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Fondo de las Naciones Unidas para la Infancia
United Nations Children's Fund

P.2

FACSIMILE TRANSMISSION FORM

SD/PRO/59-94
21 OCTOBER, 1994

ROBERT J. LEDOGAR
SENIOR PLANNING OFFICER

M: AIDA OLIVER Aida Oliver
OFFICER IN CHARGE
UNICEF-SANTO DOMINGO

UBJECT: TRANSLATION FROM SPANISH TO ENGLISH
OF DECLARATION OF ST. LUCIA

Annexed please find a non-official translation of the abovementioned declaration, produced by this office. We contacted the Office of the First Lady of Paraguay to determine if there was an official translation, but were told that it was not readily available.

Also, Mr. Adorna will send to you on Monday, October 24, a copy of the corresponding trip report for the St. Lucia Conference.

Best regards.

AO/nm

IV CONFERENCE OF WIVES OF HEADS OF STATE AND GOVERNMENTS OF THE AMERICAS
11-12 OCTOBER, 1994
CASTRIES, ST. LUCIA

(Unofficial Translation)

DECLARATION OF ST. LUCIA

We, the Wives of Heads of State and Governments, Representatives of Governments and First Ladies of the Americas, meeting in St. Lucia, recognizing that there is a need to work together to actively support the initiatives and social policies directed at the most vulnerable sectors of our society, hereby declare that the strengthening of the integration and cooperation processes of our nations will be the results of actions directed at improving the quality of life of the population.

Our joint efforts in benefit of the social development of the nations of the Americas has as a main purpose the identification of problems, the introduction of solutions and the strengthening of national programmes which will allow for us to meet the goals of sustainable development.

Adopting as our own the preoccupations and analysis debated in meetings held previously in Venezuela, Colombia and Costa Rica, as well as the declarations and agreements to carry out pertinent actions, we come together to give a sound of alert on the rapid increase of poverty of the peoples of Latin America and the Caribbean.

In accordance with the role currently being carried out by women in society, our responsibilities in the past decade have evolved towards the promotion of actions, projects and programmes for social development focusing on the technical and professional aspects. We therefore,

REAFFIRM our commitment to support actions which will completely favour the human rights of women and promote the necessary changes in current legislation, according to the Convention on the Elimination of all Forms of Discrimination Against Women.

RECOMMEND the signing and ratification of the Inter-American Convention to Prevent, Sanction and Eradicate Violence Against Women ("Convención de Belém do Pará"), adopted on June 9, 1994, in the 24th Ordinary Session of the OAS General Assembly, held in Brazil, and support actions to guarantee the implementation of the Convention.

VALUE the efforts being carried out by those nations that have made concrete gains in legislation on women, especially in those issues related to intra-family violence, where the principle

victims are women, children and adolescents as well as other advances that benefit and recognize the rights of the woman as head of household.

PROPOSE supporting actions which will contribute to carry out the necessary changes for the incorporation of women under conditions of equal opportunities, identifying the cultural and socio-economic barriers which impact and discriminate against woman, and also develop educational actions which will prepare her for decision-making in various forms.

AGREE that measures must be taken to initiate or consolidate the execution of the projects and regional initiatives which have been presented at this meeting, such as, "Training Modules to Prevent the Incorrect Use of Psychotropic Substances by Street Children (WHO), Project for Rural Women (IICA-IDB), Project on Child Labor in Latin America (ILO), Prevention of Pregnancies in Adolescents (UNFPA), and the Project "Latin America Against Cancer" (ALICC-European Commission).

We also agree to meet with the pertinent entities to develop projects in the following areas: Detection of Cervix-Uterine and Breast Cancer, Literacy Support Campaigns for Adult Women, Development Projects for Rural Women, Consciousness-Awareness Campaign to Combat Violence Against Woman, the Child and Family.

WE MAKE THE COMMITMENT to support actions so that the proposals presented in the preparatory meetings of the Fourth World Conference on Women, to be held in Beijing on September, 1995, will be included in our work agenda.

WE PROPOSE a Pro Tempore Secretariat conformed by the outgoing country, the current host country and the future host. The Secretariat's function will be to coordinate and organize the annual meeting in the future host's country.

WE AGREE to adopt, for future Conferences, a central theme for debate to be analyzed in-depth by the participants.

WE RECOGNIZE the importance of the efforts carried out by the Former First Ladies and their technical advisors in the constitution and organization of these meetings of Heads of State and Governments of the Americas.

WE ADOPT as the symbol of these Conferences the logo of the present Fourth Conference, in order for these meetings to be identified with a uniform logo.

WE CONGRATULATE and thank our host, Mrs. Janice Compton and the Government of St. Lucia for organizing and carrying out this Conference, recognizing their tremendous efforts to guarantee the success of the Conference, in spite of the havoc created by Tropical Storm Debbie.

WE THANK the international organizations, the public and private institutions of St. Lucia for their financial and technical support to carry out the Conference.

WE ACCEPT the proposal of the First Lady of the Republic of Paraguay to have her country host the Fifth Conference of Wives of Heads of State and Governments of the Americas, to be held in 1995, and we gracefully thank the First Lady of the Republic of Bolivia for proposing to have her country host the Six Conference, which will be held in 1996.

Castries, St. Lucia
13 October, 1994

LIST OF SIGNATORIES

1. Norma Y. Hughes
   First Lady of Anguilla

2. Selmira Mireya Regazzoli
   Country Representative from Argentina

3. Kathleen Esquivel
   First Lady of Belize

4. Ruth Elaine Thomas
   Country Representative from Bermuda

5. Ximena de Sánchez de Lozada
   First Lady of Bolivia

6. Gilda Mari Ramos Guimaraes
   Country Representative from Brazil

7. Marta Larraechea de Frei
   First Lady of Chile

8. Jacquin Strass de Samper
   First Lady of Colombia

9. Josette Altmann de Figueres
   First Lady of Costa Rica

10. Vilma Espín Guillois
    Country Representative from Cuba

11. Susan Jacinta Snuere
    Country Representative from Curacao

12. Josefina Villalobos de Durán-Ballén
    First Lady of Ecuador

13. Elisabeth de Calderón Sol
    First Lady of El Salvador

14. Gladys Annabella Morfín
    Country Representative from Guatemala

15. Janet Jagan
    First Lady of Guyana

16. Bessie Watson de Reina
    First Lady of Honduras

17. Ivy Sylvia Cooke
    First Lady of Jamaica

18. María Auxiliadora Matus
Country Representative from Nicaragua

19. Dora Boyd de Pérez Balladares
First Lady of Panamá

20. María Teresa Carrasco de Wasmosy
Country Representative from Paraguay

21. Elisabeth Astete Patiño
Country Representative from Perú

22. Jacqueline Malagón Luna
Country Representative from the Dominican Republic

23. Lady Evelyn Arrindell
First Lady of St. Kitts/Nevis

24. Lady Lucille James
First Lady of St. Lucia

25. Juilette A. Campbell
Country Representative
St. Vincent and the Grenadines

26. Liesbeth Venetiaan Vanenbu
First Lady of Suriname

27. Zalayhar Hasanali
First Lady of Trinidad and Tobago

28. Lady Joan Harrigan Farrelly
First Lady of U.S. Virgin Islands

29. Diana de Veer de Caldera
Country Representative
Venezuela

END

The Harvard Crimson
THE UNIVERSITY DAILY • FOUNDED 1873

GUEST COMMENTARY

Clinton Wins for Women

By Lynn Cutler

Immediately following the elections of Nov. 8, we can expect a spate of articles, columns, editorials and punditry regarding the presidency of Bill Clinton. We will see a dissection of the last 20 months, with a good dose of Monday morning quarterback "spin" and predictions about the remainder of his term. The inevitable handicapping of the 1996 election will begin.

What we will not see much of is the good news for American women. We could spend a great deal of time talking about why that is true, but more important is what that good news is.

Clinton has more women in his cabinet, in his governmental appointees and in the judiciary than have been in place at any other time in our history. Every day these women make a difference for all women in this country and for their families.

In appointments of the most senior positions in our government, over 30 percent are women, and in all of Clinton's appointments, 47 percent, nearly half, are women. For the first time in our history, we have parity in decision making roles in our government. Many of these appointees hold titles never before held by women. They are running departments and designing policy in what have been traditionally male positions. Clinton's recognition and understanding of the contributions women can make in all areas of government and society has made an enormous difference for all of us.

Some of the most dramatic and far-reaching gains for women in the Clinton administration have been the appointments to the judiciary. Of the 143 people nominated to the federal bench, the president named 44 women. All three previous presidents combined did not name half of that number. The appointment that will affect our lives for the longest period of time is that of Ruth Bader Ginsburg to the Supreme Court.

Our chief law enforcement agency, the Department of Justice, is headed by Janet Reno—the first women attorney general. Her deputy and seven of the 11 assistant attorneys general are women. This impacts the view of women's safety by our government. With the passage (because of the firm stand of our president) of the Violent Crime Control and Law Enforcement Act this year, the Violence Against Women Act became law. This invests heavily in the personal security of women by providing more police, prosecutors and services in cases involving sexual violence or domestic abuse.

From his very first day in office, Clinton has worked to promote freedom of choice for women. He repealed the "gag rule" that restricted abortion counseling at federally funded family planning clinics. The Republicans have threatened to reinstate the "gag rule" in their "Contract with America." The president repealed the Mexico City policy that banned funding to international organizations that promoted comprehensive family planning, and signed the Freedom of Access to Clinic Entrances Act to ensure that women and their doctors can enter clinics without fearing intimidation and violence. And the Department of Health and Human Services, headed by Secretary Donna Shalala, implemented a change to the Hyde Amendment obligating states to pay for abortions for poor women whose pregnancies result from rape or incest, or endanger the life of the mother.

The first piece of legislation the president signed, after 10 years of veto and haggling by the Republicans, was the Family and Medical Leave Act. This legislation gives working people freedom for the first time to take time from work to stay with a sick parent or child and know their job is secure.

When the president took office, the country faced several major economic challenges, including rising federal deficit and increasing loss of jobs. Female heads of households, an ever-increasing portion of the labor force (which is 47 percent female), were particularly hard hit by a worsening economy. The president's economic plan has begun to put our economic house back in order. There are nearly 4.3 million new jobs in the first 19 months of this administration, and the president's plan is reducing the deficit by nearly $700 billion over five years.

Along with the overall plan to revitalize the economy, the administration has encouraged the formation and development of women-owned businesses. Women business owners currently own 40 percent of all businesses: women are starting businesses at one-

and-a-half times the rate of their male counterparts and employ 11 million workers—more than the Fortune 500 companies. Women business owners need access to capital, and the Clinton administration has taken unprecedented steps to create opportunities for them.

The Small Business Administration (SBA) has taken several steps to increase the capital available to women-owned firms. The SBA has established goals for dramatically expanding lending to these firms, increasing the number of loans to women from 3,880 in 1993 to 7,211 in 1994. With other initiatives by the SBA to help women business owners, and the expansion of opportunities for women-owned businesses to obtain government contracts, along with increased technical assistance, women are making serious new long-term gains.

In addition, with the passage of the Earned Income Tax Credit, Clinton initiated the best, comprehensive method of supplying initiatives for low-income families to begin to move ahead. Incentive, rather than punitive tax policy, became the way for the working poor to make real gains.

Women are the care givers, responsible not only for their own health but also for the health of their children, spouses and parents. As a result, women know how important it is to keep health care reform at the top of our national agenda.

Despite being the biggest consumers of health care services, women have a harder time getting health coverage than men. They are more likely to work part-time and in pink-collar jobs without health insurance; of the 16 million women without coverage in 1990, half had uninsured jobs. Those lucky enough to have insurance pay more; women aged 15 to 44 pay 68 percent more out-of-pocket for health care than their male counterparts.

All of this at a time when women are increasingly afflicted with AIDS, with breast cancer (one in 20 women 20 years ago to one in eight today), with increased incidence of heart disease and with greater risks of environmentally-induced problems. The Clinton administration has launched a variety of programs to improve preventive care for women. While the Congress failed to pass health reform legislation this year, the president and the first lady will continue to fight for enactment.

In the meantime, federal funding for breast cancer research and prevention has been increased—to $650 million in fiscal 1994. In addition, the National Action Plan on Breast Cancer provides a blueprint for a partnership between the government and the private sector to work to prevent, diagnose, treat and ultimately eliminate breast cancer.

With the Women's Health Initiative, the administration launched the largest clinical research study ever conducted on either men or women to examine the major causes of death, disability and frailty in post-menopausal women: heart disease, breast and colon cancer and osteoporosis. An emphasis to include minority women at each clinical site is a component of the study.

Education, housing, and every other area of our lives is being impacted by the women the president has appointed to carry out the policies and the commitment he has to a better quality of life and equality of opportunity for the women of America.

It will be up to us to tell people about these initiatives and the work of the president on our behalf. It's good news and therefore we probably won't read it on the front pages of our newspapers. Women have a responsibility to spread the word—our day as full citizens is coming much faster because we elected Bill Clinton.

Lynn Cutler, former vice-chair of the Democratic National Committee, is a fellow at the Institute of Politics.

Draft Concept Paper Summit of the Americas

Symposium on Healthy and Educated Children for First Ladies

Purpose: To provide the First Ladies attending the Summit of the Americas with the opportunity to discuss issues on the official agenda of the Summit -- health and education -- as they affect children, to give them the opportunity to exchange experiences of challenges and achievements in these areas, and to present to the press and the public their concerns and views of how these issues can best be addressed in the Hemisphere.

Scene: First Lady Hillary Clinton and up to 30 First Ladies from the Hemisphere will attend the symposium. There will be a plenary session of roughly 1 hour and 15 minutes in which Mrs. Clinton will make introductory remarks, followed by a video prepared by UNICEF (description attached at Appendix A), followed by an overview of the challenges and achievements in children's education and health in the Americas. There will then be roughly 15 minutes for a brief discussion of these issues.

