

Shiplen

- Overview
- Senegal



The Trip of The First Lady
Hillary Rodham Clinton

to

Senegal,
South Africa,
Zimbabwe,
Tanzania
Uganda,
and Eritrea

March 15-29, 1997

TRIP OF THE FIRST LADY TO AFRICA
MARCH 16 - 30, 1997

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Africa Overview: U.S. Policy and Interests

U.S. policy objectives in Africa are to build an increasingly democratic, market-based and peaceful region, open to U.S. trade and investment and integrated into the global economy. Our goals for sub-Saharan Africa take into account the profound changes sweeping the continent, and the need to support dramatic political and economic reforms being initiated by Africans themselves, including increased democratization, economic reforms and opening of markets, efforts to eliminate conflict, build awareness of environmental stewardship requirement, and empower women and children.

A fundamental tenet of U.S. policy in Africa is our desire to assist Africa's integration into the global economy by achieving widespread reform of African economies, many of which are still making the difficult transition from the inefficient, state-dominated structures of the Cold War era to systems which encourage and reward free enterprise. Carefully focused American contributions to sustainable development in Africa can also help reduce aid dependency; however, private sector-led growth fueled by open markets, trade and investment offers the best hope for Africans to achieve long-term economic and political objectives. We are vigorously pursuing new opportunities for U.S. firms in emerging African markets, which can stimulate new export-sector jobs for American workers.

Through bilateral and multilateral programs and intense diplomatic engagement, we are actively promoting stable, honest, and democratic governments. Good governance can only be sustained through respect for human rights, free and fair elections, strong civic institutions, and the effective assumption of responsibility by Africans for their own affairs.

Man-made and natural emergencies in Africa continue to require substantial levels of assistance including nearly \$1 billion in the Great Lakes region since 1994. We are actively involved in helping alleviate the human suffering being endured by many Africans, especially women and children. In light of the ongoing fighting in Zaire, the continuing effects of the civil wars in Angola, Burundi, Somalia, and Liberia, Africa today hosts about one-third of the world's refugees, 80 percent of whom are women and children. Even in traditional African societies not wracked by conflict, women remain second-class citizens, as they and their children must struggle each day to meet the most basic of human needs. We are promoting peace through diplomatic efforts to resolve current conflicts in the Great Lakes crisis in central Africa, Liberia, Angola, and elsewhere, while working to strengthen the capacity of African institutions to prevent future conflicts.

To enhance the capabilities of selected African militaries to respond collectively to humanitarian and peacekeeping crises, we are working with potential African troop contributors and donors, the UN and the OAU to create an African Crisis Response Force (ACRF).

Elsewhere, we are seeking to address effectively Africa's widespread human suffering and poverty, including the ravages of HIV/AIDS. This will require greater donor coordination to maximize the positive impact of limited resources dedicated to education, improving health care, and meeting basic human needs - all of which will contribute significantly to raising living standards.

We are also working with our African counterparts to minimize environmental degradation, which has had a significant impact on the global climate and threatens the biodiversity riches of the continent. Unless population pressures against African ecosystems are lessened, both environmental and development goals will be unattainable. With African partners, we seek ways to reverse the effects of environmental degradation and to restrain population growth in Africa.

In pursuing U.S. policy and interests in Africa, we face a number of potential pitfalls. Protracted crises tax diplomatic, financial, military and humanitarian resources. In the United States, resource allocations have shrunk from \$800 million annually to less than \$650 million as overall aid levels have declined. Yet the political and economic revolutions spreading throughout Africa today will only succeed as the development process becomes participatory.

USAID is our principal bilateral conduit for long-term development assistance, with programs designed to encourage economic growth, stabilize population, improve health, protect the environment, and build democracy. Our FY 98 request of \$700 million in development assistance for Africa represents a slight increase over our appropriation the last two years, but is still 13 percent below the FY 95 appropriation.

Other accounts serve U.S. interests to prevent and mitigate conflicts and promote democracy. The Administration is requesting \$15 million in Voluntary Peacekeeping and \$5 million in Foreign Military Financing in FY98 to finance the African Crisis Response Force, and \$25 million in Economic Support Funds to support democracy programs throughout the region. The United States has also contributed \$3 million each in FY 96 and FY 97 voluntary peacekeeping funds to support development of the OAU Conflict Management Center.

In the last few years, U.S. resources provided relief during crises in Liberia, Rwanda, Ethiopia, Mozambique, and other African countries. U.S. humanitarian aid includes PL-480 food grants, refugee assistance, and disaster relief. Through these accounts, the United States provided about \$760 million in emergency aid to Africa in FY 96. In addition, the Peace Corps is active in 34 countries across Africa.



DEPARTMENT OF THE TREASURY
WASHINGTON, D.C.

SECRETARY OF THE TREASURY

March 14, 1997

MEMORANDUM FOR: HILLARY RODHAM CLINTON

FROM: Robert E. Rubin *R. E. R.*

SUBJECT: Your Africa Trip

As background for your trip, I thought you might be interested in the following brief overview of recent economic and policy developments in sub-Saharan Africa. I also attach thumbnail sketches by my staff of the countries you will be visiting. I hope you will find this useful.

Africa: Beginnings of a Turnaround?

The end of the Cold War and of apartheid have fundamentally changed the economic and political landscape in sub-Saharan Africa. Marxist regimes have collapsed, most post-colonial wars have ended, and statist economic policies are seen to have failed. Since 1990, 25 African countries (including all those you will visit except Eritrea) have held elections generally recognized as free and fair. Many African governments are beginning to get their economic frameworks right.

The effects already are apparent. According to the World Bank, the region's average annual growth rates have risen from 1.4% in 1991-94 to 4% in 1995, vs. average population growth of 3%. While the averages mask wide variations, per capita incomes rose in 28 countries in 1995. In stronger reformers such as Senegal, Ghana, Ethiopia, and Cote d'Ivoire, growth rates were in the 5-6% range, while a very few like Uganda grew by 10%. In contrast to much recent African experience, the worst performers such as Liberia and Zaire seem more the exception than the rule.

How to Sustain Growth?

The good results are due mainly to stabilization policies such as reducing budget deficits, freeing exchange rates, improving producer prices for farmers, and forcing public enterprises to begin paying their own way. This helps the poor by reducing inflation and freeing resources for such purposes as basic health and education. But many African economies still are hobbled by bloated governments, dependence on a few commodity exports, and debt burdens from past mistakes. Saving and investment rates are low, the private sector is small, and infrastructure is decrepit. The region is more closed to trade and investment than any other region of the globe.

The IMF, which addresses macroeconomic stability, and the World Bank, which focusses on microeconomics and development issues, provide the largest share of policy guidance, technical help, and financial support for reform. Our stake in these institutions enables us to leverage our financial contribution with those of other countries. We are using our influence to steer more of their resources toward borrowers that have shown the strongest commitment to reform. Despite

the progress shown by many African reformers, however, most of them still are very poor and highly dependent on concessional assistance. This underscores the importance of our budget request for the IMF's ESAF and the World Bank's IDA, to which Congress has not been as receptive as it once was.

Africa's heavy debt burden -- almost as large as its total GDP -- is another major constraint on economic reform and growth. That explains the importance of another major Administration initiative: debt reduction for the most heavily indebted poor countries (HIPC), combining debt reduction by the IMF and other international financial institutions with bilateral debt reduction in the Paris Club of up to 80% for countries that are implementing effective reform programs and need this level of relief. The first candidate for HIPC debt relief is Uganda, whose program is being considered this month.

The resistance of vested interests, and the short-term pain associated with austerity programs, have made it difficult for many African governments to sustain their reforms. Progress has been much too slow; at 5% annual growth rates it would take nearly forty years -- two generations -- for per capita income in a typical African country to grow from, say, \$400 to \$800. In the United States, by contrast, our average inflation-adjusted per capita income (roughly \$26,000) grew by \$388 in 1995-96 alone. Clearly, something more than the current reform agenda is needed.

A Trade and Development Initiative for Africa:

The Administration, in cooperation with several members of Congress, is working on an initiative for inclusion early in April in a bipartisan bill that could be passed as early as this summer.

At the heart of our thinking is the recognition that successful emerging market countries in other parts of the world are much more open than Africa to trade and investment. Such openness not only brings with it capital, technology, and market access, it also brings competition that forces other beneficial changes, promoting economic diversification and faster growth. In return for positive steps by African governments to liberalize their trade and investment regimes, our initiative is likely to include at least the following elements:

- Improved access to the U.S. market for African exports;
- Enhanced financial support by the International Financial Institutions (IFIs), since they can provide six dollars or more of concessional lending for every dollar we provide;
- Technical assistance in trade liberalization and related areas;
- Policy dialogue to build a consensus for reform; and
- Stronger coordination with other aid donor countries.

Where Are the Success Stories?

It is long past time that we stopped speaking of Africa as an undifferentiated whole, and began to focus on the more committed economic reformers. Most of the countries you will be visiting fall into that category. Attached are some brief economic sketches of each of them.

Senegal -- Long one of Africa's most civil and democratic societies, Senegal had a poor economic record due to its stifling, statist economic system -- which also offered the ruling party many patronage opportunities. Since the 1994 currency devaluation, however, there has been a basic change of outlook, with the Finance Minister and others leading an effort to build public consensus behind a market-oriented, private sector-led strategy. After a decade of growth averaging 1.9% per year, growth was 5.2% in 1996, inflation was 3.2%, and the water company, telephone system, and some hotels and other parastatals have been privatized. Problems include a literacy rate of under 50% and unemployment as high as 45%. Both figures may be worse for women.

South Africa -- South Africa's average per capita income of \$3160 in 1995, among the highest on the continent, masks enormous racial disparities. In 1996, average white household income was nearly six times that of blacks. In addition the latter face enormous unmet needs for housing, education, and jobs; black unemployment is at least 33%. The Mandela government's goal is to reduce the disparities by fostering economic growth, improving delivery of social services, and increasing black employment. Economic growth rates rose until 1996, when the declining value of the currency and the resulting uptick in inflation and interest rates, and decline in capital flows, caused a dip in growth. The good news is that inflation, at 7.4% in 1996, still is low and exports were up strongly in 1996 due to the cheap rand. The government's goal is creation of 400,000 new jobs per year by the year 2000.

Zimbabwe -- When Ian Smith was ousted in 1980, then-Rhodesia had one of sub-Saharan Africa's most diversified economies, including sophisticated infrastructure and 25% of GDP from manufacturing. But land and other assets were mostly owned by whites. The government has stressed education and health policies and supported small farmers, but a costly public sector and poor fiscal controls have led to large budget deficits, high public borrowing and interest rates, slack investment, and corruption. By 1990, 26% of Zimbabweans lived in poverty, per capita GDP was declining, and fewer graduates were finding jobs; severe droughts in 1992 and 1995 cut farm production. GDP per capita was only \$500 in 1995, though agricultural recovery and growth in horticulture, mining and tourism produced 7% growth in 1996. The incidence of AIDS is rising.

Tanzania -- This potentially prosperous country was hamstrung by the utopian socialist policies of its first president, Julius Nyerere. The economy's failure to grow and diversify (per capita income is \$100 and the 30 million people still depend on agriculture) finally led in 1986 to an IMF/World Bank-supported reform program. Major features include abolishing pervasive state controls, especially in agriculture; promoting the private sector; liberalizing trade and exchange systems; and allowing private participation in the financial sector. Economic growth averaged 4 percent in 1986-1989, but was 3.7 percent in 1994 due to drought and corruption, and 4 percent in 1995.

Uganda -- Since hitting bottom under Idi Amin, Uganda has become sub-Saharan Africa's best success story. Beginning in 1987 a combination of political stability, strong reform backed by the World Bank and IMF, high coffee prices, and major funding by donors brought growth averaging 5 percent a year and 10 percent in 1996. With 17 million people and per capita income of just

\$225, the government's strategy emphasizes poverty reduction through labor-intensive growth, and public spending focussed on social programs such as agricultural research and extension, rural water and roads, basic health, and universal primary education. Uganda will be the first debtor country to benefit from comprehensive debt relief under the HIPC initiative.

Eritrea -- In 30 years of civil war, Eritrea's 3.5 million people developed a strong self-reliance ethic. Since independence in 1994 they have joined the IMF, World Bank, and other international organizations, and stated their desire to attract private investment, but they have been hesitant to borrow because of the presumed "leverage" debt would give foreign creditors. Development planning is at an early stage, as witnessed by the fact that Eritrea does not yet have a government budget. Partial economic data suggest real GDP growth of about 4 percent in 1995. Social indicators are discouraging, with life expectancy of about 46 years (vs. an African average of 50), child mortality of 203 per 1,000 live births, and an adult literacy rate of perhaps 20 percent.

12 March 1997

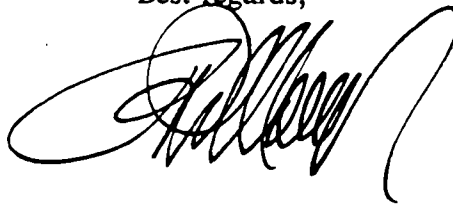
Dear Ms. Verveer,

As a follow-up to the meeting last week that the Administrator had with the First Lady, attached you will find the briefing notes we prepared on Foreign Direct Investment in Africa and a brief snapshot from a UNDP perspective of the countries you plan to visit.

I enjoyed meeting you last week and I appreciate your efforts in organizing the meeting.

I hope the First Lady finds these notes useful and I wish you both a safe and productive trip.

Best regards,



Roy D. Morey
Director

Ms. Melanne Verveer
Deputy Assistant to the President
and Deputy Chief of Staff to the
First Lady
Office of the First Lady
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**UNITED NATIONS DEVELOPMENT PROGRAMME
BRIEFING NOTE ON VISIT TO AFRICA
FOR
MRS. HILLARY CLINTON, THE FIRST LADY
UNITED STATES OF AMERICA**

Foreign Direct Investment in Africa

The argument is often made that foreign direct investment (as well as international trade) should increasingly be the answer to the achievement of sustainable human development throughout the developing world. While it is true that there has been an upsurge in foreign direct investment (FDI) in the developing world over the last ten years or so, as noted by James Gustave Speth, Administrator of UNDP, 75 percent of foreign direct investment goes to fewer than a dozen developing countries. Moreover, and this is perhaps the most startling statistic, Sub-Saharan Africa, excluding South Africa, attracted only 2.9% of global FDI to developing countries in 1995, and that share appears to be declining. Furthermore, the bulk of the FDI to Africa has gone to a number of the oil-exporting countries and to South Africa.

This stands in marked contrast, for example, to the booming economies of Northeast and Southeast Asia where foreign direct investment combined with high levels of domestic savings has increasingly superseded official development assistance as the primary engine for economic growth. In other words, and notwithstanding the fact that many Africa countries have instituted bold economic and political reforms in recent years, foreign direct investment, at least for the moment, is by no means a substitute for increased levels of international development assistance. It is clear that for the African countries to achieve sustainable human development, they will need both increased official development assistance and increased foreign direct investment. Indeed, and as noted in a recent article in the Sunday New York Times Magazine, a number of African leaders including Uganda's President Yoweri Museveni, have stated that the long-term solution to Africa's development difficulties lies in increased foreign direct investment.

There are essentially three major constraints which must be overcome if Africa is to attract greater levels of foreign direct investment. These are as follows:

1. **Weak Political and Social Infrastructure.** Many African countries still suffer from weak governmental structures, inadequate legal frameworks and other attendant problems. Oftentimes this situation is compounded by corruption. In the absence--or at least the perceived absence--of the "rule of law," overseas investors are generally reluctant to invest.

2. **Inadequate Physical Infrastructure.** Many of the Sub-Saharan African countries lag far behind the rest of the developing world in the area of physical infrastructure including roads, railways and telecommunications. This applies in particular to West and Central Africa. Political divisions imposed by the colonial authorities often discouraged intra-African cooperation.

3. **Non-viable Markets.** The small size of many African countries acts as a disincentive to foreign direct investment since investors normally require access not only to the global marketplace but to a viable domestic marketplace as well.

The **United Nations Development Programme** is currently working with many of the African countries to assist them to overcome existing constraints to higher levels of foreign direct investment as well as international trade since the two are increasingly dependent upon one another. At the country level, we are devoting a significant share of our resources to supporting the desire of African countries to improve their overall governance arrangements. This includes assistance for public administration reform and improved macro-economic management which takes into account the need for both growth and equity as well as assistance for improvements in the overall "enabling environment" for foreign direct investment.

Since our inception over thirty years ago, UNDP has been a strong proponent of inter-country cooperation in Africa including regional integration. This has been done in part because of the wide-spread recognition that regional cooperation and integration in Africa will help to create the kind of viable markets which foreign investors require. Although, as noted in the President's recent submission to the Congress of a **Comprehensive Trade and Development Policy for Africa**, "regional integration has long been an objective honored more in rhetoric than in reality in Africa," there are signs that regional integration is again being taken seriously by the African leadership. UNDP is currently associated with the revival of East African cooperation by Kenya, Tanzania and Uganda following the demise in the 1970s of the East African Community. Moreover, UNDP has been a staunch supporter since its inception of the Southern Africa Development Cooperation Conference(SADCC) which includes Zimbabwe among its members.

SENEGAL

A. Priority Development Issues

According to the 1996 Human Development Report, Senegal ranked 153 out of 176 countries with a per capita GDP of about \$558. Thirty-three percent of the population lives below the poverty line and over 80% of them are localized in rural areas. Basic human indicators on food intake, health care, education, and unemployment point out to very serious deficiencies on all those counts hitting particularly hard women and children. It is generally considered, therefore, that Senegal will in the years to come have to cope with two major challenges: (i) sustained economic growth; and (ii) poverty alleviation.

B. UNDP Assistance

In agreement with the Government and in close consultation with other government partners, UNDP operates on two fronts:

1. On policy dialogue, helping the government formulate strategies for the implementation of recommendations of international conferences or world summit meetings in various areas such as education, women, and environment.
2. On operational programmes, through support to the National Poverty Eradication and to the National Governance programmes. With respect to the first one, emphasis is being put on the promotion of income generating activities, the strengthening of local community bodies or entities to enable them to provide basic social services while actions envisaged in the Governance area will aim at creating a better environment for public investments, aid coordination and strengthening of human and institutional capacities.

