

THE CARTER CENTER NEWS

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World Peacemaker: President Carter Awarded 2002 Nobel Peace Prize

The Norwegian Nobel Committee awarded the 2002 Nobel Peace Prize to former U.S. President Jimmy Carter for “his decades of untiring effort to find peaceful solutions to international conflicts, to advance democracy and human rights, and to promote economic and social development.”

During the announcement Oct. 11 and the acceptance ceremony on Dec. 10, the committee cited President Carter’s

Nobel and are presented each year on Dec. 10, the anniversary of his death in 1896.

“He was the politician who during his presidency attempted to bring about a more peaceful world,” Berge said. “He was, and continues to be, the mediator who seeks peaceful solutions to international conflicts. He has shown, and still shows, an outstanding commitment to democracy and human rights. His humanitarian and

social activities have been, and are still, far-reaching.”

Berge continued, “As if mediation, human rights, and disarmament were not enough, The Carter Center has in cooperation with other organizations headed a number of important health campaigns. So far the best results have been achieved in the fight against Guinea worm



negotiation of the Camp David Accords between Egypt and Israel and praised his work through The Carter Center in Atlanta on the occasion of its 20th anniversary in 2002.

Calling him one of the most deserving laureates, Norwegian Nobel Committee Chairman Gunnar Berge bestowed a diploma and gold medal on President Carter at a formal ceremony in Oslo City Hall attended by Norway’s King Harald V and Queen Sonja. The Nobel prizes, first awarded in 1901, were created by Swedish industrialist and dynamite inventor Alfred

infection. Today the number of cases has been reduced by more than 95 percent. Having overcome smallpox, the world is now on the verge of exterminating another major epidemic disease.”

President Carter then gave his 20-minute Nobel lecture on the responsibility of powerful nations to preserve peace and alleviate suffering in the poorest nations.

“Most work of The Carter Center is in remote villages in the poorest nations of Africa, and there I have witnessed the capacity of destitute people to persevere under heartbreaking conditions,” he said. “I have come to admire their judgment and wisdom, their courage and faith, and their

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Mrs. Carter Named to
Women’s Hall of Fame
(Full article, page 8.)

The full text of President Carter’s
Nobel lecture is available at
www.cartercenter.org.

From the Executive Director

“People everywhere share the same dream of a caring international community that prevents war and oppression,” said President Carter after the Nobel Peace Prize was announced last October.

At The Carter Center, we could not do our share in making that dream come true without the support of thousands of partners around the world—organizations, individual donors, foundations, and most of all, people abroad who work with us to address unique local challenges as well as global issues in peace and health.

The Nobel Committee acknowledged that progress requires partnership when it cited successes of The Carter Center among the reasons it honored him with the peace prize: progress against tropical diseases, conflict resolution on several continents, advancing democracy and human rights, promoting economic and social development.

President Carter’s example shows us that one person, working with others, can make a difference—through leadership,

vision, and courage—in neighborhoods, nations, and sometimes on the world stage. Yet finding permanent solutions to complex global problems demands collective long-term commitment and shared responsibility.

Not everyone has the influence of a former president, but each of us has the capacity to reach out to help others in some way big or small. We have been blessed at The Carter Center that so many are reaching out by joining in our work.

We would be remiss if on the occasion of the Nobel Peace Prize we did not acknowledge the role of these partners in our success: foundations that support specific projects in peace and health; individuals who donate from their personal savings; 18 countries that, through financial grants, have endorsed the Center’s vision; eminent current and former leaders in Latin America, Africa, and Asia who volunteer their time and expertise to advance specific Center objectives; other nongovernmental organizations in the United States and

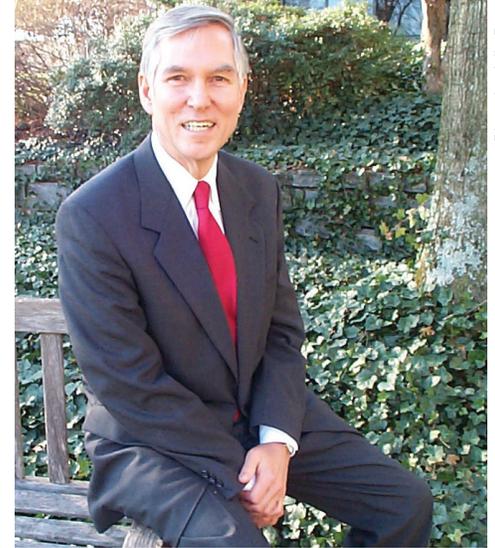


Photo by Julie Benz

John Hardman, M.D.

abroad; and all of those who strengthen us by sharing our vision for the future.