The First Ladies will then break up into three or four discussion groups focussing on specific issues of children's education and health. (See a list of possible topics at Appendix B.) For each topic and discussion group, there will be an expert present to facilitate discussion and act as a resource person. (See a list of potential experts at Appendix C.) A possible goal for these groups could be to share information about successful models for addressing some of the problems outlined in the plenary session.

Participants will reconvene after approximately one and one half hours for lunch. The program for lunch could follow one of three forms: the conversations in working groups could continue; chairs of working groups could report to the entire group on their discussions; or there could be a keynote speaker. Depending on the time available, a combination of the above might be possible. The lunch program might focus on ways to expand or replicate successful models.

At some time after the lunch, there will be a press conference where several of the First Ladies will present a statement reflecting the themes and conclusions of the morning and lunch discussions. The press release will tie into the broader themes of the Summit. (See Appendix D for some thoughts on the form and content.) (The content of the press release and the participants in the press conference will have to be finalized at some point during the program if not agreed on in advance.)

The First Ladies will be provided with a briefing book with information on the issues to be discussed. (For an outline of a briefing book, see Appendix E.)

Follow-up: Given sufficient interest on the part of the First Ladies in following-up the Summit of the Americas, a number of possibilities (requiring different levels of resource commitment) could be considered:

--a rapporteur's report on this ~~first~~ meeting of the First Ladies of the Americas, the issues they discussed and the conclusions they reached. This could be published as a booklet (with pictures, sidebars, quotations, etc., in the several languages of the Americas) to be distributed widely.

--a follow-up discussion (to assess progress on the issues considered in Miami) in the context of the existing annual conference of Wives of Heads of State and Government of the Americas scheduled to be held in Paraguay next year. (There is a question of whether all countries in the region are members of this organization; this would have to be explored before proposing this follow-up.) This organization has a mechanism in place for implementing and monitoring projects through the Office of the First Lady in individual countries.

Castro's wife goes / U.S. has been invited as observers in 5 previous mtgs.

--an agreement that First Ladies will consult with their countries' delegates to next year's World Summit for Children to ensure that their agenda is pursued in that forum.

--an agreement to hold future ad hoc discussions among interested First Ladies on particular issues considered in Miami. These discussions might be linked to other events in the hemisphere related to the particular issue.

--an agreement to have First Ladies visit counterparts in other countries to learn more about and highlight successful models or to draw attention to and provoke action on particular issues.

--the creation of a communications vehicle for the First Ladies of the Americas -- a periodic newsletter of some type, highlighting activities of First Ladies involving the issues discussed in Miami and others of interest. This could be a means of creating a measure of solidarity and collaboration among First Ladies in the region. It could also serve as a focus of periodic publicity benefitting the First Ladies. The vehicle could be a publication or even some sort of computer network, a la internet. (Some First Ladies may not have their own computer setup. But they could have easy access to one . . . or we could arrange for them to have their own equipment.) Where there is enough enthusiasm, there might be possibilities of using hemispheric wide cable TV (Univision?) or other electronic communications facilities for periodic events focussing on the activities of First Ladies in the areas of health and education.

Appendix A: Description of UNICEF Video

The UNICEF video will be approximately 10 minutes long and will provide a general overview of the problems facing children in our Hemisphere and the major efforts underway to address those problems. It will be produced by Steve Anderson, who produces the Rights & Wrongs piece on PBS. The basic outline is as follows:

1. One minute on major problems facing children in the Americas, including health, nutrition, sanitation, education, and violence.

2. Several minutes on this hemisphere's commitment to addressing these problems, focussing on the 1990 summit, development of national plans of action, the Narino Accord, and various initiatives in the hemisphere.

3. A listing of issues that need to be addressed, focussing on health and education issues.

Appendix B: Possible Topics for Discussion at the First Ladies Symposium

OVERVIEW

In order to improve the health and education of children in the hemisphere, a variety of challenges remain. Among the most critical health issues facing mothers and children in the region today are the needs to improve basic services for children, to advance safe motherhood, to prevent HIV/AIDS transmission, and to improve equitable access to services through health care reform. Among the most significant challenges in educating the children of the Americas are providing children with adequate nutrition and nurturing in their early childhood, providing access to education to all children, and maintaining a quality of education that keeps children in school and prepares them for productive lives. In each of these areas, critical gaps remain. Nonetheless, there have been successes and, to a great extent, we know how to meet these challenges if we can mobilize the political will, creativity and resources to do so.

Major Health Issues:
Basic Health Services for Children
Safe Motherhood
Access to Health Care for All
HIV/AIDS

Cross-cutting Health/Education Issues:
Early Childhood Development
Youth Lifestyles

Major Education Issues:
Access to Education and School Completion for All Children
Quality and Relevance of Education

More detailed discussions of these issues follow.

HEALTH

Basic services for children: Infant and child mortality, despite steady declines, remain high in many Latin American and Caribbean countries, especially among disadvantaged populations. Half a million infant deaths--more than 15 times the U.S. total--occur annually in the region, most of them preventable. Major achievements to date have been in the "soft" goals, related to high-impact yet simple technologies such as vaccinations and, to a lesser extent, controlling diarrhea through oral rehydration. The challenge now is to move to more difficult interventions such as managing pneumonia and improving nutritional status (including micronutrients) and the "hard" goals such as neonatal mortality, which require more complex interventions, while sustaining the gains already achieved. The region-wide effort to eradicate polio, which led to the recent achievement of interrupting transmission throughout the hemisphere was a model of cooperation, partnership and participation. Now we need to expand and adapt this model to measles, which the region has committed to eliminating by 2000 and to focus on interventions to control diarrhea, pneumonia and neonatal infections, and to improve nutrition.

Safe motherhood: Maternal deaths remain unconscionably high in Latin American and the Caribbean, with average rates more than 20 times higher than those in the U.S. Moreover, because fertility rates are also higher in the region, a woman's lifetime risk of dying from maternal causes averages 35 times higher in the region, and, in some countries, is more than 100 times higher. To reduce the risks, prenatal care, referral systems and emergency obstetric care need to be improved and expanded, and the access and use of voluntary family planning information and services need to be increased. A recent pilot program in Inquisivi, Bolivia, which utilized a number of these approaches, showed a decrease in maternal and perinatal deaths and a marked increase in modern contraceptive use.

HIV/AIDS: The HIV/AIDS pandemic is advancing rapidly in Latin America and the Caribbean, with an estimated 2 million infections to date (expected to reach 3 million by the year 2000) in addition to at least 1 million so far in North America. Furthermore, the epidemic has shifted to predominantly heterosexual transmission in most countries with concomitant increases in infected women and their children. In part because of the long incubation period, in many countries, there is little awareness of the magnitude of the threat, which has grave implications economic development as well as health. It is, therefore, important to heighten awareness and mobilize political will in order to develop programs to promote safer sexual behavior, increase access to condoms and control sexually transmitted diseases (which enhance HIV transmission). There have been small-scale successes. In Haiti and Brazil, for example, condom use has rocketed. Comprehensive programs have

now been initiated in those two countries as well as in Jamaica, Dominican Republic and Honduras.

Access to sustainable health care services for all: Health status varies greatly within countries of the region. For example, in Guatemala, infant mortality is more than two-thirds higher among indigenous peoples, and maternal mortality is also significantly higher than in non-indigenous groups. Among the contributing factors, major inequities in access to health services is an important one. In order to make services more equitable, efficient, effective and sustainable, many countries throughout the region are undertaking health-care reform efforts. These efforts include changes in health policies and institutions such as:

- promoting decentralization,
- reorienting budgetary priorities to favor essential services for the poor,
- exploring alternative means of financing, managing and providing services,
- making greater use of NGOs,
- shifting the role of ministries of health from providers to regulators and setters of quality standards.

There is no single formula that can be applied in all settings. The reforms have to take into account the cultural and institutional characteristics of each society. There have been successful approaches and we're learning how and where to apply them. The Prosalud experience in Bolivia, where a self-financing NGO program is delivering high-quality services to a variety of populations, is one example.

EDUCATION/HEALTH

Early Childhood Development: Women in Latin America and the Caribbean are leaving traditional roles and entering the local or regional workforce in dramatic numbers. The need for structured child care and preschooling is urgent and growing. Only 28% (8.9 million children) of the preschool cohort in Latin America and the Caribbean has access to any form of preschooling. Without adequate government and private sector programs, the health and educational needs of young children are neglected and their potential as future pupils and workers is impaired. Preparing children for the changes of the 21st century requires imparting skills which build individual confidence, adaptability, problem-solving approaches and teamwork. This process should begin in the preschool years. Children without access to early childhood development programs are less able to benefit from educational opportunities later and may never become competitive in the work force. This perpetuates an age-old pattern. When local communities are mobilized and given resources to address issues of child day care, malnourishment and school curriculum, problems

are solved rationally and the community's capacity to solve new problems independently and democratically is strengthened.

EDUCATION

Access to--and Completion of--Education for All Children: Governments frequently commit insufficient funds to public preschool, elementary and secondary programs and public and private education may be poorly coordinated, affecting both the accessibility and quality of schooling. Efforts to reach remote rural populations which are culturally or ethnically different from the mainstream are often incomplete or non-existent. Instead of developing multilingual, cross-cultural curricula and pedagogy, many education systems in the hemisphere promote Western-oriented, cosmopolitan approaches which make few concessions to local cultural contexts. Furthermore, education for girls and women is not given the attention it requires to compensate for socioeconomic forces that limit girls' access to continued schooling. Incentives are needed to keep both girls and ethnic minorities in school longer, setting up special scholarships or other culturally acceptable programs. Modern means to organize and project education programs to remote and low-density population areas will eliminate vast per-pupil expenditure rates. These might include regional boarding schools or "distance learning" through radio/TV equipment and educational programs, delivered to local classrooms, community centers or other public buildings.

Quality and Relevance of Education: Repetition and dropout rates of school-age children in rural or disadvantaged areas leave pupils with functional capacities (reading, writing, critical thinking, problem-solving) well below age-group norms in many countries in the hemisphere. Economic costs increase substantially when pupils take extra years to complete primary levels of education. Current methods of rote, teacher-centered instruction transmit established socio-cultural legacies to new generations but neglect the skills of independent critical thinking or preparing students for lifelong learning and adaptation. Up-to-date curricula and interactive, cooperative teaching methods are indispensable in creating a productive workforce which is adaptable to changing labor needs and inclined toward democratic, collaborative approaches in public life. Curricular reforms based on functional, performance-based teaching and testing can produce instructional efficiencies and cut back dropout rates by making teaching more relevant. Improved in-service teacher training must match curricular reforms. At the secondary level, collaboration with major private-sector employers will assure a vocationally-oriented curriculum which is relevant to labor market needs.

Appendix C: Potential Experts on Children's Education and Health in the Hemisphere

Overview:

James Grant, Executive Director, UNICEF

Nancy Birdsall, Executive VP, InterAmerican Development Bank

Marta Mauras, UNICEF Regional Director for Latin America

HEALTH

Dr. George Alleyne, Director-designate of PAHO

Dr. Ciro de Quadros, Immunization Chief, PAHO

Dr. Silvia Bomsim, Proais Project/Brazil

Dr. Barbara Schieber, Mothercare Project/Guatemala

Carmelo Mesa-Lago, Economist/Public Sector Reform, North-South Center

EDUCATION

Luis Crouch, Research Triangle Institute

Jeff Puryear, InterAmerican Dialogue

Rosa Maria Torres, UNICEF, Senior Education Advisor

Fernando Reimers, HIID

Appendix D: Ideas for Press Statement

Today, (date) xxx First Ladies of the Americans participated in a Symposium entitled "Healthy and Educated Children of the Hemisphere."

The issues discussed by the First Ladies included (list). Both the challenges and successes of providing health and educational services were considered (details?)

The First Ladies agreed that over the past decade, major gains have been achieved in bringing adequate, affordable and quality health care and education to the xxxx million children of the hemisphere. Successes have been based on (examples of successful approaches).

However, important and difficult challenges remain (list).

The importance of these challenges and the need to address them is also recognized in the discussions of the Heads of State. (Mention relevant agenda items, conclusions an any new programs at Summit).

Recognizing the importance of the achievements of the pasts and the challenges of the future involving the health and education of the children in this hemisphere, the First Ladies agreed to (describe follow-up).

Appendix E: Outline for Briefing Book

A. Overall Summit Issues

B. State of Children in Hemisphere

C. Achievements and Challenges in Education and Health for Children

D. Models of Success

E. Remaining Needs

F. Available Programs and Resources

A river seems a magic thing. A magic, moving, living part of the very earth itself—for it is from the soil, both from its depth and from its surface, that a river has its beginning.

LAURA GILPIN, *The Rio Grande* (1949)

That river—it was full of good and evil together. It would water the fields when it was curbed and checked, but then if an inch were allowed it, it crashed through like a roaring dragon.

PEARL BUCK, *The Old Demon* (1939)

As we were in the midst of the dry season, the river at Vat Thmey was now only a big snake of mud.

MOLYDA SZYMUSIAK, *The Stones Cry Out: A Cambodian Childhood 1975–1980* (1984)

ROME

In Rome people seem to love with more zest, murder with more imagination, submit to creative urges more often, and lose the sense of logic more easily than in any other place.

LETITIA BALDRIGE, Of Diamonds and Diplomats (1968)

In Rome people spend most of their time having lunch. And they do it very well—Rome is unquestionably the lunch capital of the world.

FRAN LEBOWITZ, *Metropolitan Life* (1978)

Night doesn't fall in Rome; it rises from the city's heart, from the gloomy little alleys and courtyards where the sun never gets much more than a brief look-in, and then, like the mist from the Tiber, it creeps over the rooftops and spreads up into the hills.

CAROLINE LLEWELLYN, *The Masks of Rome* (1988)

See also Italy.

ROOMS

A room is a place where you hide from the wolves outside and that's all any room is.

