Africare: Mission and Description

Africare works to improve the quality of life in Africa, assisting families, communities and nations in two principal areas — food security and agriculture, and health and HIV/AIDS — as well as water resource development, environmental management, literacy and vocational training, microenterprise development, civil-society development, governance and emergency humanitarian aid. In the United States, Africare builds understanding of African development through public education and outreach.

A private, nonprofit organization, Africare was founded in 1970. Since that time, communities in 36 nations Africa-wide have benefited from direct Africare assistance. During the fiscal year 2005, Africare supported more than 150 programs in 26 African countries.

Africare is a charitable institution under Section 501(c)(3) of the Internal Revenue Code. Africare’s financial support comes from charitable foundations, multinational corporations and small businesses, the religious community, other private organizations, the U.S. government, foreign governments, international agencies and thousands of individuals. Africare is a member of Global Impact: a part of the Combined Federal Campaign and many corporate as well as state and local government workplace drives. Africare has its headquarters in Washington, D.C., with field offices currently in 23 African countries.

Africare
Africare House
440 R Street, N.W.
Washington, D.C. 20001-1935

For more information — Call (202) 462-3614 or visit www.africare.org

Celebrating Africare’s 35th Anniversary 1970 – 2005
Chairman and President’s Message

This year’s annual report is very special because it celebrates Africare’s 35th anniversary. From its humble origins in the Republic of Niger back in 1970, Africare has come a long way. The first year’s budget was about $30,000; during the fiscal year 2005 (July 1, 2004 through June 30, 2005), Africare’s budget was about $50 million. From 1970 through fiscal 2005, Africare provided a total of more than $590 million in assistance to Africa. Africare’s first work focused on the health of the people of Niger; soon thereafter, Africare diversified and became a broad-gauged development organization with programs in areas ranging from agriculture, water, the environment, health and HIV/AIDS — to literacy, microenterprise, governance, civil-society development and, on a continuing basis, emergency humanitarian aid.

As we reflect on this 35-year period, one especially significant Africare contribution emerges: the extent to which we have helped Africans to develop their ability to work at the community level and to improve their overall quality of life. That contribution has involved strengthening local institutions, training local people and imparting technology so that the people and communities of Africa can take charge of their own development. There is probably no greater testimony than that of the African people themselves — from President Nelson Mandela (“I regard Africare as one of America’s greatest gifts to Africa”) to a teenage girl in the village of Dollossa, Ethiopia, where Africare helped to build a new well (“I would like to express my appreciation. I think Africare’s supporters are like us — human — because they care so much about others”).

During 2005, we have seen a tremendous expansion of Africare programs and activities. We would like to emphasize what we call Africare’s “signature program” for helping orphans and vulnerable children: the COPE (Community-Based Orphan Care, Protection and Empowerment) project, which is now operating in the four East and Southern African countries of Mozambique, Rwanda, Tanzania and Uganda. This program reaches out to people who have not been dealt with in the past and makes a significant contribution to improving their overall quality of life — children’s ability to stay in school, to receive psychological support and to earn an income.

In addition, we are proud of the work Africare has done to help the refugees coming out of Darfur, Sudan. Africare has played a significant role providing assistance to refugees from that tragic situation, now based in camps just across the border in Chad. Africare has been one of the most significant managers of the camps in Chad and has played an instrumental role in ensuring that the refugees are given food, clothing and other help to promote their overall quality of life. Africare has been complimented by numerous international
officials on the quality of our camps and our management. It continues to be our privilege to mitigate the 
tragedy confronted by these refugees.

Another major Africare development during 2005 was the opening of our first office in the Democratic 
Republic of the Congo: an important country in an essential African region, which has faced civil war and 
turmoil over the past 10 to 15 years. We are helping orphans and vulnerable children (“street children” in 
urban Kinshasa). In so doing, we are working for the first time in partnership with a European NGO 
— Medecins du Monde — with funding from the Government of France and the City of Paris. That same 
partnership, with the same funders, is also underway in Benin.

As you read the following pages, you will learn much more about Africare’s work across all sectors during 
2005 — and across all the years of our history in the 35th anniversary section.

Finally, in December 2005, Africare’s chairman of many years, George A. Dalley, Esq., stepped down from 
that position. W. Frank Fountain, already a member of the Africare Board, was elected as the new chairman. 
On behalf of the Africare Board and the extended family of staff, supporters and colleagues in Africa, we 
thank George Dalley for the significant contribution he made to Africare’s 2002 presidential transition as 
well as his tremendous — and tremendously successful — efforts to strengthen Africare’s financial situation. 
Many long hours and much heartfelt dedication marked George’s chairmanship. For all that, we thank him. 
We, Frank Fountain and Julius Coles, look forward to developing an even closer relationship with the private 
sector and to expand our donor base here in the United States, in Europe and elsewhere around the world.

Much has been accomplished, as the following report shows. Much, however, remains to be done before the 
people of Africa realize their economic potential and transcend today’s immense challenges — overcoming 
HIV/AIDS, rising above poverty and taking their rightful place on the world economic stage. Thank you for 
your support. We hope you will continue as a part of the Africare cause.

W. Frank Fountain  Julius E. Coles  
Chairman of the Board  President
“The task undertaken by Africare is immense — as immense as the continent of Africa itself, which must confront problems unimaginable to people who have not lived in African settings.”

—-HAMANI DIORI
PRESIDENT OF NIGER
CO-FOUNDER AND CHAIRMAN OF AFRICARE
1972
**Drought Ravages the Sahel, Africare Responds**

“Sahel,” in Arabic, means “border.” Africa’s Sahel region stretches from west to east along the southern edge of the Sahara Desert. From 1968 to 1974, Sahelian West Africa suffered severe drought. Almost no rain fell. The region’s 25 million people were affected. Thousands of them died. A quarter of their livestock also died. Some 10 million people lived in camps, dependent on food aid. For its first five years, in Chad, Mali, Mauritania, Niger, Senegal and Upper Volta, Africare provided drought relief: food, health care, wells and more. By late 1973, after tireless efforts to publicize Africare, financial support began to flow — from major grantors (the Lilly Endowment, the U.S. Agency for International Development) and the public, including celebrities Roberta Flack, Don King and Muhammad Ali.

“...apparent stoicism of so many of those we have met regarding the drought, the losses of cattle, and the ravaging of the land. Many have lost most, if not all, of their worldly goods; and, in a sense to them, a portion of their ‘family’ in the loss of their cattle. Obviously, the grief and the pain are great — and great character must be present to prevent complete deterioration. Africare is greatly needed!”

— GROVER E. MURRAY, PH.D.
PRESIDENT, TEXAS TECH UNIVERSITY
OBSERVATION FROM AFRICARE RELIEF MISSION TO NIGER • 1974

---

**1960s**

Wave of African independence. By 1970, only about a dozen countries remain colonized.

**1963**

The Organization of African Unity (now, the African Union) is formed.

**1968**

The “great Sahelian drought” in West Africa begins.

**1973**

U.N. alert: Five to 10 million West Africans may die of starvation.
“Africare is committed to the long haul, the long range projects that are critical to African countries’ ability to develop self-sustaining agricultural economies.”

— CARL T. ROWAN JOURNALIST 1976

National Africare Launch in Atlanta, Georgia

“The slaves did not disappear and become obliterated, but they multiplied. So I welcome you to your home away from home.” Thus did Vice Mayor Maynard Jackson welcome 20 African ambassadors — and Africare leaders — to Atlanta on June 3, 1972, for the national “public launch” of Africare. “We have come here to participate in the translation of a dream into reality,” rejoined Lesotho’s ambassador. Mayor Sam Massell, Coretta Scott King, Andrew Young, Shirley Clarke Franklin and others welcomed Africare during the weekend’s events. “I was very pleased to learn of the fine cooperation you received while in Atlanta for the official Africare kick off,” wrote Governor Jimmy Carter. The Africare dream was becoming real.
“It is refreshing and encouraging to have observed Africare over the past seven years — patiently taking care to determine what Africans felt needed doing and what they were prepared to do themselves with a minimum of assistance. Africare has encouraged that all-important process of consensus. Africare has faith in us, and we cannot help but have faith ourselves in such an organization.”

— ANDRE COULBARY

AMBASSADOR OF SENEGAL TO THE U.S. ▶ 1978

Tara, Seguenega: Integrated Rural Development

Africare and host country partners in Niger and Upper Volta pioneered an “integrated rural development” (IRD) program model, combining multiple activities and applying them to a single setting. The first such project began in 1975 in Tara village, Niger. The goal was to strengthen all types of food production, from rice and vegetables to fish and poultry; but irrigation, rural roads, health, literacy, credit and marketing also had to be addressed to reach that goal. The second IRD project, begun in 1978, covered the sector of Seguenega, Upper Volta (now, Burkina Faso), with 100 villages and 100,000 people. Both projects ended in the 1980s. Highly successful, they proved that poverty is complex and therefore requires multifaceted assistance to be overcome — substantially and over the long term.

MID-1970S

Neighboring (“front-line”) states support anti-apartheid struggle in South Africa.

MID-1970S

South Africa retaliates with regional destabilization: killings, other destruction.

1977


1977

First Africare National Conference

Nearly 2,000 supporters turned out for Africare’s first national conference — Citizen Participation in African Development — held in February 1976 in Washington, D.C. Journalist Carl T. Rowan, a speaker, cited the high level of attendance as proof that “blacks in this country do give a damn about what happens in Africa.” Other speakers included African diplomats, U.S. Senator Edward Brooke and U.S. Congressmen Charles Diggs, Louis Stokes and Andrew Young. Stokes called for a “Marshall Plan for Africa.” Diggs noted that African development also benefits America. Young observed that “it’s whether you’re a lover or a hater, not whether you’re black or white,” that inspires helping Africa.