C. Projects the First Lady Might Find of Interest to Visit

* Regional Credit

The project aims at improving the living conditions of the population through strengthening of the informal sector so as to enable it to identify and implement income generating activities. It operates in three zones: the capital city (Dakar) and its outlying areas; and the regions of Diourbel (about two hours drive from Dakar) and Tambacounda. In the last two regions, it targets women's groups in particular.

* Water Supply and Sanitation in Rural Areas

The project's objective is to bring drinking water and adequate sanitation facilities to rural areas so as to improve the general well-being of the population through reduction of water-borne diseases and infant mortality. It also enables women to participate actively in the management of activities of direct relevance to them. It operates in 8 regions of Senegal, one of them in a village located at 90km from Dakar.

SOUTH AFRICA

A. Priority Development Issues

The new South Africa has inherited two economies (i) a first world economy with developed economic infrastructure of roads, railways, ports, telecommunications, electric power grids, viable financial institutions, production facilities; commercial enterprises, large-scale and technologically advanced agriculture; and (ii) a third world economy characterized by poverty, unemployment and survival activities.

The national development goals are to reduce poverty, unemployment and inequities and to integrate into the global economy. The Reconstruction and Development Programme aims at raising annual house construction to 300,000 by 1999; building schools and improving educational facilities for the majority of the population; extending health coverage and encouraging primary health-care projects; providing safe water to 12 million people; and rapidly expanding the electricity network.

B. UNDP Assistance

UNDP and other UN agencies represented in South Africa identified appropriate areas of focus for UN operations activities as follows: completing the process of democratization; job creation; reduction of poverty and inequality; and cooperation on environmental matters.

More particularly, UNDP is focusing its programme on (i) poverty and inequality; (ii) governance and development management; and (iii) cooperation on environmental matters.

C. Projects the First Lady Might Find of Interest to Visit

It is suggested that the First Lady could visit the women's development activities supported by UNDP, UNCHS and ILO in Guguletu and Phillippi, two townships in the Cape Flats. This part of the programme includes Small and Medium Enterprises, Local Industrial Park initiative of Guguletu and the Homeless Federation site in Phillippi.

In the area of Pretoria, educational activities being developed with UNETPSA (United Nations Educational Training Programme for South Africa) and UNESCO could also be visited.

ZIMBABWE

A. Priority Development Issues

The key and priority development issues facing Zimbabwe include recurrent droughts and chronic food and water shortages, inequitable land distribution, degradation of the environment, and increased unemployment. These challenges are closely interlinked and do lead to poverty. They have a bearing on economic growth and on sustainable human development.

B. UNDP Assistance

UNDP's assistance focuses on capacity building in the following areas of development : poverty reduction, development management, and environmental regeneration. Poverty reduction is the over-arching objective. Cross-Cutting themes of governance, gender and HIV/AIDS are addressed within each concentration area.

The UNDP approach emphasizes the importance of public consultations and broad popular participation in the formulation of national strategies, policies and plans. To this end, UNDP has been supporting community initiatives with a direct impact on sustainable livelihoods and poverty reduction, including agricultural production, water provision, environmental management and income generation.

C. Projects the First Lady Might Find of Interest to Visit

Time allowing, it would be an honor for this office, and indeed, for the rural communities of Zimbabwe if Mrs. Clinton could visit one of our Give-A-Dam projects south of Bulawayo. This is a semi-arid area where UNDP, in conjunction with NGOs and local communities, is involved in water provision programmes to generate incomes, increase food production, create employment, alleviate poverty and conserve the environment. Women and youth are involved in this programme.

The second project near Harare is GEF-funded and includes the use of solar power for lighting and refrigeration in households, schools and clinics.

TANZANIA

A. Priority Development Issues

The Government's economic objectives and policies in the medium term (1996-1999) are stated in the third Rolling Plan and Forward Budget (RPFB-III), 1996/97-1998/99. The Government continues with the structural reforms and macro-economic stabilization programmes with a view to generating strong economic growth to combat poverty and deprivation. In particular, the Government intends to create an enabling environment for a strong private sector, reduce government involvement in directly productive activities, improve efficiency in the use of public resources, accelerate export promotion, enhance domestic competitiveness and promote environmentally sustainable development. Efforts are being made to build on the incentives already provided by the recent liberalization in the external trade and payments system. The continued development of human resources and improvements in the social and physical infrastructure also form critical components of the development strategy.

B. UNDP Assistance

Based on the national development situation analysis, its perspectives and trends, as well as the extensive consultations with the different in-county development partners, two critical areas for UNDP's intervention have been identified as follows:

- (I) Poverty Eradication: addressing sustainable livelihoods, HIV/AIDS, environment and natural resources management; and
- (ii) Governance and Management Development: including economic management, private sector development and export promotion; local government and decentralization; gender/women advancement.

C. Projects the First Lady Might Find of Interest to Visit

It is suggested that the First Lady visit the following UNDP-supported projects which are the components of the National Income Generation Programme (NIGP): (i) the Horticultural Gardens Project; (ii) the Fisheries Development Project, both located in Dar es Salaam; and (iii) the Oil Processing Project in Arusha.

UGANDA

A. Priority Development Issues:

The period 1986-1997 has seen substantial improvements in the economic and political life in Uganda. The economy has grown at an average annual rate of 6 percent and inflation has declined from triple to single digits within this decade. A new democratic constitution was promulgated in 1995. Presidential and Parliamentary elections were held in 1996.

Notwithstanding the above developments, the country faces considerable poverty and HIV/AIDS challenges.

Poverty is widespread in the country and is more acute in the rural areas where 87 percent of the population, particularly women, live. Poverty is reflected in the low income per capita of \$220, a life expectancy of 44.7 years and an adult literacy rate of 59.7 percent.

The main focus of this briefing note is on the UNDP response to the HIV/AIDS epidemic. Current estimates show that about 1.9 million Ugandans are HIV positive. Approximately 70 % of those infected with the virus are in the productive age bracket of 15 to 45 years of age. Among those in the 15 to 25 age bracket, girls are six times more likely to be infected with HIV than their male counterparts. It is also estimated that one in every four professionals is infected.

B. UNDP's Assistance

In view of the seriousness of HIV/AIDS, UNDP supported the government's efforts in the establishment of the Uganda AIDS Commission and its Secretariat which developed a national operational plan for AIDS-related activities in the country. At the grassroots level, UNDP's activities focused on mitigating the social and economic impact of HIV/AIDS through direct support involving income-generating activities. For example, UNDP and the United Nations Capital Development Fund (UNCDF) contributed to the rehabilitation of a plant that produces basic and affordable agricultural implements such as hoes and ox-drawn ploughs given that Uganda is a predominantly agricultural country.

C. Projects the First Lady Might Find of Interest to Visit

It is proposed that the First Lady should visit:

- The project UGA/95/001 - HIV/AIDS at Kamwocha Community Center in the city of Kampala, where women are trained in skills related to tailoring, knitting, bakery, etc. The women are also receiving counseling on HIV/AIDS.
- Africa 2000 Project where women are provided assistance in income-generating activities relating to poultry, piggery and other agricultural activities. These communities are located about 10km outside of Kampala city.

ERITREA

A. Priority Development Issues

The main issues and challenges facing Eritrea are a direct result of the 30-year war on independence which destroyed all the physical and institutional infrastructure throughout the country. Accordingly, the main challenges are how to formulate and implement rehabilitation and resettle refugees and internally displaced Eritreans. The government has identified two high priority issues, namely: Human Resources Development, and Institutional building and strengthening as the main pillars for the consolidation of peace and security. Eritrea is a country with an estimated adult illiteracy of about 80% for male and 85% for female. It is also estimated that only 8% of the population (3.5 million) has access to safe drinking water while less than 1% in the rural and 44% of the urban population have access to sanitation services; shelter is a serious problem in the rural areas, food production is at a subsistence level.

B. UNDP Assistance

UNDP's response to some of the above-mentioned challenges has been focused on support to rehabilitation, resettlement and reintegration of refugees and surrounding communities. Two main programs have focused on training and development of community skills for agricultural activities, facilitating the establishment of community committees and sectoral task forces to address some of the main issues. The second program focuses on improving general education and elimination of adult illiteracy. UNDP has agreed to support the National Union of Eritrean Women in designing a comprehensive program that addresses the social and economic plight of women. The main components of the program are research\studies\specialized training for various groups of women, professionals, business women, village working women, housewives and girls. The program is owned jointly by the NUEW, association of Eritrean business women and the girls in the National Union of Eritrean Youth.

C. Projects the First Lady Might Find of Interest to Visit

It is proposed that Mrs. Hillary Clinton may wish to visit one of two refugee resettlement centers in the Western lowlands. Another project is the fisheries programme run by artisanal cooperatives.

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That's Fit to Print"

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\$1 beyond the greater New York met

Malaria Makes a Comeback, And Is More Deadly Than Ever

By NICHOLAS D. KRISTOF

MWANABWITO, Tanzania — Her face was calm and soothing, but Mariam Karega's eyes brimmed with fear as she cradled little Hussein and nursed him, trying to pump life into him along with her milk.

"I'm losing hope," Mrs. Karega said, her big aching eyes radiating the terror of any parent holding a dying child. "He's tiny and he's stopped growing. And although he'd started to walk, now he can't anymore. I don't think he'll make it."

It was a sweltering afternoon, and a dozen other villagers sat solemnly around Mrs. Karega and her 15-month-old son, a knowing sympathy hanging in the air along with the flies. In this village of thatched mud huts in rural Tanzania, in East Africa, the trauma of losing a child is almost as common as a scraped knee.

These children are dying not from something intuitively monstrous, like the crocodiles that lurk in the Ruvu River below the village, ready to spring on any unwary bather. Instead, the children are dying of mosquito bites.

In 1996 alone, between one million and three million people died of malaria, the mosquito-borne disease that has struck Hussein and the other children in the village. Most alarming, malaria, far from coming under control, is becoming resistant to medications and is expanding into new areas and killing many more people

EVERYDAY KILLERS

First of two articles.

than it did a few decades ago.

For these reasons, the World Health Organization recently declared that "public health enemy No. 1" is the mosquito.

Americans may think of medical care as incalculably complex, a world of angioplasty and echocardiograms and other technologies that to many people are as incomprehensible as they are unpronounceable. But for most people in the world, the challenges of health care are simpler: when mothers like Mrs. Karega hold dying children, it is usually because of something as simple as dirty water or a mosquito bite.

While medical care has made tremendous strides in recent decades, some of the most formidable challenges remain the most basic: providing people with toilets and clean water, and protecting them from deadly mosquitoes. The extraordinary thing about the mosquitoes is that in the current battle against the best

Malaria Mosquito
(*Anopheles bifurcatus*)



Continued on Page A10, Column 1

Safeguards

A \$5 Net Can Help, But Cash Is Lacking

Continued From Page A1

Is of 20th-century science and medicine may be winning.

In the 1950's, experts were optimistic that malaria could be wiped out, and for a time DDT and other insecticides led to a sharp reduction of mosquitoes and of the disease. But the use of DDT and similar chemicals was sharply curtailed because of their dreadful environmental effects, and partly as a result malaria began a long upswing around the world in the 1960's and 70's.

"As a single disease, malaria has a bigger impact on the world than anything you can think of," said Dr. Kazem Behbehani, director of the division for control of tropical diseases at the World Health Organization in Geneva. "And it's spreading."

Between 300 million and 500 million people now get malaria each year, and someone dies of it about every 15 seconds — mostly children and pregnant women. Over the last decade, malaria has killed about 10 times as many children as all wars combined have in that period.

The cumulative statistics have so many zero's that it is impossible to conceive of the heartbreak that they represent. People in developed countries sometimes suppose that third world villagers are so familiar with suffering that they are numbed to it, but anyone who thinks that should have seen

Mrs. Karega's eyes — or should have been on a muddy path in the Cambodian glade, 7,500 miles to the east.

Banana trees dotted a starkly beautiful hillside of brilliant greens, but from up ahead an eerie wailing resonated through the trees, a shrieking that at first sounded inhuman.

It turned out to be human after all, coming from a wretched farmer named Yok Yorn, 48, a man with a gray crew cut, a long face and square chin, and tear-stained cheeks. He was bent over the body of his 7-year-old son, Kaiset, who had died of malaria a couple of hours earlier.

The boy's body lay on the floor, half-covered by a blanket, as his family sobbed and other villagers tried to comfort them. Mr. Yok Yorn was the most distraught: as tears trickled down onto his son's body, he cradled the boy's head and put his own next to it, rubbing his hair against his son's.

The boy had become seriously ill with malaria a week earlier, and Mr. Yok Yorn had carried him piggyback down the path to a local doctor. Mr. Yok Yorn borrowed the \$50 doctor's fee and did not think twice about handing over what in local terms was a colossal amount, equivalent to tens of thousands of dollars for an American family.

"This was the smartest boy in the family," Mr. Yok Yorn said softly when he had recovered his composure enough to speak. He added that his grief was compounded because Kaiset was his second son to die of malaria. His eldest child, Thad, 16, also died of the disease.

Mr. Yok Yorn looked around at his other five children. His voice broke as he whispered, "I'm so afraid that my other children will die of malaria as well."

Doctors say that there is no reason why children like Kaiset had to die, and that they can usually be saved if they get prompt treatment from a good doctor. But that is often impossible in the third world, where well-trained doctors are scarce. Cambodia has one doctor for every 9,500 people; the United States has one for every 387.

Drugs are normally used to treat malaria, although drug-resistant strains are becoming a problem all over the world and especially in Southeast Asia. In addition, mosquitoes are emerging that are resistant to ordinary insecticides, and together they make a ferocious combination: super mosquitoes armed with drug-resistant super malaria.

But the situation is far from hopeless. A new drug, Malarone, has done well against malaria in clinical trials, both as a treatment and as a preventive, according to data made public at a recent international conference. Malarone will undergo further testing, and experts also cite a slew of technical reasons to argue that with time and money a successful vaccine can probably be developed.

Until an effective vaccine is developed, experts say, the best approach is simply to keep mosquitoes from biting people. The anopheles mosquito, the variety that carries malaria, tends to bite after dark, and so several recent studies have suggested that sleeping inside a mosquito net impregnated with insecticide can reduce malaria sharply.

For now, however, the impregnated nets are not widely available in street markets of developing countries, and the insecticide has to be reapplied at least once every year. A more fundamental problem is that many people cannot afford even ordinary mosquito nets, which cost \$5 or \$10.

"We have no blanket, no medicine and not enough food to eat," said Soy Phal, 31, a Cambodian who is herself feverish with malaria and whose husband died of the disease three years ago. "How can I afford a mosquito net? I spend my life being sick, so I have no time to earn money to get a mosquito net."

Mrs. Soy Phal's complaint is echoed by

development economists. They note that malaria and other tropical maladies create a cycle in which disease hinders economic development and thereby sustains the disease.

Take Jamaluddin, a 36-year-old man with a black beard and deep-set eyes who lives in Bhadas village in northern India. Until a few months ago, he ran a tea shop and earned enough so that he was gradually climbing out of poverty. Then he and his entire family suddenly caught malaria, and within two weeks in October he had lost one of his two wives and three of his seven children. Medical and funeral costs left him \$350 in debt, forcing him to give up his tea-shop lease as well.

"I don't know if my life will ever get back on track," said Mr. Jamaluddin, who now hopes to get odd jobs as a laborer, paying \$1.40 a day. "I'm completely shattered."

The last thing Mr. Jamaluddin can afford is a mosquito net to save his remaining children. But Nhem Yen is perhaps even worse off.

Mrs. Nhem Yen, a Cambodian villager, has one small mosquito net — and that is the source of her anguish. A 40-year-old woman with thick hair brushed to the side around a high forehead, Mrs. Nhem Yen has five children and two grandchildren in her little hut. Every evening she must figure out which children sleep under the net, and which sleep outside the net and risk death.

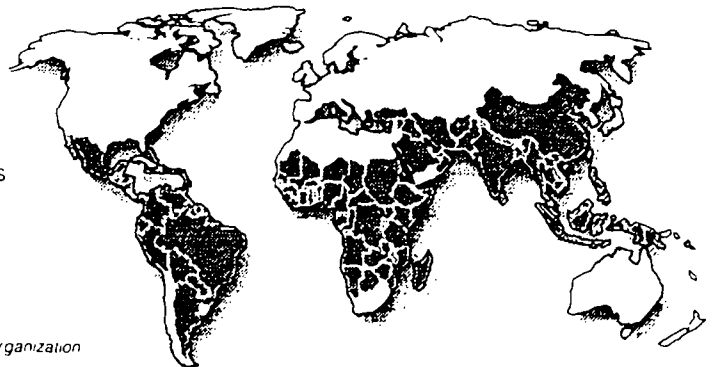
"It's very hard to choose," Mrs. Nhem Yen said softly, her children clustered around her. "But we have no money to buy another mosquito net. We have no choice."

KEEPING TRACK

Malaria: Still a Scourge

Malaria killed one million to three million people last year. Shaded areas indicate countries where malaria is endemic.

Source: World Health Organization



The New York Times

Mrs. Nhem Yen is looking after two granddaughters because their mother died of malaria recently at the age of 24, just a day after giving birth. The dead woman, Mrs. Nhem Yen's daughter, never saw a doctor — it would have cost too much.

The elder granddaughter, a puffy-cheeked 3-year-old with a dimple on her chin, does not yet understand that her mother is dead. The younger one, just two weeks old and frail, surviving on cow's milk, still lacks a name because she seems unlikely to linger. For now, Mrs. Nhem Yen gives these two the place under the mosquito net, but she knows it may be a losing gamble: the two-week-old may die anyway and in the meantime is taking up the life-saving space under the net.

Research

Little Money Is Spent To Fight Malaria

One reason for optimism in the struggle against mosquito-borne diseases is simply that science has shown that it can often conquer age-old scourges when given the resources. Leprosy used to be one of the most dreaded of diseases, but it now is easily cured with drugs and may soon be virtually wiped out around the world. The same is true of polio.

But malaria remains a medical catastrophe in part because it does not get much in the way of resources. Only about \$85 million a year is spent globally on malaria research, about half as much as is spent on asthma research.

A recent British study estimated that each year \$3,274 is spent on AIDS research for each fatal case of AIDS, while \$65 is spent on malaria research for each fatal case of malaria.

