage people to do the right thing.”

They also encouraged governments to use new diagnostic tools available from the World Bank to identify corruption, make it public, and create action plans to resolve specific problems.

“One way to thwart corruption is to make sure the costs of corruption—through detection, deterrence, and punishment—outweigh the benefits,” said Jennifer McCoy, director of the Latin American and Caribbean Program at The Carter Center.

Top Mental Health Treatments Shared

Nearly 350 consumers, family members, providers, and advocates of mental health care attended the Rosalynn Carter Georgia Mental Health Forum to hear about effective treatment programs and research for mental illnesses.

The topic for the May 14 gathering, held at The Carter Center, was “Recovery: A Journey for Life.” William Anthony, Ph.D., director of Boston University’s Center for Psychiatric Rehabilitation, was the
Center Monitors Cherokee Elections

Carter Center delegates have trekked to 16 countries and Georgia to watch elections, but their travels had not ever included working with a Native American tribe — until now.

Gordon Streeb, associate executive director of peace programs for the Center, led a 10-member team to Tahlequah, Okla., to observe the May 22 elections for the Cherokee Nation’s principal chief and all 15 Tribal Council seats. The Cherokee Nation Election Commission invited the delegation, as did the candidates and elected council members. Besides the Center staff, the team included Tom Mishou, special assistant/banking commissioner of the Georgia Secretary of State’s Office, Bud Fletcher, director of elections for Bibb County, Georgia, and Dr. Michael Bird, a long-time Colorado legislator.

Election observers visited polls in all 32 precincts throughout northeastern Oklahoma. To help bolster confidence in the election process, they analyzed registration and voting procedures, reviewed absentee ballots, tracked events at the commission, and monitored voting results.

All precincts opened on time, most voters cast their votes within minutes, and there were no reports of people being denied the right to vote if their names appeared in the precinct book. Unlisted voters received registration forms on-site to qualify for upcoming elections.

This election was also the first time the Cherokee Nation had used electronic voting machines. Only one machine malfunctioned during voting, but was repaired within hours.

To improve the voting process for future elections, The Carter Center team recommended that Cherokee officials create an appeals process for voters who had complaints. These voters could appear before an authorized group for fair rulings on their grievances. The team also suggested simplifying the voter registration process and expanding voter education.

“Compared to elections we have observed around the world, there are parallels, but it’s unique that you have a separate nation within a country that has its own rules,” said Dr. Streeb.

There are more than 156,000 Cherokees of voting age with only about 26,000 tribal members registered to vote. More than half of the registered voters did cast a ballot (also see below).

A Carter Center team will return to monitor the July 24 run-off election.

Cherokee Statistics

- The Cherokee Nation is the second largest Native American tribe, with more than 197,000 members. The Navajo Nation is the largest.
- More than 156,000 Cherokees of voting age, but only about 26,000 tribal members are registered to vote.
- Some 40 percent of the tribe lives outside the 14 counties in northeastern Oklahoma represented on the Council and votes by absentee ballot.
- While absentee ballots cast declined this year, total participation increased by nearly 2,000.
Carter Center observers witnessed a historic political transition in Africa's most populous nation, when Nigerians went to the ballot box to end nearly two decades of military rule.

Former military leader Olusegun Obasanjo was elected president Feb. 27 by a percentage margin of 62-38 against his opponent, former Finance Minister Olu Falae. During his May 29 inauguration address, the new president pledged to reverse Nigeria's government corruption and mismanagement and unite the Moslem north and Christian south.

The Carter Center was invited to observe the elections along with the National Democratic Institute for International Affairs (NDI). Together they formed a 60-member delegation that visited 335 polling stations in all regions of Nigeria on election day.

In addition to low voter turnout, the group saw evidence of fraud, noting an incompatibility between the number of voters at the polls and totals reported at the end of the process. The delegation reported no availability of "systematic evidence" that the abuses affected the election's overall outcome, and singled out neither side. However, President Carter concluded that the wide disparity between observed voter turnout and reported vote totals made it impossible to ascertain the outcome.