JEAN RHYS, *Good Morning, Midnight* (1939)

A woman must have money and a room of her own if she is to write fiction.

VIRGINIA WOOLF, *A Room of One's Own* (1929)

I have at last got the little room I have wanted so long, and am very happy about it. It does me good to be alone.

LOUISA MAY ALCOTT, *Journals* (1868)

Most women still need a room of their own and the only way to find it may be outside their own homes.

GERMAINE GREER, *The Female Eunuch* (1971)

See also Houses, Space, Walls.

ROOTS

To be rooted is perhaps the most important and least recognized need of the human soul.

SIMONE WEIL, *The Need for Roots* (1949)

I have not seen my birthplace, / where my mother deposited the heavy load of her inside.

TAHEREH SAFFIR-ZADEH, "My Birthplace," *Resonance in the Bay* (1971)

Far away from my country I would be like those trees they chop down at Christmastime, those poor rootless pines that last a little while and then die.

ISABEL ALLENDE, *The House of Spirits* (1982)

To separate from my culture (as from my family) I had to feel competent enough on the outside and secure enough inside to live life on my own. Yet in leaving home I did not lose touch with my origins because *lo mexicano* is in my system. I am a turtle, wherever I go I carry "home" on my back.

GLORIA ANZALDÚA, *Borderlands/La Frontera: The New Mestiza* (1987)

If you go away from your own place and people—the place you spent your childhood in, all your life you'll be sick with homesickness and you'll never have a home. You can find a better place, perhaps, a way of life you like better, but the *home* is gone out of your heart, and you'll be hunting it all your life long.

MARY O'HARA, *Thunderhead* (1943)

But there were years when, in search of what I thought was better, nobler things I denied these, my people, and my family. I forgot the songs they sung—and most of those songs are now dead, I erased their dialect from my tongue; I

Out of the corner of one eye, I could see my mother. Out of the corner of the other eye, I could see her shadow on the wall, cast there by the lamplight. It was a big and solid shadow, and it looked so much like my mother that I became frightened. For I could not be sure whether for the rest of my life I would be able to tell when it was really my mother and when it was really her shadow standing between me and the rest of the world.

JAMAICA KINCAID, *Annie John* (1983)

She was the archetypal selfless mother: living only for her children, sheltering them from the consequences of their actions—and in the end doing them irreparable harm.

MARCIA MULLER, "Benny's Space," in Sara Paretsky, ed., *A Woman's Eye* (1991)

On one thing professionals and amateurs agree: mothers can't win.

MARGARET DRABBLE, *The Middle Ground* (1980)

Oh! mothers aren't fair—I mean it's not fair of nature to weigh us down with them and yet expect us to be our own true selves. The handicap's too great. All those months, when the same blood's running through two sets of veins—there's no getting away from that, ever after. Take yours. As I say, does she need to open her mouth? Not she! She's only got to let it hang at the corners, and you reek, you drip with guilt.

HENRY HANDEL RICHARDSON, *Two Hanged Women* (1934)

My mother phones daily to ask, "Did you just try to reach me?" When I reply, "No," she adds, "So, if you're not too busy, call me while I'm still alive," and hangs up.

ERMA BOMBECK, *The 1992 Erma Bombeck Calendar* (1992)

Blaming mother is just a negative way of clinging to her still.

NANCY FRIDAY, *My Mother/My Self* (1977)

I fear, as any daughter would, losing myself back into the mother.

KIM CHERNIN, *In My Mother's House* (1983)

At that moment, I missed my mother more than I had ever imagined possible and wanted only to live somewhere quiet and beautiful with her alone, but also at that moment I wanted only see her lying dead, all withered and in a coffi my feet.

JAMAICA KINCAID, *Annie John* (1983)

No matter how old a mother is, she watches middle-aged children for signs of improveme

FLORIDA SCOTT-MAXWELL, *The Measure of My Days* (1968)

Whenever I'm with my mother, I feel as thou I have to spend the whole time avoiding la mines.

AMY TAN, *The Kitchen God's Wife* (1991)

Now that I am in my forties, she tells me I beautiful; now that I am in my forties, she sen me presents and we have the long, personal a even remarkably honest phone calls I alwa wanted so intensely I forbade myself to imagi them. How strange. Perhaps Shaw was corre and if we lived to be several hundred years ol we would finally work it all out. I am deep grateful. With my poems, I finally won even m mother. The longest wooing of my life.

MARGE PIERCY, *Braided Lives* (1982)

She never outgrows the burden of love, and t the end she carries the weight of hope for thos she bore. Oddly, very oddly, she is forever sur prised and even faintly wronged that her son and daughters are just people, for many mother hope and half expect that their newborn chil will make the world better, will somehow be a redeemer. Perhaps they are right, and they can believe that the rare quality they glimpsed in th child is active in the burdened adult.

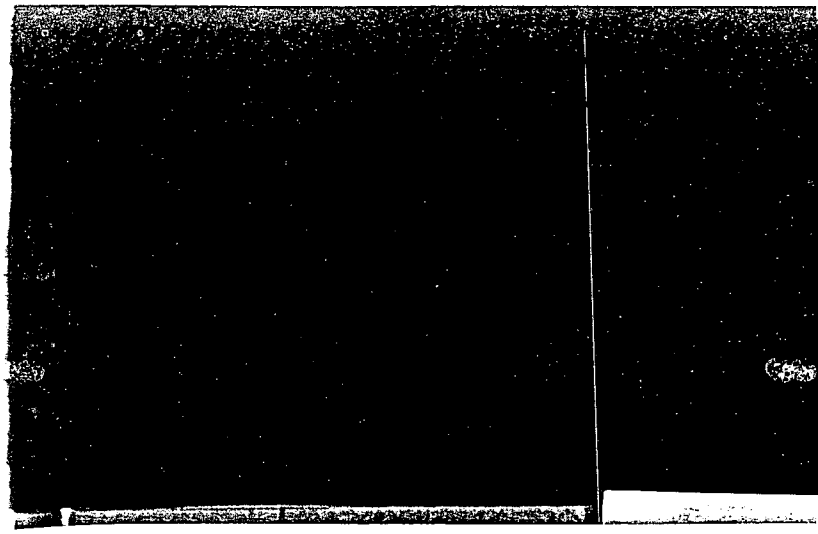
FLORIDA SCOTT-MAXWELL, *The Measure of My Days* (1968)

When my mother had to get dinner for eight she'd just make enough for sixteen and only serve half.

GRACIE ALLEN, in Liz Smith, *The Mother Book* (1978)

One of my children wrote in a third-grade piece on how her mother spent her time . . . "one-half time on home, one-half time on outside things, one-half time writing."

CHARLOTTE MONTGOMERY, in *Good Housekeeping* (1959)



2 I submit that women's history has been hushed up for the same reason that black history has been hushed up . . . and that is that a feminist movement poses a direct threat to the establishment. From the beginning it exposed the hypocrisy of the male power structure. Ibid., Ch. 2

3 The bar is the male kingdom. For centuries it was the bastion of male privilege, the gathering place for men away from their women, a place where men could go to freely indulge in The Bull Session . . . a serious political function: the release of the guilty anxiety of the oppressor class. "The Bar as Microcosm," *Voices from Women's Liberation,* Leslie B. Tanner, ed. *1970*

2408. Nancy R. Hooyman (1945–)

See Mary Bricker-Jenkins, 2343:1-3.

2409. Ruth Iskin (1945–)

1 In the dealer-critic system, galleries exist primarily for sale purposes and it is the critic's role to promote the art product by establishing its value and providing a justification for its importance. "A Space of Our Own, Its Meaning and Implications," *Womanspace February/March 1973*

2410. Kathy Kahn (1945–)

1 There is still a natural tendency for the people of one class to look down on people who they think are lower class—as if they are less than human. Quoted in "Kathy Kahn: Voice of Poor White Women" by Meridee Merzer, *Viva April 1974*

2 In places like the textile mills, where superhuman production rates are set, the people have to take speed (amphetamines) in order to keep up production. . . . Virtually every factory in this country is run on speed, grass, or some other kind of upper. Ibid.

3 I do not believe in being paid for organizing . . . because a revolution is a revolution. And nobody—*nobody*—gets paid for making a revolution. Ibid.

2411. Jamaica Kincaid (1945?–)

down in the gutter? Are they r
I stand in a field of tall grass
for miles and miles? On the oth
which is big and blue as
limits. "W
Bottom of th

2 Wash the white clothes on M
them on the stone heap; wash
on Tuesday and put them on t
dry; . . . soak your little cloth
take them off; . . . always e
such a way that it won't turn
stomach; on Sundays try to w
and not like the slut you are so
ing; . . . this is how you smile
don't like too much; this is h
someone you don't like at all;
smile to someone you like com
is how to make a good medicin
is how to make a good medicin
a child before it even becom
this is how to bully a man; th
bullies you; this is how to lov
this doesn't work there are ot
they don't work don't feel too
up . . .

2412. Karen Malpede (19

1 . . . in order for me to revo
"man" I had to come to femi
no other way, I had to come to
of the divine in women. Now
within a long tradition of pe
that theater is a way to reve
deep essence, the unrealized
holiness of humankind.
"Karen Malp
with Contemporary Wo
Kathleen B

*See 2256.

2 Pacifism is an active, asserti
which, when used effectively
do with holding to a sense of
munity and with refusing to be
victim scenario.

3 The great artist speaks a tru
becomes universal. There's n
that with one eye on the mark

4 I think artists, like most oth
want to face the fact that we
our extinction as a species and
with us all the life on earth.

have done so for centuries.
y are the objects of objects,
s, frequently the objects of
elves objects, and so, in
position, unqualified mem-
e. To the extent that they
lves out trying to integrate
prevailing delusional sys-
that, writing and living,
. In this case they encoun-
at autonomy. Autonomous
systems can promote each
do not have to fight each
e inner insecurity and im-
lemand the demarcation of
intimidation. Ibid.

nce exclusively the art of
lriven to lovelessness, re-
son, to magic spells). It
male tribal elders in the
ties; then, for a long time,
m whom the first priests
e ritual only by pushing
gical clothing of women.
l to me to point out these
ndignation, for humanity
vel of magic and sorcery.
is: Was it necessary that
tand "alone" before Na-
. not in it?* "4: A
er about Unequivocal and
leaning, Definiteness and
finiteness; about Ancient
New View-Scopes; about
Objectivity," op. cit.

5. Pt. II: "If, Nature, I stood

reverence and dread. I
today have nothing left
Ibid.

lani (fl. 1930s)

men as a part of the life
aying down a division of
o sexes, without putting
f those women who by
ts reach the highest
'omen, Past and Present
1937

raigin (fl. 1930s)

iance can be of the most
se who do not believe it
gnorance of the facts.
Either Is Love *1937*

2042. Lydia Gottschewski (fl. 1930s)

1 It is a curious fact that pacifism . . . is a mark of an age weak in faith, whereas the people of religious times have honored war as God's rod of chastisement . . . Only the age of enlightenment has wished to decide the great questions of world history at the table of diplomats.
Women in the New State *1934*

2043. Frances Newton (fl. 1930s)

1 There, in that manufactured park with its ghoulish artificiality, with its interminable monuments to bad taste, wealth and social position, we were planning to place the body of a beautiful and dignified old man who had lived generously and loved beauty. *Light, Like the Sun* *1937*

2 I can stand what I know. It's what I don't know that frightens me. Ibid.

2044. Alice M. Shepard (fl. 1930s)

1 They shall not pass, tho' battleline
May bend, and foe with foe combine,
Tho' death rain on them from the sky
Till every fighting man shall die,
France shall not yield to German Rhine.
"They Shall Not Pass" *n.d.*

2045. Bertye Young Williams (fl. 1930s–1951)

1 He who follows Beauty
Breaks his foolish heart.
"Song Against Beauty" *n.d.*

2046. Isabel Allende (193?–)

1 It was a long week of penitence and fasting, during which there were no card games and no music that might lead to lust or abandon; and within the limits of possibility, the strictest sadness and chastity were observed, even though it was precisely at this time that the forked tail of the devil pricked most insistently at Catholic flesh. Ch. 1, *The House of the Spirits*, Magda Bogin, tr. *1982*

2 A bone in Nivea's corset snapped and the point jabbed her in the ribs. She felt she was choking in her blue velvet dress, with its high lace collars, its narrow sleeves, and a waist so tight that when she removed her belt her stomach jumped and twisted for half an hour while her organs fell back in place. Ibid.

3 "The Congress and the armed forces are above corruption. It would be better if we used the money to buy the mass media. That would give us a way to manipulate public opinion, which is the only thing that really counts."
Ibid., Ch. 12

4 They were unable to bribe the members of Congress, and on the date stipulated by law the left calmly came to power. And on that date the right began to stockpile hatred. Ibid.

2047. Sandra Burton (1934?–)

1 [Marcos*] was the kind of lawyer you would hire to get you off if you were really in trouble—particularly if you were guilty.
Impossible Dream: the Marcoses, the Aquinos, and the Unfinished Revolution *1989*

*Ferdinand Marcos (1917–1989), Philippine president (1966–1986).

2048. Shirley Trusty Corey (193?–)

1 The arts must be considered an essential element of education, not an optional or lesser element in the consideration of time, materials or appropriate teaching staff. They are the content and process by which we bring unity to isolated knowledge and feelings. They are tools for living life reflectively, joyfully, and with the ability to shape the future.
Letter to Elaine Partnow* *19 December 1989*

*Author.

2 The arts personalize knowledge and visions, demanding an ever growing development of the mind and spirit. We do our children and our country ill service by not supporting them adequately in our schools. Ibid.

