


The Center for Communications, Health and the Environment (CECHE) is a private, non-profit, 501(c)(3) American institution based in Washington, DC. Founded in 1990, CECHE's mission is to assist under-served communities in the United States and developing nations worldwide by initiating and supporting programs to improve health and alleviate the adverse health affects of environmental pollution. CECHE works in partnership with scientists, journalists, educators and policy-makers from the United States, Central Europe, India and other countries. Involved in a number of projects in the United States and around the globe, CECHE is especially focused on the use of mass media and information technology in programs centered around five areas: community and school-based intervention; environment and public health programs and policy; professional training in media and health; public education; and private voluntary sector development.





CHAIRMAN'S MESSAGE

2006-2007 was an exciting time for CECHE. We initiated three new programs and successfully concluded three efforts started several years ago.

Among our new initiatives are a “Dump Soft Drinks Campaign” launched with the Center for Science in the Public Interest (CSPI) and our new online publication, *In Focus*, which replaced our flagship *Global Health & Environment MONITOR* after 13 years of increasing and successful impact. Two additional programs reaching completion in 2006 were Communities Can!, an international joint effort with the Georgetown University Child Development Center; and the Safe Food International program, a partnership with CSPI.

Meanwhile, on the domestic and international fronts:

- The University of the District of Columbia demonstrated a 90 percent retention rate and ongoing impact from a CECHE-supported nutrition scholarship program launched there in 2001.
- Nineteen graduate students at Lady Irwin College in New Delhi have received nutrition and public health scholarships since 2003 through a CECHE program.
- CECHE vice chairman's book, *Breaking The Real Axis Of Evil*, formed the basis for the development and passage of the ADVANCE Democracy Act by the U.S. Congress.
- CECHE's Indian partner, Roshni, reported major reductions in beedi rolling and smoking among villagers, especially women, in southern India through its mass media program, also designed to promote skills for non-tobacco trades.
- CSPI and CECHE are collaborating on two new projects to advocate for public health policy reform -- the first focuses on cardiovascular disease prevention, and the second on discouraging children and teenagers from consuming sugary soft drinks.

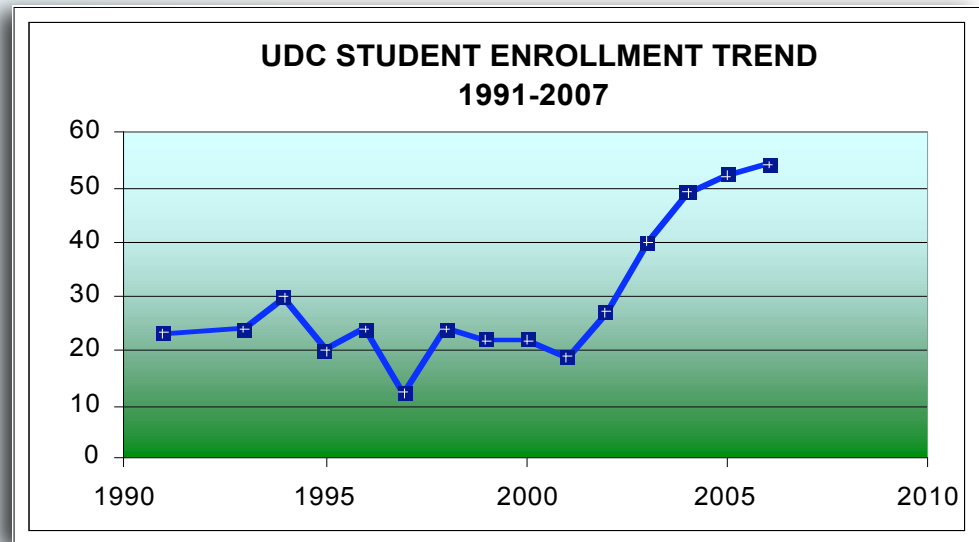
These and other CECHE initiatives and joint efforts are bearing fruit on multiple fronts, thanks in large measure to the wisdom and support of our partners and volunteers. We thank them -- and you -- for enabling us to continue to pursue our mission.

Sushma Palmer

COMMUNITY AND SCHOOL-BASED INTERVENTION

Nutrition Scholarships at UDC Make Impressive Gains

Aimed at stimulating student enrollment and retention, CECHE's Nutrition Scholarship Program at the University of the District of Columbia (UDC) has done both over the past five years. The uni-



versity's Nutrition and Food Science Program has seen a 62 percent increase in enrollment since the scholarships were introduced in 2001, from 19 to 58 students (see chart), and an equally impressive increase in retention. To date, 34 UDC nutrition and dietetics majors have received scholarships as part of the CECHE initiative, and it has helped to reach more students and retain almost 90 percent of the students enrolled in the program.