Money for malaria research is meager in part because the disease primarily afflicts poor people, and Western drug companies doubt that third world villagers would be able to pay much for a new malaria vaccine even if it was developed.

Another reason malaria is the exception, a disease that is killing more people than three decades ago, rather than fewer, is that it is difficult to imagine a more vexing adversary than the mosquito.

The mosquito has been on earth at least 40 times as long as humans, and it has proved a more wily antagonist than wolves or saber-toothed tigers. It is only the female mosquito that bites — to get blood to nourish its eggs — and that is when it transmits diseases. The mosquito does not itself catch malaria or fever or encephalitis or the many other ailments that it can carry.

Malaria parasite cells multiply in the infected person's liver and cause severe fevers with hot and cold chills. Depending on the variety of malaria, the patient can fall into a coma, have seizures or suffer from anemia, kidney failure or rupture of the spleen. Survivors of the worst kind, cerebral malaria, are sometimes mentally retarded.

Experts are learning some tidbits about mosquito habits: they are finicky, often preferring animal blood to the human variety; they like dark colors; they are drawn to sweat; they respond to hormones and avoid menstruating women. But above all, what strikes many entomologists is that mosquitoes are enormously adaptable to new threats and environments.

That helps them expand into new regions, bringing diseases with them. Until 1970, only nine countries had experienced epidemics of dengue hemorrhagic fever, a mosquito-borne disease for which there is no cure or vaccine and which causes the victim to bleed from the mouth, nose and gums. Since then 29 more countries have experienced outbreaks, and a milder form of the disease, called dengue fever, has struck people in Texas.

Some entomologists worry that global warming may expand the habitat of the anopheles mosquito. The World Health Organization has warned that a result may be anopheles mosquitoes' living in places like the southern United States and southern Europe, and an extra 80 million cases of malaria annually by the end of the next century.

Another particularly dangerous kind of mosquito, the Asian tiger mosquito, which can carry dengue fever, encephalitis and yellow fever, arrived in Texas in 1985, apparently in a shipment of tires from Asia, and it has now established itself in at least 23 states, including those as far north as New Jersey and Illinois.

Malaria itself has cropped up recently in parts of the former Soviet Union, and it now is endemic in 91 countries. In little villages that dot the dirt roads of Rajasthan and Haryana States in northern India, melancholy farmers

stand in their hushed doorways and say they had never heard of malaria locally until their loved ones began to die of it a few months ago.

"I don't remember anything like this in all my life here," rasped Jabar Khan, the white-bearded 80-year-old patriarch of Agaon village. "I lost a grandson and two granddaughters, but I still don't understand what happened. They were sick with fever, and they began shaking so much that their teeth chattered. Then they died."

Poverty

For Children's Sake, A Fearful Gamble

Parents in poor countries can face excruciating choices: often the only way to give their children an opportunity is to gamble with their lives.

In Cambodia, the death toll from malaria is rising in part because families are knowingly moving to malaria zones. They move there to earn the princely sum of \$2 or \$3 a day, enough to feed and clothe the children and send them to school so that they can escape the cycle of poverty. The catch is that the pay is high because of the deadly risks.

"I can't stand being here, because it's no use being rich if your children die," said Chir Savan, 36, who was preparing dinner in her hut as dusk fell in a village in the malaria zone. "Right over there, in that house, there was a family living with two children, about the age of mine, a boy and a girl. But they lost both children because of malaria, and so now they decided to move away."

So why does Mrs. Chim Savan stay in the village?

It is not just that her husband has a job there cutting wood and thus the family has food to eat, or even that the family's entire savings — \$4 — were spent when they moved here in April. Rather, the problem is that the family puts honor above all else.

One of the couple's four sons, Rathna, a 5-year-old who was scampering naked around the hut, nearly died of malaria a couple of months ago. Mrs. Chim Savan managed to save his life, but only by borrowing \$22 so that he could spend a week in hospital for a blood transfusion and other treatment.

So now the parents have saved Rathna, but they feel they are honor-bound to stay in the village until they can repay the \$22 to the woodlot owner, who lent them the money. The risk is that in the meantime their other children will die.

"If I weren't in debt I would leave," Mrs. Chim Savan said. "But when we were in trouble, the owner helped us, so now we have to help him. Because he was good to us."

"We're scared that the loan will have saved one child's life while costing us the lives of our other children. But what we can we do?"

In talking to women like Mrs. Chim Savan, one is reminded that it is not just diseases that kill people, but also poverty.

Malaria itself is not such a deadly threat when it strikes the healthy and rich. But in the third world, few are healthy to start with, and they lack the resources to buy mosquito nets, to drain swamps that breed mosquitoes, and even to get simple treatment.

Mrs. Karega, the Tanzanian woman who fears for the life of her 15-month-old toddler who cannot toddle, said a nurse at a rural clinic told her to take little Hussein to the district hospital, so a doctor could look at him and examine his blood and perhaps save him.

"But we can't afford to do that," Mrs. Karega said, looking down at Hussein as he nursed from her breast. "That would be too expensive. We don't have that much money."

How much would it be?

Mrs. Karega answered at once, for she had worked out the sums many times in her head, searching for a way to gather the money. "Including round-trip transportation, the lab test and a tip for the doctor, it would cost 10,000 rupees. We just can't afford that."

The amount is equivalent to \$16.65.



Richard D. Krieger/The New York Times

In a Tanzanian village, Mariam Karega cradles her 15-month-old son Hussein, who appears to be dying of malaria. Last year, malaria killed one million to three million people.



Nicholas U. Krass/The New York Times

Nhem Yen, a Cambodian villager, has just one small mosquito net, forcing her to choose who will be protected among the seven children in her care. A fundamental problem in the third world is that people cannot afford even the cheapest safeguards.

Africa Overview: HIV/AIDS in Africa

Unlike most infectious diseases in Africa, HIV/AIDS affects the urban elite as well as the rural poor, and generally during their most economically productive years. An increase in deaths among young adults of the magnitude predicted could have substantial adverse effects on economic and political stability throughout Africa. AIDS is causing increased stress on fragile African economic infrastructures as labor productivity declines, particularly in agricultural, labor-dependent economies. AIDS is causing obstacles to trade, foreign investment and tourism. Health systems and social coping mechanisms already are overburdened. High rates of HIV infection among police and military personnel threaten internal security. Furthermore, the demobilization of military forces in Africa may exacerbate the epidemic when HIV-infected soldiers return home and spread the virus.

The HIV/AIDS epidemic in Africa is a major impediment to sustainable development. The World Health Organization (WHO) estimates that AIDS soon will exceed measles and malaria as a leading cause of death among children under five years of age in Africa. At the current levels of HIV infection, it is inevitable that AIDS-related deaths during the next five years will reverse the previously favorable trend in life expectancy at birth, child mortality, and adult mortality.

HIV/AIDS threatens to halt or reverse the recent social and economic gains (including child survival and human resource development) made in many African countries. Other infectious diseases, such as tuberculosis, are becoming active in persons with weakened immune systems and are reaching epidemic levels. Enormous health care costs and escalating demands on health care infrastructures are beginning to be felt. The labor force of affected countries, from the educated elite to the subsistence farmer, may be decimated. The Food and Agricultural Organization (FAO) estimates that one quarter of the farms in the most affected African countries will fail as a result of the crippling impact of AIDS on the work force. As traditional social support networks are stretched beyond capacity, families will be disrupted, children will become orphaned, and the aged will be left without support. Limiting the spread of HIV and mitigating the multisectoral impact of AIDS is an essential investment in sustainable development.

Country HIV/AIDS Profiles

SENEGAL

HIV/AIDS Situation

The HIV/AIDS epidemic in Senegal is in an early but potentially explosive phase. With a total population estimated at 8.1 million, HIV infection levels among selected populations range from below 1 and 2 percent among blood donors and pregnant women seeking prenatal care to between 1 and 4 percent for persons seeking treatment for sexually transmitted diseases. The highest rates of infection -- an average of 16 percent -- are found among commercial sex workers.

USAID Strategy

Since 1985, USAID/Senegal has provided more than \$8 million dollars in support of AIDS prevention and control efforts in Senegal. Initially support was provided through USAID's Family Health and Population Project and in 1992 USAID developed the Senegal AIDS Control and Prevention Project (AIDSCAP), one of the largest AIDSCAP Projects in Africa. Working through the National AIDS Prevention Program and local non-governmental organizations, the AIDSCAP project attempts to reduce high-risk behaviors within target groups and strengthen service delivery to reduce the spread of HIV/AIDS and sexually transmitted diseases (STDs). USAID acts as a catalyst for governmental and nongovernmental organizations, local communities and individuals in setting up a national HIV/AIDS prevention program. Specific areas of USAID support include behavioral change communications, policy dialogue, STD control, condom social marketing and HIV/AIDS surveillance.

SOUTH AFRICA

HIV/AIDS Situation

Since 1982 when the first AIDS case in South Africa was reported, the epidemic has progressed rapidly through the country. With an estimated population of 38 million, there are approximately 500 new HIV infections daily and the rate of new infections is doubling every 11-13 months. Among high risk populations prevalence rates range from 2 to 20 percent. The region of highest prevalence, an estimated 9.6 percent, is Kwazulu-Natal. Lower rates have been reported in other rates: Orange Freestate at 4.1 percent, Transvaal at 3.1 percent and the Cape at 1.3 percent. The virus is spreading most rapidly among youth and young adults ages 15-30.

USAID Strategy

USAID South Africa's HIV/AIDS strategy is to support educational efforts in three areas: prevention of sexually transmitted HIV/AIDS; reduction of the impact of HIV/AIDS infection on individuals, groups and societies; and the prevention of prenatal transmission. USAID support has been provided primarily through nongovernmental organizations. Areas of program support include technical assistance, training, community outreach, youth intervention/peer education, and capacity-building. USAID/South Africa also provides assistance through AIDSCAP which focuses on home-based care and support programs, community education and educational materials development. USAID spends approximately \$6-8 million annually on these efforts.

ZIMBABWE

HIV/AIDS Situation

With a population of 11 million, Zimbabwe has an HIV/AIDS prevalence among the highest in Sub-Saharan Africa. Overall infection rates are estimated at 30 percent in rural areas. Infection rates in selected high-risk populations such as commercial sex workers are much higher. Some studies in Harare show rates as high as 86 percent in this group. Among sexually-transmitted-disease patients the infection rates are more than 60 percent.

USAID Strategy

USAID Zimbabwe developed its AIDS Prevention and Control Program (ZAPAC) in 1993 worth approximately \$4 million annually. This program is designed to decrease HIV-related high-risk behavior among selected target groups and strengthen services that reduce the spread of HIV/AIDS within these groups. The program emphasizes education and motivation for behavior change. USAID provides policy support for the National AIDS Control Program and coordinates activities with other donors such as UNICEF. USAID also developed an AIDSCAP program that focuses on behavioral-change communication in the workplace among occupational groups such as transport workers and farmers. AIDSCAP also works with the media to disseminate accurate educational information on the AIDS epidemic.

TANZANIA

HIV/AIDS Situation

The HIV/AIDS epidemic in Tanzania is severe. With a population of 27.5 million, estimated HIV infection rates for males are 5.6 percent and for females, 6.3 percent. Rates among commercial sex workers in Dar es Salaam are greater than 40 percent. Infection rates among high-risk groups along major trucking routes are as high as 56 percent. The National AIDS Control Program projects that there will be 800,000 AIDS cases and 2.4 million HIV-positive Tanzanians by the year 2000.

USAID Strategy

USAID/Tanzania has developed the Tanzania AIDS Project (TAP), a five-year, \$20 million effort designed to reduce the impact of AIDS on Tanzanian society by promoting HIV prevention measures and ensuring the provision of adequate support services to orphans and their families. TAP is one of the few African AIDS projects with programs designed to alleviate the impact of AIDS on individuals, families, and communities. The program focuses on condom promotion, STD reduction and sexual risk-reduction. TAP support is provided to both the public and private sectors and includes activities, which promote NGO capacity building, condom social marketing and worksite HIV/AIDS prevention. TAP also finances the largest AIDSCAP program in Africa.

UGANDA

HIV/AIDS Situation

Uganda, with a total population of 19 million, is experiencing a severe AIDS epidemic. An estimated 1.5 million Ugandans are infected with HIV. The epidemic in Uganda is one of the oldest in Africa. Although the HIV prevalence in some selected populations is beginning to decline, the rate of new infections continues to be very high, especially among young people. HIV infection rates in urban areas range from 10 to 25 percent. The U.S. Bureau of Census projects that AIDS effects on infant and adult deaths will result in a decrease in life expectancy at birth from its current 37 years to 31.5 years by the year 2010. It is believed that 1 million children have already lost at least one parent to AIDS. In the midst of this epidemic, some encouraging trends are emerging. There is some evidence of behavioral changes including dramatic increases in the demand for condoms, declines in the average numbers of sexual partners and changes in social norms to discourage multiple and casual sexual partners.

USAID Strategy

USAID's (\$2.5 million annually) program in Uganda has emphasized community education, voluntary HIV testing and counseling, condom promotion, STD control and integration of supportive care and prevention counseling for people living with HIV/AIDS.

USAID has worked with a wide range of groups including the Ugandan military, the Ministry of Health, Protestant and Islamic leaders and organizations. Since 1991, much of USAID's support has been provided under an umbrella grant to World Learning, Inc., which has supervised a total of fourteen grants to local NGOs.

ERITREA

HIV/AIDS Situation

The status of the epidemic in Eritrea is not well documented but preliminary indications are that the situation is serious. With a population estimated at 3.3 million, the country may be experiencing a rapidly expanding epidemic in traditional high-risk groups and youth. Results from some studies done in Asmara indicate that there may be a doubling of HIV infections every 12 or 13 months. There is a major seroprevalence study underway which should provide the data needed to get a better fix on HIV incidence and prevalence in the country.

USAID Strategy

USAID currently is developing an HIV/AIDS program strategy but a definitive strategy is not yet in place. Possible areas of assistance include the development of sentinel surveillance systems to monitor the progression of the disease, planning and technical assistance, development of integrated approaches to HIV/AIDS prevention as a component of reproductive health programs, educational programs for special target groups such as youth and strengthening condom social marketing programs. Other efforts will include increasing collaboration with other donors such as UNAIDS.

Africa Overview: Female Genital Mutilation

Female genital mutilation (FGM) is the cutting or removal of all or part of the female genitals, as part of a ritualistic practice deeply rooted in culture and tradition. It is based on long-held beliefs, superstitions, women's social role, and the belief that FGM will suppress and control the sexual behavior of women and girls. FGM crosses ethnic, cultural and religious lines. It is often such a deeply held conviction that some girls desire it to conform and be a part of their society. Many women, however, increasingly view it as a way to control and subjugate women. Experts put the number of females who have been genitally mutilated at 115-130 million worldwide. Two million girls are at risk each year of being mutilated.

FGM can have devastating and harmful consequences for a woman throughout her life. Short-term effects include bleeding, post-operative shock, damage to other organs, infections and even death. Long-term effects include retention of blood in the abdomen and swelling of the stomach, chronic infections of the bladder and vagina, painful menstruation, childbirth obstruction, and increased risk of STDs and HIV infections and sexual dysfunction.

FGM is most prevalent in sub-Saharan Africa where it is practiced in at least 28 countries. Some immigrants practice FGM in other parts of the world, including in Europe, the United States, Canada, Australia, and Israel. The United States has recently enacted legislation specifically outlawing FGM practiced on a person under the age of 18. In separate legislation, Congress has provided that, beginning later this year, the United States must oppose loans by the international financial institutions to the government of any country where FGM is widely practiced which has not taken steps to implement educational programs to prevent it.

A number of international organizations and conferences have expressed strong positions on the dangers of FGM and their support to eradicate the practice. Since 1992, the World Health Organization has maintained that FGM must not be institutionalized (i.e., made legal for doctors and hospitals to perform). The UN's International Conference on Population and Development in Cairo in 1994 and the UN's Fourth World Conference on Women in Beijing in 1995 recognized FGM as a harmful traditional practice against women and girls and called for action by governments and other organizations to eliminate FGM and provide education about its harmful effects. The Inter-African Committee on Traditional Practices Affecting the Health of Women and Children (IAC) works to encourage governments to adopt clear national policies to abolish FGM and to intensify educational programs about its harmful effects.

The State Department, the U.S. Agency for International Development (USAID), and the U.S. Information Agency (USIS) are working with community organizations and governments overseas to address the issue of FGM. State chairs an interagency group that coordinates USG policy on FGM. State has funded studies and provided assistance to NGOs through its Democracy and Human Rights Fund. USAID obligated \$1 million in FY95 to develop and integrate educational programs on the dangers of FGM into population, health, education, and women in development activities. USIS makes information on women's issues, including FGM, available on its home page on the World Wide Web. The United States views the practice of FGM as both harmful to women's health and a violation of women's human rights. Recognizing the extreme cultural sensitivities involved in addressing FGM and in an effort to ensure our message is better received, the United States supports efforts by local community-based organizations and health officials working within their own communities to eradicate FGM.

In June 1996 the U.S. Board of Immigration Appeals granted asylum to a Fuziya Kasinga, a Togolese woman fearing FGM. The board found that FGM can be a basis for a grant of asylum, but the decision was narrow. The possibility of being a victim of FGM does not constitute grounds for asylum in all cases. The Kasinga case was decided on its individual merits and future cases involving FGM will also require an examination of the individual's circumstances until the Board of Appeals chooses to articulate broader guidelines.

In Eritrea the prevalence of FGM is estimated to be on the order of 90%, and it is practiced by almost all ethnic groups. While there is no law prohibiting FGM, the government makes information on FGM part of its health and general education programs. In Uganda the prevalence is estimated at only 5% because it is practiced only in one district (Kapchorwa). The government condemns the practice and the IAC works to eradicate it. A bill pending before the National Assembly would prohibit FGM. In Tanzania prevalence is on the order of 10%; it is practiced by scattered population groups. There is no law prohibiting FGM, but the government is making an effort to eradicate it. In Ghana, prevalence ranges from 15-30%; FGM is practiced mainly among Muslims in the far north. A 1994 law prohibits FGM, the government publicly seeks eradication and NGOs are actively involved in eradication efforts through extensive grassroots educational programs. In Senegal, prevalence is on the order of 20%. There is no law prohibiting FGM, but the President has spoken against the practice and outreach groups are active. FGM is not prevalent in Malawi, Zimbabwe, South Africa or Mozambique.