2049. Maureen Fiedler (193?–)

1 Why organize? First, because it ends isolation. Many women feel treated as second-class citizens—in church, in society. In organizing we lose the sense of being alone. Second, in organizing the whole is greater than the sum of its parts, and our energy is increased when we come together. And third, we are building base communities which struggle for change and give us a place to talk.
Speech, National Assembly of Religious Women Annual Conference *1985*

2050. Raisa Gorbachev (

1 Soviet people are putting int
revolutionary restructuring. W
life . . . to be worthy of a h

2051. Norma Meacock (

1 . . . in all my life I have nev
satisfactory as a means of pr
Think

2 If the texture of our daily lif
it'll disappear up its own ars

2052. Alice Miller (193?–

1 Society chooses to disregard
of children, judging it to be
because it is so commonplac
"Childhood and Creativi
Childhood, Hilde

2 Technical mastery and skill
many, but they are not necess
even become a prison for th
to express themselves, for suc
to their technical proficiency
I have seen drawings that
down to the last detail, with
flaw, yet they seem lifeless
who drew them is not sensed

3 We are often imprisoned in th
abilities and routines, which
sense of security. We are af
yet we must gasp for air and
way, probably over and ove
not want to be smothered in
is familiar and well known t
be born along with our new

2053. Muriel Resnik (19

1 JOHN. . . . that's nothing but
This is what the Internal Re
pects. It's all part of the gam
part, we have to play ours
American citizens!
Act I, Sc.

2 JOHN. But she doesn't *know*
I'm not. Is that a happy wo
see? We're not hurting her.
anything away from her. In p
you in my life makes me ha

Miserable is the fate of writers: if they are agreeable, they are offensive; and if dull, they starve.

LADY MARY WORTLEY MONTAGU, letter (1709), in Octave Thanet, ed., *The Best Letters of Lady Mary Wortley Montagu* (1901)

Writers are the moral purifiers of the culture. We may not be pure ourselves but we must tell the truth, which is a purifying act.

RITA MAE BROWN, *Starting From Scratch* (1988)

Writers are given the responsibility of sight. I think that the whole burden, responsibility and beauty of the gift forces us to construct our lives differently so that we are able to become vehicles to transcend, to encompass and articulate not only our own experience but the experiences of others.

ALEXIS DE VEAUX, in Claudia Tate, ed., *Black Women Writers at Work* (1983)

Writers in Latin America live in a reality that is extraordinarily demanding. Surprisingly, our answer to these demands protects and develops our individuality. I feel I am not alone in trying to give their voice to those who don't have it.

ELENA PONIATOWSKA, in Janet Sternburg, ed., *The Writer on Her Work*, vol. 2 (1991)

How can one not speak about war, poverty, and inequality when people who suffer from these afflictions don't have a voice to speak?

ISABEL ALLENDE, in Marie-Lise Gazarian-Gautiez, *Interviews With Latin American Writers* (1989)

I resent people who say writers write from experience. Writers don't write from experience, though many are hesitant to admit that they don't. I want to be clear about this. If you wrote from experience, you'd get maybe one book, maybe three poems. Writers write from empathy.

NIKKI GIOVANNI, in Claudia Tate, ed., *Black Women Writers at Work* (1983)

One of the obligations of the

It's an act of faith to be a writer in a postliterate world.

RITA MAE BROWN, *Starting From Scratch* (1988)

There is no denying the fact that writers should be read but not seen. Rarely are they a winsome sight.

EDNA FERBER, *A Kind of Magic* (1963)

Whenever an encounter between a writer of good will and a regular person of good will happens to touch on the subject of writing, each person discovers, dismayed, that good will is of no earthly use. The conversation cannot proceed.

ANNIE DILLARD, *The Writing Life* (1989)

All of a writer that matters is in the book or books. It is idiotic to be curious about the person.

JEAN RHYS, in Carole Angier, *Jean Rhys: Life and Work* (1991)

If I could I would always work in silence and obscurity and let my efforts be known by their results.

EMILY BRONTË (1850), in Bertha W. Smith and Virginia C. Lincoln, eds., *The Writing Art* (1931)

The writer is either a practicing recluse or a delinquent, guilt-ridden one; or both. Usually both.

SUSAN SONTAG, in *New York Times* (1986)

It should surprise no one that the life of the writer—such as it is—is colorless to the point of sensory deprivation. Many writers do little else but sit in small rooms recalling the real world.

ANNIE DILLARD, *The Writing Life* (1989)

The writer of originality, unless dead, is always shocking, scandalous; novelty disturbs and repels.

SIMONE DE BEAUVOIR, *The Second Sex* (1949)

the child that is not flesh of my flesh. Grant that I may be successful in molding one of my pupils into a perfect poem, and let me leave within her deepest-felt melody that she may sing for you when my lips shall sing no more.
"La Oracion de la Maestra" (The Teacher's Prayer), *Desolacion* *1922*

2 Let me make my brick schoolhouse into a spiritual temple. Let the radiance of my enthusiams envelop the poor courtyard and the bare classroom. Let my heart be a stronger column and my goodwill purer gold than the columns and gold of rich schools. Ibid.

3 A son, a son, a son! I wanted a son of yours and mine, in those distant days of burning bliss when my bones would tremble at your least murmur and my brow would glow with a radiant mist. "Poem of the Son," St. 1, op. cit.

4 he kissed me and now I am someone else
"He Kissed Me," St. 1, op. cit.

5 My grief and my smile begin in your face, my son. "Eternal Grief," St. 2, op. cit.

6 The crimson rose
plucked yesterday,
the fire and cinnamon
of the carnation,

the bread I baked
with anise seed and honey,
and the goldfish
flaming in its bowl.

All these are yours, baby born of woman,
if you'll only go to sleep.
"If You'll Only Go To Sleep," Sts. 1–3, *Tenura* (Tenderness) *1924*

7 Of the enemies of the soul—
the world, the devil, the flesh—
the *world* is the most serious and most dangerous. "Todas Ibamos a Ser Reinas" (We Were All to Be Queens), *Tala* (Felling) *1938*

8 I have all that I lost
and I go carrying my childhood
like a favorite flower
that perfumes my hand. Ibid.

9 And I wished I were born with them.
Could it not be so another time?
To leap from a clump of banana plants
one morning of wonders—
a dog, a coyote, a deer;
to gaze with wide pupils, to run, to stop,
to run, to fall,
to whimper and whine and jump with joy,
riddled with sun and with barking,
a hallowed child of God, his secret, divine servant.
"Ocho Perritos" (Eight Puppies), op. cit.

10 I will leave behind me the dark ravine, and climb up gentler slopes toward that spiritual mesa where at last a wide light will fall upon my days. From there I will sing words of hope, without looking into my heart. As one who was full of compassion wished: I will sing to console men. Quoted in Introduction to *Tala* in *Selected Poems of Gabriela Mistral*, Doris Dana, tr. and ed. *1971*

1402. Julia Seton (1889–?)

1 Dancing is a universal instinct—zoölogic, a biologic impulse, found in animals as well as in man. "Why Dance?," *The Rhythm of the Redman* *1930*

2 In its natural, primitive form, dancing is vigorous muscular action to vent emotion. Originally, it was the natural expression of the basic impulses of a simple form of life. Triumph, defeat, war, love, hate, desire, propitiation of the gods—all were danced by the hero or the tribe to the rhythm of beaten drums.
"Dance in the Animal World," op. cit.

3 But life has taught me that it knows better plans than we can imagine, so that I try to submerge my own desires, apt to be too insistent, into a calm willingness to accept what comes, and to make the most of it, then wait again. I have discovered that there is a Pattern, larger and more beautiful than our short vision can weave. . . . Epilogue, *By a Thousand Fires* *1967*

1403. Madeline Talmage Astor (fl. 1890–1945)

1 [Being helped over the rail of the Titanic*] "I rang for ice, but *this* is ridiculous!"
Attr. *15 April 1912*

*British luxury passenger liner that sank during its maiden voyage after it struck an iceberg near Newfoundland; 1,513 lives were lost.

1404. Mary E. Buell (fl. 1890s)

1 Something made of nothing, tasting very sweet,
A most delicious compound, with ingredients complete;
But if, as on occasion, the heart and mind are sour,
It has no great significance, and loses half its power. "The Kiss," *n.d.*

1405. Harriet L. Childe-Pemberton (fl. 1890s)

1 As I allays say to my brother,
If it isn't one thing it's the tother.
"Geese: A Dialogue," *Dead Letters and Other Narrative and Dramatic Pieces* *1896*

2 O beautiful earth! alive, aglow,
With your million things that grow,
I would lay my head on your ample knee. . . .
"Songs of Earth," 1, St. 1, *Nenuphal* *191*

3 For passion has come to the verge and leaps
Headlong to the blind abyss,
Yet gathers thereby the strength of deeps,
And eddies a moment and swirls and sweeps
Till peril is one with bliss!
"Songs of Water," IV, St. 4, op. cit

1406. Anita Owen (fl. 1890s)

1 And in these eyes the love-light lies
And lies—and lies and lies!
"Dreamy Eyes" *c.189*

2 . . . Daisies won't tell.
"Sweet Bunch of Daisies" *189*

1407. Hattie Starr (fl. 1890s)

1 Nobody loves me, well do I know,
Don't all the cold world tell me so?
"Nobody Loves Me" *18*

2 Somebody loves me; How do I know?
Somebody's eyes have told me so!
"Somebody Loves Me" *18*

1408. Daisy Ashford (1890?–1972)

1 I am parshial [sic] to ladies if they are nice I suppose it is my nature. I am not quite a gent man but you would hardly notice it.
Ch. 1, *The Young Visitors*,* *19*

*Written when the author was nine years old.

2 My life will be sour grapes and ashes with you. Ibid., Ch

1409. Hallie Flanagan (1890–1969)

1 We were a violent lot,* a thorn in the b bureaucratic. Possibly that is one function of

7 "Do you know that the tendrils of graft and corruption have become mighty interlacing roots so that even men who would like to be honest are tripped and trapped by them?"
Ibid., Ch. 11

8 "Dogs' lives are too short. Their only fault, really." Ch. 2, *The Flowering* *1972*

9 Girls! Girls! Girls!
With platted hair an' mebbe curls
Singin' in a *chorus!*
Lord have mercy o'er us. Ibid., Ch. 4

1394. Mary Day Winn (1888–1965)

1 Sex is the tabasco sauce which an adolescent national palate sprinkles on every course in the menu. *Adam's Rib* *1931*

1395. Anna Akhmatova (1889–1966)

1 There is a sacred, secret line in loving which attraction and even passion cannot cross,—
Untitled, St. 4 (1915), *White Flock*, Jane Kenyon, tr. *1917*

2 I remember how the gods turned people into things, not killing their consciousness.
And now, to keep these glorious sorrows alive,
you have turned into my memory of you.
Untitled, st. 3 (1916), op. cit.

3 How quiet it is after the volley!
Death sends patrols into every courtyard.
Untitled (1917), *Plantain*, Jane Kenyon, tr. *1921*

4 O great language we love:
It is you, Russian tongue, we must save, and we swear
We will give you unstained to the sons of our sons. "Courage" *1942*

5 It is not with the lyre of someone in love
that I go seducing people.
The rattle of the leper
is what sings in my hands.
Untitled, in toto, *Twenty Poems of Anna Akhmatova*, Jane Kenyon, tr. *1985*

6 And the sun goes down in waves of ether in such a way that I can't tell
if the day is ending, or the world,
or if the secret of secrets is within me again.
"On the Road," st. 3 (1964), op. cit.

1396. Enid Bagnold (1889–1981)

1 "She keeps 'er brains in 'er 'eart. An' that's where they ought ter be. An' a man or woman who does that's one in a million an' as got my backing." *National Velvet* *1935*

2 "Things come suitable to the time. Childbirth. An' bein' in love. An' death. You can't know 'em till you come to them. No use guessing an' dreading." Ibid.

3 "There's men . . . as can see things in people. There's men . . . as can choose a horse, an' that horse'll win. It's not the look of the horse, no, nor of the child, nor of the woman. it's the thing *we* can see. . . . Ibid.

4 "Love don't seem dainty on a fat woman." Ibid.

5 MAITLAND. Madame loves the unusual! It's a middle-class failing—she says—to run away from the unusual.
Act I, *The Chalk Garden* *1953*

6 MRS. ST. MAUGHAM. You can't fit false teeth to a woman of character. As one gets older and older, the appearance becomes such a bore. Ibid.

7 MRS. ST. MAUGHAM. Privilege and power make selfish people—but gay ones. Ibid.

8 MAITLAND. Praise is the only thing that brings to life again a man that's been destroyed. Ibid.

9 OLIVIA. The thoughts of a *daughter* are a kind of memorial. Ibid., Act III

10 ALICE. Oh—a girl's looks are *agony!*
Act I, Sc. 1, *The Chinese Prime Minister* *1964*

11 SIR GREGORY. Marriage. The beginning and the end are wonderful. But the middle part is hell. Ibid., Act II

12 BENT. So few people achieve the final end. *Most* are caught napping. Ibid., Act III

13 SHE. We were so different that when two rooms separated us for half an hour—we met again as strangers. Ibid.

14 SHE. And if I die in ten years—or ten minutes—you can't measure Time! In ten minutes everything can be felt! In four minutes you can be born! Or live. In two minutes God may be understood! And what one woman grasps—all men may get nearer to. Ibid.

1397. Mildred Cram (1889–?)

1 Publicity tripped upon the heels of publicity.
"Billy," *Harper's Bazaar* *1924*

2 He was capitalized, consolidated, incorporated, copyrighted, limited, protected, insured, and all rights reserved, including the Scandinavian.
Ibid.

