A New Spirit of Giving in CEE

A photograph of a young boy lifting up his shirt to reveal a bandaged stomach frames the plea: "Please Stop the Pain ... For Croatia's Children." This is the image on the cover of a brochure that the Franciscan Sisters of the Poor Foundation distributes in the US to raise money for its Croatian Children's Fund—money that will provide supplies and medicine, artificial limbs and plastic surgery through the Zadar-Franciscan partnership.

Fundraising and volunteerism in the hospital setting are new concepts for many CEE partners, and the Franciscan foundation is in the vanguard in promoting this approach as a way to boost resources. During a breakout session, Michael Hoffman, the foundation's senior vice president for external affairs, outlined a successful model for fundraising in Eastern Europe, based on a project the Franciscans carried out at the Litewska Children's Hospital in Warsaw, Poland. The model, now being applied to the Zadar effort, stresses a clear structure for identifying donors, persistence in asking for help, leading by example and partnership.

Often the Eastern European reaction to the concept of philanthropy is: "Why are these people going to give us money when they get nothing in return?" Hoffman said. But when by-laws and accounting standards modeled on those used in the United States are applied to a foundation and prominent in-country board members who have precise goals are selected, this perception can be overcome, he noted.

With the initial backing of a Pepsi Co. executive in Poland, the project in Litewska raised $1 million in its first seven months, and funds were used to renovate the hospital's intensive care unit, dialysis department and diagnostic laboratory department. In three months, the Croatian Children's Fund has already raised $60,000.

Mary Jo Keshock, RN, a trustee with Cleveland-Bratislava Sister Cities, Inc., presented ideas on how to recruit volunteers to aid CEE health promotion efforts. Her eight-step process to volunteering includes hints like: "be excited," "explain your goals," "ask directly for help," and "recognize efforts." She followed this plan when she decided to ask the 89,000-strong Slovak community in Cleveland to translate health education brochures for distribution in Turianske Teplice, Slovakia and to Slovak patients in the United States. When she told the amateur translators who participated that they could dedicate their work to the memory of a relative, some were so touched, "they had tears in their eyes."

"They were very, very happy to do this. It was something they could give back, and it didn't cost them a penny," Keshock said.

A few philanthropic efforts are beginning to emerge from within the CEE health community as well. Jana trov, PhD, president of the Aid to Children at Risk Foundation in Petralka, Slovakia, described her group's successful efforts to recruit community members to counsel teenagers about the dangers of drug use. Petralka, a densely populated area of Bratislava, has been hit hard by the economic transition to democracy, and many of its young people are "apathetic" and "depressed," she said. A cross-section of the city's residents--teachers, students, housewives and members of the local government--have volunteered to help.

"This philanthropic approach does not have a long tradition in Slovakia," she said, "but these people surely must have love for their fellow man in them."

Katalin Babosik, a project specialist with USAID in Budapest, said that although "the corporate culture for donation is not there" in Hungary, and tax regulations need to be changed to favor giving, the spirit of donation could be tapped through education about what a charity does. "This is the way Hungarians can best learn democracy. This is you and your neighbors doing something, not the government telling you what to do."