United States Department of State

Washington, D.C. 20520

FEMALE GENITAL MUTILATION (FGM)

This paper is prepared primarily to provide information about female genital mutilation (FGM) practices to asylum adjudicators.

Female genital mutilation is the cutting or removal of all or a portion of the female genitals, as part of a ritualistic practice deeply rooted in culture and tradition. It is based on long held beliefs, superstitions, women's social role, and the belief FGM will suppress and control the sexual behavior of women and girls. It is often such a deeply held conviction that some girls desire it to conform to and be a part of society. Many women, however, increasingly view it as a way to control and subjugate women.

Experts put the number of females who have been genitally mutilated at 115 million to 130 million worldwide. Two million girls are at risk each year of being mutilated.

FGM is most prevalent in Africa where it is practiced in at least 28 African countries. It also occurs in several Middle Eastern countries including Egypt, Oman, Saudi Arabia, The Republic of Yemen and the United Arab Emirates. It is found in India and Pakistan among a small group of Bohra Muslims and is reported to occur in small groups in Indonesia and Malaysia (rural ethnic Malay Muslims where it more closely resembles a symbolic prick). It is also reported to be found within small indigenous groups in Eastern Mexico, Brazil and Peru. Some immigrants practice FGM in other parts of the world, including countries in Europe, the United States, Canada, Australia and Israel where the Ethiopian Falashas have immigrated. The United States has recently enacted legislation specifically outlawing FGM practiced on a person under the age of 18.

The origins of FGM are unknown. The practice existed before the beginning of Christianity and Islam. It is not required by the Koran or the Bible. FGM crosses religious lines. It also crosses ethnic and cultural lines.

A number of international organizations and conferences have expressed strong positions on the dangers of FGM and their support to eradicate the practice. The United Nations Commission on Human Rights raised the issue of FGM for the first time in 1952 and has followed up with conferences, seminars etc. throughout the years. The UN's Fourth World Conference on Women held in Beijing, China in September 1995, recognized FGM as a harmful traditional practice against women and girls and as part of its platform, called for action by governments and other organizations to eliminate FGM and provide education about its harmful effects. The International Conference on Population and Development (ICPD), held in Cairo, Egypt in September 1994.

condemned FGM as a harmful practice and urged governments to prohibit the practice and to give vigorous support to efforts among nongovernmental organizations and religious institutions to eliminate the practice. The World Health Organization (WHO) has assured governments of its readiness to support national efforts against FGM, as well as to continue research and distribution of information on FGM.

WHO has consistently maintained, since its formal statement in 1982 to the UN Human Rights Commission, that FGM must not be institutionalized (medicalized), nor should any form of FGM be practiced by any health professional in any setting, including hospitals and other health establishments. The Inter-African Committee on Traditional Practices Affecting the Health of Women and Children (IAC), which has chapters in most African countries, works to encourage governments to adopt clear national policies to abolish FGM and to intensify educational programs about the harmfulness of FGM.

The State Department and the U.S. Agency for International Development are working with community organizations and governments overseas to address the issue of female genital mutilation.

TYPES OF FEMALE GENITAL MUTILATION

Some people refer to the practice of female genital mutilation as "circumcision". However, circumcision is only one type of FGM. In fact, circumcision is the least traumatic and dangerous of the various types of FGM. Only a very small percentage of women are circumcised. The vast majority of women suffer more drastic and dangerous forms of FGM.

1. Circumcision: The clitoral prepuce or tip of the clitoris is cut away. This is the mildest type of FGM. Some people refer to this as "sunna". However, sunna is often also used to refer to the more severe types of FGM. Sunna should therefore not automatically be assumed to refer to the least dangerous type of FGM. Circumcision is the only form of FGM that is anatomically comparable with male circumcision. The more severe forms of FGM practiced on most women have been described by some authorities (in terms of the closest male equivalent), as closer to the removal of the male sex organ. Only a small percentage, about 5 percent, of women who undergo FGM undergo circumcision.

2. Excision: Excision varies. It can be the partial or total cutting away of the clitoris and/or the clitoral prepuce, up to and including the cutting away of all or part of the labia

minora. This is the most widely practiced type of FGM. Some 80 percent of women who undergo FGM undergo this form of FGM.

3. Infibulation: This includes cutting away the clitoris and prepuce, cutting away the labia minora and cutting away a part of the labia majora. The edges of the labia majora are then held together by stitching with silk or cat gut or pinned with acacia thorns. Often only a very small opening is left, made by a straw or a match stick, to allow for the flow of urine and menstrual blood. The girl's or woman's legs are then bound together from the hip to the ankle so she remains immobile for 40 days to allow for the formation of scar tissue. In some communities no stitching is used. Rather, adhesive substances including sugar, eggs, and in rare cases, even animal excreta are placed on the wound to allow it to heal. Overall, 15 percent of women who undergo FGM undergo this type of FGM. However, where it is practiced, it often affects 90 to 100 percent of the women.

ANESTHESIA:

FGM is generally performed without the aid of anesthesia, particularly in villages. If no anesthesia is used, the girl or woman may be held down by a number of women. Sometimes herbs are put on her tongue so that the tongue will retract and she will not bite it off due to excruciating pain. Only if FGM is carried out in a hospital or medical clinic, is adequate anesthesia used.

PRACTITIONERS:

In rural settings FGM is usually carried out by older women in the villages. They have no medical training in surgical practices. Midwives and traditional birth attendants sometimes perform the operation. In a few places such as Egypt and the north part of Nigeria, male village barbers perform the operation. In some countries nurses and doctors perform the operation in hospitals where there is less danger of infections. (Medicalization of FGM, as this is called, has been resisted by many outreach groups because it would help to ingrain FGM in the country. Rather, these groups want the practice outlawed altogether.)

INSTRUMENTS USED:

A variety of instruments are used to perform FGM, depending on the country and group involved. Special knives may be used. For example, special saw-toothed knives are used in Mali. Razors are commonly used as well as scissors, pieces of glass, and even on rare occasions, sharp stones, in some countries. Fingernails are sometimes used in the Gambia to pluck the clitoris out of babies. If performed in a hospital or health clinic, regular surgical equipment is used.

In villages the instruments used to perform FGM are not sterile. Often many girls are operated on during a single ritual ceremony. In these cases the same razor or knife is commonly used on a number of girls.

AGE OF THE GIRL/WOMAN:

FGM can take place at different times in a girl's/woman's life depending on the country, ethnic group etc. It may vary among different groups in the same area of the country. For example, the Ethiopian Falashas perform the operation when the baby is a few days old. In Egypt the girl is between 7 and 10 years of age. Among the Ibo of Nigeria, FGM takes place just before marriage, while among the Edo of Nigeria it is performed before the first child is born. It is not unheard of for a deceased woman who has escaped FGM during her lifetime to have the operation performed on her before burial takes place.

CONSEQUENCES OF FGM:

FGM can have devastating and harmful consequences for a woman throughout her life. The health problems a girl will experience as a result of the operation depend a lot on the severity of the operation, the sanitary conditions in which it was performed, the competence of the person who performed it, and the violence of the girl's resistance. Old women and barbers who perform FGM are medically unqualified and can do extreme damage to a woman or girl, often resulting in death. Girls who struggle violently have often had bones broken as others attempted to hold them still. In cases where the operation is carried out in unsanitary conditions and nonsterile equipment is used, the dangers of infection are greatest. Even when FGM is performed in sanitary conditions of a hospital by qualified personnel, infection may be eliminated, but the long term consequences remain.

Examples of short-term consequences of FGM include:

1. bleeding (often hemorrhaging from rupture of the blood vessels of the clitoris);
2. post-operative shock;
3. damage to other organs (resulting from lack of surgical expertise of the excisor performing the operation and the violence of the resistance of the patient when anesthesia is not used). Some patients have experienced broken femurs, clavicles and other bones depending on the heavy-handed restraint used;
4. infections, including tetanus and septicemia, because of the use of nonsterile or poorly disinfected or dirty equipment;

5. death. It is unknown how many girls die from this operation because it is kept quiet. Some bleed to death. Very few make it to the hospital.

Examples of long-term consequences of FGM include:

1. retention of blood in the abdomen and swelling of the stomach. This has resulted in documented incidents of families believing the girl was pregnant and killing her because she dishonored the family. The most severe form of FGM, infibulation, causes the most severe complications.
2. chronic infections of the bladder and vagina. Since the urine and menstrual blood can now only leave the body drop by drop, the build up inside the abdomen and fluid retention cause infections and inflammation that can lead to infertility.
3. dysmenorrhoea or extremely painful menstruation.
4. the genital area is unbearably sensitive and painful to the touch.
5. child birth obstruction, which can result in the development of fistulas that can lead to tearing in the vaginal and/or bladder wall which can lead to chronic incontinence.
6. risk of HIV infection, particularly when tools have not been sterilized and are used to perform the operation on a number of girls at a single ritual.
7. sexual dysfunction.

Often reinfibulation must be performed each time a child is born. When infibulation is performed, the small opening left in the genital area is too small for the head of a baby to pass through. Failure to reopen this area can lead to death or brain damage of the baby and death of the mother. The excisor must reopen the mother and restitch her again after the birth. In most tribes the woman is restitched as before with the same tiny opening. In other tribes the opening is left only slightly larger to reduce painful intercourse. (In most cases, not only must the woman be reopened for each child birth, but on her wedding night the excisor may have to be called in to open her so she can consummate the marriage. The husband sometimes uses a sword or knife himself for this purpose, instead of the excisor.)

Although no extensive studies have been done on the psychological damage of FGM on a girl/woman, changes have been observed in the child who has been subjected to the operation. Nightmares, depression, shock, passivity, feelings of betrayal are not uncommon among these girls.

OUTREACH/LAWS:

Most of the African countries where FGM is practiced have outreach groups within the country working to eliminate the practice. Some have active support from the government. The emphasis by many of these groups is generally to educate the populace, both male and female, about the damages of FGM and the effect it can have on a woman's health. This is often done through mass media, seminars, education in the schools etc. Many outreach groups are now instituting alternative income producing activities for excisors who depend on FGM for their livelihood. Many outreach groups oppose the medicalization of FGM in hospitals. While lessening the risk of infections, this has the effect of further institutionalizing the practice when total elimination of FGM is the aim.

A number of countries where FGM is prevalent have laws specifically prohibiting FGM. Others have other criminal laws that might be used against FGM practitioners. A few cases have been successfully tried under these laws. The vast majority of countries, however, do not have any law against FGM. (See chart that follows.)

Generally, there are no laws specifically concerning FGM in most of the countries to which persons who practice FGM have immigrated. However, in most Western European countries, Canada and Australia, sufficient legislation already exists to cover FGM. Specific legislation against FGM does exist in Sweden and Great Britain.

Sweden was the first Western European country to specifically outlaw all forms of FGM in 1983. Great Britain's law prohibiting FGM became effective July 16, 1985. The British law makes it an offense for any person to perform FGM and for other persons to aid, abet, counsel or procure the performance of these acts. This would cover parents of girls who have their daughters subjected to the operation. Although not explicitly prohibited in France, there have been several cases involving FGM successfully prosecuted under existing laws. This has included the conviction and imprisonment of parents of girls subjected to FGM.

UNITED STATES LAW AGAINST FGM:

The performance of FGM on a person under the age of 18 has recently been made a crime in the United States. The law provides that whoever knowingly circumcises, excises or infibulates the whole or any part of the labia majora or labia minora or clitoris of another person who has not attained the age of 18 years shall be fined or imprisoned not more than 5 years or both. The law further provides that the belief that the

operation is required as a matter of custom or ritual shall not be taken into account under this law. (Title 18, United States Code, Section 116 "Female Genital Mutilation")

CHART OF FGM SPECIFIC COUNTRIES:

The following chart summarizes the estimated prevalence of FGM in the countries where it is practiced. It also shows the type of FGM, the ethnic groups or areas that practice it, the presence or absence of laws outlawing FGM and the outreach groups working to educate the populace and eradicate the practice. The chart contains general information only and is not intended to be dispositive of asylum claims. Detailed papers have also been prepared on the practice of FGM in 16 countries, including Benin, Burkina Faso, Cote d'Ivoire, Djibouti, Egypt, Ethiopia, the Gambia, Ghana, Guinea, Liberia, Mali, Nigeria, Sierra Leone, Somalia, Sudan and Togo.

OVERVIEW OF PRACTICE OF FEMALE GENITAL MUTILATION

Country	Prevalence	Type of FGM	Ethnic Group/Area	Law/Outreach
Benin	30% - 50%	Excision	Most affected- Bariba, Peul, Boko, Wama, Nago.	No law against FGM. The Inter-African Committee on Traditional Practices Affecting the Health of Women and Children (IAC) leads campaign against FGM since 1982 with workshops, seminars. It collaborates with Ministry of Social Affairs and Health. Government permits distribution of educational materials in government-run clinics.
Burkina Faso	70%	Excision	All but a few of 50 ethnic groups practice FGM. Bella group and castes such as Griots and some secret societies do not practice FGM.	Recent law outlaws FGM. Provides prison term and fine. Government waging widespread campaign against FGM. National Committee set up by Presidential decree that does extensive educational work.
Cameroon	20%	Circumcision and excision	Practice in areas of far north and south west.	No law against FGM. National Committee of IAC campaigns against FGM. Activities of IAC are supported by government. Government active against FGM.
Central African Republic	50%	Circumcision and excision	Found in at least 10 of 48 ethnic groups.	Since 1966 law against FGM. Government active and has taken measures against the practice.
Chad	60%	Excision most common in all parts of the country. Infibulation confined to eastern part of country in area bordering Sudan.	In all areas of the country across ethnic and religious lines.	No law against FGM. Government has published policy opposing FGM but plays only minimal role in trying to halt FGM. IAC National Committee active in outreach programs.
Cote d'Ivoire	60%	Excision	Mande (Malinke, Foula, Bambara, Dioula) and Voltaic groups (Semufo, Tagwana, Djimini, Lobi, Birifor, Koulango) of the north. Southern Mande of the west	No specific law against FGM. Would probably be illegal under general laws against the person. New law being drafted prohibiting FGM. NGOs campaign against FGM. Some government support but no funds yet.

Country	Prevalence	Type of FGM	Ethnic Group/Area	Law/Outreach
			(Dan, Yacouba, Toura, Gouro).	
Djibouti	90-98%	Excision and infibulation	Afars and Issa	Since 1994 Penal Code outlaws FGM with prison term and fine. NGO outreach groups campaign to educate and eradicate practice. Government support-use of its facilities; media.
Egypt	97%	Excision throughout country. Infibulation concentrated in southern part of country.	Practiced by both Muslims and Coptic Christians; across ethnic lines.	Murky area. Presidential decree in 1958 prohibited FGM making it punishable by fine and imprisonment. Later ministerial decrees allowed certain forms. Minister of Health in 1996 banned all doctors from performing FGM. Nonmedical practitioners of FGM have been arrested under current law. Many NGOs doing outreach including National Committee of IAC.
Ethiopia	90%	Circumcision and excision. Infibulation in areas bordering Sudan and Somalia.	Circumcision practiced among Amharas, Tigrayans and Jeberti Muslims living in Tigray. Excision practiced by Gurages, some Tigrayans, Oromos, and Shankilas. Infibulation practiced among pastoralists in Afar, the Somali region and parts of Harari. Mariam Girz practiced in Gojam (the Amhara region). FGM not practiced among Begas of Wellga, the Azezo, the Dorze, the Bonke, the Shama and some population groups in Godole, Konso and Gojam.	No law prohibiting FGM. Constitution prohibits harmful traditional practices. 1960 Penal Code prohibits torture and cutting off any body parts. Wide range of educational outreach activities by NGOs. National Committee of IAC does extensive activities. Government active in outreach.
Eritria	90 %	Circumcision, excision,	By almost all ethnic	No law prohibits FGM. Government makes

Country	Prevalence	Type of FGM	Ethnic Group/Area	Law/Outreach
		infibulation	and religious groups	information on FGM part of its health and general education programs.
Gambia	60-90 % average. Almost 100% of Fulas and Sarahulis	Excision. Infibulation in very small percentage of women and girls. Also special "sealing" performed.	Mandikas, Hausas, and Jolas practice excision. Sarahulis practice modified form of excision. Fulas practice "sealing" analogous to infibulation. Bambaras practice infibulation. Wollofs, Sereres and Manjangos do not practice FGM.	No law prohibits FGM. NGOs working to educate and eradicate FGM using workshops, seminars, theater, media etc. Foundation for Research on Women's Health, Productivity and the Environment (BAFFROW) developed curriculum for schools on "initiation without mutilation". Government recognizes harmful effects, supports NGO outreach. Concerned it be addressed with all due sensitivity.
Ghana	15-30%	Excision	Mainly among Muslims in far northeastern and northwestern areas. Prevalent among migrants of bordering countries in south. Ethnic groups known to practice FGM include Kussasi, Frafra, Kassena, Nankanne, Bussauri, Moshie, Manprusie, Kantansi, Walas, Sissala, Grunshie, Dargati and Lobi. Less prevalent among the educated in urban areas.	1994 law prohibits FGM. Sec. 69A of Criminal Code makes it 2d degree felony with fine and imprisonment. Art. 39 of Constitution abolishes injurious and traditional practices. History of enforcement of this criminal law. Extensive outreach by groups in collaboration with government to eradicate FGM. Government at all levels publicly supports eradication of FGM.
Guinea	70% - 90%	Circumcision, excision, infibulation	Peuhl, Malinke, Soursou, Guerze, Toma	Art. 265 of Penal Code prohibits FGM. Art. 6 of Constitution prohibits cruel and inhumane treatment. Supreme court preparing clause for Constitution prohibiting FGM. Outreach groups work with government to eradicate FGM through films, TV, seminars etc.
Guinea-Bissau	50% average; 70-80% in Fula and Mandinka areas; 20-30% in urban	Circumcision and excision	Fulas, Mandinkas, Peulh	No law prohibits FGM. In 1995 a law proposed to outlaw FGM defeated. Assembly did approve proposal to hold practitioners criminally responsible

Country	Prevalence	Type of FGM	Ethnic Group/Area	Law/Outreach
	Bissau.			if woman dies as result of FGM. Government gives some support for outreach groups doing educational seminars, publicity etc. National Committee formulated plan to fight FGM but has no money to carry it out.
Kenya	50%	Circumcision and excision. Some infibulation in far eastern areas bordering Somalia.	Throughout country but decreasing in urban areas.	No law prohibits FGM. A recent vote by Parliament defeated a motion to outlaw FGM on the basis that each tribe "has a right to choose what to do with its girls". This, despite the fact Ministries had announced government aim to outlaw FGM. Government hospitals instructed to cease practice of FGM. National Committee on Traditional Practices does outreach as do other groups.
Liberia	50%-60%	Excision	13 ethnic groups practice FGM. Mande speaking people of Western Liberia such as Gola and Kissi practice FGM. Not practiced by the Kru, Grebo or Krahn in Southeast, by Americo-Liberians (Congos) or by Muslim Mandingos.	No law prohibits FGM. Liberian National Committee collaborates with government in research, health training about harmful effects of FGM. NGOs also work in anti-FGM campaign.
Mali	90%-94%	Circumcision, excision, infibulation (southern part of country)	Most groups, including, for example, the Bambara, Dogon, Senoufo practice FGM. The Songhai and Tuareg do not practice FGM. FGM is lowest among ethnic groups in north.	No specific law prohibiting FGM, but Penal Code outlaws assault and grievous bodily harm. No nationally coordinated effort to educate on FGM. Many NGOs campaign and provide extensive education programs throughout country. Government supports these activities.
Mauritania	25% average. Among Soninkes and Halpulaar (95%). Among Moor woman (30%).	Circumcision (more common among the Soninkes) and excision (more common among Toucouleurs). Also symbolic excision using gum arabic plant based	All ethnic groups except the Wolof.	No law prohibits FGM. Practice not allowed in government hospitals. NGOs and public health workers educate on harmful effects of FGM.