Delegation leaders, including President and Mrs. Carter, retired General Colin Powell, and former Niger President Mahamane Ousmane, praised Nigerians for their desire to end military rule. The leaders also noted voters' sustained effort, having gone to the polls four times in three months for local, state, and national assembly elections.

President Carter called the Nigerian election the "most important in Africa this year." With more than 100 million people and rich oil resources, a successful transition to democracy in Nigeria could lift prospects for peace and development in all of West Africa.

Niger Delta Dialogue Begins

Among Nigeria's problems is protest in the Niger River delta area by indigenous groups against the government and major oil companies.

President and Mrs. Carter and Democracy Program Director Charles Costello flew to the Niger Delta city of Port Harcourt before the presidential election to meet with activists, who have grown more confrontational in seeking public attention for their grievances.

"There is almost unanimous agreement that the people in this oil-producing region have suffered from severe environmental degradation and a lack of fair allocation of funds for schools, hospitals, housing, and other necessities," said President Carter. "Unless resolved, the disputes could degenerate into an all-out war."

After meetings with Ijaw Youth Council representatives and elders from the Ijaw, Urhobo, Isoko, Ogoni, and Itsekiri people, President Carter recommended consideration of several options. They included initiating a dialogue with people chosen by the Delta people themselves and establishing a clearer federal oil revenue sharing formula to allow local and state officials in the Delta region to administer oil revenues for new roads and other projects.

President Carter also suggested a social development trust fund administered privately with local participation for more such projects.

Above: Hundreds of Nigerians wait their turn to vote at this polling station. Inset photo: Jimmy and Rosalynn Carter monitor a polling site in Nigeria.

Below: Retired General Colin Powell talks with a polling official during the Feb. 27 election.
Indonesia's June Election Draws Global Attention

Proclaimed by former U.S. President Jimmy Carter as probably the world's most important election this year, Indonesia held its first free election since 1955.

The June 7 election was the country's first since former President Suharto resigned under popular pressure in May 1998 after 32 years in power. Suharto's ruling party guaranteed that it won every election since 1971. His successor, then-Vice President B.J. Habibie, now serves as interim president until November.

About 80 Carter Center and National Democratic Institute for International Affairs (NDI) delegates headed by President Carter, along with several other international groups, observed the Southeast Asian nation's elections. They included: Tokyo Sexwale, former premier of South Africa; Keun Tae Kim and Sang Woo Kim, members of parliament in Korea; Santiago Creel, member of Congress, Mexico; Chee Soon Juan, secretary-general of the Democratic Party, Singapore; Julia Chang Bloch, former U.S. ambassador to Nepal; Paul Wolfowitz, former U.S. ambassador to Indonesia; William Fuller, president, Asia Foundation, U.S.A.; Dwight King, Indonesia expert, The Carter Center; Kenneth Wollack, NDI president; and Chuck Costello, director, Carter Center Democracy Program.

Though civil unrest exists in Indonesia due to hard economic times and ethnic, religious, and political conflicts, election observers were not deterred from carrying out their mission. "I am quite confident that there is an almost universal commitment among Indonesian people that this will be one of the best elections possible," said Carter.

He added that foreign investment could return to boost Indonesia's economy if the country succeeds in peacefully seating its newly elected civilian government.

First International Team Witnesses China Township Elections

Only a few days into the New Year, and they already had made history in pursuit of democracy. Eight Carter Center team members became the first international group to observe township elections in southwest China, and in the process found ballotting "irregularities in almost all stages."

Arriving Jan. 5 in Chongqing, the country's fourth-largest municipality, the delegates conducted a 10-day assessment of elections for Township People's Congress deputies and officials. The government of the People's Republic of China requested the visit.

The invitation alone was no small feat. It resulted from the Center's ongoing work with the Ministry of Civil Affairs (MCA) to enhance the quality of China's village elections, then the only elections that the Chinese government allowed international delegations to observe. Villages operate independently from China's administration. Townships, however, are the first stage of formal government from which China ultimately chooses all of its legislators through future, indirect elections.

The delegation witnessed the entire township election-day process from the candidates' presentations to the final vote count. It observed a large voter turnout and elected deputies enthusiastically evaluating township government.