The list is too long for individual acknowledgments, so I invite each of you to join in our celebration at The Carter Center of President Carter’s award. We thank you for sharing our cause of “waging peace, fighting disease, and building hope” for struggling people worldwide. Together, we are making a difference.

continued from cover page

Nobel Prize, cont.

awesome accomplishments when given a chance to use their innate abilities. But tragically, in the industrialized world there is a terrible absence of understanding or concern about those who are enduring lives of despair and hopelessness.”

Listening in the audience were his wife, Rosalynn, his four children and their spouses, his grandchildren, friends, and officials from The Carter Center and his White House administration. After his speech, King Harald and Queen Sonja rose to congratulate the new laureate as trumpets sounded signaling the

ceremony’s end. As Nobel committee members escorted President Carter out of the hall, President Carter handed the diploma and medal to his wife, Rosalynn.

Later that day, President and Mrs. Carter were honored with a torchlight vigil and serenade outside their hotel before attending a black-tie banquet and gala. The following night Sir Anthony

Hopkins and actress Jessica Lange hosted the three-hour Nobel Peace Prize Concert at the Oslo Spektrum, a moving musical tribute by performers from around the world.

Following events in Oslo, President Carter visited Stockholm, Sweden, to meet the other 2002 Nobel laureates, address the Swedish Riksdag (Parliament), and speak with

students at Uppsala University.

The Nobel Peace Prize comes with a financial award of 10 million Swedish kronor, about US \$1 million. Most of the funds will go to The Carter Center, with some to the Rosalynn Carter Institute for Human Development at Georgia Southwestern State University. President Carter said the money will go to a rapid response fund to be used for Center projects that require immediate action.

The gold medal and diploma will be permanently displayed at the Jimmy Carter Library and Museum in Atlanta, Ga. Bronze replicas of the medal and reproductions of the diploma will be displayed at the not-for-profit Carter Center, adjacent to the Museum and Library, and at the high school in Plains, Ga. The diploma includes a striking original watercolor of a dove of peace by the noted Norwegian artist Ulf Valde Jensen.

Photo by Connie Neilson



PROFILE: JOYCE MURRAY

New Director a Quick Study in Ethiopian Health Needs

Eight years ago, the Carter Center's newest program director, Joyce Murray, had never been in a developing country. As a professor at Atlanta's Emory University, however, she became an adviser to three Ethiopian nursing students. She recalls cautioning them, "What I'm telling you may not apply to the circumstances in your country."

The initiative's mission is to develop health material for use in training staff for 500 facilities established to bring health care to rural Ethiopians — 85 percent of the population.

Three years later, she would learn just how wise that cautionary note was. She traveled to Ethiopia on a grant to help improve nursing programs there. Her exposure to a very different medical environment continued with her involvement during the past three years with the Center's Ethiopia Public Health Training Initiative she now directs. Although she and other international experts assist in shaping the initiative's curriculum, they rely on local faculty teams to determine which health problems need to be addressed in that country. The top concerns vary greatly from those in the United States: Infant diarrhea, malnutrition, malaria, and HIV/AIDS are all potential killers.

The initiative's mission is to develop health material for use in training staff for 500 facilities established to bring health care to rural Ethiopians—85 percent of the population.

War with Eritrea disrupted the program at one point, but the ongoing

challenges are more basic. Although the program's students can be taught in English, they must provide health education in a country in which 87 languages are spoken, and poor roads make it time-consuming to take students into villages for hands-on training.

"One of the unanticipated outcomes of this initiative," Dr. Murray says, "is the stronger relationship built among the scattered college faculties and government health ministry. In our workshops, they develop a common focus on their country's most critical health needs. More importantly, our program's graduates report that the work they're doing is making a real difference in the quality of health care people now receive.

"We will be evaluating the program's impact in more detail," she continues, "but we already know two areas that need more attention: mental health, particularly in families who've lost parents or husbands to HIV/AIDS, and a CD-ROM-based means of continuing the education of graduating students, so they can become more effective teachers and keep up with new training materials being developed."

"One of the unanticipated outcomes of this initiative is the stronger relationship built among the scattered college faculties and government health ministry."

Three Ethiopians who Dr. Murray will be counting on to play a role in bringing improved health care to their country include two college faculty members and an official with the nation's ministry of health. They are the nursing students she advised almost a decade ago at Emory.



