A Note from the Executive Director

Nearly every nation in the NIS and CEE has more women than men. And women born today are expected to live an average of 11 years longer than men in the NIS and eight years in CEE. Yet health services that address women's needs throughout their lifetimes - from reproductive health to cancer screening to nutrition - are lacking or woefully inadequate in many areas.

To help fill the need for more programs focused on women's health, this winter AIHA partnerships plan to open the first of 14 comprehensive women's health centers in the NIS. At the centers, obstetrician/gynecologists, family practitioners, midwives, nurses, psychologists and health educators will work together to provide services to patients and create community outreach activities.

In support of this major new program initiative, the theme of this October's Fourth Annual AIHA Partnership Conference for the New Independent States in Des Moines, Iowa reflects the partnerships' commitment to improving women's health care. In this issue of CommonHealth, articles explore the status of women's health in the NIS and CEE; partnership efforts already under way in adolescent sex education, neonatology, breast cancer and women's ambulatory clinics; the opening of the Mother and Child Health Information Center in Tirana, Albania; and a special visit by US First Lady Hillary Rodham Clinton to the Women's Clinic at Tallinn Central Hospital in Estonia this summer.

One indication of the shift to more democratic forms of government and the popular election of presidents is the increased public role of the first ladies. Following the example of active US first ladies like Mrs. Clinton, the first ladies in the newly emergent democracies of CEE and NIS are taking responsibility for focusing attention on health and families. In this issue, the first ladies of Kazakstan and Latvia discuss their views on women's health.

As the partners move forward - not just in women's health, but in an array of other program areas - the tools of technology are playing an increasingly important role in the dissemination of information and in training and education. E-mail and the World Wide Web put even the most remote regions of the NIS and CEE in touch with each other and the rest of the world almost instantly. Teleconferencing lets health professionals learn from one another though they are oceans apart. These doors opened by new technology will be examined at the Des Moines conference as well.

The enhanced power to communicate widens access to the world beyond polyclinics and partnerships. It puts in partners' hands the means to learn from the global community about women's health, about infection control, about emergency medicine; in short, about advancing health care for all of us.

James P. Smith