

THE CARTER CENTER NEWS

SPRING 2005

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Innovative Approach to Disease Control Multiplies Results

Imagine a nation almost half the size of the United States where large portions of the population are sick—not with just one disease but several at once. Such is the daily reality for those living in Nigeria, a nation with one of the highest burdens of disease in Africa.

Working in Nigeria since 1988, The Carter Center has pioneered a model for health care delivery in partnership with the national Ministry of Health and two state ministries of health that attempts to answer this need by integrating delivery of treatments for several endemic diseases—river blindness, lymphatic filariasis, schistosomiasis, and trachoma.

Many of these illnesses, although not fatal, are extremely debilitating because they inflict permanent damage, such as blindness, abnormal development in children, or painful swelling of extremities. Communities in rural and remote areas are often least able to break the prevalent cycle of poverty caused, in part, by their limited access to disease treatment and health education.

Yet, efforts by the Center and the ministries of health to integrate medical treatment and delivery systems for several diseases at once are raising hopes for a healthier future for millions of Nigerians.



Emily Staub

A Nigerian mother washes her daughter's face. Improved hygiene can help prevent trachoma, a bacterial eye infection.

Recognizing the success of relatively simple and inexpensive intervention methods in Nigeria's Guinea worm eradication effort, the ministries of health welcomed the possibility of leveraging the resulting health care delivery infrastructure to tackle more diseases.

"The Carter Center focuses on often-overlooked diseases, applying simple strategies and effective medicines that will dramatically improve the quality of life for endemic communities. These also are diseases that people working in their own communities can control or eliminate themselves," says Dr. Frank Richards, technical director of the Carter Center's river blindness, schistosomiasis, and lymphatic filariasis programs.

Including several interventions at each visit is not only a matter of efficiency but also of ethics. "Health program workers visiting endemic villages for one disease often are asked what could be done about other diseases. It is shortsighted to be in a village giving medicine only for schistosomiasis when it is possible also to treat

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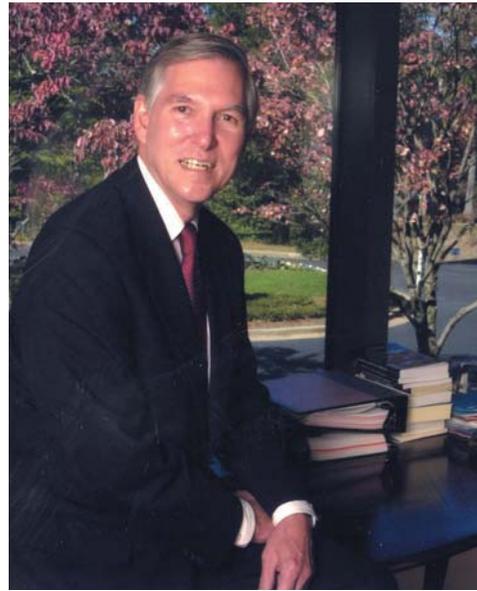


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The Carter Center observed democracy in action as historic elections occurred in the Palestinian Territories and Mozambique. Chinese election officials, meanwhile, watched voting in the United States to see what procedures they could adapt. Read more on pp. 4-7.

From the Executive Director

The election of John Moores as the Carter Center's new chairman of the Board of Trustees this March, reported in the media, marked



Annemarie Poyo

Dr. John Hardman

the latest step in a transition process for the long-term governance of the Center put in place by President and Mrs. Carter and the board during the last decade.

Mr. Moores has been actively engaged at the Center as a member of the board since 1994. A successful San Diego businessman, owner of the San Diego Padres, and recent chairman of the California Board of Regents, he first became involved with the Center through his philanthropy to prevent river blindness. Since then, he has traveled to Center projects worldwide, becoming engaged in the full range of our work in peace and health.

President and Mrs. Carter have unique roles at the Center and around the world. Their broad-based vision of human rights and compassion for the world's neediest people are embodied in every facet of the Center's work and will be their legacy at The Carter Center for generations to come.

Although they have stepped down as chair and vice chair of the board, they

remain as permanent trustees, and their good health and stamina promise that they will be engaged in Center activities for many years to come. This year, the Carters plan to lead election missions to Ethiopia, the Palestinian territories, and Liberia; host conferences on mental health and human rights; and assess our health programs on the ground in Africa as well as continue fund-raising activities for the Center's work.