The follow-up report also cited the lack of a: genuine choice of candidates; transparent nomination process; secret ballot; and public ballot count. The team was asked to submit recommendations to the National People's Congress (NPC) on how to improve these areas. It also shared its ideas with Chinese officials for moving direct elections to higher levels of government.

Regardless of the outcome, many local elections "produce a push-pull process that is changing people's relationship with local politics," said Chuck Costello, director of The Carter Center Democracy Program.

Election officials in China's Zhuiqiao village in Chongqing municipality raise a ballot box to show voters it is empty before voting during the January township elections.
Honors Abound for Mental Health Fellows

Recipients of the Rosalynn Carter Fellowships for Mental Health Journalism recently received numerous recognitions for research and reporting done as part of the fellowship program.

Andrew A. Skolnick, former associate news editor of the Journal of the American Medical Association (JAMA), and two reporters from the St. Louis Post-Dispatch were nominated for a Pulitzer Prize for reporting on the health care provided to people with mental illnesses in jails and prisons. Their writings were included in a special report that ran in the St. Louis Post-Dispatch last September. In March, Harvard University presented them with a Goldsmith Prize for Investigative Reporting final award. Additionally, they will receive Amnesty International USA’s 1999 Spotlight on Media Award on Sept. 27.

A second fellowship recipient, reporter Leslie Sowers, also was nominated for a Pulitzer Prize. Her three-part series, which began in May 1998 in the Houston Chronicle, spotlights the role biology plays in children’s mental illnesses. Additionally, Sowers received the Robert T. Morse Award in print media from the American Psychiatric Association last month. She also has received awards from four mental health organizations in Texas, as well as recognition from the Texas State Board of Education and the Hearst Corporation.

Media Shares View of Mental Illnesses

You have seen them. Dank holding cells with a soiled mattress as their only furniture. Patients donning straitjackets. Endless interrogation by a therapist cloaked in the shadows.

Movies, television, and print media often depict people with mental illnesses using these and other stereotypical, inaccurate images. And it was these portrayals, and their stigma, that were center stage May 13 for the “Conversations at The Carter Center” speaker series.

More than 100 people attended the event to hear Rosalynn Carter, a mental health advocate for more than 20 years, and a panel of experts discuss “Breaking the Stigma: Portrayals of Mental Illness in the Media.” Panelists included: Dan Rutz, senior medical correspondent for CNN; Andrew Skolnick, former associate news editor for the Journal of the American Medical Association (JAMA) and recipient of a Rosalynn Carter Fellowship for Mental Health Journalism; Otto Wahl, Ph.D., psychology professor at George Mason University and a Carter Center fellowship program advisory board member; and John Gates, Ph.D., former director of the Center’s Mental Health Program.

“Reporting in television and newspaper is becoming more factual and balanced when addressing mental illnesses,” said Mrs. Carter. “However, the entertainment media is the most difficult to change, not only because of its size and diversity, but because of its profit motive.”

This mental health discussion was the fourth and final “Conversations” for 1998-99. The Center will announce its next series schedule in August.

Forum Shares Top Mental Health Care Treatments

continued from Page 1

The fellowships, coupled with the Rosalynn Carter Georgia Mental Health Forum and the annual Symposium on Mental Health Policy, help professionals, consumers, and family members better understand some of the experiences of nearly 50 million Americans who have mental disorders.

For more information about mental health and brain research, major hurdles still exist. “Unfortunately, public policy has not always kept pace with scientific advances, making it difficult for people to receive the newest, most effective medications,” Mrs. Carter stated during the forum.

More public funding and community-based support services are needed, as well as insurance programs that do not discriminate against people requiring mental health benefits, she added.

“Research shows that a full range of treatment options, including medication and therapy, allow people with mental illnesses to lead full, satisfying, and productive lives,” said Mrs. Carter. “By sharing information about what programs work best, we can help perpetuate quality mental health care, not only in Georgia, but nationwide.”

The Carter Center will publish a summary report on the forum in late fall.
Improving Ethiopians' Health Through Training

The Carter Center's Global 2000 program is launching a new plan designed to help Ethiopians improve their health.