Left: Dr. Murray speaks with Ato Alemayehu Galmessa (middle), a psychiatric nurse who is an instructor from Alemaya University, and Ato Belete Shiferaw (right), a nursing instructor from Dilla College, during a field visit to a rural health clinic.

Right: Dr. Murray, nursing students, and other health professionals visit a health center near Dilla, Ethiopia.



Photos by Laura Lester

Jamaicans Renew Confidence in Democratic Process

Helping to break the cycle of violence that plagued previous elections in Jamaica, The Carter Center in October observed the island nation's second relatively peaceful election.

Jamaica's Electoral Advisory Committee invited The Carter Center to observe its parliamentary elections in 1997 and 2002, hoping to deter election-related violence. The outbreak of violence during the 1980 election killed more than 800 people. Yet in 1997 and 2002, when Jamaica invited international observers, election-related violence in the "garrison" communities controlled by politically related armed gangs was reduced.

Photo by Rebekah Raleigh



A boy's sign indicates his wish at a march for peace outside Kingston.

"While violence in the so-called garrison communities remains a concern, we found preparations for the elections to be exemplary," said Laura Neuman, who organized the mission for the Americas

Program. "The institution of the Elections Centre allowed for the immediate resolution of disputes, and a lot of progress was made in the consultative process in verifying the voters list, determining the location

of polling stations, and selecting poll workers, which helped generate confidence in the process."

Former U.S. President Jimmy Carter and former Costa Rica President Miguel Angel Rodriguez led a 60-member international delegation, representing 16 countries. Both presidents are members of the Center's Council of Presidents and Prime Ministers of the Americas, a group of 35 leaders who have monitored elections throughout the Western Hemisphere since 1987. The council, headquartered at the Center's Americas Program, seeks to reinforce democracy, resolve conflict, and advance cooperation in the Western Hemisphere. Jamaica Prime Minister P. J. Patterson and leader of the opposition the Hon. Edward Seaga, who served as prime minister from 1980–1988, also are members.

Patterson's People's National Party won its fourth consecutive parliamentary election and appointed him to his third term as prime minister. Before election day, Patterson and Seaga signed a political code of conduct to demonstrate their commitment to peaceful elections.

Domestic Observers Enhance System

Working with domestic observers is key to many of the Carter Center's effective election observations. Together, domestic and international observers can ensure coverage of most, if not all, of a country and can observe in highly political areas, helping to lower tensions in volatile regions.

In Jamaica, the Center's Americas Program coordinated its efforts with CAFFE, Citizen's Action for Free

and Fair Elections, to observe the October 2002 parliamentary elections. CAFFE, established in 1997, is headed by Dr. Lloyd Barnett, a human rights

lawyer and recipient of Order Jamaica, the country's highest civilian honor.

"Election observers add a great deal," Dr. Barnett said. "It is in itself a utilization of the democratic process. Observers also help to prevent the corruption of the system because their presence is a deterrent to irregularities. Political parties have now come to accept the value of having observer missions."

CAFFE's coverage was invaluable, especially under the difficult circumstances of not having an election date until close to the election, said Laura Neuman, senior program associate, the Americas Program.

"CAFFE briefed the Center's short- and medium-term observers on election issues, particularly the fear of violence," Neuman said. "In many of the constituencies, the first person our observers met was a CAFFE observer, who provided immeasurable help."



Dr. Lloyd Barnett, a human rights lawyer, is chairman of CAFFE.

Waging Peace Around the World: Focus on Elections

Nigeria

A Carter Center-National Democratic Institute assessment mission in November found millions of voters still unregistered for elections expected in April 2003.

The joint mission deployed 19 observers throughout the country to meet with political parties, electoral officials, and civil society groups. NDI and the Center also jointly observed Nigeria's 1999 elections and found serious flaws and fraud in the process.

The delegation urged political party leaders to denounce mounting violence and the government to put into place a security plan for the election. "A violence-free election will help to ensure the integrity of the election process to advance the overriding goal of consolidating civilian, democratic government in Nigeria," said Charles Costello, director of the Democracy Program.

Kenya

Breaking a 33-year political hold by the ruling party in Kenya, a former ally of

the longtime president won the presidency in a milestone election The Carter Center observed to be open and competitive in spite of some irregularities.

Mwai Kibaki, a former finance minister, was elected Dec. 27 to succeed President Daniel arap Moi, who was president for 24 years before Kenya's constitution forbade him from running again.