Other strategic steps at the Center also have strengthened our base for the future: a strong partnership with Emory University, the success of our recent campaign to add \$150 million to the Center's endowment, the assembly of a highly skilled staff of professionals who lead and implement the Center's work, and a solid track record of achievement.

With this strong foundation, and working together with our partners around the world, the Center will continue to wage peace, fight disease, and build hope for suffering people indefinitely into the future.

continued from cover page

Disease, cont.

lymphatic filariasis. Some children need medicine for both," says Richards.

Some drugs can treat more than one disease, such as Mectizan®, which treats river blindness and when combined with albendazole also prevents lymphatic

filariasis. Health education to prevent trachoma by proper hygiene promotes personal habits that can prevent infections from other diseases. Distribution of bed nets to prevent lymphatic filariasis also helps to prevent malaria.

Integration of these vital health interventions means The Carter Center and others can do more despite the many

physical obstacles and limited resources disease control programs face. This further development of disease surveillance and health care delivery systems also improves nations' capacities to sustain key health treatments to their populations over the long term.

Most importantly, some of the world's most forgotten people will suffer no longer from forgotten diseases.



All Photos: Emily Staub

Dr. Frank Richards talks with a 30-year-old man who suffers from lymphatic filariasis. The Carter Center, in partnership with the national program, works in Nigeria's Plateau and Nasarawa states.



River blindness often affects many in one village. In the village of Cambre, the chief's vision improved after taking Mectizan, and he quickly spread the word to other villagers.



This boy from Kwa'al village waits to receive his praziquantel tablets. Nigeria is the most schistosomiasis-endemic country in Africa.

Profile: Dr. Thom Bornemann

Director Sees Need to Integrate Mental Health Into Health Care System

Although the words “reduce stigma” do not appear in the name of any initiatives of the Mental Health Program Thom Bornemann directs, the concept is embodied in virtually everything the program does.

“Mental disorders are among the most prevalent of all health conditions,” said Dr. Bornemann. “We have effective treatments available, but the vast majority of people who need treatments do not get them, in part because our system distinguishes between physical and mental illnesses. That we separate the brain from the rest of the organism is folly, and yet we’ve organized our health care system that way.”



Annemarie Poyo

Dr. Thom Bornemann, who joined the Center in 2002, said the Center’s success in bringing together the mental health community can help those with mental disorders rejoin their families and jobs.

Reducing the stigma against mental illnesses in many ways, including increased access to care, is a cause Dr. Bornemann has pursued throughout his career—from early work in a psychiatric emergency clinic in San Francisco to developing a national mental health program for refugees. Acutely interested in finding ways to apply research to clinical practice and integrate mental health into the larger public health

policy arena, Dr. Bornemann found joining the Center in 2002 a natural evolution for him.

“Our field, not unlike other fields, includes competing interests,” said Dr. Bornemann. “A policy-maker may be most interested in the efficiency and effectiveness of programs, whereas a consumer of mental health services may be interested in housing, a decent wage, and the opportunity to rejoin his or her community. The Carter Center’s program is recognized as an honest, fair-minded broker, working well with a host of constituents to promote resolution and action.”

The program brings government policy-makers, academics, advocates, and consumers together through the annual Rosalynn Carter Symposium on Mental Health Policy, now in its 20th year. “We offer a rare opportunity for leadership from all sectors of the community to come together on an issue of national concern, such as the need to transform mental health care for families and children,” said Bornemann. “In recent years, we’ve conducted follow-up studies to identify actions symposium participants have taken to make concrete progress. We try to go beyond professional meetings where people network and then resume business as usual, because we’re in a field where business as usual is not acceptable.”

Dr. Bornemann and his staff also work with Georgia mental health organizations to produce a yearly state-level forum, which will focus in May 2005 on Georgia’s move to managed care in the taxpayer-

funded Medicaid program. An even broader avenue for making gains is the fellowship program for mental health journalism. “The anti-stigma message was really the impetus for the program, which encourages journalists to report more accurately about mental illnesses, reducing stereotypical information and developing a better-informed media and public,” Dr. Bornemann said. Results have been tangible. For example, one fellow produced a series of articles on the Oregon mental health system that led to legislative action.

“Since Mrs. Carter began her work in mental health, we have moved from a focus on lessening symptoms to a concept of recovery. Her impact in this field has been deep and constant.”

— THOM BORNEMANN

“There’s not a country on this planet that doesn’t have tremendous difficulties with stigma, often leading to profound forms of discrimination against people and families of people with mental disorders,” said Dr. Bornemann. “If we at The Carter Center can help the mental health community in this country become more effective and are able to communicate that success to our colleagues around the world and learn from them as well, we can help people get back on their feet to rejoin the work force, start leading more enriched lives, and have relationships again in communities and with their families.”