Through its new Ethiopian Public Health Training Initiative, the Center will help enhance the quality of teaching and students' educational materials at the African nation's five health colleges. The Center, along with the Ministries of Health and Education, will develop disease-specific or health promotion teaching modules to train the students. The faculty then practice-teaches and tests its modules in class to increase their knowledge and skill.

This undertaking is part of the Ethiopian government's plan to open 600 new health centers over the next 10 years, each with a four-member staff, to provide fundamental health care to millions of villagers in rural communities. Ethiopian Prime Minister Meles Zenawi requested the Center's input.

"The average Ethiopian villager is far removed from the nearest medical facility," said Craig Withers, deputy director of Global 2000 operations. "When Prime Minister Meles took office in 1991, one of his goals was to rebuild the health care infrastructure that had deteriorated during the Mengistu dictatorship.

"Last year, we developed training modules on tuberculosis, pneumonia, diarrhea, ascariasis, and HIV/AIDS," said Withers. "In May, we focused on trachoma, malaria, measles, protein-calorie malnutrition, and sexually transmitted diseases in our third workshop at Alamaya University in Ethiopia. Since these 10 illnesses often affect entire communities, the college faculty decided to tackle them first."

Global 2000 also helps colleges to develop teaching materials. "A major obstacle that most Western students do not face is the complete lack of learning materials," said Dennis Carlson, M.D., the Center's senior consultant on the initiative. "Almost 95 percent of class time in the past has been taken up by teachers dictating class text to the students, who then read it later at home. If they had the material photocopied or in textbooks, class time could be spent on practical learning."

To help the faculty become more efficient, The Carter Center has supplied each of the five colleges with a photocopier, desktop computer and printer, and subscriptions to nine health journals that cover topics from nursing to health policy and management.

Ethiopia expects the training initiative to take 12 years to complete. Donations from SmithKline Beecham, the OPEC Fund, and the Yoshida Scholarship Foundation help fund the program.

Guinea Worm Close to Eradication

Zero in the win column may be discouraging in sports competition, but when the contest is against Guinea worm disease, zilch never looked so good.

As of May, six nations - Cameroon, India, Kenya, Pakistan, Senegal, and Yemen - have recorded zero cases of Guinea worm for more than one year. Chad has reported only three cases in the past year. And the World Health Organization certified Pakistan, where The Carter Center began its eradication efforts, as Guinea worm-free in 1997.

"Seven down and 12 to go," said Donald Hopkins, M.D., associate executive director of The Carter Center. "This is a remarkable public health success story. With fewer than 100,000 Guinea worm cases reported worldwide, the coalition is close to making Guinea worm only the second disease in history to be eradicated."

Guinea worm disease, also known as "dracunculiasis," is more than 3,000 years old. Until it is wiped out completely, as smallpox was in 1977, more than 100 million people are at risk for the disease.

People become infected when they drink stagnant water contaminated with tiny water fleas carrying Guinea worm larvae. Inside the human body, the larvae mature and grow up to 3 feet long. After one year, the threadlike worm emerges slowly through a painful blister in the skin. If the worm breaks while emerging, which can take 8 to 12 weeks, it causes severe pain and inflammation.

Many victims immerse the affected area in water to soothe the burning pain. When the female worm touches water, she releases tens of thousands of larvae, repeating the cycle. The worms' emergence incapacitates their victims, keeping children from school, farmers from their fields, and mothers from caring for their babies.

To prevent Guinea worm disease, villagers strain their drinking water or apply a larvicide to their water supply.

Former President Jimmy Carter and Gen. Amadou Toumani Touré, the former president of Mali, officially called for a massive, final assault against Guinea worm in 1998. The worldwide coalition, comprised of villagers, their government leaders, intergovernmental agencies, nonprofit organizations, and major corporations, redoubled its efforts to find and stamp out the "fiery serpent."

"We're working hard to eliminate Guinea worm from every affected country by the end of 2000, except for Sudan," said Dr. Hopkins. "Then, the coalition will turn our full attention to that war-torn country."
More Gift Options Available for Center Donors

The Carter Center's Gift Planning program, which was established last September, is giving private donors more ways to support the Center.