“Africare is becoming a model for other organizations working overseas.”

— JAMES P. GRANT
PRESIDENT, OVERSEAS DEVELOPMENT COUNCIL • 1976

ASSISTANCE GROWS
• Total value of assistance/support, 1976–1980: $10,743,643
• Compared to 1970–1975: +832%

NOTE: Information above and on facing page is for Africare’s fiscal (not calendar) years 1976–1980.

APRIL 1979
Ugandan dictator Idi Amin is overthrown, ending eight-year reign of terror.

SEPT. 1979
As refugees pour into the country, Somalia declares state of emergency.

APRIL 1980
Zimbabwe, formerly “Rhodesia,” gains independence and majority rule.

APRIL 1980
Lagos Plan of Action for African self-development is ratified by Organization of African Unity.

SEPT. 1980
Coup sparks civil war in Liberia; fighting, devastation to continue for 23 years.

COUNTRIES HELPED
Africare reaches 14 of Africa’s 50-plus countries:
- West Africa: Chad, the Gambia, Guinea, Mali, Mauritania, Niger, Nigeria, Senegal, Upper Volta (renamed “Burkina Faso” in 1984)
- East Africa: Ethiopia, Somalia, Sudan, Uganda
- Southern Africa: Zambia

AT WORK IN AFRICA 1976–1980

Africare 35th Anniversary
1981–1985 Africare

The year 1985 marked Africare’s 15th anniversary. By that time, Africare was working in the five major regions of Africa; it had assisted 23 of the 36 countries it would reach by 2005; and all that work — the first 15 years of program assistance — had been accomplished at a cost of just $39 million.

“We need Africare to spread all over Africa,” urged the Zambian official, Dr. Siteke G. Mwale, in 1981. By 1985, a young, energetic Africare was well on its way.

Development work continued to proliferate — from food, water and environmental projects, to rural health assistance and “women in development” initiatives. Emergency aid was ongoing in Somalia, home to a million refugees from Ethiopia’s Ogaden region. Refugee relief began in Rwanda and Chad. In 1981, Africare was among the first private U.S. organizations invited by the newly independent Zimbabwe (formerly, “Rhodesia”) to provide aid.

Stateside participation also kept growing. For example, volunteer Africare Chapters were active in numerous cities. Overall private giving both increased and diversified. African-American individuals and organizations continued to heed Africa’s call. Africare was admitted to the International Service Agencies (now, “Global Impact”) workplace-giving federation. Africare Day became a well-known Africa event in Washington. Students competed for the first prize, a trip to Africa, in Africare’s D.C. Public High School Africa Essay Contest. The African Development Education Program, a multiyear, nationwide initiative, was launched in 1984. That same year, Africare co-sponsored the Minority Involvement in Development Conference, held in Washington, D.C. Stated the conference coordinator, educator Marie Davis Gadsden, Ph.D., “The time for minority involvement is now.”

**Public/Private Partnerships for African Health**

In 1981, Africare partnered with the U.S.-based Pharmaceutical Manufacturers Association (PMA, now PhRMA) and the Gambian government to analyze that country’s pharmaceutical distribution system — the problem being that rural clinics frequently lacked essential drugs. The study led to a 15-month initiative to revamp the system; PMA and 13 member companies donated funds. “The system developed in this country should ... ensure access by every member of the community to essential drugs,” stated the Gambian delegate to the 1984 World Health Assembly. In 1983, Africare helped the Sierra Leonean Ministry of Health to pilot a similar program. In 1989, Africare introduced the program in Ghana. Working together, Africare, African governments and American companies achieved results that none could have achieved alone.

“Public/Private Partnerships for African Health
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“This is an organization that accomplishes great things — from setting up health care services, to teaching farmers about agribusiness, providing critically needed water supplies, emergency aid and protecting the environment. ... We applaud Africare for the leadership role it has played in improving the quality of life for the people of Africa.”

— JAN LESCHLY
CHIEF EXECUTIVE,
SMITHKLINE BEECHAM ™ 1996

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<td>45,000 Ugandans flee to Rwanda; local resources strained, refugee crisis results.</td>
<td>After 20 years, peace returns to Chad; refugees start coming home.</td>
<td>Africa’s first cases of HIV/AIDS are identified.</td>
<td>The West African nation, Upper Volta, is renamed “Burkina Faso.”</td>
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Africare 35th Anniversary
“Africare is Americans — black and white — working with African planners to offset the effects of present and future drought.”

— ROBERTA FLACK
ENTERTAINER  •  1979

Africare Chapters Raise Funds and Awareness

Throughout the ’70s and ’80s, Africare Chapters — organized groups of volunteers who raised funds and worked to educate their communities about Africa — played a vital role in extending Africare’s reach in the United States. The first Africare Chapter, established in the early 1970s, was in Washington, D.C. (it sponsored the benefit event, Africare Day). Chapters followed in more than 20 cities — including Atlanta, Boston and New York in the East; Chicago, Flint, Indianapolis and Kansas City in the Midwest; and Oakland and Seattle in the West. Each group was unique; together, they formed a large, diverse and caring constituency for Africa and Africare as an organization.

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1981 – 1985
Regional destabilization continues in Southern Africa, backed by forces of apartheid.

1984

1984
Three-year Africa-wide drought begins. Hardest-hit country is Ethiopia.

1985
Drought rages in 20 to 30 African nations; 300 million people affected.

JULY 1985
Live Aid concert for African drought relief; the predecessor, Band Aid, was in 1984.

NOTE: Information above and on facing page is for Africare’s fiscal (not calendar) years 1981–1985.

COUNTRIES HELPED
Africare reaches 22 of Africa’s 50-plus countries:

- West Africa: Burkina Faso, Chad, the Gambia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone
- East Africa: Ethiopia, Kenya, Somalia, Sudan, Uganda
- Central Africa: Central African Republic, Rwanda
- Southern Africa: Lesotho, Malawi, Mozambique, Zambia, Zimbabwe
- North Africa: Egypt

ASSISTANCE GROWS
- Total value of assistance/support, 1981–1985: $27,552,004
- Compared to 1976–1980: +156%

Africare 35th Anniversary 9
1986–1990 Africare

“Scenes Like These in Ethiopia”: Drought Spreads

Between 1984 and 1986, severe drought ravaged the African continent. Twenty to 30 countries — 300 million people — were affected. Ethiopia’s plight was the best known; but people, livestock and crops also were dying elsewhere in Africa. Africare’s extensive drought relief reached severely affected countries such as Burkina Faso, Chad, Ethiopia, Mali, Mozambique and Niger. Ongoing water and agricultural work in many countries helped as well. Stateside support to Africare was as diverse as it was generous: religious groups, schools, foundations, businesses, communities and individuals all got involved. “I have seen many crisis situations,” recounted Africare’s director of international development, Joseph C. Kennedy, Ph.D., “but the scenes like these in Ethiopia are the most pitiful in my experience.”

“No group has addressed Africa’s agricultural problems better than Africare. In Africa, Africans and Americans working through Africare have joined together as partners, in mutual respect, to understand and nurture and use the land.”

— VICE PRESIDENT GEORGE H.W. BUSH  ime 1984

During the late 1980s, Africare’s assistance more than doubled over the previous five years, as the organization maintained faith in Africa’s future and expanded in numerous new directions to help the continent cross the threshold to which Walker referred.

From the Central African Republic to Malawi and from Mali to Guinea-Bissau, rural enterprise development programs rapidly spread. Child spacing became a part of Africare’s larger health programs. Natural resource management, ongoing since the 1970s, continued. Basic water and agricultural assistance sped recovery from the recent drought. Two program models, Child Survival and Food for Development, were launched; both have remained at the center of Africare’s work to the present day. Africare’s first AIDS programs began in 1987, in Nigeria and Rwanda. And during those waning years of apartheid, Africare strengthened assistance to the Southern African “frontline states” — in particular, Angola, Mozambique, Zambia and Zimbabwe — where continuous attacks by South Africa-backed insurgents destroyed roads, buildings, farms, development projects and, most tragic, hundreds of thousands of human lives.

1986

Africa-wide drought subsides. Affected communities begin to rebuild.

1986


1987

South Africa undermines freedom fighters in Angola, worsening the ongoing civil war.

1988

In Sub-Saharan Africa, women now account for half of all people living with HIV.
Africare House: “Washington’s House for Africa”

On Oct. 8, 1987, some 500 supporters celebrated the opening of Africare House: Africare’s wholly-owned international headquarters building and a public facility for Africa. Dr. Kenneth D. Kaunda, then president of Zambia and chairman of the OAU, cut the ribbon. Funds for the building had come from thousands of supporters worldwide. In 1983, the dean of the African Diplomatic Corps supplied this endorsement: “We applaud the idea of a center embracing Africa as a whole in the capital city of the United States, and we as a group urge American[s] to lend Africare House their strongest support.” Africare House has been widely used ever since: visits by African heads of state, for example, and monthly meetings of the African Diplomatic Corps.

“Those of us who have had the privilege to live and work in Africa have, if we are wise, learned that anything worth striving for — whether it is freedom or a self-help clinic — comes only to those who can stay the long, hot course.”

— BISHOP JOHN T. WALKER
CHAIRMAN, AFRICARE 1986
1991–1995 Africare

Most of Africare’s effort during this period went toward food, water, environmental and health programs, especially in Africa’s rural areas. Child Survival programs expanded to five countries. Onchocerciasis (“river blindness”) control reached more than 800,000 people in Chad and Nigeria. HIV/AIDS assistance went to six countries. Food for Development programs improved food security in Burkina Faso and Guinea. In Egypt, Africare began a multiyear project to train young farmers and “make the desert bloom.”

