





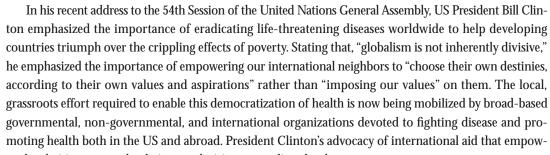




## A Note From the **Executive Director**

Improving Global Health, One Community at a Time

our years ago, First Lady Hillary Rodham Clinton made headlines with her message that "it takes a village" to raise a child. Her simple-sounding idea encompassed complex questions that went beyond the realm of the nuclear family to examine the roles that individuals, communities, and even states and countries play in the upbringing of a single child. In doing so, she reminded us of our collective responsibility as citizens of the global community to ensure the health and prosperity of future generations everywhere. Today, health organizations around the world—including AIHA's partnerships—are emphasizing collective responsibility for healthcare concerns by mobilizing action on a local scale—improving global health one community at a time.



ers local citizens to make their own decisions regarding development initiatives has been a tenet of the AIHA partnership model since the program began in 1992, and is further magnified in AIHA's current emphasis on community-based healthcare.

The need for community-based healthcare underlies current national and international initiatives to address broad health concerns that require localized community action. The US Department of Health and Human Services (HHS) and the World Health Organization (WHO) are two organizations that bring national and global attention to the world's leading causes of death. Healthy People 2010, an HHS initiative that is a statement of national healthcare priorities to be met by the year 2010, pro-

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vides the framework for private companies, community organizations, and federal and state governments to establish their own "Healthy People" action plans. The objectives of Healthy People 2010 are currently being formulated through a broad consultation process led by an alliance of 350 national membership organizations and 300 state health, mental health, substance abuse, and environmental agencies. Public hearings and consortium meetings all over the country are soliciting the input of communities nationwide about how to accomplish the goals of the initiative.

In an address at the National Healthy People Consortium Meeting and Public Hearing held for the













upcoming Healthy People 2010 Initiative, Assistant Secretary for Health and Surgeon General Dr. David Satcher stressed the importance of involving local community agencies in supporting the overarching goals benchmarked by HHS for 2010: to increase quality and length of life and eliminate health disparities among specific population groups. The obstacles to these goals, such as the inadequate treatment of diabetics and persistently high rates of tobacco use, are issues that cannot be solved by individuals alone. They require local action by community organizations that know how to speak to their specific populations. Dr. Satcher also emphasized the extent to which US domestic health policy needs to take global health initiatives into account: "We cannot protect the health of the American people unless we think globally." He reminded health leaders that Healthy People 2010 is the US's contribution to WHO's call to all nations to renew their commitment to "Health for All" in the 21st century.

Rising rates of tobacco use are a good example of a global health issue that extends beyond the ability of individuals to solve on their own. As part of their overarching "Health for All" goal, WHO's Tobacco Free Initiative, established in 1998 by WHO Director-General Dr. Gro Harlem Brundtland, addresses the global nature of this major public health threat and the community mobilization needed to educate individuals about the effects of tobacco use in a world where there are currently 4 million deaths a year attributable to the habit—a number expected to rise to 10 million in the next 10 to 20 years. WHO's approach involves building strong partnerships with each WHO Regional Country Office and a variety of national and local institutions. WHO will measure its success at both local and global levels, an indication of WHO's recognition of the importance of community action in effecting global change.

This trend toward using local, grassroots community organizations to address health concerns global in scale is reflected in AIHA's more than 20 new Community-Based Primary Healthcare Partnerships. Many of the US partners in these new partnerships are community-based coalitions organized to promote healthy lifestyles at a local level. They include local women's centers and shelters, rural projects, public libraries, early start programs, healthy communities initiatives, family councils, reproductive clinics, and community health centers. These US community organizations will work to support their NIS and CEE partners as they develop and implement successful local action plans in order to enhance the health of their communities. Many of them are operating with the support of local government officials—including city and oblast health administrations—easing the work of partners in implementing effective program measures. A number of NIS and CEE governors and mayors are involved in AIHA activities, have already made trips to the US in connection with their cities' partnerships, and are planning to attend the AIHA annual conference in November. The conference theme, "Partnering for Healthier Communities," will bring together over 500 US, NIS, and CEE partnership representatives to share their community-based approaches to solving healthcare concerns.

When Dr. Satcher closed his address to the National Healthy People Consortium, he recalled a time in Morocco that he questioned a group of teenagers about high-risk behaviors in their age group. They responded with the question, "Dr. Satcher, if it takes a village to raise a child, where in the 1990s is our community?" Dr. Satcher concluded, "This is our chance to say to those children and to our own at home who, by the way, are raising the same question, 'Here we are.'"

James P. Smith