Mozambican Elections Face Challenges in Years Ahead

In December, The Carter Center monitored the presidential and legislative elections in Mozambique, supporting the southeast African nation as it looks to a better future since ending a brutal civil war in 1992.

The Center's observers, led by former U.S. President Jimmy Carter, his wife, Rosalynn, and former Benin President Nicéphore Soglo, reported most of the 1,000 polling stations they visited to be well-organized, fully staffed with poll workers and election materials, and functioning effectively. Voter turnout, though, was low, with fewer than 40 percent of eligible voters casting a ballot during the Dec. 1-2, 2004, elections.

Also of concern were significant procedural irregularities during the

tabulation of results. The electoral authorities were inadequately prepared with computer software and never released a final list of polling stations, making it difficult to independently confirm official results. When the preliminary results were released after the legally required deadline, several formal petitions were lodged with the constitutional council. Although the council shared some of these concerns, the petitions were rejected, and the irregularities were deemed insufficient to alter the overall presidential election result. Ruling party Frelimo presidential candidate Armando Guebuza received 63 percent of the vote, trailed by Renamo party leader Afonso Dhlakama with 32 percent. Dhlakama's



Grant Lee Neuenburg

Carter Center Executive Director John Hardman and former Benin President Nicéphore Soglo note low voter turnout at one of the polling sites they observed.



Kay Torrance

Mozambique field office representative Nicolás Bravo records a poll location on his observation forms.



A poll worker signs the registration paper of an election observer showing the sites she visited.

party has rejected the results, leaving Mozambique's democracy facing a more uncertain future than anticipated.

"Mozambique has achieved notable success in rebuilding its economy since the end of the war and holding regular multi-party elections," said Dr. David Pottie, senior program associate of the Democracy Program. "The Center observed elections in 1999, 2003, and 2004, and while Mozambique is to be congratulated for the achievement of a peaceful voting process, persistent and serious problems with the voter register and tabulation of votes must be addressed to ensure that voter choice is reflected in credible, final results."

Chinese Officials Observe Voting in United States

Election officials in China provide great customer service: They bring the ballot box to voters' homes after dinner to ensure a turnout of at least 51 percent. But as Chinese citizens become more politically engaged, election officials will have to look at instituting other practices, such as requiring ballots to be cast at polling sites, much as other countries do.

Voting procedures were just one of a range of items 35 election officials from China's National People's Congress and Ministry of Civil Affairs observed on Election Day in Atlanta and Chattanooga, Tenn., Nov. 2. The group was hosted by The Carter Center.

While China is still a one-party system, the central government began direct village elections in 1988 to help maintain social and political order in the context of rapid economic reforms. The success of village elections has led to direct township and county elections. The increased voter participation has highlighted some deficiencies of China's election law, which the National People's Congress has begun to amend.

"Our visitors observed voter registration, voting, ballot counting, and verification procedures to see if some of the measures could be adopted in China," said Dr. Yawei Liu, associate director of the Center's China Village Elections Project. "They also examined local campaigning, which has become a central issue in village elections."

Several of the Chinese observers were surprised at how orderly U.S. Election Day was.

"Voters wait patiently in line," said Jinhua Wang, who works in Beijing and is responsible for national coordination of village elections. "There was a big crowd, a long line, and no one gets impatient."

Elections in China are quite different, explained Baiyu Tang, an election official from central China's Hunan province. Polling sites are decorated and dance groups perform—all in an effort to attract

enough voters to legitimize an election.

"Here you just open a school and people come," she said.

At local party headquarters, the Chinese officials learned how U.S. candidates campaign. The Chinese do not use the word "campaign," but rather "introduction." Introductions of candidates must be organized—and therefore monitored—by election officials. In some recent elections, candidates began to campaign independently, catching officials by surprise, Dr. Liu said. Many Chinese election officials have said if the current election law is not revised significantly, competition will be stifled.

The Center's election project provides assistance to local election officials to increase the openness and competitiveness of village and local People's Congress deputy elections. In addition to hosting delegations in the United States, Dr. Liu has observed village-, township-, and county-level elections in China.

"There are many ways The Carter Center has helped us," Wang said. "The Center is helping us to promote our elections among voters. The Center also sends an observer mission to China every year and makes recommendations to us. The exchange between China and the United States is very important."