Carter Center observers, led by former Zambia President Kenneth Kaunda and Carter Center Associate Executive Director Gordon Streeb, visited more than 200 polling stations in Nairobi and six provinces on election day.

"The Electoral Commission of Kenya should be commended for its preparations and impartiality in conducting the elections," Streeb said. "Although there were inequitable media access for the opposition parties and confusion over the voter registry, the elections were well-managed and the outcome reflected the will of the Kenyan people."

China

In December 2002, at the invitation of the Chinese National People's Congress, The Carter Center became the first international organization to observe county-level congress deputies elections, the highest level of direct elections in China.

Observers monitored elections in six polling sites in three cities in Yunnan province. The Center has observed village elections in China since 1997, subsequently observing higher-level elections in townships and now county level.

"The Center will continue to focus on improving the quality of elections in China and helping to standardize procedures," said Dr. Yawei Liu, associate director of the Center's China Village Elections Project. "In Yunnan we saw the use of primaries to narrow the field of candidates, a measure The Carter Center had recommended in a pilot during the township people's congress deputies election in Hebei province in 2002. We'd like to see the use of secret ballot booths to protect the secrecy of voting. Now, most voting is done in the open. Voters consult with each other on their ballots."

Center Remains Involved in Democracy in Venezuela

Seeking to resolve Venezuela's political crisis, an international tripartite group including The Carter Center, the Organization of American States, and the United Nations Development Programme began formal reconciliation talks in November with the government and several opposition groups.

President Carter made a trip to the country in July 2002 to lay the groundwork for negotiations.

2000 election to be flawed, although the outcome of the presidential election was not in question. After massive protests, Chávez was removed from power but later reinstated. Since then, opposition groups, protesting what they see as his increasing undemocratic actions, have organized general strikes and large street protests, some of which have ended in violence, to call for Chávez's resignation and early elections.

The tripartite group began talks in early November between the government and opposition political and civil society groups on an electoral option to move the country beyond the current crisis. While OAS Secretary General César Gaviria leads the talks, the Center is providing strategic advice to him, helping to guide the content and process of the negotiations through a field representative based in Caracas. The UNDP provides logistical assistance. President Carter made a trip to the country in July 2002 to lay the groundwork for negotiations. The Center's Americas Program and Conflict Resolution Program are collaborating in the effort.

"The radical changes brought about by President Hugo Chávez generated deep divisions within the country that are threatening its democratic institutions and economic stability," Americas Program Director Dr. Jennifer McCoy said. "A major oil exporter, Venezuela's deepening crisis will affect regional stability as well."

President Chávez was elected democratically in 1998 and re-elected to a six-year term in 2000. The Carter Center observed both elections and found the

Clear Vision Is in Their Future

Combating River Blindness in the Americas

The women of the extended Ramirez family—Lisa, Martha, Maria, Anna, and Yesenia—range in age from 16 to 52 and have been involved with the Carter Center’s effort to eliminate onchocerciasis, or river blindness, for a collective total of 25 years.



Photo by Emily Howard

During an onchocerciasis training workshop, Maria and Martha Ramirez role-play for other health promoters.

The family lives in Guatemala, where only a sister of Martha’s sister-in-law has showed symptoms of the debilitating but preventable eye disease the women help fight. That statistic is unusual in a country in which more than 182,000 people remain at risk for this parasitic disease that’s transmitted by black flies that breed in rapidly flowing streams. The parasites cause intense itching, and sometimes, blindness.

The Carter Center is the only non-governmental organization combating river blindness in both Africa and the Americas. The Center works directly with ministries of health, establishing accountability and building sustainability in the fight against this disease.

The women are onchocerciasis village volunteers, trained to administer tablets of Mectizan®, donated by Merck & Co., twice a year to help reach the goal of eradicating the disease in the Americas by 2007.

“Our work is important,” said Martha Ramirez, “because people can now be

treated at home. We are happy to be of help.”

The women also say their work has earned them respect in the community and generated faith in the future. “We see that other countries are ahead, and we want to keep up Guatemala’s pace toward elimination,” they say.

As manager of a coffee plantation, Padro Sofof has come a long way from the days when he cleaned coffee plants or cut grass around them.

He’s also come a long way toward understanding how to prevent the disease called river blindness that afflicts his friends and co-workers both when they



Photo by Emily Howard

Padro Sofof, plantation manager in San Lucas Toliman, Guatemala, promotes trust in health services.

work in daylight and when they’re at home using lamplight.