Country	Prevalence	Type of FGM	Ethnic Group/Area	Law/Outreach
		product mixture to shrink the clitoris.		
Niger	20%	Excision	Peul in southern part of country; Songhai, Kourtey, Wogo	No law prohibits FGM. Government decree established committee to campaign against FGM. Government participates in educational seminars, publicity.
Nigeria	50%	Circumcision, excision and some infibulation in north west area.	Widespread throughout entire country across all ethnic groups and religions. Includes the Yoruba, Ibo, Hausa, Edos. The Nupes and Fulanis do not practice FGM.	No law prohibits FGM. No government policy against it. Many NGOs campaign and educate about dangers of FGM. Medical doctors and nurses campaign against it.
Senegal	20%	Excision	Toucouleur, Sarakole, Peul and Bambara, the Halpulaar, Mande, Diolas, Mandinguiques and the Tenda. FGM seldom practiced among the Ouolof and Serere.	No law prohibits FGM. President has spoken out against FGM. Outreach groups conduct seminars, publicity, campaigns, surveys, workshops on FGM.
Sierra Leone	80% - 90%	Excision	All classes and ethnic groups except Christian Krios	No law prohibits FGM. No government support to eradicate practice. NGO grass roots education program on danger of FGM exists. NGOs carry out sensitization programs and work to eradicate practice.
Somalia	98%	Infibulation	Most if not all ethnic groups.	No law against FGM. Outreach groups campaigned to eradicate FGM. Former Barre government appointed group to eradicate FGM. Education programs existed since Somalia Academy of Arts and Sciences began studies on FGM in 1980s. Extensive work by former government's Ministry of Education.
Sudan	89% of northern Sudanese women.	Infibulation predominates. Some are switching to excision instead of infibulation.	All ethnic groups. Predominantly infibulation throughout most of northern, north eastern and north	First African country to outlaw FGM. 1946 Penal Code prohibited infibulation but allowed less severe forms of FGM. Ratified again in 1957. Prohibited infibulation but allowed excision of projecting part of

Country	Prevalence	Type of FGM	Ethnic Group/Area	Law/Outreach
			western regions. FGM is virtually nonexistent in three regions of southern Sudan.	clitoris; punishment of fine and imprisonment. 1993 Penal Code does not mention FGM, leaving its status unclear. Outreach groups working to eradicate it for 50 years. Intensive campaign today.
Tanzania	10%	Excision, infibulation	Christian Chagga groups near Mount Kilimanjaro. Population groups-Dodoma, Singida, Kilimanjaro, Mara region, Morogono, Iringa and Somali immigrants.	No law prohibits FGM. Government efforts to eradicate practice. National Committee carries out extensive education programs, surveys, studies, research.
Togo	12% average. Ethnic groups vary. (Cotocoli, Tchamba, Mossi, Yanga and Peulh show 85-98%). Moba-22%; Gourma-12%.	Excision.	Cotocoli, Tchamba, Peulh, Mossi, Yanga, Moba, Gourma, Ana-Ife. Adja-Ewe and Akposso-Akebou do not practice FGM.	No law prohibits FGM. Human rights and women's organizations educate rural populations on harm of FGM. Since 1984, with help of government, National Committee of IAC holds seminars, workshops to educate about FGM.
Uganda	5%	Circumcision and excision.	Prevalent in only one district - Kapchorwa.	No law yet prohibits FGM. National Assembly bill would prohibit FGM. Government publicly condemns FGM. National Committee of IAC works to eradicate FGM and educate on harmful effects.
Zaire	5%	Excision	In ethnic groups living in the northern part of country above the equator.	No law prohibits FGM. Outreach efforts unknown.

This chart contains general information only and is not intended to be dispositive of asylum claims. Please refer to specific country information where available.

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Africa Overview: Status of Women

Women in Africa constitute over 50 percent of the population and they head about 40 percent of African households. They supply over 70 percent of the agricultural workforce, 50 percent of labor in domestic food storage, 100 percent in food processing, 50 percent in animal husbandry, and 60 percent in marketing. Despite their enormous contributions to their families, communities and the economy, African women face significant legal, social, traditional and cultural barriers. While laws and policies to guarantee women equal rights exist in most countries' constitutions, they have little impact in practice. Women continue to be denied equal rights and opportunities, depriving them of credit, medical care, training, education, and leadership positions. Biases are more rooted in the countryside, where there are fewer resources and more rigid social attitudes and customs concerning women.

Throughout the continent, statutory, customary and religious law exist side-by-side. Disputes involving "domestic" issues or "family" matters are often referred to traditional courts or village elders, where discriminatory treatment is perpetuated. Custom or common practice is often assigned a higher priority than the formal law, which is often ignored by those responsible for applying it. In many instances, women neither know their legal rights nor have effective means of asserting them. In some African countries, a woman has no legal right to own or bequeath property without permission of her husband or a male relative. Women are routinely denied compensation in cases of divorce, and they often lose custody of their children if tradition decrees that children are the wards of their fathers as is the case in Senegal. Some African women lack the legal right to enter into a formal contract without the consent of a male relative, and their applications for credit are rejected far more often. Many countries also restrict women's ability to obtain passports and travel without their husbands' consent. Polygamy is still commonly practiced, especially in Muslim communities and rural areas. Moreover, women often are threatened with ostracism or violence by their family or village if they consider exercising legal rights to which they may be entitled.

A corollary of the legal inferiority of African women is that crimes against them often are not prosecuted fully or are not considered criminal offenses. Violence against women often is excused, rationalized or overlooked by both traditional and modern legal systems. Female genital mutilation (FGM) is widespread in Africa being prevalent in 28 countries and, until recently, had been avoided as a topic of public discussion. Many leaders have refused to consider it a women's rights issue. Most African countries do not have any law against FGM.

African women are beginning to demand greater equality and recognition for their contributions, and they are moving ahead in the political arena. They captured media attention and contributed substantially to significant commitments made in Beijing. Women are raising and gaining political consciousness through social, business and political organizations. They are seeking a greater voice and representation in the UN, OAU and other key African structures. The rapid growth of women's NGOs and their support by donors is indicative of the growing movement supporting women's issues.

As of June 1995, women held 559 (9.5%) out of the 5,872 seats available in 38 parliaments in sub-Saharan Africa. About 80 cabinet-level positions of more than 900 in the region are held by women. Women have made significant political advances in Benin, Botswana, Eritrea, Malawi, Mozambique, Namibia, Sierra Leone, South Africa, Uganda, and Zambia. Women hold a significant percentage political offices in Mozambique, South Africa, Eritrea and Uganda. In these countries, women leaders have produced important legal advances, especially ensuring that new constitutions guarantee gender equality. The Uganda constitution has been cited as being the most gender-equitable in the continent. The most senior ranking female elected official in Africa is the Vice President of Uganda, Speciosa Wandira-Kazibwe, who is committed to advancing the issues of women and girls.

More African women also are now seeking economic empowerment in the informal and formal business sectors. They dominate the informal business sector, contributing importantly to household survival and economic development. According to the World Bank, informal economic activity accounts for 30-50 percent of gross domestic product in some African countries. Research studies in Zimbabwe, for example, have shown that women's "petty trade" accounts for 40-100 percent of individual household incomes. Women traders in West Africa wield enormous economic power and sometimes use their influence to pressure male politicians to respond to their needs. Also, more women are active through business and professional women associations, such as the African Federation of Women Entrepreneurs headquartered in Ghana, and the All-Africa Business Women's Association headquartered in Kenya. A recent success story from South Africa involves the creation of an investment fund, Nozala Investments Limited, by a group of businesswomen. Its goals are to ensure economic advancement for women, promote women entrepreneurs, and in general, seek investment opportunities which will allow South African women to share the nation's wealth.

HIGHLIGHTS OF STATE DEPARTMENT ACTIVITIES TO PROMOTE THE ADVANCEMENT OF WOMEN

"We cannot advance our ideals and interests unless we focus more attention on the fundamental human rights and basic needs of women and girls... If women can live and work as full and equal partners in any society, then families will flourish. And when they do, communities and nations will thrive... We are putting our efforts to protect and advance women's rights where they belong — in the mainstream of American foreign policy."

—President Bill Clinton on International Human Rights Day, December 10, 1996

Promoting the advancement of women is an integral element of US foreign policy. The State Department, in partnership with the community of non-governmental organizations, supports the efforts of the global community to promote the advancement of women.

Women's Rights in the Forefront of Policymaking: Women's rights are a fundamental expression of the foreign policy of the United States. When situations around the world threaten the fundamental human rights of women, the State Department brings those violations to the forefront of policymaking. The State Department also expresses support for those countries which are taking progressive actions to secure the rights of women.

- **Human Rights Report:** The State Department's annual country report on human rights practices around the world now chronicles, documents, and integrates issues of women's human rights. Through descriptions of issues ranging from the treatment of women in the judicial process to women's access to the economic and political levers of their societies, these human rights reports offer the most comprehensive guide to violations of the human rights of women worldwide.
- **Progress Reports:** The State Department publishes a monthly report on the progress made since the 1995 UN World Conference on Women held in Beijing. This report highlights the numerous positive activities of both governments and non-governmental organizations in the promotion and advancement of women.
- **Multilateral Efforts:** The US has taken the lead in the UN Commission on Human Rights to integrate the human rights of women into the mainstream of UN human rights activities. The US has seen that gender specific language is included in a broad range of resolutions of the Commission.
- **Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW):** The State Department strongly supports President Clinton's efforts for the ratification of the Convention on the Elimination of All Forms of

Discrimination Against Women and will be working with the US Congress with a view to early ratification of this important treaty.

- **NGO-State Department Collaboration:** Throughout the policymaking process, from embassies to foreign service officers to high level State Department diplomats, the United States continuously engages in a dialogue with women's non-governmental organizations.

Embassy Support for Grassroots Efforts: The on-the-ground work of United States embassies overseas provide a vital bridge between policymakers and the world's women. The United States supports efforts to promote the advancement of women through various embassy activities. A combination of funding and information exchange form the foundation of a process which elevate women's issues by expressing United States support for programs geared to the empowerment of women.

- **Promoting the Human Rights of Women:** The State Department has instructed all US embassies abroad to consider the advancement of women's human rights as an integral objective of US foreign policy. Embassies are raising key women's rights issues with host governments, women's groups, and non-governmental organizations, and devising means to energize US government efforts around the world to promote the empowerment of women.



- **Funding Grassroots Projects:** Many embassies use discretionary funds to support grassroots efforts for the advancement of women. For example, in 1996, the US Embassy in Namibia devoted its 1996 democracy and human rights discretionary funds to promote women's issues, funding six community-based programs on sexual violence against women and girls.

Political Participation and Empowerment: The full participation and representation of women throughout the entire political process is a foundation of sustainable democracies. As the promotion of democracy is one of the fundamental pillars of the foreign policy of the United States, the promotion of women as active participants in building and maintaining these democratic societies naturally follows. The State Department is supporting programs aimed at empowering women to become involved in all aspects of political life including voting, running for office and advocating for political change. For example, the State Department recently provided funding to a non-governmental organization which provides women in Asia with the training and skills to run for political office.

Humanitarian Assistance—An Emphasis on Women: The United States has been a leading advocate for focusing attention on the special needs of refugee women. The State Department is increasingly gearing its humanitarian assistance programs to provide women with needed services, provisions, and skills and coordinates these programs with both non-governmental and international institutions.

- **Funding Programs:** The State Department funded \$6 million for women's initiatives in Bosnia and Rwanda in order to facilitate the rebuilding of democracy and civil society in these two countries. Furthermore, the State Department funds non-governmental programs designed to provide women refugees with services, including reproductive health services. The Bureau of Population, Migration and Refugees (PRM) supported education programs to target

Afghan girls in Pakistan who otherwise would not have had equal access to education with boys.

- **Coordination with UNHCR:** The United States has worked closely with UNHCR to establish policies and guidelines for protection and assistance to refugee women to meet their special needs (protection against sexual and physical abuse, against exploitation, and against discrimination in the delivery of humanitarian supplies and services).

Violence Against Women: Violence against women, in all its forms, from the beating of women in the home to the rape of women in the battlefield, is the most widespread and entrenched violation of women's fundamental human rights. In particular, sexual violence, including rape, is among the most terrible dangers confronting refugee women. Violence against women imposes high societal costs and impede the true and sustainable development of democratic societies throughout the world. The State Department is taking an active role, in collaboration with communities and governments, in promoting the eradication of violence against women worldwide through the following type of activities.

- **Legal Guarantees:** The US has provided model legislation to countries overseas to help them draft comprehensive laws on violence against women, including domestic violence. Based on such model legislation, governments are instituting concrete legal protections for women.
- **Funding Programs:** The State Department and its overseas embassies fund a variety of non-governmental and community programs on violence against women. These programs range from the establishment of shelters and hotlines to assist women victims of violence to sensitivity training for police to public education efforts.
- **Rape as a War Crime:** The US has urged the Chief Prosecutor of the War Crimes Tribunal for Rwanda and the Former Yugoslavia to vigorously prosecute rape as a

war crime. The US is supporting a program to train Tribunal prosecutors and investigators on issues of sexual violence.

- **Refugee Protection:** The development of policies to protect and assist refugee women and the implementation of programs which incorporate these policies has been a major element of US refugee policy since 1990. The State Department has worked closely with the United Nations Commissioner for Refugees (UNHCR) to establish policies and guidelines for protection and assistance to refugee women to ensure that their needs are met.
- **Female Genital Mutilation (FGM):** The Senior Coordinator for International Women's Issues chairs an inter-governmental agency working group on female genital mutilation. This inter-agency group meets regularly to discuss strategy and policy with the overall goal of moving towards the eradication of this harmful practice. The group includes representatives from the Departments of Treasury, Health, USAID, USIA who are addressing new legislation outlawing the practice of FGM in the US and requiring the US to vote against international financial institution loans to countries where FGM is practiced and no education programs are in place to address it. The State Department develops country profiles on the practice of FGM for asylum adjudicators. The State Department also funds non-governmental activity aimed at alleviating the health complications which arise from the practice of female genital mutilation. US policy is to work in collaboration with community organizations and governments who are committed to eradicating this practice.
- **United Nations Special Rapporteur:** The US strongly supported the creation of a UN Special Rapporteur on Violence Against Women. The US is working at the current session of the UN Commission on Human Rights to renew the rapporteur's mandate.

Trafficking in Women and Girls:

The State Department, including the bureaus of International Narcotics and Law Enforcement (INL), Democracy, Human Rights and Labor (DRL) and Population, Refugees, and Migration (PRM), is working to combat the illegal trafficking of women and girls. The United States is currently involved in numerous bilateral, regional and multilateral initiatives to protect the

rights of all migrants and to help deter trafficking in persons. In order to halt illegal trafficking, the United States is working with its partners and allies in order to find solutions. In the areas of migration and enforcement, for instance, as part of an ongoing anti-crime training and technical assistance program, the State Department is hosting a joint US-Russia seminar on the criminal justice issues involved in the commercial sexual exploitation of women and children.

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U.S. DEPARTMENT OF STATE
Office of the Spokesman

SPECIAL PROGRAM IN HONOR OF
INTERNATIONAL WOMEN'S DAY
WITH
SECRETARY OF STATE MADELEINE ALBRIGHT
AND
FIRST LADY HILLARY RODHAM CLINTON

Dean Acheson Auditorium
Washington, DC
March 12, 1997

SECRETARY ALBRIGHT: Thank you very much. Thank you very much, Tim, for that exceptionally warm and friendly introduction. Mrs. Clinton, Dame Eugenia Charles, Geraldine Ferraro, Members of Congress, Excellencies, and Friends:

I am delighted to welcome the First Lady and all of you to the State Department's observance of International Women's Day.

I also want to thank that really great feminist, Tim Wirth, and Theresa Loar for the tremendous job they are doing. When the globe is your constituency, you tend to be pretty busy and no one burns energy more efficiently than our team at Global Affairs.

Let me begin this morning with one very simple statement. Advancing the status of women is not only a moral imperative; it is being actively integrated into the foreign policy of the United States. (Applause) It is our mission. It is the right thing to do, and, frankly, it is the smart thing to do.

The reason is that as we approach the new century, we know that we cannot build the kind of future we want without the contribution of women. And we know that, around the world, women will only be able to contribute to their full potential if they have equal access, equal rights, equal protection and a fair chance at the levers of economic and political power.

Towards these goals, we have made progress. I said once that if I had been born a generation or two earlier, and if I had wanted to make a definitive statement on American foreign policy, my only option would have been to enter society and then pour tea into an offending Ambassador's lap.