Crisis, too, abounded. Among them were the Rwandan genocide of 1994, related violence in Burundi, warfare in Somalia (and its government’s eventual collapse) and civil wars in Angola, Liberia and Sierra Leone. In all those situations, Africare provided rapid humanitarian aid.

Stateside, Africare’s nationwide African Development Education Program continued. The Constituency for Africa, eventually an independent organization, was formed within Africare in 1991. The African Diplomatic Outreach Program began. And Africare launched its $20 million endowment campaign.

Both profound crisis and stunning achievement characterized the Africa of the early ’90s. Africare kept faith, as did its supporters and friends. “I profoundly believe in Africa,” declared President Nicephore Soglo of Benin, in remarks at the Africare Bishop Walker Dinner in 1994. “My firm belief is that this continent is in motion. The tragic setbacks due to the unfortunate internal conflicts in Somalia, Liberia and Rwanda certainly show that numerous obstacles remain to be overcome and that the battle of development has not been won. Those setbacks, however, will not alter the hope of numerous Africans who believe, and rightly so, that the future is for them.”

South African Interns Prepare for the Day

“I regard Africare as one of America’s greatest gifts to Africa.”
— President Nelson R. Mandela  1998

“While the world waits to see whether South Africa can bring itself to bury apartheid and free its oppressed black majority,” wrote columnist William Raspberry in 1990, “one Washington-based organization is betting that it will — and helping to prepare for the day.” The organization was Africare, and the initiative was the South Africa Career Development Internship (CDI) Program. Launched in 1989 with cornerstone support from IBM Corp., CDI provided professional immersion internships in the U.S. to black South African (and later, Namibian) pre-professionals graduating from American universities. Ultimately, the 400-plus CDI alums got good jobs back home and became mentors to other young, black Southern Africans.

1991
Civil war breaks out in Sierra Leone; the fighting will continue for 11 years.

1991 – 1993
Thousands die, millions displaced in Somali civil war; national government collapses in fall 1991.

1991 – 1993
Southern Africa suffers worst drought in region’s living memory.

APRIL 1993
Eritrea becomes an independent country; formerly, it was part of Ethiopia.
South Africa: “Dawn of a New Era”

With Nelson Mandela’s 1990 release from prison, the repeal of the last apartheid laws and the unbanning of political parties in South Africa and, finally, the country’s first free elections in April 1994, “South Africa,” Mandela told supporters at Africare House, “stands at the dawn of a new era.” In 1989, Africare began assisting black South Africans in the U.S. with its CDI Program (see previous page). In 1992, Africare became one of the first U.S.-based assistance organizations on the ground in South Africa. From 1994 to 1995, Africare trained more than 200 future leaders of South Africa (candidates or newly elected officials from any party) in the practical aspects of democratic governance. Africare soon began development assistance to rural South African communities; such assistance continues to the present day.

“...Africare’s members have fulfilled their humanitarian ideals by providing practical help to areas in need of emergency assistance or long-term development aid. Africare has a vital role to play in the progress of the entire African continent, and I stand with you in your important work to bring relief, opportunity, and hope to those who so desperately need it.”

—— PRESIDENT WILLIAM J. CLINTON   1995

1995

Africare’s fiscal (not calendar) years 1991–1995

COUNTRIES HELPED

Africare reaches 29 of Africa’s 50-plus countries:
- West Africa: Benin, Burkina Faso, Chad, Cote d’Ivoire, the Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone
- East Africa: Eritrea, Ethiopia, Somalia, Tanzania
- Central Africa: Burundi, Central African Republic, Rwanda
- Southern Africa: Angola, Malawi, Mozambique, Namibia, South Africa, Zambia, Zimbabwe
- North Africa: Egypt

ASSISTANCE GROWS

- Compared to 1986–1990: +63%

NOTE: Information above and on facing page is for Africare’s fiscal (not calendar) years 1991–1995.
1996–2000 Africare

The crises of the early 1990s continued: civil wars in Angola, Liberia and Sierra Leone; recurrent conflict in Burundi; and refugee migrations within Southern Africa and from Sudan to neighboring countries. In 1998, a border war erupted between Eritrea and Ethiopia. Heavy flooding in early 2000 caused damage and loss of life in Southern Africa, especially in Mozambique. Drought continued to plague Sahelian West and East Africa. And in every case, Africare continued to help.

In contrast, Rwanda made steady progress — rebuilding, reducing ethnic hostilities and, by the year 2000, holding multiparty elections. Other nations progressed toward democratic forms of governance, open civil societies and free-market economies. Africare’s traditional development projects facilitated that progress. In addition, Africare greatly expanded its work in civil-society development and governance.

Africare’s Food for Development, or “food security,” programs had reached 13 countries by 2000. And as HIV/AIDS dramatically spread in Africa, Africare’s HIV/AIDS programming also spread — by the end of 2000, to more than 20 nations.

In the 1998 annual report, Africare’s chairman and president shared this look to the future: “We are mindful that Africare is entering, not just another year, but the cusp of a new millennium. So we began asking ourselves: ‘What can we do differently? How can we better help Africa?’ ... We must achieve more with less,” they noted. “Donor resources are shrinking across the board.” They went on to affirm these programmatic focal points: (1) HIV/AIDS; (2) food security, population and the environment; (3) conflict resolution and “good governance”; and (4) computer and Internet technology transfer. Those focus areas have been maintained to the present day.

“From the beginning, Africare was always there to work with the people and not to superimpose a plan for them. That kind of involvement both serves and empowers. And though it’s slow going, I think Africare has made a tremendous contribution in helping people take hold of, and work with, whatever resources they have.”

— DR. DOROTHY I. HEIGHT
National President
National Council of Negro Women 1996

“Africa is undergoing a renaissance,” stated First Lady Hillary Rodham Clinton at the Africare Bishop Walker Dinner in 1997. “Democracy is flowering across much of the continent. ... A new generation of reform-minded leaders is in charge in many capitals. There is new respect for human rights ....” As African nations transitioned to various forms of democracy, Africare provided support. In Mali, Rwanda and South Africa, for example, Africare carried out governance training at both local and national levels. Support continued to civil-society development, or “democracy with a small ‘d’ ”: work that had been at the heart of Africare’s effort since its founding. In Benin, Burundi, Guinea and Niger, Africare programs strengthened indigenous non-governmental organizations (NGOs): co-ops, trade associations, community self-help groups and other grassroots entities. Thus was fostered an enabling environment for all other progress.

1996
Truth and Reconciliation Commission, chaired by Archbishop Desmond Tutu, begins hearings in South Africa.

APRIL 1996
OAU holds annual summit in North Africa (Egypt), signaling continent-wide inclusiveness.

1997
Angola now has world’s highest percentage of landmine amputees.

MARCH 1998
First substantial Africa visit by a sitting U.S. president: President Clinton visits six countries in 12 days.
The Africare Bishop Walker Dinner


“... we ... celebrate the achievements of Africare as an organization that epitomizes the best and most inspiring of civil society action: a movement that started from scratch, fuelled by the conviction that it is possible to change things for the better.”

— KOFI A. ANNAN
SECRETARY-GENERAL
OF THE UNITED NATIONS
1998

JULY 1999

1999
AIDS is now the leading cause of death in Africa.

1999 – 2000

FEB. – MARCH 2000
Severe floods leave hundreds dead, a million homeless in Southern Africa.

MAY 2000

COUNTRIES HELPED
Africare reaches 28 of Africa’s 50-plus countries:
- West Africa: Benin, Burkina Faso, Chad, Cote d’Ivoire, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone
- East Africa: Eritrea, Ethiopia, Tanzania, Uganda
- Central Africa: Burundi, Central African Republic, Rwanda
- Southern Africa: Angola, Malawi, Mozambique, Namibia, South Africa, Zambia, Zimbabwe
- North Africa: Egypt

ASSISTANCE GROWS
- Total value of assistance/support, 1996–2000: $122,117,305
- Compared to 1991–1995: +55%

NOTE: Information above and on facing page is for Africare’s fiscal (not calendar) years 1996–2000.
By 2005, longstanding wars in Angola, Liberia and Sierra Leone had ended and reconstruction was underway. Food crises arose in various regions of Africa. The need remained great for food, water and environmental assistance. Traditional indices of health had improved — Africa’s infant and child mortality rates had decreased by 30 percent since 1960; since 1990, 5 percent more Africans had access to safe water — yet HIV/AIDS had engulfed the continent in what is probably the worst pandemic in history.

Africare responded. HIV/AIDS assistance took center stage, but Africare’s work addressed the range of basic human needs continent-wide.

In June 2002, Africare’s president* of 31 years, C. Payne Lucas, retired and Julius E. Coles became the third president of the organization.

“There are no ‘Africare programs,’ only African programs.” That core approach — articulated at Africare’s outset — has remained unchanged over these 35 years. Listen to the people. Salome Monareng, leader of a women’s agricultural group in South Africa: “Africare helped us to discover ourselves, the potential that lies within us. And this was real education. We are creating our own jobs rather than waiting for someone to create jobs for us” (2001). Alphonse Bizima, president of a small AIDS support group in Rwanda: “Africare’s project is helping us to find solutions to our own problems” (2002). Ruth Mufute, who grew up in a poor village of Zimbabwe and eventually became the Africare representative in Zimbabwe and Zambia: “I, an average Zimbabwean woman, have been given a chance to help others — other children now living the life I used to live, in areas where I used to live, with dreams like the ones I used to have. Africare gave me that chance” (2004).

*Title changed from executive director to president in 1992.