All Photos: Annemarie Poyo

Dr. Yawei Liu of the Center's China Village Elections Project explains how candidates are listed on a paper ballot at a polling site in Douglasville, Ga. Paper ballots are provided to voters as an example of what they will see on the touch-screen computers.



Poll manager Joe Buckner explains voting procedures to Chinese election officials. The officials were surprised at the high turnout in the United States, something not seen in many Chinese villages.

Palestinian Election Renews Opportunity for Democracy and Peace in the Middle East

Former U.S. President Jimmy Carter and The Carter Center witnessed a new era in Palestinian politics when they observed the Jan. 9 election of Mahmoud Abbas, an election many hope will create new opportunities for peace in the Middle East.

"The death of Yasser Arafat and the swift transition to new leadership have revived Palestinians' optimism about a future peace process," President Carter said. "The election sets an important example of the potential for democracy in the Arab world."

President Carter, former New Jersey Governor Christine Todd Whitman, and former Sweden Prime Minister Carl Bildt led a delegation of 80 observers organized by the National Democratic Institute to the West Bank and Gaza. Overall, the delegation found the election to be orderly, well-administered, and with few incidents of violence. However, the election was tarnished by the fact that the Palestinian security apparatus and elements of the Palestinian Authority pressured the Central Election Commission to

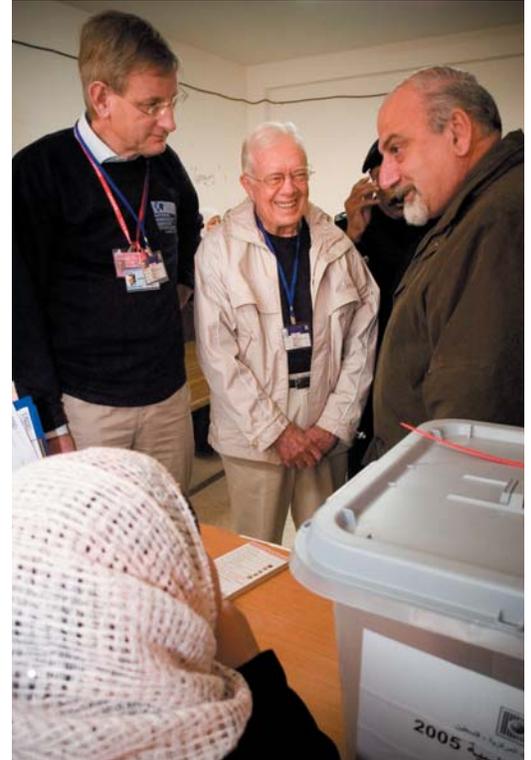
announce several last-minute changes on Election Day to extend voting and increase turnout.

"The election sets an important example of the potential for democracy in the Arab world."

— JIMMY CARTER

Center observers visited sites in both the West Bank and East Jerusalem, where a small number of eligible Palestinians living there were assigned to vote at the post offices. The Israeli government wanted voting in East Jerusalem to take place at post offices in order to consider it as similar to casting absentee ballots, with the sites administered by Israeli postal officials.

"The post office polling sites were of particular concern to Carter Center and NDI observers because of the



Former Swedish Prime Minister Carl Bildt and President Carter listen to their translator while observing voting at a Jerusalem polling site.

A Closer Look at the Palestinian Election

Carter Center experts Matthew Hodes, director of the Conflict Resolution Program, and Dr. David Carroll of the Democracy Program were members of the observer delegation to the Palestinian election, which was jointly organized by The Carter Center and the National Democratic Institute.

What role did observers play at the Palestinian election?

Carroll: The main purposes of international observation are to provide an independent assessment of the quality of an electoral process and to demonstrate the support of the international community. The presence of impartial and respected observer groups

helps build confidence that the process is conducted transparently and without interference. In the West Bank and Gaza, reports by NDI and Carter Center observers confirmed the election went smoothly and without significant problems, in spite of the difficult conditions arising from occupation and ongoing conflict. In East Jerusalem well before polls closed, we brought to the attention of electoral authorities administrative problems preventing people from voting, and they addressed the problems.

Has significant progress been made toward Palestinian self-governance?

Carroll: Yasser Arafat's death provided an opportunity for a new era of democratic



All Photos: Thomas S. England

A poll worker inks the thumb of a voter to show he has voted. Voters' hands are checked for ink before they are allowed to vote to ensure anyone voting is doing so for the first time.