Today, women are engaged in every facet of international affairs, from policymaking to dealmaking, from arms control to trade, from a courtroom of the War Crimes Tribunal to the farflung operations of the United Nations High Commissioner for Refugees and to the top floor of the State Department.

So we have much to celebrate. We also have much further to go.

During my recent around-the-world trip, I met with six Presidents, four Prime Ministers, eight Foreign Ministers, three Defense Ministers, two Premiers, one Chancellor, one Secretary General and one Trade Minister. And if you put us all in one room, you would have 26 suits and my skirt.

This lack of representation at the top is mirrored throughout the political and economic structures of most nations. Whether one is bumping against a glass ceiling or standing on a dirt floor, equality remains--for most--more aspiration than reality.

It is in America's interest to change this. Advancing the status of women is directly related to our foreign policy goals. We want to build peace and expand the circle of democracy. We want to sustain a growing global economy that creates good jobs for Americans. And we want to see a future in which the values we cherish are more widely shared.

In each case, we can't get from where we are to where we want to go if women are left on the sidelines; women must be integrated at every step of the way.

Consider, for example, the pursuit of peace.

I am not among those who believe that if the world were run solely by women, war would disappear. The human capacity for folly and miscalculation is widely shared. But the history of this century tells us that democracy is a parent to peace. And common sense tells us that true democracy is not possible without the full participation of women.

The Beijing Conference has created new momentum for women to speak out, get involved, organize, vote and become candidates for office. The vast network of non-governmental organizations that women have built is focused on these tasks.

Greater participation translates into richer democracy and more representative policies. And in those regions where democracy makes the greatest difference for peace, women are hard at work creating and expanding the institutions for freedom.

I have seen in Bosnia the efforts of women's groups to heal the wounds of ethnic division. The women of that country are determined to build a society in which they--who have paid a fearful price for wrong decisions in the past--will have a role in making the right decisions in the future.

I have seen in Central Europe and the New Independent States the birth of movements designed to give women a real voice in the construction of new democracies. This is crucial, because women were hardest hit by the economic and social disruptions of recent years.

I have seen in Burundi hundreds of women from the Hutu and Tutsi ethnic groups working side by side to prevent in their country the genocidal violence that caused so much suffering in neighboring Rwanda.

During and since the Women's Conference, I have seen representatives of groups from around the world--African, Asian, Latin; Jewish, Islamic and Christian--joined in the common cause of sustaining the global momentum towards more open and representative political systems.

That is their goal, and as Americans, it is our goal.

So is economic growth.

Since 1993, under President Clinton's leadership, we have negotiated more than 200 trade agreements, given a tremendous boost to international commerce and created millions of new jobs.

But for the world's economy to keep growing, women everywhere must have increased access to the building blocks of economic opportunity and power.

A growing economy requires a modern economy. And as Turkey's Kemal Ataturk said seven decades ago, you cannot "catch up with the modern world by modernizing only half the population."

Despite recent gains, women remain an undervalued and underdeveloped human resource. This is not to say that women have trouble finding work.

In many societies, in addition to bearing the children, women do most of the non-child-related work. But often, women are barred from owning land, excluded from schools, provided less nourishment and permitted little or no voice in government.

It is no accident that most of those in the world who are abjectly poor are women. Frequently, they are left to care for children without the help of the children's father. Many are trapped at a young age in a web of ignorance and abuse.

Women are prepared to be full partners in sustainable development, but they need education, decent health care, access to credit, and protection from violence. They need the knowledge and the power to make their own choices.

We know from experience that, when that happens, the cycle of poverty can be broken and birth rates stabilized; environmental awareness increases, the spread of sexually transmitted disease slows, and socially constructive values are more likely to be passed on to the young. That is a priceless and lasting gift to the future.

We also serve the future when we stand up for basic values of law and respect for the dignity of every human being.

A half century ago, a great American First Lady was the driving force behind the adoption of the Universal Declaration on Human Rights. In Beijing, another great First Lady eloquently reaffirmed America's commitment to that Declaration and to its application to all people--specifically including women and girls.

Now, I don't know whether this resulted from a conversation between these two First Ladies.

But I do know that the Universal Declaration reflects spiritual and moral values that are central to all cultures, respecting both the wondrous diversity that defines us and the common humanity that binds us.

The Declaration obliges all governments to strive in law and practice to protect the rights of those under their jurisdiction. And by its very existence, it shows that whether a government fulfills that obligation is a matter not simply of domestic, but of universal, concern.

Unfortunately, today, around the world, appalling abuses are being committed against women. There are those who suggest that many of these abuses are cultural and there's nothing we can

do about them. I say they're criminal and it's the responsibility of each and every one of us to stop them. (Applause)

It is encouraging that in the wake of Beijing, efforts to curb violence against women have surged. In country after country, we see projects designed to heighten awareness and gain for women greater protection under the law.

This matters because every time a special police unit is created to ensure a prompt response to sexual or domestic abuse; every time a cooperative effort is undertaken to end female genital mutilation; every time a program is launched to halt the exploitation of women and girls; every time strides are made towards the equal valuation of women as individuals, family members and citizens--our world is uplifted and we are all enriched.

In the effort to advance the status of women, the United States is a leader; but a leader cannot--and we are not--standing still. At President Clinton's initiative, we are incorporating concerns related to women into the mainstream of American foreign policy. What does that mean?

For one thing, it means that the President's Inter-agency Council on Women, created last year to implement the Beijing Platform for Action, will be chaired this year by the Department of State.

It means that our overseas aid programs will continue to emphasize projects that expand the ability of women to participate economically and politically; to gain access to education and health care, including reproductive health care; and to protect themselves against violence and disease.

It means that we will place special emphasis on the institutions of civil society that include women and refugee relief that is designed to meet women's needs.

It means that we will continue to report honestly and thoroughly on violations of human rights, and that we will denounce those violations whether they are sins of omission by those who refuse to investigate or prosecute domestic abuse, or sins of commission by dictators such as those in Burma or extremists in Afghanistan.

It means that we will continue to back the international war crimes tribunals, because we believe that the authors of ethnic cleansing should be held accountable, and those who see rape as just another weapon of war should pay for their crimes. (Applause)

It means that we will take part in a global effort to crack down on illegal trafficking in women and girls. And let me say that if those who traffic in drugs should be punished severely--and they should--so should those who traffic in human beings. (Applause)

Finally, it means, because I said that I would tell it like it is, when I go to North Carolina in a couple of weeks to speak at the Jesse Helms Center, I will state explicitly that it is long past time for America to become party to the Convention on the Elimination of Discrimination Against Women. (Applause)

As I think many people know now, I have a very good relationship with the Chairman of the Foreign Relations Committee. We agree when we can and we disagree agreeably, when we don't agree on the subject.

The integration of women into our foreign policy is an active, ongoing, worldwide process. It requires working not only with other governments, but also with non-governmental organizations and other agents of progress. It affects everything from the design of AID

programs, to policy decisions made by our bureaus here in Washington, to Embassy activities around the globe.

And it reflects our understanding that progress requires not simply opening doors, but a vigorous effort to reach out and spread the word that the old era of injustice and repression must end so that a new era of opportunity and full participation may dawn.

Before closing, I want to say a few words about our next speaker, for she is certainly one of the women we have incorporated into the mainstream of our foreign policy.

During the past four years, Hillary Rodham Clinton has become America's most respected and valued--albeit unofficial--Ambassador.

She has advocated America's agenda of peace, democracy, economic growth and law from India to Indonesia, from China to Copenhagen, and from Ukraine to a memorable diplomatic and culinary experience in Ulan Bator.

She brings to her assigned tasks enormous energy, brains, commitment and volumes of eloquence.

Those of you who have done public speaking know how hard it can be to excite an audience, at least without getting into trouble. Imagine how hard it is when that audience comes from 150 different countries and when most of them are sitting there with earphones on, wires going every way, listening to emotionless and not always accurate translation.

And yet, this woman, the honorary chair of our delegation, electrified precisely that kind of audience in Beijing.

Her message still echoes; her contributions to American leadership continue to build; her wisdom has become an international force for good. All this, and a Grammy Award, too. (Laughter)

As Secretary of State, I can think of no greater blessing than to have the First Lady at my side and on America's side.

This weekend, at my request, she will travel to Africa, a region of great importance to the United States and to the progress of women.

I look forward to hearing about her trip, and I know we all look forward to hearing from her now.

Please welcome our terrific First Lady, Hillary Rodham Clinton. (Applause)

MRS. CLINTON: Thank you very much. Thank you so much, Secretary Albright. I still love to say that. We are gathered today to celebrate International Women's Day in the heart of the State Department, and we do as Americans have much to celebrate, starting with a Secretary of State who, yes, broke a barrier by virtue of her own gender; but who much more importantly is

committed to defending the rights not just of Americans but of citizens around the world regardless of gender.

Not only has Madeleine Albright broken many a glass ceiling, she has brokered many a peace. Not only has she opened many doors, she has opened many minds. Since she mentioned it, I would say that in my last conversation with Mrs. Roosevelt – (laughter) – she told me how pleased she was that her husband had appointed the first woman to the Cabinet in United States' history, and how pleased she was that my husband had appointed the first woman Secretary of State. (Applause)

I thank Secretary Albright for her leadership, her courage, and on a personal note her friendship. I am delighted that she has agreed to serve as the new Chair for the President's Inter-Agency Council on Women, ably assisted by Theresa Loar and Tim Wirth and others of you here.

We all know that countless responsibilities face our new Secretary of State and all of us. Our foreign policy does not lack for challenges. We must continue to reduce weapons of mass destruction. We must realize the century's dream of a wholly united, democratic, and peaceful Europe. We must work to capture new opportunities in Asia, to seize opportunities for peace in the Middle East and other areas that are strategic not only to the United States but to the entire globe.

We must work with our partners in Latin America, Africa and elsewhere to build an inclusive and expanding global economy. We must safeguard our people from the threats of terrorism, extremism, international crime, drugs and environmental degradation.

While all of these require our attention and commitment, today I have come to advance a simple idea, that is: the seamless inclusion of girls and women's needs in American foreign policy. Despite the work they do, the families they raise, the communities they hold together, too many of the world's women, particularly in developing nations, live on the outskirts of opportunity and equality.

But let me be clear. This challenge is not confined to the developing world. We still have plenty of work to do here in the United States and in other advanced economies of the world to ensure that women have a full stake in democracy. One goal in every country should be to see that all citizens, regardless of race or gender or ethnicity or religion, have a full place at their society's table.

If you'll forgive just a slight diversion, yesterday I was in Arkansas. I visited people who had been hit by a terrible tornado in the morning. Even before that disaster struck, these were people already working overtime to build good lives to reach their aspirations. The full benefits of American society were still a long way away for them. After this tornado, all that they had worked for, all they had hoped for, seems lost.

Later that day, I spoke at an event that helped raise funds to send single parents, primarily women, to college or vocational school. I heard stories from five women who told us what it had

meant that their society, in the form of those who had raised these funds, reached out and told them that they could make something of their own lives; they could go to college; they could support themselves and their children.

They had heard the message that is even still too often conveyed in America: that they weren't worth very much; that nobody really cared too much about them. As one young woman said, "Five years ago, I was in a battered woman's shelter in Fayetteville, Arkansas. I had nothing. I not only didn't have a car, I didn't have a driver's license, and my face looked as though it had been run over by a truck. All of a sudden there were people there who convinced me that I could make something of myself and care for my nine-month-old son. I thought to myself, how can these people believe in me, that I could go to college, that I could support myself. How could these people care about me when my own husband didn't care about me."

Those stories as I heard them reminded me of stories that I have heard around the world, as women in Bangladesh or India or Nicaragua or Chile stood up and told me what it meant to them to have someone believe that they, too, could make a living for their families; that the skills they had would be valued in the marketplace; that their children, especially their daughters, could have a better life.

The women last night were helped to return to school, and today they are citizens of the United States in the fullest sense of that word. Whatever disparities of wealth exist in our country and around the world means that people are left by the side of the road, detoured off the information highway, unable to take advantage of democracy's opportunities. What America must do for its own sake, as well as for the sake of its leadership in the world we are in today and that we are entering tomorrow, is to promote democracy and civil society in every nation, so that all citizens – every man, woman and child – can live up to their God-given potential.

But one may ask, "Well, it's fine for me to care about the women of Arkansas, but why should I or any American care about women in developing countries and around the world?" Why should women, as Secretary Albright just eloquently explained, be a concern of ours and our foreign policy here in the United States?

What the Secretary said and what this Administration believes is that if half of the world's citizens are undervalued, underpaid, under-educated, under-represented, fed less, fed worse, not heard, put down, we cannot sustain the democratic values and the way of life we have come to cherish. If as a nation Americans care about opening foreign markets for American goods and services, if we care about making our country secure in the face of new threats, if we care about widening the circle of peace and prosperity, then we must address the conditions and circumstances of the world's women.

You in this room know better than anyone else that our world is in a time of great transformation, heralding ever more democracy, leading, we hope, to ever more peace. But the great promise of this time is not without its challenges. Global competition, the information revolution, the rapid pace of change create pressures on every society, from governments down to families. These pressures pose unavoidable questions for us as we approach the 21st century. How do we figure

out ways to balance individual and community rights and responsibilities? How do parents raise children in the face of the influences of the mass media and consumer culture? What do we make of what seems to be a conflict in many instances between personal identity and the work available in an age of globalization and high technology? What about the roles of women in society? How will people preserve their ethnic pride and value their national citizenship, and how will nations protect their sovereignty while cooperating regionally and globally with others?

Thinking about these questions and how a free nation like ours will respond to them, we may need to be reminded that democracy is not just about legally protected rights, elections or free-market economies. It is about the internalization of democratic values in people's hearts and minds. It is about how, in the absence of either hot or cold wars, democracy is rooted in people's everyday lives.

Given the changes that are going on around us, we can no longer gauge our interests around the world solely through power blocs and vast arsenals. Across the globe, here at home, at the end of the Cold War, we have been freed to focus on issues that edge right up to our own front doors. How do we educate our children? How do we insure that families have proper health care? How do we insure that democracies and free markets produce citizens, not just consumers?

I have said before that in this time of challenge around the globe, we know we will continue to cope with what is often thought of as the traditional balance of power among countries. But I would also argue that we must now add to that balance of power equation, often called *realpolitik*, the idea that real life politik may be just as intimately connected with whether or not democracies survive and flourish.

These issues that we speak of today should not be considered women's issues. But certainly it is fair to say that women, often by necessity, become the world's experts on the hazards and vicissitudes of life, and they therefore often understand and appreciate more clearly that they have a vested interest in insuring that their societies and governments address these real life challenges.

I have seen for myself on continent after continent the solutions that women are forging. New mothers in Jakarta, Indonesia, who gather every week to learn about family planning and better nutrition for their children. Doctors and nurses in Belarus and Ukraine who are caring for the children of Chernobyl. Women from Santiago to San Diego who are working on issues as diverse as education, crime and the environment.

These issues are central to our global democratic interests, for what distinguishes democracy is fair and genuine participation in every aspect of life. It should be too obvious to point out, but unfortunately it isn't, that giving women a strong voice and fuller say over their futures is intimately related to the health of democracies, because women are the majority in most countries and the world over. America's credo should ring clearly: a democracy without the full participation of women is a contradiction in terms. To reach its full potential, it must include all of its citizens.

Clearly, whether we succeed in strengthening democratic values around the world is of special consequence to women, who in our country and elsewhere are still striving to attain and even define their rightful place in government, the economy and civil society, and to claim their rightful share of personal, political, economic and civic power. Raising the status of women and girls and investing in their potential means insuring that they have the tools of opportunity available to them: education, health care, credit and jobs; legal protection, and the right to participate fully in the political life of their countries; and that is why the United States must continue its bipartisan tradition of supporting initiatives that move our world closer to these goals.

Today, more than 600 million women worldwide are denied the opportunity of an education. Women make up two-thirds of those who can neither read nor write. Yet the single most important investment any developing nation can make is in the education of girls and women. We are discovering that in country after country the benefits of educating women go far beyond the classroom and the schoolhouse. They go to stronger families, better health, nutrition, wages and levels of political participation.

I have seen how the support of the United States for the education of women and girls worldwide is paying off. I have seen how similar social investments, also many supported by the United States, can make a difference in countries as diverse as Brazil, the Philippines, Nepal and Pakistan. Certainly, as I travel around the world and as many of you do likewise, we have seen with our own eyes that investing in girls and women helps to transform communities, which in turn can transform society. Women will not flourish and neither will democracy if they continue to be under-valued inside and outside the home.

I have had many experts in economic development around the world say to me that women's work is not part of the economies of countries; that women do not participate in the economic markets of the countries. And yet I have seen with my own eyes as I've traveled through urban areas and remote rural ones that women are bearing often the bulk of the load of the work that must be done to plant crops, to harvest them, to make it possible for small enterprises to flourish in market stalls.

So I know that women are working. Their contributions may not be counted in the gross domestic product of their societies, but they are of value. If all the women in the world tomorrow said they would not work outside the home, the economies of every country would collapse. (Applause)

It is time that we honored and counted the contributions that women make, both in the home and outside. Investing in women also means investing in their health and in turn in the health of their families. I am especially pleased that the United States has provided assistance through the United States Agency for International Development to assure that women, children and families have access to a full spectrum of low-cost, high-yield health care services, from safe birthing kits for expectant mothers, to basic immunizations for infants, to oral rehydration therapy to treat children suffering from diarrhea.

I want to say a special word about family planning and its importance in this larger effort. Family planning is fundamental to letting women take responsibility for themselves and their children. Right now, however, roughly 100 million women worldwide cannot get or are not using family planning services because they are poor, uneducated or do not have access to care. Some 20 million women will seek unsafe abortions. Of these women, some may become disabled for life; some will have other health problems.

But fundamentally, the rate of unsafe abortions is in itself a tragedy. High abortion rates do not represent women's equality. They represent a failure on all our parts to help women prevent unwanted pregnancies in the first place. If we really care about reducing abortion and fostering strong families, we must not back away from America's commitment to family planning efforts overseas. (Applause)

And if we really care about making women equal partners in societies the world over, we must do everything in our power to fight violence against women, whether it is a hidden crime of domestic abuse or a blatant tactic of war. No single social investment is a panacea for women or for developing countries, nor should every just cause in the world be America's to embrace. But I do believe that as long as discrimination and inequities persists in a broad-scale way against women, a stable, prosperous world will be far from a reality.