By the mid-1990s, Africa bore most of the world’s AIDS burden. In 2005, Sub-Saharan Africa had 71 percent of the world’s AIDS deaths, 64 percent of all people living with HIV or AIDS and 80 percent of all AIDS orphans. Africa’s HIV/AIDS prevalence rate was 6 percent — and up to 34 percent in some parts of Southern Africa — while the world average was just 0.5 percent. “We cannot accept that we have 6,500 Africans dying [of AIDS] every day and find it normal,” stated the international humanitarian activist, Graca Machel of Mozambique. “They are not mere statistics. They have a face like any one of us. They are our children.” Africare’s first HIV/AIDS programs were in Nigeria and Rwanda, in 1987. Today, Africare’s HIV/AIDS programs — prevention, counseling and testing, care for people living with AIDS and support for AIDS orphans — reach every country where the organization works.

“Africare’s greatest contribution — what I’m most proud of — is that we have now created an organization with an extended family. You are members of Congress and members of churches. You are black and white. You are African and American. When I look at the people in this room, when I feel the pulse, I know we have the makings of a great institution. This is just the beginning.”

— C. PAYNE LUCAS
AFRICARE PRESIDENT, 1971 TO MID-2002
RETIREMENT SPEECH • JULY 2002

Africare provides skills training to help HIV/AIDS-affected people earn income. This Southern African woman now supports herself and her family by sewing.

**2001–2005** Africare

|--------------------|----------------------|--------------------|---------------------|
Lucas Retires, Coles Welcomed as Africare President

Africare’s president since May 1971, C. Payne Lucas retired from the staff in mid-June 2002. Africare welcomed as its new president Julius E. Coles: a 28-year veteran of the U.S. Agency for International Development, the first director of Howard University’s Ralph J. Bunche International Affairs Center and, most recently, director of the Andrew Young Center for International Affairs at Morehouse College. “As an organization, we have always looked forward,” stated then Board Chairman George A. Dalley, “and we continue to look forward to new leadership and a new role.”

— JULIUS E. COLES
AFRICARE PRESIDENT, MID-2002 TO PRESENT

AUG. 2003
Liberia civil war ends; reconstruction begins.

2004
International activist Wangari Muta Maathai of Kenya receives Nobel Peace Prize.

NOV. 2005
Ellen Johnson-Sirleaf wins Liberia presidency: Africa’s first elected female leader.

LATE 2005
Since 2003, tens of thousands slaughtered in Darfur, Sudan. Two million have fled their homes.

AFRICA 2005
Population: 906 million
Infant mortality: 89/1,000
Life expectancy: 50
HIV cases: 25.8 million

Africare 35th Anniversary

COUNTRIES HELPED
Africare reaches 27 of Africa’s 50-plus countries:
- West Africa: Benin, Burkina Faso, Chad, Cote d’Ivoire, Ghana, Guinea, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone
- East Africa: Eritrea, Ethiopia, Tanzania, Uganda
- Central Africa: Burundi, Rwanda, Democratic Republic of the Congo
- Southern Africa: Angola, Malawi, Mozambique, Namibia, South Africa, Zambia, Zimbabwe
- North Africa: Egypt

ASSISTANCE GROWS
- Total value of assistance/support, 2001–2005: $222,781,498
- Compared to 1995–2000: +37%

NOTE: Information above and on facing page is for Africare’s fiscal (not calendar) years 2001–2005.
“Africare has survived and grown — and will continue to thrive and grow — because of the hard work, the sacrifices, the dedication and the love for Africa that each of you has given to Africare.

“You can be proud of the things we have accomplished together: how many water wells have been dug, how many people now have water for drinking and irrigation, how many health clinics have been built, how many more children have lived, how many farmers have grown more food and made some income, how many women have gained greater opportunities, how many refugees and displaced persons have been helped. You can be proud of all these things.

“Perhaps most important of all, you can be proud that, through it all, you showed that people truly can care about other people.”

— JOSEPH C. KENNEDY, PH.D.
AFRICARE SENIOR VICE PRESIDENT AND DIRECTOR OF INTERNATIONAL DEVELOPMENT, 1971–1999
RETIREMENT MESSAGE • 1999
During the fiscal year 2005 (July 1, 2004 through June 30, 2005), Africare’s work spanned communities in 26 countries of Africa.

Major new initiatives ranged from community-based assistance to one million AIDS orphans in East and Southern Africa, to emergency aid to Darfurian refugees in Chad, to multifaceted food security projects in most regions. With the end of conflict in countries such as Angola, Burundi, Liberia and Sierra Leone, Africare turned the corner from emergency aid to refugee resettlement and longer-term development work. In March 2005, Africare opened an office for the first time in the Democratic Republic of the Congo.

Ongoing were a wide range of projects as simple as building a village well and as complex as governance training at both the national and local levels. Ongoing, and expanding, was Africare’s response to the crisis of HIV/AIDS in Africa. Having carried out its first HIV/AIDS projects in 1987, shortly after the pandemic began, Africare this year supported HIV prevention, home- and clinic-based care for people living with AIDS and, as noted above, assistance to AIDS orphans. Many Africare projects in other sectors (for example, food security and emergency aid) included HIV/AIDS components.

The following sections present a report of Africare’s activities during 2005, meeting crisis needs but focusing on the continent’s long-term self-development.

**CIVIL-SOCIETY DEVELOPMENT AND GOVERNANCE**

During 2005, Africare’s civil-society development and governance programs reached six countries. The programs ranged from strengthening non-governmental organizations in Burundi and Niger, to “bottom up” community development planning in Tanzania — to the establishment of rural radio stations, with civic and educational programming, in Mali and Niger. Support continued to a policy group that provides independent advice to the Nigerian president at his request. In Mali and Senegal, Africare helped to train newly-elected local officials in the methods of decentralized governance. Those programs aimed to foster peace and participatory citizenship: the “enabling environment” for all other development work.
With 70 percent of its people engaged in agriculture, Africa is a continent of farmers. With one in three of its people suffering from malnutrition, Sub-Saharan Africa also, paradoxically, is a continent of hunger: it is the hungriest region in the world.

During 2005, Africare’s food security and agricultural assistance spanned 22 Sub-Saharan African countries, from the dry and drought-prone nations of the Sahel, to the fertile Great Lakes region, to Central and Southern Africa. Farmers received many kinds of help, addressing the many facets of farming and rural life as well as the immensity of the overall need. As a result, in the Africare project areas, food supplies increased, malnutrition dropped, farmers’ incomes rose and the general quality of rural life improved.

“Africare’s work will help me feed myself. It will provide a means to live.” Those words were spoken by a Namibian woman farmer in 1993. The commitment shown by Africare to that woman has remained Africare’s commitment — this year, as every year — to hundreds of thousands of farmers Africa-wide.

Zimbabwe was among the Southern African nations struck by drought this year. Africare in part responded with emergency food distributions but also continued improving the Zimbabwean people’s ability to feed themselves. Drought-resistant varieties of nutritious crops such as cassava, pigeon peas, sweet potatoes and maize were introduced — with the needed irrigation systems, seed supplies, and instruction in cultivation, processing and marketing — to more than 20,000 farmers near the capital city of Harare and in the Mashonaland East, Matebeleland South and Midlands provinces.

“I would like to express my appreciation. I think Africare’s supporters are like us — human — because they care so much for others.”

— A 15-YEAR-OLD GIRL IN DOLLOSSA, ETHIOPIA: BENEFICIARY OF AN AFRICARE WELL CONSTRUCTION PROJECT 1992
Farm families in two rural districts of Zambia learned how to raise cattle and then utilize them for nutrition (milk), fertilizer (manure) and draft power (tillage implements and rural transport). Elsewhere in Zambia, women beekeepers improved their operations with Africare’s support. Zambia, too, experienced drought this year.

Mzimba, Nkhata Bay and Ntcheu are among the Malawian districts considered extremely vulnerable to drought. This year, in addition to emergency food aid, Africare built up the capacities of farmers in those districts — distributing seeds for drought-resistant crops, providing other inputs such as farm tools and fertilizer, and helping farmers organize into co-ops and marketing groups. The farmers, in turn, shared a portion of their food and sales income with neighboring families affected by HIV/AIDS.

Potato and bean producers in Uganda received assistance from Africare during 2005, as did farming communities in Burundi’s Karusi province and crop and livestock producers in the Logone Oriental department of Chad. In nine prefectures of Guinea, Africare helped to conduct an assessment of farmers’ seed supplies. In Namibia’s Caprivi region, Africare increased food production and income generation by local groups that provide home-based care to people living with AIDS.

Comprehensive “food security” projects were underway in 12 African countries: Angola (Bie and Kwanza Sul provinces), Burkina Faso (Zondoma province), Chad (Assongha and Ouaddai departments), Eritrea (Northern Red Sea zone), Guinea (Dabola and Dinguiraye prefectures), Malawi (Ntcheu district), Mali (Dire and Goundam circles), Mozambique (Manica province), Niger forest areas of Zambia’s Luapula province and five districts of Uganda helped to curb environmental destruction by addressing its cause: rural poverty. Africare trained and equipped local villagers to earn livings in alternative, environmentally friendly ways. Before, people unwittingly stripped the environment in their desperation to survive.

**PRECIOUS NATURAL RESOURCES**

Most Africare agricultural projects included some form of natural resource management, enabling rural families to use wood for fuel and construction, soil for crop cultivation, grasslands for livestock grazing, and water for farming and drinking — in ways that also protect those resources over time. For example, large projects in Tanzania’s Ugalla Game Reserve, forest areas of Zambia’s Luapula province and five districts of Uganda helped to curb environmental destruction by addressing its cause: rural poverty. Africare trained and equipped local villagers to earn livings in alternative, environmentally friendly ways. Before, people unwittingly stripped the environment in their desperation to survive.