A Palestinian woman casts her ballot in the West Bank.

political sensitivity surrounding East Jerusalem and because problems occurred at post office sites in the 1996 elections,” said Dr. David Carroll, acting director of the Center’s Democracy Program. “When we arrived at the post office stations in the morning, it was immediately evident that most voters were not on the registry and were being turned away.”

leadership and governance for the Palestinian people. While the 1996 elections, which The Carter Center observed, were a milestone in moving toward democracy, the 2005 election took place in a dramatically different context. The field of candidates was competitive, and the elections provided Palestinians with an opportunity to select new leaders, who they intend to hold accountable on a range of concerns. The successful presidential election sets the stage for the important upcoming elections for the Palestinian Legislative Council and for additional municipal elections scheduled to take place this year. If completed successfully, this cycle of elections will yield new political leadership, reflecting broad participation among Palestinians and with full potential for independent self-government.

Mahmoud Abbas was elected president of the Palestinian Authority, January 2005.

President Carter helped the Israeli officials and the Palestinians reach a



An election official checks a voter’s identification against the list of voters at a post office polling site in East Jerusalem.

compromise: Any Palestinian living in East Jerusalem could vote at any of the six sites with proper registration documents, provided foreign observers selected by the Palestinians recorded the names.

What does this election mean to democracy in the region?

Carroll: The election shows Arab peoples and leaders that citizens’ yearnings for democracy can and should be met and that democratic renewal strengthens political legitimacy. Many people see the election as an opportunity for a new leader to recommit to the peace process and make real progress in negotiations with Israel.

Is there renewed optimism in the process to achieve peace between the Israelis and Palestinians?

Hodes: Polling data suggest a majority of Palestinians are optimistic in this regard, a one-third increase over data obtained before Arafat’s death. The election means to Palestinians that the new president is

now an elected politician whose success will be measured by what he delivers to his constituents. They are anxious to see what he can do.

How has recent violence impacted the peace process?

Hodes: Violence since the election has only served to galvanize the new president, Mahmud Abbas, to move quickly to try and consolidate his security services and show his seriousness in trying to combat violence. He is already trying to talk to groups that have used violence, such as Hamas, the Palestinian Islamic Jihad, and the Al-Aqsa Martyrs’ Brigade, to reach agreements on long-term cease-fires that may provide the necessary room to pursue a revival of the peace process.

Guinea Worm Disease Eradication Campaign Builds on Extraordinary Opportunities

Gates Foundation Offers Challenge

The Carter Center's Guinea worm disease eradication effort saw a 50 percent reduction in cases during 2004—the largest percentage drop in a single year since the program began. With a fraction of 1 percent of the disease remaining, Guinea worm is poised to become the first parasitic disease eradicated in human history.

Building on this momentum, in April the Bill & Melinda Gates Foundation

pledged \$25 million to expedite the fight against this debilitating disease. With an outright \$5 million contribution this year, the Gates Foundation challenged the Center to raise an additional \$20 million—\$5 million each year for the next four years, which the foundation will match dollar for dollar. The government of Canada, through the Canadian International Development Agency pledging \$5 million over five years, and

the Conrad N. Hilton Foundation, pledging \$1 million over four years, were the first to respond to the Gates challenge. When the challenge is complete, a total of \$45 million will have been raised to help conclude the Center's Guinea Worm Eradication Program.



Emily Staub

A waterborne parasite, Guinea worm disease is contracted when people drink contaminated water. Inside the abdomen, Guinea worm larvae can mature and grow into threadlike worms as long as three feet. The slow, painful emergence of the mature worm through a blister in the skin interrupts family and community life, keeping children from school and farmers from their fields.

“Guinea worm disease eradication is an investment—an economic, domestic, international, and human investment.”