Taken together, our investments in social development are vital to strengthening free market interests, spreading our democratic ideals, and enhancing our security. Over time, America has learned that our ideals and interests cannot be divorced from the political, economic, and social cross-currents swirling around us.

I hope that we have also learned that engagement with the world represents opportunities at home as well as obligations abroad.

Let me give you just one modest example. I spoke recently at a conference sponsored by USAID called "Lessons Without Borders." At the conference, Baltimore's Mayor, Kurt Schmoke, told how governmental leaders from his city had gone to Africa to learn about simple, low-cost strategies used on that continent to encourage parents to immunize their children. Now, similar programs are in place in Baltimore, with community clinics, a vaccination van, door-to-door visits, and the resulting higher immunization rates for children under three.

We can learn from our neighbors around the world. Many of the lessons we can learn, we will find, are lessons that have been helped to be taught by our own foreign policy engagement. Less than one percent of our budget, yet countless lives can be improved and we can improve lives here at home.

Before I close, I want to say a word about my forthcoming trip to Africa. I was very honored to be asked to make this trip because I think America's engagement in the world must include an engagement with sub-Saharan Africa. Contemporary history is a story that citizens and countries are writing, and there is a new story that must be told. Every region is contributing its own chapter. Africa has a remarkable story if we will only pay attention to it.

It is moving toward democracy. In the last six years, the number of democracies have jumped from five to 23. Africa is growing economically, moving from suffocating state-controlled economies to open markets that can give full life and scope to human endeavor. Last year, 30 countries recorded positive economic growth.

Africa is beginning to forge a new relationship with the United States; one based not just on aid but on shared ideals, mutual responsibilities, integration into the world economy, and partnerships designed to resolve conflicts and to meet common challenges. To be sure, many of the African democracies are new and therefore fragile. Hope remains tenuous. Too much of the continent continues to be riven by disease, malnutrition, poverty, injustice, corruption, perilous conflicts, and their terrible aftermath – refugee crisis that trap women and children especially in lives that go from bad to worse.

And yet – and yet in spite of these challenges, for the first time, we can see that at this moment in history there are in Africa grounds for far more hope than despair. With the support of the United States, we can solidify that hope.

I will be privileged to visit Senegal, South Africa, Zimbabwe, Tanzania, Uganda, and Eritrea. I am pleased that so many of the Ambassadors from those countries and other countries in Africa are with us today.

I hope to witness firsthand and to highlight each country's efforts to build democracy and a strong, civil society. I will focus particularly on grassroots initiatives and on efforts that affect women and children. I hope this trip will give the American people a renewed sense of the importance of our commitment to Africa. I hope it will lay out exactly why we must do our utmost to support democracy and social investment in Africa, and to strengthen Africa's place in the community of nations.

I hope it will show that American engagement must be measured not just in aid dollars or humanitarian efforts in the wake of tragedy and crisis, but in the democratic values we reinforce and the human rights we defend and in the conflicts we help resolve preventatively.

There are, to be sure, issues of America's national security at stake. Instability in Africa, whether it is rooted in war, in terrorism, in organized crime, in disease, in environmental degradation and poverty, touches us, too. There are also economic issues at stake. Right now, the United States holds only seven percent of the African market of 600 million people. By forging stronger economic ties with Africa, we will do much to secure the prosperity of our own people as well.

But, finally, our greatest reasons for engagement with Africa are built on a positive foundation. Africa is on the move with a new generation of leaders, the fresh air of political reform and thriving multi-ethnic societies.

As we look at the future for America's engagement around the world, we can see that wherever we help to seed the ground for democracy, wherever we reach out to people out of mutual respect

to help them help themselves, wherever we understand clearly that in this time of interdependence and interconnection, we all have a stake in the success of the other. We will make progress together. Whether it comes to assisting and working with our friends in the new democracies in Africa or understanding the importance of our commitment to women and girls, America's interests are at stake.

But far more importantly, America's values are at stake. If we act upon those values, we will help to lead the world into the kind of new future we envision as possible for our children and all the children around the globe.

Thank you very much.

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Africa Overview: Refugees

Sub-Saharan Africa currently holds approximately 5 million refugees, one third of the world's total. At the same time, it is home to half of the world's estimated 20 million internally displaced persons. The refugee situation is at once complex and dynamic. There are at least 25 refugee-generating countries and 39 host countries in sub-Saharan Africa. Many countries are simultaneously hosts and generators (e.g., Liberia and Sierra Leone, Ethiopia and Sudan, Eritrea and Sudan, Angola and Zaire, Senegal and Mauritania). Significant refugee repatriations which have occurred in recent years include the return of over 1.5 million Mozambican refugees and some 2 million Rwandans.

The continuing ethnic tensions, human rights abuses, competition for resources (due in part to population growth), environmental degradation, political change, religious proselytizing, and easy availability of modern weaponry that produce thousands of refugees are not solely internal domestic matters, but transnational issues which affect neighboring states which end up hosting substantial numbers of needy people. Mass movements of people can destabilize host countries and disaffected refugee groups often nurture the seeds of future conflicts as we have seen in the Great Lakes region.

For some time, we have been concerned about the growing refugee burden on lesser developed countries. Recently, hospitality towards refugees in Africa has been strained. Tanzania, which has a long tradition of generously hosting refugees, has for the first time "closed" its borders. In December 1996, however, an estimated 400,000 Rwandans were repatriated from Tanzania following a government ultimatum to depart. Government pressure and the active participation of the Tanzanian military in the repatriation effort attracted criticism from refugee rights organizations. New refugees from Burundi and Zaire are, however, still being admitted despite these efforts.

Funding for assistance to African refugees through the Department of State, refugee assistance contributions for Africa reached \$175.4 million, not including food aid or complementary disaster assistance which were funded by USAID. In certain specific situations, the Department of Defense has also provided surplus equipment or peacekeeping support that benefits refugees and other conflict victims. In FY 97, State Department assistance is projected to reach over \$200 million. Most of these assistance funds are channeled to specific Africa regional appeals from international organizations such as the Office of the United Nations High Commissioner for Refugees (UNHCR), the International

Committee of the Red Cross (ICRC), the International Federation of Red Cross/Crescent Societies (IFRC), and World Food Program (WFP).

Protection of and assistance for refugee women and children are particular concerns. The U.S. and UNHCR try to use people-oriented planning techniques where the particular vulnerabilities of women, children, and men as well as their particular skills are taken into account. Refugee populations usually are 80% women and children. They are particularly vulnerable to stresses such as rape and losing husbands and family support structures due to their being women and refugees. The difficult issues of refugees' reproductive health, the fate of orphaned and unaccompanied children who are separated from their families, as well as war trauma and child soldiers are increasingly being addressed through cooperation between UNCHR and UNFPA.

Senegal is both a host and generator of refugees. There are a disputed number of Mauritanian refugees (as many as 50,000) who fled or were expelled from Mauritania after ethnic killings in 1989 living in villages along the Senegal River. There are 15,000 or more Senegalese refugees in Guinea Bissau and the Gambia as a result of the Casamance conflict.

South Africa was a well-known, if relatively small (25,000), generator of refugees during the apartheid era. Return from exile was not without problems for many. During the Mozambique war, South Africa hosted some 250,000 Mozambican refugees. Today, South Africa faces mainly migration problems as poor citizens of surrounding countries come to South Africa seeking work.

Zimbabwe produced many refugees during its independence war and during ethnic clashes of the mid-1980s but they have all returned from neighboring countries. Zimbabwe hosted some 200,000 Mozambican refugees for a decade (1984-94).

Tanzania is distinguished as having never generated refugees and as having been a generous host to refugees from both neighboring countries (Rwanda, Burundi, Zaire, Uganda, Mozambique) and further afield (Namibia, South Africa, Somalia). It is currently receiving daily inflows from the conflicts in Zaire and Burundi despite a fraying welcome.

Uganda was Africa's third largest generator of refugees in the early 1980s. Today, although there are almost no Ugandan refugees, the number of internally displaced is on the rise, with some 170,000 displaced in the north, owing to attacks by Sudanese-sponsored insurgents. Uganda continues to host some

250,000 refugees from Sudan, Zaire, and Rwanda. Rebel attacks on refugees and internally displaced persons as well as military recruitment by various rebel groups among refugees are issues of concern.

Eritrea's 30 years of fighting for independence generated hundreds of thousands of refugees who fled mostly to Sudan. Despite spontaneous repatriations, approximately 300,000 remain there. Organized return has stalled owing to Eritrean and Sudanese unwillingness to cooperate and meet with each other (they have broken diplomatic relations). The UNHCR and the international community are working on options to break the deadlock and move the Eritrean repatriation forward.



PEACE CORPS

DIRECTOR

March 10, 1997

MEMORANDUM FOR THE FIRST LADY

From: Mark Gearan *MG*
Peace Corps Director

Re: The Peace Corps in Africa

We are delighted that you will be meeting with Peace Corps Volunteers in Senegal, Tanzania and other countries during your upcoming trip to Africa. Your visit to Paraguay and the uplifting message you delivered to our Volunteers energized the entire agency. I am confident that your visits in Africa will have the same impact.

Our largest, oldest, and, in many ways, most successful programs are in Africa. Today, more than 2,600 Peace Corps Volunteers are working in health, education, the environment, small business development, and agriculture. They are demonstrating the importance and the validity of your message of "it takes a village," by living and working at the grassroots level in hundreds of villages throughout the continent.

Peace Corps Volunteers believe that they are making a positive contribution in the countries where they serve. A recent Peace Corps survey found that nine out of 10 former Volunteers believed they had a positive impact in their host countries, and an equal number would make the same decision to join. Volunteers also continue to serve when they return to the United States: nearly 80 percent of former Volunteers have or continue to volunteer in the U.S., through charitable and religious organizations, as tutors, and through groups like Habitat for Humanity.

Attached is a briefing book that contains information about the important work that Volunteers are carrying out in Africa.

Eritrea -- Peace Corps Volunteers first arrived in Eritrea in 1995, to assist the government in providing Eritrean children with a quality education. All of the 40 Peace Corps Volunteers in Eritrea work as educators.

Senegal -- Peace Corps/Senegal is one of our oldest programs: Volunteers have been serving there for almost 34 years. Today, more than 100 Volunteers are doing

outstanding work on a variety of projects. In particular, Environment Volunteers are helping Senegalese farmers to blend traditional and modern farming techniques to grow more food and, at the same time, protect the environment and the soil quality.

South Africa -- In February of this year, the Peace Corps sent its first group of Volunteers to serve in South Africa. Our entry into South Africa is an outgrowth of President Mandela's state visit with President Clinton in October 1994, and Vice President Gore's signing of the Peace Corps country agreement with Deputy President Mbeki in December 1995. The 31 Volunteers will work side-by-side with South Africa's teachers in the country's Northern Province, to improve the quality of education in traditionally underserved areas. Vice President Gore and Deputy President Mbeki provided a fitting welcome to the Volunteers in South Africa, during the recent U.S.-South Africa binational commissions meetings in Cape Town.

Tanzania -- Peace Corps Volunteers have been serving in Tanzania for almost 25 years. Most of the current Volunteers are working to improve educational opportunities for Tanzanians. The Volunteers are doing some extraordinary work with youth groups and peer education programs to help prevent the spread of HIV/AIDS.

Uganda -- Peace Corps Volunteers returned to Uganda in 1991 following an absence of 18 years. One of our most notable initiatives there is our work with the non-governmental organization Ugandan Women's Efforts to Save Orphans (UWESO), founded by First Lady Janet Museveni to link Ugandan women with income generating opportunities.

Zimbabwe -- Volunteers have been serving in Zimbabwe for 6 years, and they remain very popular in towns and villages throughout the country. They are developing libraries and resource centers in rural schools and have sponsored expos for small businesses that concentrate on creating economic opportunities for women.

Secretary of State Christopher met with our Volunteers in Mali last October and saw some of the excellent work they are carrying out. A huge crowd of villagers from throughout the region gathered to greet him, including some who brought a large sign that said, "Welcome Warren!" After the event, the Secretary called me from his plane to tell me how much he enjoyed it and how much he respected the Volunteers. His staff reported to me that it was one of the best events of his tenure as Secretary of State.

Please let me know if I can provide you with more information or answer any questions.

AFRICA REGION

Regional Overview

Lost in the often pessimistic portrait of modern-day Africa is the resiliency of most African men and women who continue with their daily lives—farming, fishing, trading, educating their children, taking care of the health of their families, setting up water committees to maintain village pumps, building solid waste disposal systems, running apprenticeship programs for young people, managing their natural resources, and developing small credit unions and businesses.

But in recent years the socio-economic challenges in Africa have escalated. Unstainable debt burdens, political instability or civil strife, environmental degradation, and expanding populations have brought enormous pressures on the land and government-supported social services. Peace Corps Volunteers, have mirrored the resiliency of the people with whom they work. Their presence is a statement of hope and support to people who are working to encourage reforms, create open economies, and build civil, democratic societies.

Peace Corps Volunteers have a long history of cooperation with, and commitment to, African communities across the continent. They work at the grass-roots level on a wide array of projects that have made significant contributions to the lives of ordinary Africans. Volunteers work with underserved communities in their fields, schools, villages, neighborhood centers, and health clinics. In the process, they have built a spirit of friendship, understanding, and mutual respect between Americans and the people of Africa.

Today, an average of 2,250 Volunteers are serving in 30 African countries. Their efforts are focused on working with ordinary men and women who want to strengthen their communities and build a better future for their children. Volunteers transfer skills for managing development and strengthening community participation at every stage of a project, from planning to completion and evaluation. Volunteers encourage members of their communities to develop their own performance standards to better understand how projects can improve the quality of life. They support community leaders who are making hard decisions about scarce resources and taking on more responsibility for the future of the continent.

Peace Corps Volunteers are also working with their African counterparts in new fields to meet new needs. In Zimbabwe, Namibia and The Gambia, Volunteers work in schools, libraries and resource centers to establish a culture of reading. In Benin, Volunteers and their students are part of Project GLOBE, an international science program that allows young Beninese rare access to computer technology. In Ghana, Uganda and Lesotho, Volunteers are building networks and working with NGOs to provide opportunities for business men and women in local industries and enterprises. Health and Agricultural Volunteers are collaborating on workshops for nutrition and maternal and child health care projects in Chad, Congo, and Malawi.

AFRICA

Across the continent Volunteers have helped put environmental education into school curricula. In Ethiopia, Gabon, Madagascar, and Tanzania, Volunteers are encouraging school children to share their knowledge about the environment and natural resources with their parents who are natural resource managers and users. Volunteers are also working with men and women farmers helping them maintain a balance between their needs and protection of the land.

The number of refugees and displaced people are growing in Africa. Much of Peace Corps' regular work brings contact with these homeless populations. Therefore, the Peace Corps' newly established Crisis Corps provides a additional opportunity for rapid responses to natural disasters and humanitarian crises. In FY 1998, 14 Volunteers will assist NGOs in working with Liberian and Sierra Leonean refugees in Guinea and Cote d'Ivoire.

As part of the Peace Corps' Strategic Plan to adjust to reduced budgets and to take advantage of new opportunities for Volunteer service, the Peace Corps closed its country programs in Sao Tome and Principe in FY 1996 and Swaziland in FY 1997. In addition, Peace Corps operations in Botswana will close in FY 1998. The Peace Corps leaves these countries with great pride in the contributions that Volunteers have made and with confidence that the communities where Volunteers lived and worked can manage their own development needs in the future.

In February 1997, the first group of Peace Corps trainees arrived in South Africa. This new Peace Corps program is an opportunity for Americans to build the kind of people-to-people relationships with the people of South Africa that would not have been possible a few years ago. The first group of Volunteers will support the professional development of primary school teachers. Once Volunteers have established a presence in local schools, the Peace Corps anticipates that they will assist in developing the skills of individuals in surrounding communities.

For more than 35 years, since the first group arrived in Ghana, Peace Corps Volunteers have helped build the often slow road to sustainable development in Africa by working daily with the continent's most important resource: Africa's men, women, and children.

Sector Summaries

A. Education



Education remains the Africa region's largest sector, accounting for over 35% of the region's Volunteers. Programming in education is designed to offer students' quality instruction; improve the teaching skills of African educators; develop relevant, culturally appropriate instructional materials; and meet the educational needs of the communities where Volunteers live and work.

Volunteers are teaching math, science and English to thousands of young African students. Volunteers are also working with African teachers and administrators either in teacher training colleges or informally in the classroom setting. In Ghana, Malawi and Kenya, they assist in special education programs. Promoting educational equity for girls and women is an important feature of Volunteers' work. Volunteers build bridges between the classroom and community by introducing important issues such as nutrition, environment, and health into education curricula, and by encouraging students to apply their learning in their daily lives at home.

In The Gambia, Uganda, Zimbabwe, Namibia and Lesotho, Volunteers are establishing resource centers for teachers, learners and local communities. In Guinea, Volunteers participate in workshops that encourage girls to remain in school and succeed academically. In 22 countries, Volunteers are also involved in extra-curricular activities such as computer clubs, Earth Day celebrations, sports clubs, and summer language camps.

B. Economic Development



Volunteers promote economic development at the grass-roots level in 10 countries in the Africa region. Volunteers facilitate entrepreneurs' efforts to forge linkages with sources of raw materials and with other businesses, in order to market products or redistribute them for sale. The Volunteers offer on-the-job consulting and train entrepreneurs in business management skills.

Volunteers in Mauritania promote local pump and fence manufacturing businesses. Volunteers have developed fruit and vegetable, and fruit-tree grafting businesses in Senegal. In Ghana, they support the participation of small and micro-entrepreneurs in the tourism industry, and assist in the development of businesses such as seedling nurseries.

Volunteers collaborate with international and local non-governmental organizations on grass roots economic development projects. In Uganda, Volunteers work with a local NGO to help stabilize families in the aftermath of the HIV/AIDS epidemic. In Benin, Volunteers helped organize a fair where businesses and NGOs forged important linkages.

Volunteers in Mali are strengthening financial services for local entrepreneurs by working with village banks, credit unions, non-governmental organizations, and other institutions that provide financial services for communities that are underserved by the formal banking sector.