**FIGHTING POVERTY IN RURAL AFRICA — AND WINNING**

Nearly half the people of Sub-Saharan Africa live below the “extreme poverty line” of less than $1 a day. Because most Africans live in rural areas and work in the agricultural sector, Africare focuses on agricultural enterprise development — by smallholder farmers, by women’s groups, by youths — as a key to poverty alleviation. In Chad, Mali, Sierra Leone, South Africa, Zambia, Zimbabwe and elsewhere, Africare capitalized local lending institutions, provided business-management training, facilitated market linkages and otherwise gave small-scale rural entrepreneurs the needed resources to rise from subsistence to self-reliance.
(Agadez department), Rwanda (Gikongoro prefecture), Sierra Leone (Kailahun district) and Uganda (Kabale, Kanungu, Kisoro, Ntungamo and Rukungiri districts). As defined by the 1996 World Food Summit in Rome, food security exists when “all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.” In other words, three conditions must be met: availability of food (there is enough food for the community in the aggregate), access to food (each person in the community has enough food) and utilization of food (good nutrition).

Africare-supported food security projects addressed all three criteria and the work was multidimensional — with subprojects ranging from farmer training to marketing, from rural road construction to natural resource management, from water supply to family nutrition and more. (All food security projects also included HIV/AIDS assistance.)

An evaluation of the project in Uganda this year comments upon that complexity: “[This] is a remarkable project. Conceptually, it is brilliant. Food security, being a multisectoral concept, requires a multisectoral approach, which is exactly the design of the UFSI [Uganda Food Security Initiative]. The different components and interventions mutually reinforce each other, and the positive effect on the ground is highly visible. Villagers in remote parts of southwestern Uganda are benefiting from the project in an important and vital way.”

The projects derived most of their funding from the sale, or “monetization,” of food commodities donated by the American government under U.S. Public Law 480. Africare sold those commodities in Africa to African traders, thus increasing both the local food supply and the professional experience of participant traders. This year, monetization took place in most of the 12 countries where food security projects were underway.

More than 700,000 people benefited from Africare’s food security projects during 2005.

“WATER IS LIFE”

Wells, dams, reservoirs, trenches, pipes, pumps, spring caps, sanitation, training — by those and other means (singly and in combinations, small and large in scope), Africare since 1970 has significantly increased water supplies Africa-wide. During 2005, in more than 20 African “countries, that work continued. New irrigation systems enabled farmers to grow more food. Village wells offered convenient water supplies where, before, the nearest source had been miles away. Sanitation projects reduced water-borne disease on a continent where half the people have only unsafe water to drink. And more. For as the saying goes, “Water is life.”
During 2005, Africare’s health and HIV/AIDS assistance reached 26 African countries. Some projects focused on malaria, some on polio or onchocerciasis, some on mother-and-child health, some on rural health-systems development — and most on HIV/AIDS, now the leading cause of death in Sub-Saharan Africa.

Africare’s HIV/AIDS programming was as multifaceted as the problem itself. In Benin, for example, Africare continued assisting national-level officials and health program designers by providing better, more accessible information about the HIV/AIDS epidemic as well as improved HIV-prevention strategies. In Zanzibar, Tanzania, Africare trained a consortium of some 15 local non-governmental organizations (NGOs) to carry out HIV/AIDS prevention and care. Thirty Chadian NGOs received similar training, enabling outreach to several thousand people. With Africare’s support, HIV/AIDS testing and counseling facilities were established in Burkina Faso, Rwanda and Zimbabwe. HIV prevention education took forms ranging from literacy messaging in Nigeria’s Rivers state, to radio programs and training workshops throughout Liberia, to behavior-change modeling in Zambia. In the Democratic Republic of the Congo, Africare provided community-based support to AIDS orphans and other vulnerable children — notably, “street children” — in the capital city of Kinshasa. In Burkina Faso, Nigeria, Rwanda, Zambia and Zimbabwe, Africare assisted youth-led initiatives to prevent HIV, to care for people living with AIDS and to reach out to their orphaned schoolmates. Men, too, reached out. With training from Africare, men in Zimbabwe’s Harare, Mutasa and Shurugwi districts were providing home-based care to neighbors living with AIDS, despite the
fact that, in Africa as in most of the world, “caregiver” is not a traditional male role. In the Nigerian capital city of Abuja, Africare reduced HIV/AIDS prevalence among vulnerable women, such as commercial sex workers, by offering vocational training and other support to achieve healthier lives. Income generation and “backyard gardening” projects helped meet daily needs and medical expenses of HIV/AIDS-affected people in many countries. In the Chris Hani district of Eastern Cape province, South Africa, Africare continued working with in-country partners to create a continuum of service — including HIV/AIDS treatment, treatment education, HIV prevention education and support for AIDS orphans — from three hospitals, 33 rural clinics and their catchment areas. Finally, the Africare HIV/AIDS Service Corps was active in seven countries this year, training local people to serve as volunteer HIV/AIDS resources within their communities and to link their communities to centralized health providers.

At 50 years, Sub-Saharan Africa’s life expectancy is the lowest in the world. Its infant, child and maternal mortality rates are the highest in the world. And it is the world’s poorest region, with concomitantly few health resources — especially in the rural areas. In addition to its extensive HIV/AIDS programming, Africare carried out a wide range of rural health projects during 2005. In four districts of Zambia, for example, Africare helped to extend medical care to outlying villages. In Liberia, Africare worked to strengthen primary health-care networks. Major maternal and child health projects were underway in Ethiopia and Uganda. Clean water and sanitation prevented water-borne disease in many countries. In Chad, Africare continued its project of onchocerciasis (“river blindness”) control. In Angola, Africare supported polio prevention and treatment. In Angola, Benin, Senegal, Uganda and other countries, Africare helped local communities to control malaria: Africa’s third-leading cause of death overall and the number-one killer of African children.

A MILLION AIDS ORPHANS

With only 20 percent of the world’s population, Sub-Saharan Africa has 80 percent of all AIDS orphans — that’s 12 million parentless African children. Africare continued helping AIDS orphans during 2005. One major project, launched this year, ultimately will reach one million AIDS orphans and other vulnerable children in Mozambique, Rwanda, Tanzania and Uganda. The COPE (Community-Based Orphan Care, Protection and Empowerment) project has two notable features. First, it is a community-based initiative: it is helping local communities to better care for the orphans in their midst, thus honoring the African tradition of raising parentless children within the “extended village family,” where children feel most secure. Second, COPE’s work is comprehensive: for example, the project keeps children in school, offers psychosocial support (including HIV-prevention education), and provides child-appropriate income-earning opportunities as well as vocational training so they can support themselves as adults.

MEDICAL CARE AT LAST

Senegal shares with its African neighbors high rates of poverty and low levels of health. For example, its child mortality rate is 137 (USA: 8); physicians per 100,000 people number 8 (USA: 549); and life expectancy is 56 years (USA: 77). During 2005, Africare continued its rural health work in Senegal’s isolated regions. There, Africare built clinics, trained health workers, networked rural services to central medical facilities, and gave special attention to mother-and-child health, nutrition, and water and sanitation. Hundreds of thousands of people, some for the first time, gained access to medical care.
Emergency Humanitarian Aid

Africare was founded during a crisis — the Sahelian drought of 1968–74 — and its first years were consumed by crisis relief. Yet Africare’s priority always has been long-term development: the best way to improve the quality of life overall as well as the best way to avert future crises or vulnerability thereto. Sadly, crises and crisis vulnerability in Africa have not yet abated. During 2005, Africare continued to provide emergency humanitarian aid.

Food crises began or continued this year in many parts of Africa. In Niger, a combination of low rainfall and locust invasions led to unusually poor harvests in the fall of 2004; by July 2005, up to one-quarter of all Nigeriens needed food aid. Other West African nations were similarly affected. Southern Africa experienced its worst harvests this year since 1992. By mid-2005, more than 10 million Southern Africans were in need of food aid. Africare responded on an emergency basis in Angola, Malawi, Namibia and Zimbabwe (Southern Africa) as well as Mali and Niger (West Africa). Africare’s longer-term water and agricultural work in those areas offered further help.

Angola, Burundi and Liberia were among the African countries rebuilding during 2005 after years of civil war. Within Angola, Africare continued helping displaced persons to resettle and to obtain medical care and food; and Angolan refugees received Africare’s help at camps in Namibia and Zambia. Likewise, Africare helped Burundian refugees at two camps in Tanzania as well as Burundians displaced in-country. Finally, Africare helped many of those refugees — Burundians, Angolans and others — to return home. The work in Liberia included resettlement assistance as well as rebuilding essential infrastructure (especially medical facilities) that had been destroyed during the war.

Countries also receiving emergency aid from Africare this year included Chad, Cote d’Ivoire and Sierra Leone.

DARFUR: “ON A KNIFE-EDGE”

“The United Nations has described the situation in Darfur as a crisis of ‘enormous proportions.’ The survival of the hundreds of thousands of displaced is on a knife-edge” (BBC News, May 6, 2004). Ultimately, as the atrocities continued, more than two million Darfurians fled their homes — 200,000 of them crossing from Sudan into Chad. There, Africare responded. In Ouaddai, in eastern Chad, Africare established and now manages the Gaga Refugee Camp, providing shelter, food, medical care and other aid to 20,000 Darfurians. Africare also distributed food to Chadian host communities strained by the influx of refugees.
The Africare Bishop John T. Walker Memorial Dinner

The largest annual event for Africa in the United States, the Africare Bishop John T. Walker Memorial Dinner this year honored “bipartisan Congressional engagement with Africa” — presenting the Bishop Walker Humanitarian Award jointly to Senator Richard G. Lugar (R-Indiana) and Congressman Donald M. Payne (D-New Jersey).