— JIMMY CARTER

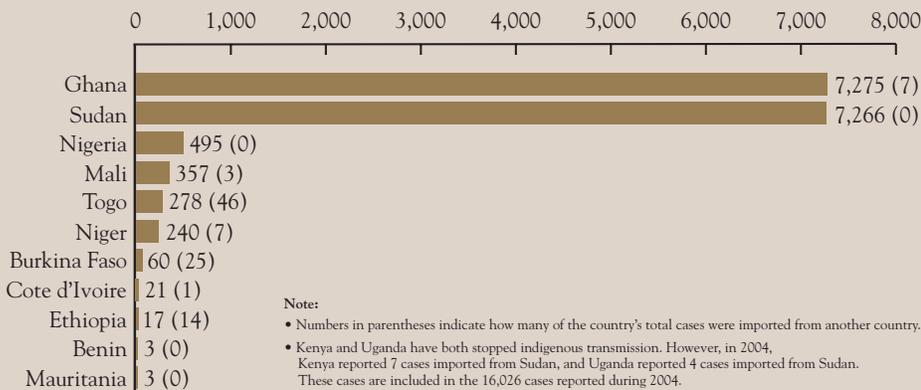
“The energy building in the field and the support of the Gates Foundation bring a sense of real immediacy and opportunity to our goal of eradicating Guinea worm disease. We began with an estimated 3.5 million cases in 1986. Today, there are approximately 16,000 cases. But these last cases will be the most difficult and costly to eradicate. Maintaining high-quality surveillance and immediate response will continue to be huge challenges,” said Dr. Donald Hopkins, Carter Center associate executive director for health programs.

Another impetus for success is the historic peace agreement signed between

*To participate in this historic effort,
Your support will be matched dollar for dollar*

DISTRIBUTION BY COUNTRY OF 16,026 CASES OF DRACUNCULIASIS REPORTED DURING 2004

Number of Cases



To date, nine countries have stopped Guinea worm disease transmission: Uganda, 2003; Central African Republic, 2001; Chad, 1998; Cameroon, 1997; Yemen, 1997; Senegal, 1997; India, 1996; Kenya, 1994; Pakistan, 1993.

northern and southern Sudan in January. "Now the program will have unprecedented access to previously inaccessible areas in Sudan, which have many of the remaining cases of Guinea worm disease," Dr. Hopkins said.

Approximately 16,000 cases of Guinea worm remain in the world.

So far, the new year has shown extraordinary opportunities to reduce cases, with improved funding and increased awareness bringing high hopes that 2005 will be a pivotal year for Guinea worm eradication.

Lions Close Gap in River Blindness Challenge

The Lions Clubs International Foundation has pledged \$2 million to The Carter Center to help eliminate river blindness (onchocerciasis) from the Americas by the end of the decade.

The Lions' contribution will be matched on a dollar-for-dollar basis by the Bill & Melinda Gates Foundation, which pledged \$10 million, including a \$5 million challenge grant, in 2003 to encourage enough financial support to halt transmission of the disease in the Americas by the end of this decade. The Gates Foundation also will match a recent \$1 million pledge from Merck & Co., Inc.

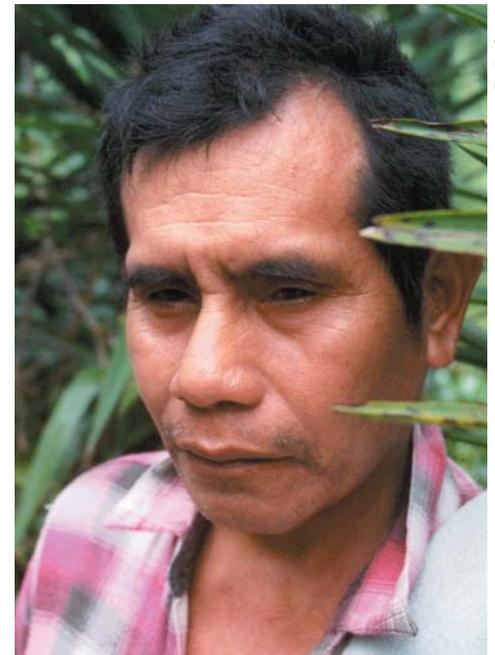
In Latin America and Africa, Lions Clubs provide an army of local volunteers who, in conjunction with The Carter Center and ministries of health, hold workshops for policy-makers and community leaders, help monitor distribution of medication, and encourage local governments to contribute to efforts to eliminate river blindness. Through the

foundation's SightFirst program, Lions has granted The Carter Center more than \$20 million to prevent river blindness and trachoma worldwide.

The Carter Center sponsors the Onchocerciasis Elimination Program for the Americas, whose partnership includes Lions, the Pan American Health Organization, and the ministries of health of the six affected countries of Latin America: Brazil, Colombia, Ecuador, Guatemala, Mexico, and Venezuela.

In 2004, OEPA delivered more than 850,000 treatments of Mectizan, a safe and effective oral tablet donated by Merck & Co., reaching more than 85 percent of the people at risk for contracting onchocerciasis. Maintaining at least 85 percent treatment coverage is necessary to eliminate the disease from the region.

Of the \$5 million required to complete the Gates challenge, only \$1 million in matching funds still needs to be raised.