C. Environment



Protecting fragile environments, preserving bio-diversity and developing community-based natural resource management projects are the major goals of Peace Corps' environmental projects in Africa. Across the continent, over 400 Volunteers are introducing new techniques that protect the environment and enhance its productivity. Volunteers are taking on environmental education in primary schools and among out-of-school youth.

Volunteers in Gabon will soon be participating in the new Forestry and Agriculture Resources Management (FARM) project that will help relieve pressure on forest resources by improved agroforestry and farming techniques, environmental education, income generation, and nutrition education activities. In Senegal, Volunteers have worked with the Ministry of Education to integrate environmental education into the national curriculum.

Volunteers participate in activities which strengthen communities' ability to address environmental concerns and balance the needs of today with conservation of the land for future generations. In Niger, Volunteers are working on ecologically-sound farming and herding practices to increase crop production and reduce stress on the land. They are also working on a "woodless construction" project that reduces the need for timber and increases the potential for old growth forests. In Guinea, Volunteers help develop community agroforestry committees and train committee members in integrated farming practices while also participating in school environmental education.

D. Health



In 19 African countries, Volunteers are assigned to community health education projects sponsored by host country governments, international organizations, local non-governmental organizations, and community groups. Volunteers promote community-based solutions for the provision of both preventive and curative health services. They have played a critical role in international efforts to eradicate Guinea Worm disease in Africa. They help health care professionals and local community volunteers conduct health education campaigns, in nutrition, HIV/AIDS prevention, maternal and child health, and the prevention of water and fecal-borne diseases. They also work with local community groups to acquire the basic management skills necessary to organize local preventive and primary-care services.

Volunteers have long been active and successful in water projects, primarily well-digging and drilling for potable water supplies. They develop their communities' capacity for management, maintenance, and repair of these sources.

No other continent has suffered more from the impact of HIV/AIDS than Africa. Peace Corps Volunteers in other countries have joined efforts to stem the spread of this disease through education and prevention programs. Peace Corps Volunteers, teachers and health educators in Cameroon have developed a book which has been adopted by the Ministry of Education as part of the national curriculum.

E. Agriculture



Increasing Africa's agricultural output is one of the continent's biggest challenges. Volunteers are working with thousands of farmers in more than a dozen countries to promote greater food security and sustainable farming practices. Volunteers work closely with individual farmers, village groups, and local institutions to implement an integrated approach that focuses on

managing water resources, gardening, animal husbandry, agro-forestry, preventing soil erosion, and rural cooperative projects. Women, who are often the main providers for their families, are target participants in projects focusing on income generation and nutrition.

Volunteers and farmers in Gabon, Cameroon, Congo, and Zambia are working on small-scale, intensive, freshwater fish farms. These fish farms increase incomes and provide families with sources of food and protein. In Benin, The Gambia, and Guinea Bissau, Volunteers are working with local residents to improve small animal husbandry techniques, educate primary school students about gardening, decrease the negative effects of farming on the environment, and increase the quality, quantity and variety of foods.

THE CORPS IN AFRICA

More Peace Corps volunteers have served in Africa than on any other continent. Ten of those programs have been terminated, including the recent Central African Republic evacuation. Five more are scheduled to close within two years. In a recent interview, Maureen Carroll, the regional director for the agency's Africa region, discussed the Peace Corps' trends and intentions.

Q • Peace Corps' latest country departure was the Central African Republic, where 85 volunteers were evacuated a couple of months ago, some under armed military escort. We hear all volunteers are safe, and almost half of them were offered and accepted transfers to projects in nearby African countries. News reports indicate French troops have restored order in the streets of Bangui and the administration of President Ange-Felix Patasse asked the Peace Corps volunteers to come back, but there are reports that it will be a minimum of a couple of years before that happens again. Why did Peace Corps leave, what are conditions like in the CAR right now, and why could it be so long before Peace Corps returns?

A • The decision to suspend our program in the Central African Republic was a very difficult one, for those of us in Washington, as well as for the staff, volunteers, and our host-country partners in the CAR. However, our most important responsibility is to maintain the safety and security of our volunteers, and this responsibility necessitated our suspension of the program in the CAR. That said, our presence there was highly regarded for its effective programming, high levels of staff and volunteer satisfaction, and the growing responsiveness of the government of the CAR.

The current situation is stable but tenuous. With the dramatic increase in personnel security incidents, and the possibility of strikes and disruption in public services, the environment is not appropriate for an imminent return of Peace Corps volunteers. The Peace Corps director met with the CAR's ambassador to the United States and reviewed the time frame for a possible

resumption of the program. The time frame is dependent upon several factors, including security reports, signs of stability in the Central African government and economy, and the Peace Corps' planning and budget cycle.

Q • According to agency statistics of the last 35 years, we've worked in a total of 45 sub-Saharan African countries, and three in North Africa. So far, we've left about 10 of them and, according to Peace Corps Director Mark Gearan's announcement last winter, we'll be out of five more—Tunisia, Swaziland, Botswana and a couple of very small programs, the Comoro Islands and Sao Tomé et Príncipe—in early in 1997. Adding the new program that starts in January in South Africa, we'll be working in about 30 countries. Is Peace Corps abandoning these countries? Are we cutting back in Africa?

A • Absolutely not. In fact, last year volunteers served in 35 African nations—more countries than at any other time in the Peace Corps' history. From the first volunteers who served in Ghana 35 years ago, the Peace Corps has had a very proud record of service and commitment to Africa. In the last two years, we have sent volunteers to Ethiopia, Eritrea and Burkina Faso. In January of 1997, we will send volunteers to South Africa for the first time, to work side-by-side with South African teachers.

While we regret having to graduate from any country, we have had to make tough choices to reduce our expenditures. In all of these countries, we are proud of the tremendous contributions that volunteers have made in helping countries better address their own basic needs. While equally difficult, our decisions to close the Comoros

program in 1995 and Sao Tomé et Príncipe in 1996 were the result of extremely high volunteer support costs.

The Peace Corps will continue to respond to the development needs of African countries. Over the last four years, the number of volunteers in Africa has increased by 15 percent, and currently, 37 percent of volunteers worldwide serve in Africa. We also anticipate that Crisis Corps volunteers will be working in Africa in the near future. For example, a Peace Corps assessment team has just returned from the Cote D'Ivoire and Guinea to assess how volunteers can assist Liberian refugees in those two countries.

Q: Are we likely to see more of the small and less cost-effective programs phased out? And where do you see political instability threatening programs such as those we've evacuated in recent years? Are there other programs that could have served their purpose by the year 2,000?

A: The strategic plan outlined by the director last year has positioned the agency to better respond to host-country needs, and the Congress has recognized this effort. As a result, the Peace Corps' budget for fiscal year 1997 is \$220 million, an increase of \$1 million over last year. This is a noteworthy achievement given the budget cuts faced by many international agencies.

For the Africa region, we try to balance the compelling needs of our host countries with the most effective and rational use of our resources. The development needs of our host countries and the ability of volunteers to operate effectively and safely are key elements in our country decisions. We are particularly vigilant in monitoring changes in the political and security climate of our host countries, and if necessary, implement plans to protect our volunteers. Our evacuation of volunteers from the CAR demonstrates the effectiveness of our emergency planning systems.

Q: Where are the new programs likely to emerge?

A: The Peace Corps has always and will continue to be responsive to countries that need our help. The Peace Corps is now exploring opportunities in Mozambique. A country assessment was conducted in 1991 and a preliminary country agreement was signed. Last month, a follow-up mission was conducted to assess current needs in the country. The desire for Peace Corps volunteers in Mozambique has been expressed, but sending volunteers would be dependent upon volunteer safety and security considerations. Additionally, we are monitoring developments in the Central African Republic for a possible resumption of the program in the future.

Q: Critics point to a lot of large, failed development projects in Africa over the years. As the premier grassroots assistance program in many of these countries, does the Peace Corps offer better direction?

A: During the past 35 years, more than 58,000 volunteers have served in Africa, in the fields of agriculture, economic development, education, the environment, fisheries, health, water and sanitation, and urban development. We have learned that volunteers can be most effective in building the capacity of nations through its individuals. The Peace Corps' "participatory approach" to development is now espoused by the large donor organizations. Our achievements have been built on years of developing partnerships. Through our demonstrated long-term commitment to countries in the region, volunteers have established the trusting relationships with governments, communities, and individuals necessary to bring about change.

In addition, we are actively encouraging volunteers to pursue ways to assist their communities beyond the confines of their primary assignments, what we term cross-sectoral linkages. People and communities don't view their problems in terms of isolated

sectors, and volunteers are well placed to act as catalysts for technical and information exchange among communities, government agencies, and non-governmental organizations.

Q: If we take a look at all the regions where Peace Corps serves—Inter America, Africa, Asia Pacific and Europe, Central Asia and the Mediterranean—how does Africa fit in? Given the Peace Corps' desire to help improve the lives of the citizens, what are the problems and possibilities that set the 40-plus nations of Africa apart from other developing world conditions? Has that been constant throughout Peace Corps' history?

A: Viewing Africa in relation to the rest of the developing world provides compelling justification for our extensive and continued work on the continent. Despite improvements in social indicators in all developing countries, Africa continues to lag behind other regions. Many of the factors which have led to rapid economic expansion and improved living standards in Latin America and Asia—including the globalization of trade, rapid technological advances and financial market integration—have not materialized in much of Africa. Viewpoints vary on the reason for Africa's distinct development path. The need to better develop human capital, more prudent use of natural and financial resources, and better governance are often-cited challenges.

However, Africa's achievements are also worth noting. Life expectancy has increased, illiteracy and infant mortality have declined. There have been significant improvements in physical infrastructure. Political progress has been achieved in many countries through democratic elections. Across the continent, Africa's resiliency, determination, and unconquerable spirit moves the continent forward and motivates us in our undertakings. Peace Corps volunteers are in a unique position to further contribute to Africa's development, through our focus on building indigenous capacity, through individuals and institutions. □

125TH STORY of Level 1 printed in FULL format.

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September 30, 1996; Monday 12:15 Eastern Time

SECTION: International news

LENGTH: 387 words

HEADLINE: Peace Corps Funds High School Education for Girls

DATELINE: ABIDJAN, Ivory Coast

BODY:

The Peace Corps announced Monday it would fund the high school education of two dozen girls in the West African country.

In an effort to promote the development of women, the U.S. government agency will pay about 90,000 CFA, the equivalent of dlrs 175, for tuition, books and boarding for 23 girls at public schools every year.

The country's annual per capita income is only about dlrs 500. The girls won the scholarships with their good grades and through an essay contest sponsored by the Peace Corps.

The federal agency has long supported programs that promote the advancement of women in Third World countries, where they often do most of the physical labor, rear and feed the children and take care of the household chores.

Many African girls don't make it to high school because their families can only afford to send their brothers, or the girls are needed in the fields and at home.

"Women in development programs are affirmative statements that African women are appreciated and deserving of our support," Charles R. Baquet III, the deputy Peace Corps director, told a news conference. He spent four days in Ivory Coast visiting volunteer sites and government officials.

"Anything that the Peace Corps can do to lighten the burden of African women is an important contribution to progress in Africa."

There are 7,000 Peace Corps volunteers serving in 92 countries today. The agency was established by President Kennedy in 1961.

(bdb)

LANGUAGE: ENGLISH

Public Papers of the President

June 19, 1996

REF: 32 Weekly Comp. Pres. Doc. 1073

LENGTH: 1494 words

HEADLINE: Remarks on the 35th Anniversary of the Peace Corps

BODY:

Thank you. Mandy, where are your family? Stand up there. Let's give them a hand. [Applause] Thank you very much. You did a good job there. Thank you very much.

To Sargent and Eunice Shriver, thank you so much for the Peace Corps, for the Special Olympics, for everything you have done for America and for the world. Senator Wofford, thank you for the Peace Corps and for national service and for everything that happened in between. Thank you, Mark Gearan, for proving that there is life after the White House. [Laughter] To all the former volunteers who are here, to the distinguished Members of Congress, to Ambassador SpioGarbrah, thank you, sir, we're honored by your presence and by our friendship with your country.

The Peace Corps, for 35 years, has shown America at its best. In the summer of 1961, as has been said, there were 80 young Americans standing where these Americans stand today. Wearing their Sunday best, they waited excitedly to meet President Kennedy, and I understand they were chatting occasionally among themselves in Twi, the language they would have to use more frequently as they walked along. [Laughter]

More than half of them were preparing to leave for Ghana, about to launch one of the greatest experiments in service to humanity in all human history. They would live as the people of Ghana lived and be active as a part of the communities they served. They were trained to teach, but they were going to learn and to bridge the gaps of development and custom with sturdy bonds of friendship and compassion.

On that day, President Kennedy said, "The future of the Peace Corps really rests with you. If you do well, then the Peace Corps will be developed, and more and more Americans will go abroad, and we will find a greater and greater response to serving our country." The men and women of "Ghana I" did the President, the Peace Corps, and America proud. I am very grateful to all of you, and I'm glad to have you back in the Rose Garden today, 35 years later.

When President Kennedy created the Peace Corps 35 years ago with the extraordinary support of Sargent Shriver, Harris Wofford, Ted Sorenson, and many others, he tapped an overflowing reservoir of energy and idealism. Thousands of young people answered the call to serve at the vanguard of the new frontier. Among the first was the Vice President's beloved sister, Nancy Gore Hunger. They gave of themselves to help others around the world to become the best they could be and to bring to them the message by the example of their lives that our Nation is a great country standing for great ideals, a country that cares about human progress everywhere in the world.

Public Papers of the Presidents

The Peace Corps symbolized everything that inspired my generation to service. It was based on a simple yet powerful idea: That none of us alone will ever be strong as we can all be if we'll all work together. None of us can reach our best potential while others are left behind. Community counts, and every member of our community matters at home and on this increasingly small planet we share.

Since 1961, as Mark said, more than 140,000 Americans have served as Peace Corps volunteers. Today the Peace Corps' towering task is just as vital as ever. I am very grateful for those who serve today. And their mission is just as important today as it was 35 years ago. Even as we meet, the Peace Corps is hard at work in countries few could have imagined going to back in 1961. Indeed, the Peace Corps is hard at work today in countries that did not exist in 1961.

It has traced the rising tide of freedom to meet new needs around the globe from Central America to Central Europe to Central Asia, sharing the skills of private enterprise in nations struggling to build a market economy, empowering women, protecting the environment, and always showing others the path to help themselves. I'm proud to say that in April, after an absence of nearly 5 years, Peace Corps volunteers returned to Haiti to help the Haitian people make the most of their hard-won freedom. Just a couple of days ago, the First Lady and I had the honor to welcome to the White House for a brief visit former President Aristide and his wife. And he talked in glowing terms about the citizenship of the Americans who have come to help Haiti, from those who came in uniform, including 200 Haitian-Americans who could speak Creole to the people of Haiti, to the Peace Corps volunteers who labor there today.

With the agreement that the Vice President signed last December, as has already been said, our Peace Corps volunteers will go this year to serve in Africa for the first time. They must be so excited. So many others have been before them, but they can prove -- they can prove -- that South Africa can make its dreams and its promise real.

I'm also proud to announce the establishment of a Crisis Corps within the Peace Corps to help the relief community to cope with international emergencies. It will draw on the Peace Corps' recent successful experience in helping people affected by disasters, such as rebuilding homes in Antigua that were destroyed by Hurricane Luis and helping Rwandan refugees to grow their own food.

The dedicated service of Peace Corps volunteers does not end when their 2-year tour is over. Today, returned Peace Corps volunteers, as has been said, are making a difference in our administration, in the Cabinet, like Secretary Shalala, or those on Capitol Hill who have already been introduced. And I want to thank them all, Republicans and Democrats alike. I wish we had them up here explaining what the role of their service in the Peace Corps was in animating their future careers in public service. There are many leaders in journalism, in business, in education, including many who are here today. Thousands of volunteers just serve in their communities today or offer their time to teach schoolchildren about the world in which they live, in which they, the volunteers, were fortunate enough to explore at an earlier time in their lives.

Their spirit of service is the spirit of America. In that sense, it's more than 35 years old; it's as old as our country itself. And I can't help but note that not all our 140,000 Peace Corps volunteers have been so young. They just had to be young at heart, young in spirit, young in imagination. And thank

Public Papers of the Presidents

you, sir, for making me feel that I might have a future in the Peace Corps.
[Laughter] I'm glad to see you. Thank you.

We all remember the legendary mother of former President Carter and her wonderful stories of how the Peace Corps changed her life. The Peace Corps is for all Americans who wish to serve.

When I became President we challenged America to rekindle that spirit of service. I thank Senator Wofford for working to support the creation of AmeriCorps in 1993, to give young people a chance to serve their country here at home, and for doing more by running the Corporation for National Service today. Americans now, in addition to the 140,000 who have worked in the Peace Corps, we've had 40,000 young Americans lifting their own lives by giving comfort and support to dealing with problems here in the United States.

Last month when I spoke at Penn State, I asked our people to further spread the ethic of service throughout our Nation. I asked America's institutions of higher education to use more of their work-study money to promote community service here at home. And I challenge every community to get our students to answer the call of service. With our help, a year from now we want service scholars to be honored at every high school graduation in America. We have to take the spirit of the Peace Corps into the lives of every young person in this country. Every citizen needs to know that we give and we get, that we grow by giving and serving.

So let us always remember that the truest measure of the Peace Corps' greatness has been more than its impact on development. The real gift of the Peace Corps is the gift of the human heart, pulsing with the spirit of civic responsibility that is the core of America's character. It is forever an

dote to cynicism, a living challenge to intolerance, an enduring promise . the future can be better and that people can live richer lives if we have the faith and strength and compassion and good sense to work together.

Thank you all for making that live in our country. And God bless you.

NOTE: The President spoke at 5:14 p.m. in the Rose Garden at the White House. In his remarks, he referred to Mark Gearan, Director, and Amanda Jackson, member from Atlanta, GA, Peace Corps; R. Sargent Shriver, first Director, Peace Corps, and his wife, Eunice Shriver, founder, Special Olympics; Ambassador Ekwow Spio-Garbrah of Ghana; Theodore C. Sorenson, Special Counsel to the President, administration of John F. Kennedy; and former President Jean-Bertrand Aristide of Haiti, and his wife, Mildred.

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