“This gathering is an extraordinary event in the annual political discourse of our nation,” noted Lugar in his acceptance speech. “For here we are surrounded by fellow citizens of goodwill, who are united in our concern for Africa and our desire that the United States be a constructive friend to the people of that continent. The fellowship of this evening is a reflection of what is possible and what should be.” At the time of the event, Lugar chaired the Senate Committee on Foreign Relations. Payne, a longstanding activist for Africa on the House International Relations Committee, was then the ranking minority member of its Africa Subcommittee.

Special tributes were delivered by then Secretary of State Colin L. Powell, former Secretary of Health and Human Services Louis W. Sullivan, M.D., and former Secretary of Transportation Rodney E. Slater.

David J. O’Reilly, chairman and chief executive officer of Chevron Corporation, served as the event’s national chair. “This needs to be the century of Africa,” he stated in his address. “There is no way that we can be successful as a global society without bringing Africa along with the rest of the world. Its potential is too great, its resources too broad and its people too creative for it not to reach that full potential.”

Former Presidents George H.W. Bush and William J. Clinton were the national honorary patrons; the international honorary patrons were the chairs of Africa’s four leading regional organizations (CEMAC, COMESA, ECOWAS and SADC). The honorary chair was Maria Walker, wife of the late Bishop John T. Walker, for whom the event is named.

Some 2,000 corporate, national and international supporters attended the Africare Dinner, held in Washington, D.C., on Friday, Nov. 5, 2004. Nearly $1 million was raised for Africare’s mission of humanitarian assistance to Africa.
Major Donors

Africare is proud to give special recognition to its donors of $5,000 or more, in cash or in kind, during the fiscal year 2005.

CORPORATIONS
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Fellowship Chapel (Detroit, Mich.)
Georgia State University, Andrew J. Young School of Policy Studies
Jeanne Hanover
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International Development Enterprises
International Relief and Development Enterprises
John Snow, Inc.
Thanks, too, to the thousands of individuals who gave to Africare in the workplace — through the Combined Federal Campaign, state and local government campaigns, and corporate employee drives. Africare is a member of the Global Impact workplace-giving federation.

Supporters also responded generously to Africare mail appeals, the Africare Web site, media coverage and other outreach efforts this year. Africare gratefully acknowledges those contributions.
Africare in Africa: 2005

- Africare assistance, FY 2005
- Past Africare assistance
Summary of Programs

Africare’s development and emergency assistance reached communities in 26 countries Africa-wide during the fiscal year 2005, as summarized below (with donors in parentheses).

**ANGOLA**

**BIE PROVINCE:** Malaria prevention and treatment (ExxonMobil Foundation)

**BIE AND KWANZA SUL PROVINCES:** Emergency food supply and food security assistance to formerly displaced farm families (Chevron Corporation, U.S. Agency for International Development/U.S. P.L. 480 Title II Program); water supply and sanitation (Office of U.S. Foreign Disaster Assistance); and polio prevention and treatment (Africare, Government of Japan, World Vision)

**CABINDA, CACONGO AND MBANZA CONGO DISTRICTS:** Food production, postharvest handling and nutrition education (Cabinda Gulf Oil, Ltd./Chevron, SONANGOL)

**KISSANGA, KUQUEMBA AND NHAREA DISTRICTS:** Food distribution to internally displaced persons (World Food Programme)

**KUITO, SELES AND WAKU KUNGO DISTRICTS:** Seed multiplication and seed-and-tool distribution (Food and Agriculture Organization of the U.N.)

See also, Namibia and Zambia (below)

**BENIN**

**BEMBEREKE, NIKI, PERERE AND TCHAOUROU COMMUNES:** HIV prevention (U.N. Development Program)

**CITY OF COTONOU (PORT AREA):** HIV prevention (William H. Donner Foundation)

**COUFFO AND MONO PROVINCES:** Malaria prevention (Global Fund to Fight AIDS, Tuberculosis and Malaria)

**OUEME PROVINCE:** Child morbidity and mortality surveillance (U.S. Centers for Disease Control and Prevention)

**OUEME AND PLATEAU PROVINCES:** Malaria prevention (UNICEF, U.S. Agency for International Development)

**NATIONWIDE:** HIV/AIDS surveillance and prevention (Africare, local partner organizations, U.S. Agency for International Development)

**BURKINA FASO**

**LOROUM PROVINCE:** Africare HIV/AIDS Service Corps (Alpha Kappa Alpha Sorority, Inc./Alpha Chapter)

**ZONDOMA PROVINCE:** Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program); and establishment of HIV/AIDS testing and counseling center (U.S. Government/West Africa Ambassador’s Fund)
BURUNDI

GITEGA AND KARUSI PROVINCES: Strengthening of indigenous non-governmental organizations (U.S. Agency for International Development); and resettlement of internally displaced persons and returning refugees (Office of U.S. Foreign Disaster Assistance)

KARUSI PROVINCE (BUHIGA AND GITARAMUKA COUNTIES): Food security (U.N. Development Program, U.S. Agency for International Development); and community-based rural development (International Fund for Agricultural Development)

See also, Tanzania (below) and Regional Programs (page 38)

CHAD

CITY OF ABECHE: Rural credit and enterprise development (European Development Fund)

ASSONGHA, BILTINE, DAR SILA AND OUARA DEPARTMENTS: Prevention of HIV and other STDs (World Bank)

ASSONGHA AND OUADDAI DEPARTMENTS: Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program)

DOBA REGION: Integrated onchocerciasis control and food security (Merck & Co., U.S. Department of Agriculture/Section 416(b))

LOGONE ORIENTAL DEPARTMENT: Agricultural production and microenterprise development (International Finance Corporation)

OUADDAI DEPARTMENT (GAGA REFUGEE CAMP): Emergency assistance to refugees from Darfur, Sudan (U.N. High Commissioner for Refugees)

OUADDAI DEPARTMENT: Assistance to Chadian communities adjacent to Sudanese refugee camps (Government of France)

DEMOCRATIC REPUBLIC OF THE CONGO

CITY OF KINSHASA: Community-based support to AIDS orphans and other vulnerable children (World of Hope)

COTE D’IVOIRE

CITY OF ABIDJAN (PORT AREA): HIV prevention (William H. Donner Foundation)

AGNEBY AND DENGUELE REGIONS: Integrated food security, microenterprise development and HIV prevention (Africare, U.S. Department of Agriculture/Food for Progress)

BAFING, DENGUELE AND WORODOUGOU REGIONS: Community development assistance to internally displaced persons and their host communities (U.N. Development Program)

ERITREA

NORTHERN RED SEA ZONE (NARO PLAINS): Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program)

ETHIOPIA

ABBOB, GODERE AND GOG DISTRICTS: Water supply and sanitation (Alpha Kappa Alpha Sorority, Besser Foundation, National Sorority of Phi Delta Kappa)

GAMBELLA REGION: Child survival (Africare, U.S. Agency for International Development)
GHANA

CITY OF ACCRA: Africare HIV/AIDS Service Corps (William H. Donner Foundation)

GUINEA

ALBADARIAH, DABOLA, GUECKEDOU, KANKAN, KOUDUSSA, MACENTA, MANDIANA, NZEREKORE AND SIGUIRI PREFECTURES: Assessment of farmers’ seed supplies (World Food Programme)


DINGUIRAYE PREFECTURE: Africare HIV/AIDS Service Corps (William H. Donner Foundation)

LIBERIA

BONG, MONTSERRADO AND NIMBA COUNTIES: Rehabilitation of health services infrastructure (U.S. Agency for International Development)

BONG, MONTSERRADO AND NIMBA COUNTIES AND CITY OF MONROVIA: Provision of emergency health supplies and water resource development (AmeriCares)

BONG AND NIMBA COUNTIES: Food security (U.S. Agency for International Development); maternal and child health (U.S. Agency for International Development); provision of emergency health supplies (Emergency Response Fund/U.N. Office for the Coordination of Humanitarian Affairs); and resettlement of internally displaced persons (U.N. Development Program)

CITY OF MONROVIA: Water supply and sanitation (UNICEF)

NIMBA COUNTY: Provision of emergency health supplies (International Foundation); and supplementary feeding of internally displaced persons (UNICEF)

NATIONWIDE: HIV/AIDS outreach training for health professionals and social workers (U.S. Government/West Africa Ambassador’s Fund)

MALAWI

LIKOMA, MZIMBA, NKHATA BAY AND NTCHEU DISTRICTS: Food security and rural infrastructure development (U.S. Agency for International Development/U.S. P.L. 480 Title II Program)

MANGOCHI DISTRICT: Integrated poverty alleviation and wildlife conservation (European Development Fund)

MZIMBA AND NKHATA BAY DISTRICTS: Emergency food distribution (World Food Programme)

MZIMBA, NKHATA BAY AND NTCHEU DISTRICTS: Distribution and multiplication of drought-resistant seeds (Office of U.S. Foreign Disaster Assistance)

MZIMBA AND NTCHEU DISTRICTS: Food production and agribusiness development (Government of the United Kingdom, World Bank/Government of Malawi); and food production (Emmanuel International, World Bank)

NTCHEU DISTRICT: Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program); family health, food production and nutrition education (Flora Family Foundation); and emergency food distribution (Government of Malawi)
MALI

**BAROUELI CIRCLE:** Local-level governance training (Government of Mali)

**DIRE AND GOUNDAM CIRCLES:** Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program); and provision of seeds, agricultural tools and veterinary supplies to farmers affected by locust invasions (Food and Agriculture Organization of the U.N.)