1398. Fannie Hurst (1889–1968)

1 It's hard for a young girl to have patience for old age sitting and chewing all day over the past. "Get Ready the Wreaths," *Cosmopolitan* *1917*

2 "I always say he wore himself out with conscientiousness." "She Walks in Beauty," *Cosmopolitan* *1921*

3 To housekeep, one had to plan ahead and carry items of motley nature around in the mind and at the same time preside, as mother had, at table, just as if everything, from the liver and bacon, to the succotash, to the French toast and strawberry jam, had not been matters of forethought and speculation.
Ch. 2, *Imitation of Life* *1932*

4 Papa lived so separately within himself that I retreated to Mama, who wore herself on the outside. Everything about her hung in view like peasant adobe houses with green peppers and little shrines, drying diapers and cooking utensils on the façade. Bk. I, *Anatomy of Me* *1958*

1399. Elsie Janis (1889–1956)

1 When I think of the hundreds of things I might be,
I get down on my knees and thank God that I'm me.
"Compensation," *Poems Now and Then* *c. 1927*

2 Why do we do it?
Oh, Hell! What's the use?
Why battle with the universe?
Why not declare a truce? "Why?," op. cit.

1400. Dorothy McCall (1889–?)

1 One cannot have wisdom without living life.
Quoted in the *Los Angeles Times* *14 March 1974*

2 Technology dominates us all, diminishing our freedom. Ibid.

1401. Gabriela Mistral (1889–1957)

1 Let me be more maternal than a mother; able to love and defend with all of a mother's fervor

CHILDREN'S HEALTH ISSUES

1. Morbidity

Children in the U.S. today face different health challenges from those of as recently as 30 years ago. While infectious disease used to cause most morbidity and mortality, today's children are much more at risk for developmental problems, unintentional injury (the number one cause of death after age 1), violence, abuse or neglect, educational failure, and immoderate risk-taking including substance abuse. These "new morbidities" have required us to transform the content of preventive health services for children. While not abandoning the monitoring of physical health and development, child health providers now must focus much more intently on emotional, family and community issues. A new vision of child health supervision, **Bright Futures: Guidelines for Health Supervision for Infants, Children, and Adolescents**, to be used by child health providers, has just been completed. It forms the cornerstone of a paradigm shift in child health care toward a view which emphasizes enhancing the competence of children and families in context through an integration of health, mental health and other human services. This change in approach will allow the heath care system to better address the complex social issues which now contront our children and families.

Infant Mortality

In 1992, the provisional U.S. infant mortality rate was 8.5 deaths per 1,000 live births; the incidence of low birthweight remained at 7.1 percent (the highest level reported since 1978). Additionally, 22 percent of women did not receive prenatal care in the first trimester of pregnancy. Concurrently, significant changes in delivery of perinatal services are occurring in response to diminishing resources and desire for cost containment, such as the shift toward managed care. Balancing the need for judicious use of resources with the continuing rates of adverse perinatal outcomes, the Department is funding an initiative called "Healthy Start" aimed at helping communities develop or maintain a quality perinatal delivery system. This initiative encompasses strategies to strengthen gaps in the system, increase provider participation for inadequately served women, and ensure that necessary services to enable women to enter and remain in care are routine components of the service delivery package, especially in managed care environments.

CHILDREN'S HEALTH ISSUES

2. Pre-and Postnatal Care

The Maternal and Child Health Bureau (MCHB) has had a long standing priority of promoting the health and safety of infants and young children in child care settings.

In 1987 MCHB awarded a grant to the American Academy of Pediatrics (AAP) and the American Public Health Association (APHA) for the development of National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs. This document is a resource that can be used by state policy makers, state licensing and regulatory agencies, state MCH programs, child care health consultants, providers, advocates and parents to promote and protect the health of young children in child care.

To enhance the use of the standards MCHB supported five implementation grants in 1991, and 1992 to assist States in their development and strengthening of their State health and safety standards for child care settings.

The MCHB has also established the National Resource Center for Health and Safety in Child Care. The Center maintains a registry of child care health consultants and resource organizations, provides technical assistance in upgrading existing child care standards, develops resource material and provides a form for sharing experiences and knowledge.

CHILDREN'S HEALTH ISSUES

3. HIV/AIDS in Infants/Children, Adolescents and Women

Infants/Children

Epidemiology:

Through June 1994, 5,734 children have been reported to the Centers for Disease Control and Prevention (CDC) with AIDS. Racial and ethnic minority children are disproportionately affected with the majority cases among African American (56 percent) and Hispanic (24 percent). Of those children 3,100 (54 percent) have died. HIV/AIDS was the seventh leading cause of death among children aged 1 to 4 years nationwide; the second leading cause of death among African American children in Florida, Massachusetts, New Jersey and New York; and the second leading cause of death in Hispanic children in New York.

Trends:

HIV infects 1,300-2000 newborns born each year in the U.S. The number of cases among children is increasing with 39 percent of the total cases reported since 1993. Perinatal transmission accounts for 89 percent of the cumulative AIDS cases and 93 percent of the cases reported in 1993. Of the 27 states that report HIV infection, 948 children are infected, but have not developed AIDS.

Update on Activities:

NIH ACTG 076 showed that Zidovudine therapy for HIV-infected pregnant women significantly reduces the risk of HIV perinatal transmission by two thirds. This research finding points to the reduction of HIV-infected children, however the long term effects are unknown for the mother and the infant who receive this therapy. PHS agencies are actively integrating these findings in the identification and provision of services for pregnant women.

Ryan White Title IV, administered by the Health Resources and Services Administration, has been funded to provide primary care or HIV-infected children, youth, women and families.

CDC has recently revised the classification system for HIV infection in children less than 13 years old. This revision was based on additional knowledge about the progression of HIV disease among children.

CHILDREN'S HEALTH ISSUES

3. **HIV/AIDS in Infants/Children, Adolescents and Women (Cont'd):**

Adolescents/Youth

Epidemiology:

The CDC reported that 1,768 adolescents between the ages of 13 to 19 have been diagnosed with AIDS as of June, 1994. It is the sixth leading cause of death for adolescents and young adults aged 15 to 24. The 1993 statistics indicated that this disease killed more young people than any other infectious disease.

Trends:

Every year, 3 million adolescents, which is one out of six, are infected with a sexually transmitted disease other than HIV/AIDS. A greater percentage of adolescents than adults with AIDS are female (29 percent vs 11 percent), are African American and Latino (58 percent and 46 percent) and were infected through heterosexual contact (16 percent vs 6 percent).

Update on Activities:

The CDC Youth Prevention Marketing Campaign targets youth with media prevention message. The goal is to prevent the sexual transmission of HIV and other sexually transmitted diseases among young people 25 years of age and younger.

The HHS Coordinating Group on HIV/AIDS, HIV Prevention Working Group, has developed drafted a document to establish priorities for investment in HIV/AIDS prevention and develop a comprehensive plan for HIV/AIDS prevention activities.

CHILDREN'S HEALTH ISSUES

4. The Childhood Immunization Initiative

Childhood immunization was one of the earliest priorities of the Clinton Administration. In response to disturbing gaps in the immunization rates for young children in America, the Administration designed a comprehensive Childhood Immunization Initiative. This national initiative address five areas:

1) Improving immunization service for needy families, especially in public health clinics

2) Reducing vaccine costs for lower-income and uninsured families, especially for vaccines provided in private physician offices (Vaccines for Children Program-VFC*)

3) Building community networks to reach out to families and ensure that young children are vaccinated as needed

4) Improving systems for monitoring diseases and vaccinations

5) Improving vaccines and vaccine use

Although 96 percent of children are adequately vaccinated by kindergarten, **almost one third** of American children under age two are inadequately protected against childhood diseases.

*Vaccines for Children Program (VFC):

On October 1, 1994, the Department of Health and Human Services implemented the VFC program, which will provide free vaccine to children at participating private and public health-care provider sites of their choice. Children who are eligible for free vaccines include those on Medicaid, those without insurance, and American Indians/Alaskan Natives. In addition, children whose insurance does not cover vaccination (i.e., who are underinsured) can receive vaccines through the VFC at federally qualified health centers and rural health clinics. Other children can receive free vaccines at public clinic under existing programs.

CHILDREN'S HEALTH ISSUES

5. **Specific Diseases:**

Measures to improve and maintain child health are high priorities for the Centers for Disease Control and Prevention (CDC). Through epidemiologic and laboratory research CDC works to achieve this priority by developing and evaluating diagnostic tests and vaccines, and by designing preventive health measures.

Diarrheal Diseases

Diarrheal diseases cause the deaths of 400 children in the United States yearly. These deaths represent 10% of the preventable deaths in children and are four times more common among blacks than whites.

Giardiasis and cryptosporidiosis are two of the most common causes of outbreaks of diarrheal illness in children in day care facilities. An estimated 12 million children attend day care facilities in the United States each day. During outbreaks of these illnesses from 20%-40% of the children may become infected.

Rotavirus also causes serious diarrhea in children in the United States. There are an estimated 3.5 million episodes of rotavirus infections and 70-100,000 hospitalizations annually.

E. coli O157:H7 is an emerging cause of foodborne illness. An estimated 20,000 cases of infection occur each year in the United States. The infection leads to bloody diarrhea and is easily spread from person to person. The infection can lead to hemolytic uremic syndrome (HUS), a life-threatening kidney failure. HUS is the leading cause of acute kidney failure in children.

Pneumococcal Disease

Pneumococcus is the bacterium that most often causes middle ear infections (otitis media) among children. Middle ear infection is one of the most common childhood illnesses and can lead to permanent hearing loss and learning disabilities. In 1990, ear infections resulted in 24 million doctor visits. Almost all children have at least one ear infection each year. The bacteria responsible for most ear infections are becoming resistant to commonly prescribed drugs; approximately 1 million ear infections are now caused by drug-resistant bacteria.

CHILDREN'S HEALTH ISSUES

5. **Specific Diseases (Cont'd):**

Bacterial Meningitis

Bacterial meningitis is a life-threatening infection of the central nervous system. *Hemophilus influenzae* type b (Hib) is one cause of bacterial meningitis which has had a substantial death rate in children. There are approximately 11,000-12,000 cases per year caused by this bacteria; 30% of the children who survive have permanent neurologic damage. Hib vaccines that are effective against meningitis in infants have been developed and have sharply reduced the incidence of Hib disease in the United States in the past few years. Development of the Hib vaccines may ultimately result in the eradication of Hib disease in young children

Respiratory Syncytial Virus

Respiratory syncytial virus (RSV) disease infects nearly all children by the time they are 2 years of age. This disease is the single most important cause of lower respiratory illness in infants and children and can lead to the development of pneumonia and bronchiolitis. RSV causes 4,500 deaths annually in the United States and about 90,000 hospitalizations.

CHILDREN'S HEALTH ISSUES

6. Youth Issues

Current studies indicate that adolescents are at greater health risks today from their behaviors than from disease. Furthermore, adolescents engage in risky behaviors at increasingly earlier ages. Alcohol, tobacco, and other drug use as well as HIV infection and other sexually transmitted diseases are a few of the major health problems that continue to be major threats to the health of adolescents.

STATISTICS (CDC Tables attached):

- The death rate for adolescents and young adults was 100.1 per 100,000 in 1991. This rate, which declined from 1980 to 1983 has increased over the past several years; the rate now is above the 1990 prevention goal.

- The three leading causes of death for 15 to 24-year-olds are unintentional injuries, suicide, and homicide. For 15 to 24-year-old black males, the 1991 homicide rate was 90.0 per 100,000, nearly double that of the previous decade. Rates among young black men exceed rates for young white men by as much as eight times.

- The proportion of 20 to 24-year-olds who are regular cigarette smokers has declined from 30 percent in 1987 to 24 percent in 1991. Substance abuse by young people also has declined between 1988 and 1992. Among 12 to 17-year-olds reporting on substance use, alcohol, marijuana, and cocaine use declining from 25.2 to 15.7 percent. Alcohol use among 18 to 20-year-olds declined from 57.9 percent to 50.3 percent in 1993.

<u>Substance Abuse</u>

The rate of drug abuse in children is alarming. The National Household Survey (NIDA) estimates that up to seven million children abuse alcohol and drugs to some extent.

The timing of interventions into abuse of substances has been shown to be critical to success. The importance of intervening during sensitive periods, before precursor problem behaviors have become rigidly set, is highlighted in many studies. Duration of interventions is also critical. Interventions need a developmental perspective, with a comprehensive series of age-specific interventions and time to enhance and sustain health adaptation and skills.

CHILDREN'S HEALTH ISSUES

6. Youth Issues

Substance Abuse (Cont'd):

Generalizing the effects of interventions is dependent on such factors as involvement of natural helpers such as parents, teachers, and peers; the site of intervention; and making interventions relevant to the participant's natural environment, such as school and playground.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is planning to work with the Maternal and Child Health Bureau in HRSA and the Department of Education, to assist schools incorporate comprehensive treatment approaches to school health programs. SAMHSA is also developing instruments to provide reliable assessment of substance abuse treatment needs of youth.

Since 1987, the SAMHSA has awarded 361 demonstration grants to community-based organizations to develop innovative strategies to prevent alcohol and drug use in their community's high risk youth population. The prevention programs emphasize protective factors and reduce risk factors related to drug and alcohol abuse and associated problems. Since 1990, SAMHSA has also funded 269 Community Partnership programs to enable communities to identify, design and implement solutions to specific alcohol and other drug abuse problems and concomitant behaviors.

Teen Pregnancy

In the U.S., one million adolescent girls nearly 12 percent--become pregnant each year. More than 80 percent of these pregnancies are unintended, approximately one-third end in abortion and one-half in a live birth. Most adolescent childbearing occurs outside of marriage and this has increased markedly during the past two decades. In 1992, 70 percent of births to adolescents were out-of-wedlock compared to slightly less than 30 percent in 1970.

Evaluations of adolescent pregnancy prevention programs indicate that a combination of interventions works best. Programs that include abstinence education, sexuality education, social skills training and practice in applying skills, as well as information about contraceptives have demonstrated positive effects in both delaying sexual initiation and increasing the use of contraceptives among the sexually active.

CHILDREN'S HEALTH ISSUES

6. **Youth Issues**

Teen Pregnancy Cont'd:

Federal responses to adolescent pregnancy include:

The Title XX Adolescent Family Life Program supports demonstration projects designed to prevent adolescent pregnancy through abstinence-based education programs and provide medical and social services for pregnant and parenting adolescents.