Emily Staub

This Guatemalan man has impaired vision, an early symptom of river blindness. He works on a coffee plantation divided by a fast-flowing river where thousands of black flies breed and transmit the disease.

visit www.cartercenter.org.
by the Bill & Melinda Gates Foundation.

Ethiopia Public Health Training Equips Future Generations, Reaches Rural Areas

In Ethiopia, a nation where less than half of the population has access to modern medicine, a partnership among The Carter Center, the Ethiopian ministries of education and health, and seven national universities and colleges is changing a desperate situation into a legacy of hope.

Shelly Brownsberger



Dr. Hailu Yeneneh, resident technical adviser for the Ethiopia Public Health Training Initiative, began his career 35 years ago as a grassroots health officer in the Ethiopian government's Global Health Center. Now, after earning a medical degree and a doctorate, teaching, researching, and directing a research institution, Dr. Hailu says he finds himself back on the front lines, "chipping in whatever I can to advance public health in Ethiopia."



Joyce Murray

More than 85 percent of Ethiopians live in rural areas, and life expectancy in the country is 41 years.

"Ethiopians now have reason to believe their community coalitions and ingenuity can have far greater impact than foreign aid or relief work ever could," says Dr. Hailu Yeneneh, resident technical adviser of the Carter Center's Ethiopia Public Health Training Initiative.

Since 1991, upon invitation from Prime Minister Meles Zenawi, The Carter Center has provided vital support and

technical expertise for the Ethiopian government's plan to expand modern health care to millions of villagers located in rural communities.

Through the initiative, The Carter Center and seven Ethiopian universities work to strengthen the teaching of health

science faculty, develop health-related teaching and learning materials, and improve learning environments.

Ethiopian teachers work side by side with international experts to develop curricula and learning materials that emphasize local experience. These materials are used to train health students, who, in turn, train and manage community health workers.

By establishing more than 600 rural health centers, the Ethiopian government is striving to dramatically increase health delivery for 90 percent of Ethiopians.

The initiative's work was truly put to the test in 2002 when a drought threatened the lives of 14 million Ethiopians. Although severe droughts are a recurring problem in Ethiopia, it had been decades since university communities had gone out to serve the rural areas in response to disasters, explained Dr. Hailu.

Yet, thanks to the expertise and leadership of Dr. Hailu and other program workers, the Center's Ethiopia Public Health Training Initiative was in a unique position to avert disaster. The use of the initiative's intervention models enabled a quick response to drought-related health and nutritional problems and facilitated the deployment of more than 2,000 students to rural, drought-afflicted villages. Program participants constructed wells, provided health education, built latrines, gathered data, and administered basic health care in a targeted response that changed the country's course.

"Ethiopians now have reason to believe their community coalitions and ingenuity can have far greater impact."

— DR. HAILU YENENEH

"Individual teachers whom we had seen give up on their professions are now impassioned and invigorated to share knowledge with the next generation. And students who had watched the anguish of their fellow citizens helplessly and hopelessly from afar are now, for the first time, experiencing the empowerment that comes with contributing to the alleviation of suffering," said Dr. Hailu. "We all learned a lot about ourselves and our country."

Winter Weekend Auction Bidders Help Advance Peace and Health

Carter Center friends and supporters participated in the 13th annual Winter Weekend live and silent auctions held Feb. 12 in Snowbird, Utah. The silent auction set two new records, raising a record \$42,936 with more online bidders winning valuable collectibles than ever before. Together, the auctions raised \$875,036 to advance the Center's work in waging peace and fighting disease worldwide.

The highest bids were \$200,000 for President Carter's oil painting of the Carter Center grounds; \$77,500 for a signed photo of Presidents Clinton, Ford, Carter, and Bush; \$75,000 for another signed photo of those same presidents; \$45,000 for a



Brent Slay, President Carter, Dianne Slay, and Brett Brinker celebrate Brent's purchase of two signed guitars.



Sandy Libby and John Rendon purchased a print of President Carter's painting "Our Mountain Home."

weeklong cruise on a 152-foot luxury yacht; and \$40,000 for a diamond cross pendant. A complete list of all the winning bids is on www.cartercenter.org. Winter Weekend is a relaxing, by-invitation event with the Carters for existing Center donors.

Ambassadors Circle and Legacy Circle Donors Hear Updates

Carter Center Ambassadors Circle and Legacy Circle members gathered in Atlanta April 14-15 to attend an informative, inspirational meeting with President and Mrs. Carter and experts throughout the Center.