**GAO, KIDAL AND TIMBUKTU CIRCLES:** Radio-transmitted civic education and community development information (U.S. Agency for International Development)

**TIMBUKTU CIRCLE:** Strengthening of rural credit facility (U.S. Agency for International Development)

**TIMBUKTU REGION:** HIV prevention (Government of Mali)

MOZAMBIQUE

**MANICA PROVINCE:** Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program)

*See also, Regional Programs (page 38)*

NAMIBIA

**CAPRIVI REGION:** Food security for HIV/AIDS-affected households (Bristol-Myers Squibb Company); and protection and education of AIDS-affected children (U.S. Department of Labor)

**CAPRIVI, KAVANGO, OMUSATI, OSHIKOTO OHANGWENA AND OSKANA REGIONS:** Emergency food distribution to orphans and other vulnerable people (World Food Programme)

**OTJOZONDJUPA REGION (OISIRE REFUGEE CAMP):** Construction of women’s center (The Moody Church); and repatriation of Angolan refugees (U.N. High Commissioner for Refugees, U.S. Department of State)

**OTJOZONDJUPA REGION (KASSAVA AND OISIRE REFUGEE CAMPS):** Camp management and provision of community services to Southern African refugees (Africare, U.N. High Commissioner for Refugees, U.S. Department of State, World Food Programme)

NIGER

**AGADEZ DEPARTMENT:** Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program)

**ARLIT AND TCHIROZERENE DISTRICTS:** Radio-transmitted civic education and community development (U.S. Agency for International Development)

**BALLEYARA VILLAGE AND CITIES OF MARADI AND NIAMEY:** Strengthening of indigenous non-governmental organizations (National Endowment for Democracy)

**BOBOYE DISTRICT:** HIV prevention (William and Jennifer Mead); and Africare HIV/AIDS Service Corps (Africare)

**CITY OF NIAMEY:** Food monetization for consortium of U.S. non-governmental organizations (U.S. Agency for International Development/U.S. P.L. 480 Title II Program)
NIGERIA

ABUJA FEDERAL CAPITAL TERRITORY: Independent Policy Group (Africare, Ford Foundation, Soros Foundation, U.N. Development Program); assistance to national initiative to improve health and education programs (U.S. Agency for International Development); and prevention of HIV among vulnerable women (World Bank)

AKWA IBOM, BAYELSA, CROSS RIVER, DELTA, EDO AND RIVERS STATES: Maternal and child health (Shell Petroleum Development Company of Nigeria)


RIVERS STATE (LUEKU AND NYOKURU COMMUNITIES): HIV prevention, literacy and vocational training (anonymous donor)

RWANDA

GASABO, KICUKIRO AND NYAMAGABE DISTRICTS: Support for people infected or affected by HIV/AIDS (World Bank)


KABUGA AND KANOMBE DISTRICTS: HIV prevention among AIDS orphans (Mosaic Foundation)

See also, Regional Programs (page 38)

SENEGAL

FATICK AND KAOLACK REGIONS: Soil desalinization (Government of Canada)

CITY OF KAOLACK: Africare HIV/AIDS Service Corps (William H. Donner Foundation)

MAKA DISTRICT: Maternal and child health (Government of Japan)

NIORO DISTRICT: Maternal and child health (Government of the United Kingdom)

TAMBACOUNDA REGION: Maternal and neonatal health (U.S. Agency for International Development)

ZIGUINCHOR REGION: Malaria and tuberculosis prevention and treatment (U.S. Agency for International Development); and local-level governance training (U.S. Agency for International Development)

SIERRA LEONE

KAILAHUN DISTRICT: Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program); and rehabilitation of health services infrastructure and provision of health care to internally displaced persons (Catholic Relief Services, Office of U.S. Foreign Disaster Assistance, World Food Programme)

TOWN OF MAKENI: Women’s microenterprise development (returned Peace Corps volunteers)
SOUTH AFRICA

CHRIS HANI DISTRICT: HIV prevention, treatment and support for people affected by HIV/AIDS, and assistance to AIDS orphans (Conrad N. Hilton Foundation, President’s Emergency Plan for AIDS Relief, World of Hope)

NATIONWIDE: Management of Agricultural Development Trust (Agricultural Development Trust)

See also, Regional Programs (page 38)

TANZANIA

DODOMA, KIGOMA AND TABORA REGIONS: Rural infrastructure development (European Development Fund)

KASULU DISTRICT (MTABILA REFUGEE SETTLEMENT AND MUYOVOSI CAMP): Assistance to Burundian refugees (Refugee Education Trust, U.N. High Commissioner for Refugees, UNICEF, U.S. Department of State); and repatriation of Burundian refugees (U.N. High Commissioner for Refugees)

KONGWA DISTRICT: Home-based care of people living with AIDS (Global Service Corps)

MTAKUJA AND SOGEENI VILLAGES: School construction (Michael and Tina Chambers family)

TABORA REGION (UGALLA GAME RESERVE): Integrated natural resource management and income generation (U.S. Agency for International Development)

ZANZIBAR (PEMBA AND UNJUGA ISLANDS): Support to HIV/AIDS assistance by local non-governmental organizations (U.S. Agency for International Development)

See also, Regional Programs (page 38)

UGANDA

KABALE DISTRICT: Rural community development (Africare, Government of Canada, International Center for Tropical Agriculture, Government of Switzerland); and improved potato production (International Potato Centre)

KABALE, KISORO, NTUNGAMO AND RUKUNGIRI DISTRICTS: Food security (U.S. Agency for International Development/U.S. P.L. 480 Title II Program); and natural resource management and income generation (Environmental Conservation Trust of Uganda, U.S. Agency for International Development)

CITY OF KAMPALA: NGO training in EPI-Info software and KPC (“knowledge, practices and coverage”) survey methodologies (U.S. Agency for International Development)

KANUNGU DISTRICT: Malaria prevention and treatment (GlaxoSmithKline UK)

KISORO DISTRICT: Introduction of disease-resistant beans (National Agricultural Research Organisation of Uganda)
NTUNGAMO DISTRICT: Child survival (U.S. Agency for International Development); integrated HIV prevention, improved nutrition and natural resource management (Environmental Conservation Trust of Uganda); nutritional support to HIV/AIDS-affected households (ACDI/VOCA, Africare, National Sorority of Phi Delta Kappa, U.S. Agency for International Development/U.S. P.L. 480 Title II Program); secondary school scholarships for AIDS orphans (Africare); water resource development (African Well Fund); and water supply, sanitation and agricultural production (William H. Donner Foundation, Starr Foundation, UNICEF)

NATIONWIDE: In-country coordination of USAID’s Communities Responding to the HIV/AIDS Epidemic (CORE) Initiative (U.S. Agency for International Development)

See also, Regional Programs (page 38)

ZAMBIA

CENTRAL AND EASTERN PROVINCES: Agricultural production and market linkage (International Fund for Agricultural Development)

CENTRAL, EASTERN, LUAPULA, LUSAKA, NORTHERN AND SOUTHERN PROVINCES: HIV prevention, health education and vocational training for youths (World Vision)

CHAMA, CHIPATA, KASAMA AND LUNDAZI DISTRICTS: Community-level health care (Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs)

CHIPATA DISTRICT: Reproductive health and HIV prevention education for youths (Government of Zambia)

CHIPATA, CHOMA, KALOMO AND LUNDAZI DISTRICTS: Support to HIV/AIDS programming by local youth groups (Zambia National AIDS Network)

EASTERN PROVINCE: Credit and credit-management training for agricultural entrepreneurs and extension agents (African Development Bank); establishment of HIV/AIDS counseling and testing center for youths (William H. Donner Foundation); and Africare HIV/AIDS Service Corps (Africare)

EASTERN PROVINCE (UKWIMI REFUGEE CAMP): Assistance to Southern African refugees (U.N. High Commissioner for Refugees)

KABWE DISTRICT: Assistance to women’s groups supporting AIDS orphans and other vulnerable children (Government of New Zealand)

KASAMA DISTRICT: Establishment of youth agribusiness-training center (U.N. Development Program)

KASAMA AND SOLWEZI DISTRICTS: Cattle production and utilization (Heifer Project International)

LUAPULA PROVINCE (FOREST AREAS): Integrated natural resource management and income generation (International Fund for Agricultural Development); and assistance to women beekeepers (Government of Ireland)

SONGWE VILLAGE: Water resource development and improved nutrition (Harold J. Bordwin and colleagues)

SOUTHERN PROVINCE: Improved cassava production (Food and Agriculture Organization of the U.N.)

See also, Regional Programs (page 38)
ZIMBABWE

BINDURA, MT. DARWIN, RUSHINGA AND SHAMVA DISTRICTS: Soybean production, processing and marketing (Rockefeller Foundation)

BUHERA, CHIKOMBA AND MARANGE DISTRICTS: Seed multiplication and agricultural production (Bill & Melinda Gates Foundation)

CHIKOMBA, MAKONI, MUTARE RURAL AND SHURUGWI DISTRICTS: Food production assistance to HIV/AIDS-affected households (LEAD/U.S. Agency for International Development)

CITIES OF CHITUNGWIZA AND HARARE: “Backyard” production of sweet potatoes (International Development Enterprises)

CITY OF HARARE (ARCADIA AREA): HIV prevention (Government of New Zealand); and microenterprise development and youth health and HIV/AIDS education (Rockefeller Foundation)

HARARE, MAKONI, MUTASA AND SHURUGWI DISTRICTS: Support of youths providing care to people living with AIDS (John Snow Inc.)