The Title X Family Planning Program provides services to low-income persons; one-third of its clients are adolescents. New priority initiatives for the program include more emphasis on services to prevent adolescent pregnancy and increased outreach to adolescents.

Medicaid is a Federal/State program that reimburses health care providers for medical services to low-income persons, including adolescents. Medicaid expends more than $200M annually to support family planning services.

Community Health Centers, Migrant Health Centers, the Maternal and Child Health Block Grant and the Social Services Block Grant also provide family planning services.

Violence

STATISTICS:

Young people are disproportinately represented among the victims and perpetrators of violence. The average age of both violent offenders and victims has been growing younger and younger in recent years. Homicide is the second leading cause of death among 15 to 24-year-olds in the U.S. and the leading cause of death for young African-American males and females. Between 1988 and 1992, the number of Violent Crime Index arrests of juveniles increased by 47 percent -- more than twice the increase for persons 18 years in age and over. Most alarming, juvenile arrests for murder increased by 51 percent, compared to nine percent for adults. The estimated 129,600 Violent Crime Index arrests of juveniles in 1992 was the highest in history, with 3,300 arrests for murder, 6,300 for forcible rape, 45,700 for robbery, and 74,400 for aggravated assault.

CHILDREN'S HEALTH ISSUES

6. **Youth Issues**

Violence (Cont'd):

The Public Health Service focuses on primary prevention and "what works' to prevent youth violence before it begins. Based on a $42M research base on violence and traumatic stress in NIH's National Institute on Mental Health, the other agencies of the PHS formulate and implement demonstrations, evaluating "what works". Our research has documented that home visitation programs, having nurses visit families at risk for violence in the home, work to prevent violence, as do early childhood education programs like Headstart. It has also shown that problem-solving and skills-building/job training programs, with direct application to young people's lives, are effective.

PHS's specific efforts include the epidemiological and violence prevention efforts of CDC, the violence research conducted by the National Institutes of Health, the high-risk youth and substance abuse-related violence prevention activities of SAMHSA, HRSA's violence prevention work with community health centers and providers, Indian Health Service family and youth violence prevention services, and the Office of Minority Health's recent funding of 16 Historical Black Colleges and Universities to establish family life centers. PHS also co-sponsored with the Administration for Children and Families (ACF) and six other Federal Departments and the Office of National Drug Policy Control, an August 1994, conference on youth violence, and on the Pulling America's Communities Together effort now underway in D.C., Atlanta, Denver, and the State of Nebraska. The PHS is also working with ACF and the Department of Education on the implementation of the $26M Community Schools portion of the FY 1995 Crime Bill funding.

THE SUMMIT OF THE AMERICAS

SECURING A PROSPEROUS FUTURE

FOR OUR CHILDREN AND THROUGH OUR CHILDREN

INTRODUCTION

- The Hemisphere's leaders and their spouses are coming together not only as the heads of their governments and people, but also as parents and members of families who recognize that one driving force behind the Summit is to ensure children's well-being now and in the future.

- This memo identifies the many ways in which the proposed Summit initiatives affect children.

- The implementation of the Summit initiatives will bring about a better standard of living for the children of the hemisphere, through increased trade and jobs, improved access to health and education, and the protection of their rights.

- Future generations will be called upon to continue the work initiated at the Miami Summit--we must prepare today's children to be the leaders of tomorrow's integrated and democratic Western Hemisphere.

The Summit Initiatives: Impact on Children

A. Hemispheric Free Trade/Capital Markets Liberalization

* Creates more jobs, allowing families to enjoy a higher standard of living.

* Lessens need to depend on children to help augment the family's income, thus reducing child labor.

* Provides more commodity variety at more competitive prices, helping to decrease malnutrition in children.

B. Hemispheric Infrastructure Protocol

* Increases access of all sectors of society to better transportation, electricity, and clean water.

C. The Information Infrastructure of the Americas

* Increases communication throughout the hemisphere, which will foster greater understanding, cooperation, and integration.

D. Enhancement of the Capacity of the OAS to Strengthen Democracy

* Helps prevent political violence, which has a profound effect on the well-being of our children.

E. Strengthening Civil Society

* Encourages the growth of civic-minded non-governmental organizations, which will benefit children directly, at the grass roots level.

* Helps ensure that groups such as disabled, indigenous, and female children receive fair and equitable treatment.

F. No To Corruption

* Teaches our children that corruption is unacceptable by treating corrupt public servants and businesspersons as criminals.

G. Counternarcotics Initiatives

* Narcotics consumption, production, and trafficking threaten all children directly.

* In order to safeguard children's health and their futures, we must educate our children on the dangers of drug abuse.

* We must continue our efforts to protect children from this threat and prevent them from becoming involved in those criminal activities.

H. Universal Access to Quality Primary Education

* All children, regardless of economic or social situation, will receive the basic tools necessary to become full, participatory members of society, especially women, minorities, and indigenous groups.

* Requiring children to attend primary school will help eradicate child labor.

* Ensures that all children have the foundation necessary to compete in a modern economy and/or to go on to higher levels of education; secondary school will train students for more complex jobs, allowing them to be more competitive in the modern world economy.

I. Equitable Access to Basic Health Service

* Reducing child, infant, and maternal mortality rates will clearly benefit children, who are particularly vulnerable to illness and unhealthy living conditions.

* The success of immunization programs in eradicating the childhood diseases polio and the german measles demonstrate the importance of universal access to such prevention programs.

* A healthy child is more likely to grow up to be a healthy adult, requiring fewer health services over the course of his or her life.

J. Nurturing Microenterprises

* Helps families obtain the means to support themselves for the long term.

K. Sustainable Energy Development and Use

* Developing cleaner sources of energy will improve the health of our children.

* We need to ensure that our children are left with options for renewable sources of energy.

L. Partnership for Biodiversity/Western Hemisphere Environmental Partnership

* Ensures that we do not destroy the living resources or environment of our planet for the sake of future generations.

10. UNIVERSAL ACCESS TO QUALITY PRIMARY EDUCATION

LARGE SEGMENTS OF SOCIETY IN OUR HEMISPHERE HAVE NOT BEEN EQUIPPED TO PARTICIPATE FULLY IN ECONOMIC LIFE, PARTICULARLY WOMEN, MINORITIES AND INDIGENOUS GROUPS. NEARLY ONE-HALF OF THE HEMISPHERE'S POPULATION LIVES IN IGNORANCE AND POVERTY. INVESTING IN EDUCATION HELPS ENSURE THAT ALL MEMBERS OF SOCIETY HAVE THE CAPACITY TO CONTRIBUTE TO ECONOMIC PROGRESS, THEREBY DEEPENING THE ROOTS OF DEMOCRACY, PROMOTING POLITICAL STABILITY AND FURTHERING ECONOMIC GROWTH.

NATIONAL ACTIONS

INDIVIDUAL GOVERNMENTS WILL:

-- DESIGNATE A REPRESENTATIVE AGENCY TO WORK WITH ITS PRIVATE SECTOR AND NGOS TO REVIEW CURRENT STRATEGY AND PROGRAMS AND TO ASSESS CHANGES NEEDED TO ATTAIN BY THE YEAR 2010 A PRIMARY COMPLETION RATE OF 100 PER CENT AND A SECONDARY ENROLLMENT RATE OF AT LEAST 75 PER CENT.

INTERNATIONAL ACTIONS

WORKING TOGETHER, GOVERNMENTS WILL:

-- CREATE A HEMISPHERIC PARTNERSHIP, WITH A SECRETARIAT, TO PROVIDE A CONSULTATIVE FORUM FOR GOVERNMENTS, NGOS, THE BUSINESS COMMUNITY, DONORS, AND INTERNATIONAL ORGANIZATIONS TO REFORM POLICIES AND FOCUS RESOURCES MORE EFFECTIVELY.

11. ENSURING EQUITABLE ACCESS TO BASIC HEALTH SERVICES

DESPITE IMPRESSIVE GAINS IN THE HEMISPHERE, CHILD AND MATERNAL MORTALITY REMAIN EXCESSIVE, PARTICULARLY AMONG THE RURAL POOR AND INDIGENOUS GROUPS.

NATIONAL ACTIONS

INDIVIDUAL GOVERNMENTS WILL:

-- DESIGNATE NATIONAL HEALTH REFORM COMMISSIONS, INCLUDING PUBLIC AND PRIVATE SECTOR PARTICIPANTS AND DONORS, TO PROMOTE EFFORTS TO REDUCE (FROM 1990 LEVELS) CHILD MORTALITY BY ONE-THIRD AND MATERNAL MORTALITY BY ONE-HALF BY THE YEAR 2000, IN ACCORDANCE WITH THE 1990 WORLD SUMMIT FOR CHILDREN, THE 1994 NARINO ACCORD, AND THE 1994 INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT.

-- ENDORSE A BASIC PACKAGE OF CLINICAL AND PUBLIC HEALTH SERVICES CONSISTENT WITH WORLD HEALTH ORGANIZATION AND

WORLD BANK RECOMMENDATIONS. THE PACKAGE WILL ADDRESS CHILD AND REPRODUCTIVE HEALTH INTERVENTIONS, INCLUDING PRENATAL, DELIVERY AND POSTNATAL CARE, FAMILY PLANNING INFORMATION AND SERVICES AND HIV/AIDS PREVENTION.

Will all Ss's need approval?

-- DEWELOP COUNTRY ACTION PLANS FOR REFORMS TO ACHIEVE HEALTH GOALS AND ENSURE UNIVERSAL, EQUITABLE ACCESS TO SERVICES. REFORMS WOULD ENCOMPASS ESSENTIAL SERVICES FOR THE POOR AND INDIGENOUS PEOPLES; STRONGER PUBLIC HEALTH INFRASTRUCTURE; ALTERNATIVE MEANS OF FINANCING, MANAGING AND PROVIDING SERVICES; AND MAKING GREATER USE OF NGOS.

INTERNATIONAL ACTIONS

WORKING TOGETHER, GOVERNMENTS WILL:

-- STRENGTHEN THE EXISTING WORLD BANK/PAN AMERICAN HEALTH ORGANIZATION ECONOMIC AND FINANCING NETWORK AS AN INTERNATIONAL FORUM FOR SHARING EXPERTISE, INFORMATION AND EXPERIENCE ON HEALTH REFORM EFFORTS. THE NETWORK WILL GATHER GOVERNMENT OFFICIALS, REPRESENTATIVES OF THE PRIVATE SECTOR, NGOS, DONORS AND SCHOLARS TO SHARE INFORMATION ON REFORM INITIATIVES CURRENTLY UNDERWAY.

-- CONVENE A SPECIAL MEETING WITHIN PAHO TO PLAN STRENGTHENING OF THE REGIONAL NETWORK.

Jan... (waldman ofc)
456 5691
6485 (fax)

THE WESTERN HEMISPHERE IS RICH IN ITS DIVERSITY...
AND CHILDREN ARE ITS GREATEST TREASURE.

BUT CHILDREN DO NOT GROW UP
WITH EQUAL OPPORTUNITIES.

TOO MANY ARE DISABLED OR DIE
FROM DISEASES THAT ARE ENTIRELY PREVENTABLE

TOO MANY--IN BOTH SOUTH AND NORTH--
GROW UP IN POVERTY,
LACK ADEQUATE NUTRITION,
GO TO SLEEP HUNGRY,
LIVE IN UNSANITARY ENVIRONMENTS,
AND RECEIVE INADEQUATE EDUCATION.

TOO MANY--IN BOTH SOUTH AND NORTH--
DROP OUT OF SCHOOL,
ARE HOMELESS, LIVE ON THE STREET
AND BECOME VICTIMS OF VIOLENCE.

BUT THIS HEMISPHERE HAS ALSO MADE
A GREAT COMMITMENT TO ITS CHILDREN,
AND WE ARE ALREADY TAKING REMARKABLE ACTION
TO HONOR THIS COMMITMENT.

THE REGION TOOK THE INITIATIVE IN 1990
TO CREATE THE WORLD SUMMIT FOR CHILDREN.

MEXICO AND CANADA
WERE TWO OF THE SUMMIT'S CONVENERS,
AND CANADA WAS ITS CO-CHAIR.

MORE HEADS OF STATE FROM THIS HEMISPHERE
TOOK PART IN THE SUMMIT
THAN FROM ANY OTHER REGION,
AND THEY TOOK THE INITIATIVE IN FOLLOWING UP
ON THE COMMITMENTS OF THAT SUMMIT.

NEARLY EVERY COUNTRY IN THE WESTERN HEMISPHERE
HAS ALREADY PREPARED A NATIONAL PROGRAM
OF ACTION FOR CHILDREN,
WHICH THE WORLD SUMMIT FOR CHILDREN CALLED FOR.

THIS IS THE ONLY REGION OF THE WORLD
THAT HAS REGULAR EVALUATION
OF WHAT EACH COUNTRY IS NOW DOING
TO CARRY OUT ITS PROGRAM OF ACTION.

IN 1992, MEXICO CONVENED
THE FIRST EVALUATION MEETING.

COLOMBIA CONVENED THE SECOND
IN APRIL 1994.

THAT MEETING PRODUCED THE NARIÑO ACCORD,
WHICH RENEWED THIS HEMISPHERE'S
COMMITMENT TO CHILDREN,
AND ENDORSED A SET OF MID-DECADE GOALS
TO GUARANTEE VISIBLE RESULTS
BY THE END OF 1995.

ACHIEVING THESE GOALS WILL KEEP
THE HEMISPHERE IN THE VANGUARD.

ONE GOAL HAS ALREADY BEEN ACHIEVED.
AS WAS ANNOUNCED AT THE HEADQUARTERS
OF THE PAN AMERICAN HEALTH ORGANIZATION
ON SEPTEMBER 29, 1994,
POLIO HAS NOW BEEN ELIMINATED
FROM THIS HEMISPHERE.

MOST COUNTRIES HAVE REACHED
AND ARE NOW SUSTAINING
IMMUNIZATION RATES
OF EIGHTY PER CENT OR MORE.