“When I was 16 and worked on a coffee plantation, I would be bitten 40 to 50 times a day by the black flies,” said Sofof. “But more than 10 years ago, I learned about Mectizan and started taking it.”

When Sofof came to work on the plantation he now manages, he explained to his new co-workers about the disease

In January 2002, the Conference on the Eradicability of Onchocerciasis met at The Carter Center. More than 60 global experts from a variety of disciplines met to discuss whether river blindness was eradicable using current knowledge and tools. The conference concluded that the disease is not eradicable globally because of major barriers to eradication in the 35 countries in Africa where it is found. However, eradication is possible in the Americas and Yemen and in some sites in Africa.

President Carter and The Carter Center actively participated in this year’s World Sight Day, observed Oct. 10, 2002. Held annually, the observance helps increase awareness of four diseases: cataracts, trachoma, river blindness, and childhood blindness. The Carter Center works year-round on prevention and treatment of both river blindness and trachoma.

The InterAmerican Conference on Onchocerciasis met in Manaus, Brazil, Nov. 19–21, 2002. Reports indicated the goal of reaching 85 percent of the Americas population with Mectizan was achieved during the first of two annual rounds of treatment in 2002.

and the importance of taking Mectizan. “I remember one woman who, three years ago, refused to take her second treatment. I talked with her, and now she is one of the women who encourages people to take their medication. Another time, the people giving the drug told me that some workers did not take their medicine because they were in the field when it was administered. I went person to person, interrupting their work, and they took the medicine.”

Sofof believes that if he can travel to other coffee plantations with people from Guatemala’s ministry of health, he can increase the public’s trust in health services. “My main hope is to keep clear vision,” he says. “I want to thank all of you at The Carter Center because you come here to teach our people to teach the children how the disease is, how to prevent it, and how to cure it. Thank you very much.”

SG2000 Helps Increase Yield

In 15 sub-Saharan African countries, increasing numbers of farmers are benefiting from assistance by a partnership of the Carter Center's Global 2000 program and the Sasakawa Africa Association. Known together as SG2000, the program has shown farmers improved techniques that double or triple their crop yield.

Moreover, the organization has gained the confidence of rural banks and other lending institutions to issue loans linked to farmers' commitment to SG2000-proven high-yield production techniques. To sustain the system, it's important that the seed be sold to farmers rather than given away. Last year, banks recovered 100 percent of these loans.

"The power of agricultural technology to improve the lives of people is readily evident," claims Dr. Wayne Haag, who has worked in the SG2000 program for 13 years, "especially in countries like Ghana, where other parts of the support system fall into place after the farmers' success. It's very pleasing to see former subsistence farmers become truly commercial farmers and build better, more permanent homes."

But technology doesn't mean mechanization. It means improved methods of farming and quality seeds, fertilizers, and herbicides.



The Carter Center/Chris Doswell-SAA

When SG2000 began its work in Ghana, no seed companies existed. "We started organizations of seed growers," Dr. Haag says. "Eventually, small commercial companies emerged out of these groups, and they have become profitable." Most required SG2000 support in the form of staff training, gaining access to seed varieties that work best in their areas and advice about storage, packaging, selling, and distributing.

In Uganda, more than 14,000 small-scale farmers have been trained in SG2000 techniques, and government support of agriculture and SG2000's work there has helped farmers achieve bumper harvests. As greater yields have pushed prices lower, the government has begun to find markets outside the country.

Backpacks Provide Needed Supplies

On Friday, Nov. 10, Carter Center employees and others filled 1,000 Guinea worm backpacks for village volunteers in Ghana.

The backpacks were provided by the Centers for Disease Control and Prevention and filled with latex gloves, gauze, iodine, and other medical supplies purchased by the Center's Guinea Worm Eradication Program. Center employee Renn Doyle and Linda Webb, CDC, (shown below) were key to the effort to obtain materials and organize the packing process.

The backpacks are being distributed to Guinea worm village volunteers in Ghana, the second most endemic Guinea worm country in the world, to help treat people with the parasitic waterborne disease. The Carter Center leads the global campaign to eradicate Guinea worm disease in Africa.



Photo by Ernesto Ruiz-Tiben

Mrs. Carter and Center Examine Sept. 11 Mental Health Impact

On the anniversary of the Sept. 11 attacks on the United States, former First Lady Rosalynn Carter urged nations and communities to devise response plans for terrorism, natural disasters, and other large-scale tragedies that include strategies for dealing with the mental health effects that follow such events.