HARARE, MUTASA AND SHURUGWI DISTRICTS: Training of men to provide home-based care to people living with AIDS (Government of Ireland, John Snow Inc.)

LUPANE DISTRICT: Establishment of women’s microenterprise-training center (Sulzberger Foundation)

MASHONALAND EAST (SHURUGWI DISTRICT) AND MIDLANDS (CHIKOMBA DISTRICT) PROVINCES: Provision of drought-resistant seeds (U.S. Agency for International Development)

MATEBELELAND SOUTH AND MIDLANDS PROVINCES: Production and marketing of drought-tolerant crops (William H. Donner Foundation, International Fund for Agricultural Development)

MUTASA DISTRICT: Assistance to AIDS orphans and other vulnerable children (Catholic Relief Services, William H. Donner Foundation, Linda M. Dunbar Charitable Foundation); Africare HIV/AIDS Service Corps (Africare); nutritional support to AIDS orphans, people living with AIDS and other HIV/AIDS-affected households (World Food Programme); seed distribution (Food and Agriculture Organization of the U.N.); and household food production (International Development Enterprises)

RUSAPE TOWNSHIP: Reproductive health and HIV prevention education for youths (U.S. Centers for Disease Control and Prevention)

SHURUGWI AND ZVISHAVANE DISTRICTS: Assistance to people infected or affected by HIV/AIDS (International Fund for Agricultural Development)

REGIONAL PROGRAMS

MOZAMBIQUE, RWANDA, TANZANIA AND UGANDA: Community-Based Orphan Care, Protection and Empowerment (COPE) project (U.S. Agency for International Development)


AFRICA-WIDE: Food for Development Program (Africare, U.S. Agency for International Development)
Management’s Report

Africare is pleased to present its June 30, 2005, fiscal year results. This report reflects another successful funding year during which the organization attracted nearly $50 million to ensure continued assistance to some of the most needy and deserving people in Africa.

Africare understands that donors consider good financial stewardship to be an essential quality of a charitable organization. Africare is particularly proud of the fact that 94 percent of every dollar spent was dedicated to program activities in Africa. By maintaining one U.S. location in Washington, D.C., Africare is able to minimize administrative and fund-raising costs while maximizing funds available for direct program expenses and related support overseas.

Africare’s management is responsible for the preparation and integrity of the financial statements as well as the systems, processes and controls that ensure timely and accurate reporting. Africare has an active Board of Directors, including an Audit Committee that oversees the organization’s internal control framework and financial reporting. A letter from the Audit Committee Chairman is included in this report at right.

The financial statements have been audited by independent certified public accountants. Excerpts from the audited financial statements are presented on the following page. Complete copies of the financial statements are available by visiting our website at www.africare.org or by calling Africare at (202) 462-3614.

Jack Campbell
Vice President, Finance and Management

Letter From the Audit Committee Chairman

The Audit Committee of the Board of Directors of Africare is composed of four independent members of the Board. No member of the Committee is an officer or employee of the organization.

The Committee met several times during the year, including meetings prior to and at the conclusion of the annual audit. The Committee discussed with Africare’s management and independent auditors various matters pertaining to financial reporting, internal controls, quality of staff and compliance with donor regulations. The Committee also met privately with Africare’s independent, external auditors to discuss the conduct of the audit and financial reporting procedures. The independent auditors have unrestricted access to the Committee.

Larry D. Bailey, CPA
Chairman, Audit Committee
**Africare** (in thousands)

<table>
<thead>
<tr>
<th>Revenue and Support</th>
<th>2005</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundations, trusts, corporations and individuals</td>
<td>$9,683</td>
<td>$9,137</td>
</tr>
<tr>
<td>Special events</td>
<td>841</td>
<td>978</td>
</tr>
<tr>
<td>Combined federal campaign (CFC)</td>
<td>201</td>
<td>165</td>
</tr>
<tr>
<td>Donated services and materials</td>
<td>10,573</td>
<td>7,330</td>
</tr>
<tr>
<td>Governments</td>
<td>26,999</td>
<td>28,842</td>
</tr>
<tr>
<td>Investment income and other</td>
<td>1,634</td>
<td>3,352</td>
</tr>
<tr>
<td><strong>Total revenue and support</strong></td>
<td><strong>$49,931</strong></td>
<td><strong>$49,804</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th>2005</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food security, relief and refugee assistance</td>
<td>$19,333</td>
<td>$16,300</td>
</tr>
<tr>
<td>Health and water resource development</td>
<td>10,861</td>
<td>10,379</td>
</tr>
<tr>
<td>Agriculture and small-scale irrigation</td>
<td>8,491</td>
<td>12,142</td>
</tr>
<tr>
<td>Integrated rural development</td>
<td>6,228</td>
<td>5,356</td>
</tr>
<tr>
<td>Other development programs</td>
<td>2,909</td>
<td>1,845</td>
</tr>
<tr>
<td><strong>Total program services</strong></td>
<td><strong>47,822</strong></td>
<td><strong>46,022</strong></td>
</tr>
<tr>
<td>Management and general</td>
<td>2,068</td>
<td>3,747</td>
</tr>
<tr>
<td>Fundraising</td>
<td>838</td>
<td>604</td>
</tr>
<tr>
<td><strong>Total support services</strong></td>
<td><strong>2,906</strong></td>
<td><strong>4,351</strong></td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>$50,728</strong></td>
<td><strong>$50,373</strong></td>
</tr>
</tbody>
</table>

| Change in net assets from operations | 797 | 569 |
| Change in non-operating minimum pension liability | 1,079 | — |
| Change in net assets | 1,876 | 569 |
| **Net assets, beginning of year** | 12,104 | 12,673 |
| **Net assets, end of year** | **$10,228** | **$12,104** |
# Headquarters and Field Offices

**HEADQUARTERS**

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**SENIOR STAFF** *

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>Julius E. Coles</td>
<td>President</td>
<td></td>
</tr>
<tr>
<td>Jeannine B. Scott</td>
<td>Senior Vice President</td>
<td></td>
</tr>
<tr>
<td>Jack Campbell</td>
<td>Vice President of Finance and Management</td>
<td></td>
</tr>
<tr>
<td>L. Michael E. Green</td>
<td>Vice President of Marketing and Development</td>
<td></td>
</tr>
<tr>
<td>Chinwe Effiong, Ph.D.</td>
<td>Director, East and Anglophone West Africa Region</td>
<td></td>
</tr>
<tr>
<td>Kevin G. Lowther</td>
<td>Director, Southern Africa Region</td>
<td></td>
</tr>
<tr>
<td>William P. Noble</td>
<td>Director, Francophone West and Central Africa Region</td>
<td></td>
</tr>
<tr>
<td>Charles DeBose, Ph.D., M.P.H., M.P.A.</td>
<td>Director, Office of Health and HIV/AIDS</td>
<td></td>
</tr>
<tr>
<td>Clarence S. Hall, Dr.P.H.</td>
<td>Deputy Director, Office of Health and HIV/AIDS</td>
<td></td>
</tr>
<tr>
<td>Harold V. Tarver</td>
<td>Director, Office of Food for Development</td>
<td></td>
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<tr>
<td>J. Margaret Burke</td>
<td>Director of Management Services</td>
<td></td>
</tr>
<tr>
<td>Jean Denis</td>
<td>Director of Management Information Systems</td>
<td></td>
</tr>
<tr>
<td>Carolyn W. Gullatt</td>
<td>Director of Human Resources</td>
<td></td>
</tr>
</tbody>
</table>

* Senior staff members as of December 1, 2006

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Sekai Chikowero, Officer-in-Charge

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President, IRC Group
Distinguished Professor in the Practice of Diplomacy, Georgetown University
Former U.S. Representative to the United Nations

Ex-Officio:
Julius E. Coles
President, Africare

* Board of Directors, FY2005 through December 1, 2006

1 Term ended, 2005
2 Elected, 2005
3 Resigned, 2005
4 Resigned, 2006
Africare Needs Your Support!

Africare depends on contributions to carry out its essential work throughout Africa. Gifts to Africare may take several forms. For example, cash contributions support a wide variety of current programs in rural Africa. Major endowment gifts ensure the perpetuation of Africare’s self-help assistance over time. Bequests of cash, securities or property offer expanded giving opportunities to many supporters. To make a contribution or for more information about gift options, please contact —

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Africare
Africare House
440 R Street, N.W.
Washington, D.C. 20001-1935
U.S.A.

Telephone: (202) 462-3614
Fax: (202) 387-1034
E-mail: development@africare.org
Web site: www.africare.org

Gifts to Africare are tax-deductible to the extent provided by United States law.
Africare works to improve the quality of life in Africa, assisting families, communities and nations in two principal areas — food security and agriculture, and health and HIV/AIDS — as well as water resource development, environmental management, literacy and vocational training, microenterprise development, civil-society development, governance and emergency humanitarian aid. In the United States, Africare builds understanding of African development through public education and outreach.

A private, nonprofit organization, Africare was founded in 1970. Since that time, communities in 36 nations Africa-wide have benefited from direct Africare assistance. During the fiscal year 2005, Africare supported more than 150 programs in 26 African countries.

Africare is a charitable institution under Section 501(c)(3) of the Internal Revenue Code. Africare’s financial support comes from charitable foundations, multinational corporations and small businesses, the religious community, other private organizations, the U.S. government, foreign governments, international agencies and thousands of individuals. Africare is a member of Global Impact: a part of the Combined Federal Campaign and many corporate as well as state and local government workplace drives. Africare has its headquarters in Washington, D.C., with field offices currently in 23 African countries.

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Africare Annual Report 2005

Celebrating Africare’s 35th Anniversary 1970 – 2005