AND THE NUMBER OF REPORTED CASES
OF MEASLES HAS DECLINED DRAMATICALLY.
ELIMINATING MEASLES FROM OUR HEMISPHERE
IS NOW A REAL POSSIBILITY.

THE NUMBER OF CASES
OF NEONATAL TETANUS
HAS ALSO DROPPED REMARKABLY--
THOUGH FURTHER PROGRESS IS NEEDED.

THE ANDEAN REGION IS ALSO CLOSE
TO THE GOAL OF IODIZING
ALL SALT CONSUMED BY HUMANS--
THUS ELIMINATING THE GREATEST CAUSE
OF MENTAL RETARDATION
IN OUR MIDST.

DEATHS FROM DIARRHEA
HAVE PLUMMETED,
AND HOSPITALS ALL OVER THE HEMISPHERE
ARE BEING DECLARED 'BABY-FRIENDLY.'

NEARLY ALL COUNTRIES HAVE RATIFIED
THE CONVENTION ON THE RIGHTS OF THE CHILD,
AND ARE NOW IMPLEMENTING IT.

IN THESE AND MANY OTHER WAYS,
THE AMERICAS ARE SETTING AN EXAMPLE
FOR THE ENTIRE WORLD.

ONE EXAMPLE IS THE CONCEPT
OF 'DAYS OF TRANQUILLITY,'
WHICH PERMIT CHILDREN TO BE IMMUNIZED
EVEN IN THE MIDST OF WAR.
THIS WAS FIRST DEVELOPED
IN EL SALVADOR IN 1984.

ANOTHER EXAMPLE IS THE CONCEPT
OF SOCIAL MOBILIZATION--
GALVANIZING ALL SECTORS OF SOCIETY
AROUND CHILDREN'S IMMUNIZATION--
INCLUDING THE CHURCH,
THE MILITARY,
THE PRIVATE SECTOR
AND NON-GOVERNMENTAL ORGANIZATIONS.
THIS WAS FIRST WIDELY APPLIED
IN COLOMBIA IN 1982.

IN BRAZIL, THE STATE OF CEARA WAS HONORED
WITH THE MAURICE PATE AWARD IN 1993
FOR ITS OUTSTANDING WORK
ON BEHALF OF CHILDREN.

NEARLY EVERY STATE IN BRAZIL AND MEXICO
IS NOW DEVELOPING ITS OWN
PLAN OF ACTION FOR CHILDREN.
PROVINCES IN THE DOMINICAN REPUBLIC,
DEPARTMENTS IN GUATEMALA,
AND MUNICIPALITIES IN ARGENTINA
ARE DOING THE SAME.

YES, MUCH HAS BEEN DONE...
BUT OUR WORK IS UNFINISHED.
A HUGE AGENDA REMAINS BEFORE US.

FIRST, WE MUST SUSTAIN
AND REAFFIRM COMMITMENT
TO THE MID-DECADE AND DECADE GOALS
OF THE 1990 WORLD SUMMIT FOR CHILDREN.

SECOND, THE CONVENTION ON THE RIGHTS OF THE CHILD
MUST BE FULLY IMPLEMENTED
BY LEGISLATIVE REFORM,
PUBLIC EDUCATION,
AND SERVICES TO PROTECT CHILDREN.

THIRD, ACHIEVEMENTS ALREADY BENEFITING THE MAJORITY

MUST BE EXTENDED TO ALL.

THE QUALITY OF EDUCATION MUST BE IMPROVED--
IN BOTH SOUTH AND NORTH.

ALTHOUGH THE AMERICAS HAVE HIGH RATES
OF SCHOOL ENROLLMENT,
THEY ALSO LEAD THE WORLD
IN SCHOOL DROPOUTS.

EFFORTS TO MAKE SCHOOLS
MORE CHALLENGING,
MORE APPEALING,
AND MORE AFFORDABLE
MUST GO HAND-IN-HAND
WITH EFFORTS TO ELIMINATE CHILD LABOR
AND TO TRAIN YOUNG PEOPLE
FOR EMPLOYMENT IN A MODERN ECONOMY.

MATERNAL MORTALITY RATES
IN THIS HEMISPHERE
ARE STILL UNACCEPTABLY HIGH,
AND PNEUMONIA STILL CAUSES
BETWEEN TEN AND THIRTY PERCENT
OF ALL YOUNG CHILDREN'S DEATHS.

IN BOTH RURAL AREAS AND
POOR URBAN NEIGHBORHOODS
SOUTH AND NORTH--
SANITATION MUST BE IMPROVED
TO PREVENT FURTHER OUTBREAKS
OF CHOLERA AND OTHER DISEASES.

THE WESTERN HEMISPHERE'S
130 MILLION YOUNG PEOPLE
ARE OUR WORKERS
AND THINKERS,
THE LEADERS OF TOMORROW.
THEY SHOULD BE HEARD FROM TODAY.

BUT THEY ARE CONFRONTED WITH PROBLEMS
AS NEVER BEFORE:

CHILD ABUSE AND CHILD EXPLOITATION;

TEEN PREGNANCY--
CHILDREN HAVING CHILDREN;

SEXUALLY TRANSMITTED DISEASES--
INCLUDING THE DEADLY HIV VIRUS
THAT CAUSES AIDS;

ILLEGAL AND LEGAL DRUGS,
INCLUDING ALCOHOL AND TOBACCO.

AND GUNS AND VIOLENCE--
NOW THE SECOND LEADING CAUSE OF DEATH
AMONG CHILDREN AGED 10 TO 14
IN THE UNITED STATES.

YES, WE HAVE ALREADY DONE MUCH.
BUT WE HAVE SO MUCH MORE TO DO.
AND WE ALL KNOW WHAT IS NEEDED--
POLITICAL WILL AND THE COURAGE
TO PUT CHILDREN'S NEEDS FIRST.
WHEN NATIONAL PRIORITIES ARE DETERMINED,
OUR WILL MUST MATCH OUR PROMISES.

Drew Elementary School, Miami (most articles w/ abstracts before-hand)

MIAMI HERALD

January 24, 1993, Sunday

SECTION: Section M; Page 5, Column 3

LENGTH: 42 words

HEADLINE: A LITTLE SCHOOL WITH BIG IDEAS

BYLINE: BY TAFFY GOULD MCCALLUM

JOURNAL-CODE: MH

ABSTRACT:

Taffy Gould McCallum interview with Miami (Fla)'s Drew Elementary School principal Frederick Morley reports on his successful program of school reform that draws national attention; focuses on his concern for active community involvement; photo (L)

GRAPHIC: Photograph

LANGUAGE: ENGLISH

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A LITTLE SCHOOL WITH BIG IDEAS A CONVERSATION WITH A PRINCIPAL WHO GETS THINGS DONE

Miami Herald (MH) - SUN January 24, 1993
By: TAFFY GOULD McCALLUM Special To The Herald
Edition: FINAL Section: VIEWPOINT Page: 5M
Word Count: 2,206

TEXT:

Q. The first this community became aware of Drew Elementary was with the issue of school uniforms, when the parents of this school decided they would like their children to wear uniforms because they thought it would improve discipline. How did that work out?

A. The majority of our students are still wearing uniforms. This is a public school, and in a public school uniforms cannot be mandatory. However, we encourage them. The uniforms are so much cheaper than the other clothing: approximately $30. With name-brand jeans, for example, today you might pay $60 just for one pair.

Another plus is the fact that our attendance is up. We are above 95 percent and that's good. We didn't have that before uniforms. I think the children are coming to school because (they) wake up in the mornings and realize that "I don't have to stand in front of this closet saying 'what am I going to wear today?' "

Another plus is that the first day of school we have most of our children here. In the past, many of the parents (would) say, "I don't have the money for clothing. I have to wait until I get my check to buy clothing for school." When they say that, they're talking about the latest fashions.

It's the most ridiculous thing, where the children wear labels and all these kinds of things.

Q. You once commented that you attributed the success of this school in large part to the fact that you had an outside board made up of executives from major corporations. Is that continuing?

A. Yes, as a matter of fact, I'm going to take you out into our "Ecosystem," which was sponsored by Southern Bell, (a project) where animals are free in the ecosystem. You'll see iguanas out there, Cuban anoles and others, and everyone's just amazed by this. It was something I was sort of against, but because of school-based management,

shared-decision making, the cadre said, "Mr. Morley, we want to do this," and I wanted them to be successful.

Q. It seemed to me at the time that the major corporations who rely on an educated work force for their employees would have it in their best interests to participate in what's happening in the schools.

A. This is one of the things that the officials from Southern Bell told me, that "we need your students -- we're going to need them in the future and we need to work together." So, for that reason, they are supporting us.

Q. Do they contribute in money and in ideas?

A. Yes.

Q. How does that work?

A. We've said "we need you to come out to the school, we need you to talk to our students." We have school on Saturdays, and Southern Bell supported us and other groups in the community supported us, and we are very appreciative.

Q. What about parental involvement? Has that always been a hallmark of this school, or is that something you've had to encourage?

A. You have to encourage that, because many parents are working parents, and sometimes children come to school right after their parents leave for work. That's at 7 o'clock in the morning, and sometimes those parents don't work just eight hours or five hours. They're working late into the afternoons and they may get home at 6 o'clock, and they don't have time to come out to the school. It's not that they don't want to, but because of economic reasons they can't come out.

Q. How about involvement at home?

A. (In Chapter 1 schools, which qualify for the federal program that serves economically and educationally disadvantaged students) we have what we call a parent-involvement specialist, one who contacts the parents. This person might even go out late in the afternoon, might have to go out on a Saturday or a Sunday to work with those parents and tell those parents how they can help their children. Those parents are also able to check out computers to assist their children.

Q. I'd be curious to know how you feel about the school voucher system. It sounds as though if vouchers were in effect, everyone would want to come to this school.

A. Yes. We know that. My concern would be global. It would not hurt Drew Elementary. But I'm afraid it would hurt many of the other schools, and we have to look at the total school system, and we need all of our schools.

Q. But is it reasonable to think, based on what the people who are in favor of vouchers are saying, that if vouchers were in effect, those schools that one might think would be hurt would actually upgrade so they could attract students as you are?

A. I think that from what I hear from Milwaukee, where they've started this, where they have the pilot program, that has not been the case.

Q. The schools have not upgraded?

A. Right, that's my understanding.

Q. You've also had great success with your Saturday program, haven't you?

A. Yes. What we've found, and we did our own study, is that those students who came to Saturday school did better than those of a similar mental ability that decided to stay home and look at cartoons.

That's where we got additional parental involvement. We have parents who came our first year, and they supplied the lunches, but they got the whole community involved.

Originally, we were supposed to have just reading, writing and mathematics, and we had the reading, writing and mathematics, but we found out that some of those students were hungry. They didn't eat, and they just needed a snack or something. So we got the community involved. We said, OK, Southern Bell, this is your time to do something. We went to political people -- the mayor of Miami, (Xavier) Suarez -- and said, this is your day to provide a lunch, this is your Saturday.

Q. What do you think (of) the idea of merit retention of teachers, and what criteria would you use to judge them?

A. We tried that once before, and you know, it's very difficult because you have many outstanding teachers.

Q. But are poor teachers a problem, do you think, nationwide?

A. Yes, I think that is definitely a problem. We have to be willing

to get rid of poor teachers. You can, if you really want to do it, if you go in there and observe and follow the procedure. I think if you check the records in Dade County, you have many of the poor teachers (who) have been dismissed, but it's up to us as administrators to go out and weed out those poor teachers.

Q. The idea of tracking, or homogeneous grouping, has come under fire recently. Those who are against it feel that children of like abilities should not necessarily be grouped according to their ability but, rather, that heterogeneous grouping -- where everyone is thrown in together -- is really the better way. Do you have an opinion on that?

A. That's been debated for years, and it's still being debated. I have a gifted program here, a full-time gifted (program), and we're trying something new. In the lower grades we aren't going to use the homogeneous grouping; we're going to use the heterogeneous grouping with the primary students who are gifted. In other words, they're going to be in the regular classes, and I have a teacher teaching all of the children as if they're gifted.

So we're doing both, and we're going to look at the results to see what's best for our students and we're going to go from there.

Q. How do you feel about establishing a greater network of trade schools for those students who are not capable of doing college work but obviously need to have some trade on which they can rely for a livelihood? Do you think we should be tracking students off into trade schools at a high school level?

A. You know, we're building the William Turner Center. That's going to be for academic achievement -- basic skills -- but also for people who want to learn trades, and I think that it's very important. Today, I wish I could find a roofer!

I don't think we should wait until we get to high school. I think that we should do what we're doing here at Drew Elementary. We have our career lab right here at Drew. All our students, before they leave here, go through that career lab. They sit down at the plumber station, they sit down at the electrician station, they sit down at the fireman station, and they go through all these things, and not only that, we bring in these individuals from the community to talk with our students.

We think this is important, because down the street you can see some individuals who may be role models, but they're selling drugs. And they come out there and drive their Mercedes and they have all the gold chains and everything around their necks and -- that's a role model for these

individuals -- so it's important for us to bring in the plumber who lives down the street who can sleep at night without someone breaking down the door, dragging him off to jail. That's important to us.

Q. At what level do the children start, in what grade?

A. They start in grade four. All our fourth-, fifth- and sixth-graders go through the lab, because we want to make sure they all get a feel of this before they leave. We introduce them to different careers right here. We aren't saying, "You don't have the ability." We aren't going to label them and track them at this particular point and say, "OK, you cannot make it in school; therefore, you're going to be a plumber." But we introduce all our students to this, and it's up to them and up to the middle schools later on to guide them into different fields. Q. Margaret Mead once commented that the greatest travesty in American education was making everyone think he not only needed a college education but was entitled to one, and that what we need is more trade and service people. That's why I think more and more people are going back to the idea of having trade schools, where students who really don't have the interest in college can nevertheless earn a good living and make a contribution to the community without a college education.