Activities included special briefings by the Center's peace and health program staff on systems of mental health care for children, the status of the Guinea worm eradication campaign, a project with the United Nations to establish standards for observing elections, and the plights of human rights defenders, among others.

Eric and Mary Weinmann of Washington, D.C., Center donors since 1994, are members of both the Ambassadors Circle and The Carter Legacy Circle. "The work of the Center is very important to us," said Mrs. Weinmann. "When I look at photographs of election monitoring in Venezuela, the Middle East, and Mozambique, I find it exciting for all of us—for the whole world—that The



Mr. and Mrs. Eric Weinmann attend the 2005 Ambassadors Circle and Legacy Circle meeting in Atlanta.

Carter Center seeks solutions and faces challenges by taking action."

"I particularly remember an earlier presentation about pipe filters," said Mr. Weinmann. "This simple and practical design is a superb example of the way in which the Center has put an idea into action to help eradicate Guinea worm disease."

Founded in 1997 by President and Mrs. Carter, the Ambassadors Circle recognizes the vision and generosity of individuals who support the Carter Center's operations and program needs with unrestricted gifts of \$1,000 or more annually. The Carter Legacy Circle honors those who provide for the future of the Center's work through planned gifts, such as a bequest in their will, charitable gift annuities, trusts, or other deferred giving instruments.

Ambassadors Circle and Legacy Circle members traveled to Plains to visit President and Mrs. Carter's hometown.

For more information about Ambassadors Circle, please call Seema Shams at (800) 550-3560, ext. 134. For Legacy Circle, contact Rhonda Schultz at (800) 550-3560, ext. 868.

President Carter Gives Keynote at OAS

Former U.S. President Jimmy Carter called on leaders and citizens of the Western Hemisphere to strengthen the OAS Inter-American Democratic Charter in a keynote speech Jan. 25 of the inaugural Lecture Series of the Americas at the Organization of American States in Washington.

The charter—approved by the OAS on Sept. 11, 2001—provides an opportunity for member countries to take responsibility for regional democracy but does not spell out specific responses to be taken when there is an interruption of democracy.

The charter rarely has been invoked by the OAS or a sitting president. The Carter Center, concerned that in recent years several presidents in the Western Hemisphere have failed to finish their terms, is forming a group to promote better use of the charter.



“Right now the charter is vague in defining conditions that would constitute a violation of the charter,” President Carter said. “The charter also requires the consent of the affected government even to evaluate a threat to democracy.”

President Carter recommended eight conditions that would constitute an interruption of democracy, including failing to hold elections that do not meet minimal international standards, arbitrarily removing members of the judiciary or electoral bodies, and silencing the political opposition, press, or civil society.

Final Report on Venezuela Referendum Released; No Fraud Found

The Carter Center released its final report Feb. 25 on its observation mission for the Aug. 15, 2004, presidential recall referendum in Venezuela. The report includes a postelection study by an independent panel of statisticians and computer security experts, which confirmed earlier conclusions that there was no evidence of fraud. In addition, the Center released a second report, on its peacebuilding efforts in Venezuela since June 2002.

Between the 1998 and 2000 Venezuelan elections, The Carter Center maintained a nearly constant presence in the country and conducted 10 study missions.

Exhibit Features Exquisite Handwork

One of China's greatest artistic traditions, the embroideries of



All Photos: Carter Presidential Library

Suzhou, are on display at the Jimmy Carter Library and Museum in Atlanta, Ga., through June 11. The 32-piece collection includes colorful landscapes, animals, portraits, and flowers by Gu Wenxia, Grand Master Embroiderer of China, and her protégé, Yu Fuzhen, Grand Master Embroiderer of Jiangsu province.

Grand Master Gu developed the design for the world-famous double-sided “Kitten Playing With Mantis,” which has become the most popular official gift from China to American presidents.

The Carter Presidential Library and Museum is the sole venue for this show outside China.



From June 2002, the Organization of American States and The Carter Center worked with the government and the opposition to help resolve issues between them, including terms for a presidential recall referendum. The Center supported the efforts of the OAS secretary-general to facilitate dialogue and worked at the highest political levels as well as intermediate social levels toward reconciliation and peaceful resolution of conflicts. After a May 2003 agreement between the government and opposition to work toward a peaceful resolution, the Center, together with the OAS, observed all the steps leading to the referendum, including the collection of signatures to petition for a referendum, the verification of signatures, and the vote.

The full text of the report is available at www.cartercenter.org.