"Many thoughtful donors assist the Center by providing outright gifts," said Christopher Conway, director of Planned Giving. "As we seek to create the conditions that will allow the Center to remain an effective organization for decades to come, we are inviting potential donors to consider planned giving as well."

Planned gifts include provisions for The Carter Center through bequests, charitable trusts, gifts of life insurance, and similar deferred and life income instruments. These types of planned giving allow donors of any age to make significant gifts once thought unaffordable. "Many people cannot write a large check to the Center, but they are interested in pledging support," Conway said. "Planned giving provides them with options."

Charitable gifts also are an important part of a sound investment and estate planning strategy. Such planned gifts provide financial benefits to donors, as well as support the Center's work. Increased spendable income, an immediate income tax deduction, reduced estate taxes, and lower capital gains on appreciated assets are just some of the benefits for donors.

For more information on the Gift Planning program, call Christopher Conway, (404) 420-5191.

Another Carter Book Deemed Best Seller

On the heels of her husband's book, The Virtues of Aging, becoming a best seller, Rosalynn Carter's literary work recently received acclaim of its own. Helping Someone with Mental Illness (Times Books, 1998), written by the former first lady with Susan K. Golant, was named the best nonfiction service book of 1998 by the American Society of Journalists and Authors (ASJA). Mrs. Carter accepted the award at the annual ASJA members meeting, held April 30 in New York City.

The book explains the latest breakthroughs in research and treatment of mental illnesses and addresses the emotional and psychological issues in caregiving for people with mental illnesses. It also suggests how to help erase the stigma and discrimination associated with mental disorders.

The book is now available in paperback in bookstores.

New Board of Trustees Member

The Carter Center welcomes Alice Rogoff Rubenstein to its board of trustees. Rubenstein, who was appointed last November, is the co-founder and managing director of Rhodes partners, an investment partnership she and her husband established in 1997. From 1985 until 1997, Rubenstein served as the chief financial officer of U.S. News & World Report. She also worked as the magazine's business manager.

Rubenstein and her husband David reside in Bethesda, Md., with their three children.

Atlanta Leaders Appointed to Board of Councilors

The Carter Center recently appointed the following 14 new members to its board of councilors: Leone Ackerley-Dowling, partner, Heidrick & Struggles; John Cook, chairman and CEO, Profit Recovery Group International; Roderick Dowling, managing partner, The Robinson- Humphrey Co.; Anna C. Ellis, president, Atlanta Classic Cars; Robert P. Guyton Jr., president, Monarch Capital Partners; Janice I. Holyfield, M.D.; T. Stephen Johnson, president, T. Stephen Johnson & Associates; Robert N. Lehrer, professor emeritus, Georgia Institute of Technology; Thomas Noonan, president & CEO, ISS Group; Scott S. Smith, co-founder, Coalition America Inc.; Sean S. Smith, co-founder, Coalition America Inc.; Carolyn A. Stradley, founder & CEO, C&S Paving; and Helen Ballard-Weeks, CEO, Ballard Designs.

Established in 1987, the Center's board of councilors includes Georgia private sector leaders who serve as advocates for the Center to the broader community. President and Mrs. Carter and Center staff update the 164-member board throughout the year about Center activities.

Carter, Center Receive First Delta Prize

Jimmy and Rosalynn Carter and The Carter Center received the Delta Prize for Global Understanding on April 27.

The new award, created by the University of Georgia with a grant from Delta Air Lines, recognizes individuals and groups for "globally significant efforts that provide opportunities for greater understanding among nations and cultures."

The Carters' work in waging peace, fighting disease, and building hope worldwide through The Carter Center earned the honor.

The Carters and the Center received the award and the $10,000 prize during ceremonies in Atlanta.
Center Helps Nigeria Battle More Diseases

For more than a decade, The Carter Center has fought two devastating diseases in Nigeria: river blindness, which inflicts constant itching and potential blindness, and Guinea worm, which causes painful skin sores and possible crippling.