A. I wish I knew how to repair brakes of a car or how to do a tune-up on some of these foreign cars, because most of us are driving foreign cars now. The trades are very important. We talk about folks out there who say they don't have jobs. Well, you learn a trade, you could get a job.

Q. How do you feel about having national standards for schools?

A. I think we should have some standards and we should have some goals for our schools. We have those in the state of Florida, and I'm for it.

Q. I know that, especially in South Florida, where we have so many immigrant children, there are many people who say it isn't fair for us to have to try to meet some national standard, because we have to teach so many of our students English first.

A. I don't think it's wrong to have national standards. I think maybe it's wrong to say everyone must meet this goal -- but there's a goal that you might want to try to reach.

Q. At least have the standard out there.

A. Yes, the standard should be out there, but don't say we've failed because we don't reach it.

Q. If you were asked by President-elect Clinton for your advice (on education), what would you say to him?

The greatest problem facing education in the future of our nation today is the use of illegal drugs, and I say that for this reason: You can come up with all the programs we can think of, and all the college professors who can come up with all these great ideas, but when you have someone who has a substance, born with a substance in his or her body, and they come to school brain-damaged, there's very little we can do. We can nurture these students, we can show our love for these students, but we need to get out in this community and rid our nation and our community of illegal drugs.

Someone mentioned that crack babies will be coming into the schools in the future. The thing they don't know is that it's not in the future, that crack babies are here in the schools now. Q. How would you approach the drug problem?

A. We're going to have to be serious about it. It's coming in from other countries, and we need to stop it before it gets here. Just to pick up these guys on the street, that's not solving the problem. It's going to still be there.

MIAMI HERALD

August 23, 1993, Monday

SECTION: Section B; Page 1, Column 2

LENGTH: 49 words

Could not find

HEADLINE: PROGRAM TARGETS GIFTED MINORITIES

BYLINE: BY MARILYN MARKS

JOURNAL-CODE: MH

ABSTRACT:

Article on one-year-old program in Broward County, Fla, that helps discover gifted and talented minority children by using activities other than standardized IQ tests; Audrey Jackson, mother of three gifted children at Charles Drew Elementary School in Pompano Beach, comments; photo (M)

GRAPHIC: Photograph

LANGUAGE: ENGLISH

St. Petersburg Times

February 11, 1989, Saturday, City Edition

SECTION: NATIONAL; Pg. 1A

LENGTH: 951 words

HEADLINE: Quayle brings hard-line message to Florida, voices support for Israel

BYLINE: STEPHEN KOFF; BARRY KLEIN

DATELINE: PALM BEACH

BODY:

PALM BEACH - Vice President Dan Quayle came to Florida to push his boss' agenda on Friday, using a hard-line address to calm Jewish fears about Israel and a similarly conservative tack in a talk to Hispanics about Latin America.

In between the separate speeches in Palm Beach and Miami, the new vice president stopped off at a predominantly black school in Liberty City.

Outside the school, the reception wasn't as warm.

"If he wants to make people think he cares about black children, he ought to do something about the way their black parents have to live," said Billy Hardemon, one of several dozen demonstrators who waved placards outside Charles R. Drew Elementary School while the vice president was speakinginside.

Quayle told reporters he came to Miami to salute the award-winning school, not to solve the city's racial tensions, which produced three nightsof rioting last month.

"I don't have any answers on that," Quayle said. "This issue is very mucha local issue."

This was Quayle's first domestic trip since he was sworn in Jan. 20, and it came barely 13 hours after President Bush delivered his first address to ajoint session of Congress.

Programs for Florida figure prominently in the president's plans, thevice president said.

He cited Bush's commitment to a $ 1-billion increase for fighting drugs, a 22 percent raise for NASA and an indefinite postponement of offshoredrilling near the Everglades.

"Florida did very well in the president's budget," Quayle said at a press conference. "(And) the president did very well in Florida during thecampaign."

Indeed, the Bush-Quayle ticket won by 60-38 percent in the Sunshine State.

But Jewish voters, who had qualms about the candidates' commitment to Israel, heavily favored Democrat Michael Dukakis, according to the AmericanJewish Congress.

On Friday, Quayle tried to allay those concerns.

Speaking to about 500 leaders of the Anti-Defamation League of B'nai B'rith meeting in Palm Beach, he cited inconsistencies in PLO leader Yasser Arafat's peace-promising rhetoric and the PLO's violent actions. "Those who believe that American policy is about to undergo a basic shift merely because we have begun to talk with the PLO are completely mistaken," he said.

Quayle did not address this week's State Department report criticizing Israel's treatment of Palestinian civilians, and said, "Arab states havekilled far more Palestinians than Israel has."

However, he said, "Israel cannot be judged by the standards of its neighbors." And by democratic standards, he said, "the status quo on the WestBank and Gaza Strip is clearly unacceptable."

As for Palestinian sovereignty, he said, "We continue to believe . . . that an independent Palestinian state will not be a source of stability or acontribution to a just and lasting peace."

Jewish leaders said they were enthralled by that message.

"I think it's very important at an early stage of a new administration to hear these kinds of things," said Ken Jacobson, director of Middle Easternaffairs for the Anti-Defamation League.

Quayle left Palm Beach for Miami with Gov. Bob Martinez aboard Air Force Two, where they discussed the space program. Upon landing, the vice president's motorcade sped off to Charles Drew Elementary School, where testscores and achievement rank among the highest in the nation.

The school is near the neighborhood where racial violence and looting erupted last month, sparked by the shooting of a black man by a policeofficer.

"I think I'm at the best merit school in the entire United States of America," Quayle told about 400 students gathered in the school cafeteria.

Principal Frederick Morley presented two school uniforms - white shirts and blue plaid ties - for Quayle and President Bush, whose son Jeb also was present. The principal praised the visit as an example of the newadministration's concentration on education.

Protesters outside the school questioned Quayle's commitment to solvingproblems that have battered the riot-torn community.

"Why's he in there talking to children?" Billy Hardemon asked. "Why doesn't he come into the community and talk to people struggling to getby?"

Friday night, the vice president spoke at a black-tie gala sponsored by Miami's Cuban American Bar Association, where affluent members of the Hispanic community turned out to hear Quayle's anti-communist remarks.

Quayle criticized human rights violations in Latin American countries, but contended that the worst violators of human rights in El Salvador are the leftist guerrillas trying to overthrow the democratic government.

Quayle said Cuba, Nicaragua and Panama have tyrannical Latin governments that are "desperately holding out against a democratic tidal wave that isrising ever higher."

"The governments ruling these countries claim to be the vanguard of the Latin American revolution," he said. "In reality they're the rear guard."

- Information from AP was used in this report.

Sun-Sentinel (Fort Lauderdale)

June 22, 1994 WEDNESDAY, BROWARD EDITION

SECTION: SOUTHEAST, Pg. 6, NAMES AND FACES

LENGTH: 880 words

HEADLINE: SERVICE AWARDS RECOGNIZE EMPLOYEES AT HOSPITAL

BYLINE: Yvonne McClain

BODY:

The Jackson Memorial Foundation honored five Jackson Memorial Hospital employees at the Jay W. Weiss Humanitarian Awards Gala on May 7.

The Winner's Circle Award is given to employees who have shown exceptional service to the hospital and the community.

Two of this year's recipients are Miramar resident John Clark and Pembroke Pines resident Cindy Friedewald. Clark, clinical coordinator of critical care medicine in the Department of Pharmacy Services, has worked at Jackson Memorial for 11 years. He also is an adjunct professor at the University of Florida, Florida A&M University and at Nova Southeastern University's College of Pharmacy.

In 1992, Clark was president of the Miami Chapter of the American College of Clinical Pharmacology and received the Publication Award in 1993 from the Florida Society of Hospital Pharmacists.

Friedewald, a registered nurse, is the director of nursing at the Children's Hospital Center and has worked at Jack-son for 18 years.

She is co-chairwoman of the Employee Management Committee and chairwoman of the Labor Management Committee at the hospital. She is also the nursing liaison for Head Start Nurses for the Community Action Agency.

Friedewald, Clark and the other recipients were nominated by Jackson employees and were selected by the Winner's Circle Selection Committee.

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The Cooper City Police Department is proud to announce that Police Explorer Jeff Propst won a fifth-place trophy in the marksman class during a recent shooting competition in St. Petersburg.

The match was held May 22 at the Pinellas County Police Academy Range. There were 51 total shooters and 15 in the marksman class.

Propst, 14, is an eighth-grader at Walter C. Young Middle School in Pembroke Pines. Two other Cooper City Police Explorers also participated in the competition.

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The National Safety Council, Broward Chapter is proud to announce the first award recipients of the Robert F. Kearson Scholarship: Binu Jacob and Merline Saintil.

Jacob is a resident of Davie and just graduated from Ely High School. He ranked third in his class of 326 and was recently named a Broward Top Ten Teen. Jacob will be attending the University of Miami as a biology/chemistry major.

Saintil is a resident of North Lauderdale and ranked first in her graduating class of

300 at Hallandale High School. Saintil will be going to Florida A&M University in Tallahassee as an electrical engineering major.

Jacob and Saintil won their scholarships for their demonstrated interest in the health and safety of their communities.

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Dr. Silvia M. Flores, president of the Fort Lauderdale Philharmonic Society, has been named "Humanitarian of the Year" by Hispanic Unity of Florida.

She was honored on June 4 at the seventh annual Hispanic Heritage Ball at Pier 66 in Fort Lauderdale.

Flores was born in Mexico City and is a resident of Fort Lauderdale. She is the mother of three children and is married to Dr. Jorge Arturo Flores, a cardiologist in Broward County.

Silvia Flores has been very active in the Hispanic community for many years and has held prestigious titles, such as American Cancer Society's Woman of the Year in 1992. Through her involvement with the Philharmonic, she was instrumental in organizing the Children's Concerts Series.

Hispanic Unity of Florida is Broward County's only Hispanic human services agency. Hispanic Unity also serves other non-English speaking minority groups in Broward County by providing job placement, family counseling and other programs.

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The Pembroke Pines Villagers, a new civic group for residents of east Pembroke Pines, recently elected the following officers for this next year: Randy Arrowsmith, president; Sue Robinson, vice president; Pat Boehm, secretary; and Mimi Spitz, treasurer. Jay Allen, Carolyn Wells and Rene Champagne will sit on the board of directors.

Send items and photographs for Names and Faces to Sun-Sentinel, 3 SW 129th Ave., Pembroke Pines, Suite 101, Pembroke Pines, Fla. 33027.

GRAPHIC: PHOTOS 2, Clark; Friedewald

LOAD-DATE-MDC: August 1, 1994

MIAMI HERALD

July 10, 1994, Sunday

SECTION: Section B; Page 2, Column 1

LENGTH: 62 words

HEADLINE: UM/JMH'S EYE INSTITUTE TOPS NATIONAL POLL

BYLINE: BY PEGGY ROGERS

JOURNAL-CODE: MH

ABSTRACT:

US News & World Report survey ranks Univ of Miami (UM) as top-ranking US eye care facility; gives high ratings to AIDS, orthopedic, geriatric and otolaryngology treatment at Univ of Miami/Jackson Memorial Hospital (UM/JMH); ranks Miami Children's hospital as No 14 among nation's top 19 pediatric hospitals (M)

MIAMI HERALD

June 22, 1994, Wednesday

SECTION: Section C; Page 1, Column 5

LENGTH: 39 words

HEADLINE: JMH TO TRIP 350 JOBS OVER 15 MONTHS

BYLINE: BY MICHELE CHANDLER

JOURNAL-CODE: MH

ABSTRACT:

Public Health Trust plans to trim nearly 4 percent, or at least 350 jobs, at Jackson Memorial Hospital in Miami; officials cite falling hospital admissions, shorter hospital stays and lower rates offered by managed-care plans (M)

07624124
UM/JMH'S EYE INSTITUTE TOPS NATIONAL POLL
Miami Herald (MH) - SUN July 10, 1994
By: PEGGY ROGERS Herald Staff Writer
Edition: FINAL Section: LOCAL Page: 2B
Word Count: 382

TEXT:
There is no better eye care than at the University of Miami, says a national survey that also gave high rankings to AIDS, orthopedic, geriatric and otolaryngology treatment at the University of Miami/Jackson Memorial Hospital.

Miami Children's Hospital also gained prominence, ranking as No. 14 among the nation's top 19 pediatric hospitals, according to the U.S. News and World Report survey.

UM's Bascom Palmer Eye Institute ranked No. 1 among the nation's top 15 ophthalmology centers, according to the annual ranking, to be published in the magazine's July 18 issue.

The four other UM treatment specialties ranked among the best programs for each of those areas. Care of AIDS patients came in No. 8 out of the top 40 AIDS programs.

"We're obviously very excited over here," said UM medical school spokesman Chris Dudley. "This is good news for us."

Other than the two Dade hospitals, only one other Florida center was considered among the nation's best -- Shands Hospital at the University of Florida.

U.S. News and World Report calls its survey the "only objective assessment of U.S. hospitals currently available." In most cases, the rankings are based on combined findings of a national survey of specialists, hospital death rates and other data on each hospital.

To assess a few specialty areas, including pediatrics and ophthalmology, the findings are based solely on a physician survey of the programs with the best reputations. The magazine offers the survey as a consumer guide for picking the best care, although some experts say a survey alone is insufficient.

"You shouldn't take them too seriously," said Dudley. "It does show some measure of, not quality, but reputation of programs around the country. And it's nice to show up on these things. But a patient who's

looking for a program should look beyond the ratings."

Miami Children's Hospital did not appear among last year's best. In the four other categories that University of Miami/Jackson Memorial Hospital ranked, none was in the top spot. This year's survey did repeat one thing, though: an omission.

For the second year, it refers to the University of Miami without mention of Jackson, the hospital where UM doctors and Jackson staff provide much of the care cited. "The University and Jackson should be equally credited as the partners they are," Dudley said.