"No country is immune from the problem of mass violence. We must prepare ourselves for future disasters. The mental health world will have to fashion

preventive strategies for broader audiences," said the former first lady before a conference of the World Federation for Mental Health in London on Sept. 11.

The issue was revisited at the 18th Annual Rosalynn Carter Symposium on Mental Health Policy in November, where former New York City Mayor Rudolph Giuliani joined some 200 leaders of national mental health organizations to evaluate the aftereffects of the terrorism.

"We're going to have to deal with

events like Sept. 11 in the future. The idea of bringing together experts in mental health is a very big contribution to the security of this country," said Giuliani.



Photo by Annemarie Poy

Former New York City Mayor Rudolph Giuliani emphasizes his understanding of the need for mental health services.

National Hall of Fame Inducts Mrs. Carter

On Oct. 5, 2002, six days before President Carter won the Nobel Peace Prize, Carter Center Co-chair Rosalynn Carter joined former first ladies Abigail Adams and Eleanor Roosevelt when she was inducted into the National Women's Hall of Fame in Seneca Falls, N.Y. Inductees are selected by a national panel of judges for their contributions to the arts, athletics, business, education, government, humanities, philanthropy, and science.

Mrs. Carter's work for women, children, and the mentally ill is "a living testament to her vision and character."

"Her lifelong work on behalf of women, children, and the mentally ill is a living testament to her vision and character. In this day and age, Mrs. Carter's ongoing dedication to making our country a better place for all is, indeed, a great and worthy achievement," said Marilyn Bero, president of the National Women's Hall of Fame. Originally named in 2001,



Mrs. Carter's induction was postponed a year, due to the Sept. 11 attacks.

Widely recognized for her promotion of mental health over the last 30 years, the founder and chair of the Carter Center Mental Health Task Force has galvanized key partnerships in the campaign to eliminate stigma against those with mental illness, to achieve parity in mental health insurance coverage, and to screen youth early for mental and behavioral disorders.

Mrs. Carter has chaired the World Federation for Mental Health's International Committee of Women Leaders for Mental Health since its establishment. As first lady of the United States, Mrs. Carter served as active honorary chair of the President's Commission on Mental Health. Within one year, the commission assessed the current system and made

recommendations for new legislation by undertaking a series of public hearings across the country. In September 1980, Congress passed the Mental Health Systems Act.

In 1991, she launched with Mrs. Betty Bumpers, wife of former U.S. Sen. Dale Bumpers of Arkansas, "Every Child By Two," a nationwide campaign to publicize the need for early childhood immunizations. She also is president of the board of directors for the Rosalynn Carter Institute for Human Development, established at Georgia Southwestern State University to help family and professional caregivers, and is honorary chair of Last Acts, a national coalition to improve care for dying people and their families.

The National Women's Hall of Fame, founded in 1969, is the oldest national institution dedicated to recognizing and



Photo by Emily Howard

honoring the significant achievements of individual American women. Seneca Falls, N.Y., is the birthplace of the women's rights movement and site of the first Women's Rights Convention in 1848.

School of Public Health Chair, Mental Health Fellows Appointed

The Carter Center Mental Health Program this past fall celebrated the appointment of the Rosalynn Carter Chair in Mental Health—the only such academic chair for mental health at a school of public health—and named eight journalists to receive the 2002-2003 Rosalynn Carter Fellowships for Mental Health Journalism.

Emory University's Rollins School of Public Health named Benjamin G. Druss, M.D., M.P.H., to the chair, effective Dec. 31, 2002. The endowed chair is the first joint appointment between the Rollins School and The Carter Center.

"Mental illnesses have been neglected for too long in the public health arena, and this will bring national recognition and attention to the promotion of mental health and the prevention of mental disabilities. We look forward to working with Dr. Druss," said Mrs. Carter.

The sixth annual Rosalynn Carter



Dr. Benjamin Druss serves as Emory University's first Rosalynn Carter Chair in Mental Health.

Fellowships for Mental Health Journalism also were announced. The fellowships are part of an international effort by The Carter Center to reduce stigma against people with mental illnesses and decrease incorrect and stereotypical information through the media. The fellows include the program's first photojournalist, two journalists from New Zealand, a reporter from The Washington Post, an editor from the Los Angeles Times, a producer from WABC-TV in New York, and several freelance print and radio journalists.

Visit www.cartercenter.org for more information on the fellows and their projects.