Based on its success in controlling both diseases, the Center recently took on the challenge of fighting two others: lymphatic filariasis and urinary schistosomiasis.

Often called “elephantiasis,” lymphatic filariasis is one of only six infectious diseases in the world considered eradicable, and is transmitted by mosquito bites. Victims are afflicted with grotesque swelling of the limbs or genitals. In the body, parasitic worms produce embryos called microfilaria which circulate in the blood, frequently damaging the internal organs. Experts estimate that 120 million people in 73 countries are infected and another 900 million are at risk in tropical Africa, Latin America, and Asia.

Schistosomiasis, also called “snail fever,” is the second most important parasitic disease in tropical countries, after malaria, because of its impact on rural economies and public health. People become infected by bathing or swimming in water contaminated with parasitic larvae that emerge from certain snails. Larvae then penetrate the skin and lay thousands of spiny eggs that tear and scar the intestines, bladder, liver, and lungs.

The result is chronic debility and sometimes premature death. Children ages 5-14 often are victims. About 200 million people infected with the disease live in Africa. However, more than 70 countries are affected, including those in Asia and South America.

“We can prevent Guinea worm disease primarily by filtering larvae from the water,” said Frank Richards, technical director of the Center’s river blindness, lymphatic filariasis, and schistosomiasis programs. “But there is no medicine to treat or prevent Guinea worm. Fortunately, river blindness, lymphatic filariasis, and schistosomiasis can be treated with annual doses of very safe and effective medicines.”

Dr. M.Y. Jinadu is national coordinator of Nigeria’s programs to eliminate lymphatic filariasis and control schistosomiasis. Part of her job involves being a major partner with the Center’s Global 2000 Program in Plateau and Nasarawa States. She helps determine treatment locales, educate villagers about these diseases, and establish community-based drug distribution programs.

By the end of 2000, the program plans to train 1,000 village health workers, treat thousands of people in 960 villages for lymphatic filariasis and urinary schistosomiasis, and create and distribute health education materials. Staff also will work to break transmission of lymphatic filariasis in these two states before taking the program nationally.

“Having the right drugs available to treat these diseases is only half the battle,” summarized Richards. “In many ways, the success of each of our health initiatives depends on the ongoing efforts of people like Dr. Jinadu. It is their willingness to work with us that makes all the difference.”

Volunteers: Partners in Our Mission

When people from all over the world come to The Carter Center, they expect us to provide a unique forum in which to discuss difficult issues.

Take, for example, last month’s “Transparency for Growth in the Americas” conference (see “World Leaders …”, Page 1). Participants highly praised the insights and recommendations that emerged to battle corruption in Latin America.

But the number of accolades we receive about our staff’s quality and well-run events always amazes me. Words such as “knowledgeable,” “responsive,” and “helpful” ring through our halls whenever we mount major events.

Unbeknownst to most participants is that many who greet and direct them, and work behind the scenes are volunteers. Under the direction of our experienced staff and directors, they exemplify the Center’s mission of reducing suffering and fostering hope wherever we see a need.

Our volunteers are the Center’s lifeblood. A dedicated “staff” of about 100 answers phones, prepares mailings, disseminates materials, and helps guests at dozens of events each year. Aged 18 to 92, they hail from various professions: an Episcopalian priest, a college professor, a geologist, students, homemakers. Some train for eight weeks and pass an exam to become docents.

Volunteers also support the Center in other ways. More than 60 leaders from business, education, and the nonprofit and service communities sit on the Center’s board of councilors. They attend quarterly breakfast meetings to learn about our latest activities and then promote our good work to their colleagues.

Our board of trustees also consists of volunteers who not only provide vision and oversight for our work, but also lend their experience and resources to specific projects.

We consider all those who support us as partners. Each financial contributor volunteers to join our mission. Every African village who voluntar-ily agrees to filter his water unites with us to prevent Guinea worm. Each person who chooses to exercise his or her right to vote in a country that has never experienced democracy joins our vision of freedom, justice, and respect for human rights.

I join President and Mrs. Carter, and all at the Center, in thanking our volunteer family. Each of you makes our work possible.