In addition, the scholarship program facilitated the awarding of a 10-year accreditation to UDC's Nutrition and Food Science Program by the American Dietetic Association's Commission on Accreditation for Dietetic Education. In response, UDC's Department of Biological and Environmental Sciences anticipates starting an internship cum master's program in nutrition and dietetics (with emphasis on public policy, communication and clinical experience) to comply with the recommendations of the Commission on Dietetic Registration's task force, which requires a graduate degree to become a registered dietitian.

2006-2007 UDC Scholarship Recipients

Four UDC students were awarded CECHE scholarships for the 2006-2007 academic year.

Vera Braga: A senior with research and academic experience in dietetics and a master's degree from Brazil, Ms. Braga plans to complete her baccalaureate degree in dietetics, pursue graduate studies in nutrition, then work with communities to effectively use diet to prevent cancer or to provide nutritional support to cancer survivors.



Mabel Hernandez: A recent immigrant from Columbia intent on becoming a registered dietitian, Ms. Hernandez has a graduate degree in nutrition and is pursuing a second baccalaureate degree in the field to meet the accreditation standards in dietetics.

Charmaine Jones: Interested in becoming a sports dietitian, Ms. Jones is an involved dietetics senior who also works as a political action committee assistant at the American Dietetic Association's Government Relations Office in Washington, D.C.



Rhea F. Williams: Ms. Williams is a senior majoring in dietetics whose goal is to work with cancer patients as a registered dietitian. She is president of the UDC Student Dietetic Association and the group Minorities in Agriculture, Natural Resources and Related Sciences.

College Nutrition Scholarships in India Report Impact

In the summer of 2003, graduate students at Lady Irwin College in New Delhi, India were given an opportunity to enhance their training and research when CECHE partnered with the school's Food and Nutrition Department to establish a scholarship program for its master's degree and doctoral candidates. At least three public health nutrition scholarships are awarded each year — two to master's candidates and one to a doctoral student, chosen on a merit-cum-means basis. Applications are screened by the director of Lady Irwin, the head of the Food and Nutrition Department and an instructor nominee. The school's scholarship committee then approves the final candidate list and presents the recommendations to CECHE for review.

Scholarship Recipients

To date, 19 students have been awarded scholarships.

The recipients for 2007 were: Neha Gupta, Charu Tyagi and Aashima Garg.



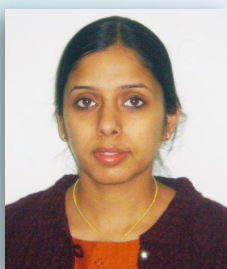
M.Sc. student **Neha Gupta** is studying the interrelationship between maternal knowledge, feeding practices and the nutritional status of pre-schoolers.

Master's candidate **Charu Tyagi** is researching the role of diet and lifestyle as risk factors in the development of type 2 diabetes mellitus in adult Indian males.



Doctoral candidate **Aashima Garg** is conducting a four-phase study on the impact of community-based nutrition counseling on improving the complementary feeding practices of infants in rural Uttar Pradesh.

She has recorded noticeable advancement in the practices in the six intervention villages and better service delivery of existing health care providers at the grassroots level.



The recipients for 2006 were: Neha Manchanda, Shreya Arora and Vani Sethi.

M.Sc. student **Neha Manchanda** investigated the “causes and management of iron deficiency anemia in girls aged 18-21 years,” assessing hemoglobin levels before and after intervention; investigating dietary intake patterns and food-related behavior; and providing dietary counseling and supplements to anemic subjects.



Shreya Arora's M.Sc. thesis looked at the effect of household storage on iodine levels of double fortified salt (DFS), and addressed the problem of Iodine Deficiency Disorders and Iron Deficiency Anaemia in India. As part of her research, Ms. Arora also conducted a sensory evaluation of different foods cooked with DFS and assessed consumer acceptability.



Doctoral student **Vani Sethi** is investigating “the effect of counseling by grandmothers on young infant feeding, care and growth in poor rural households of district Agra, Uttar Pradesh.” An evaluation of intervention in 2005-06 showed that the practice of timely initiation and exclusive breastfeeding has increased by 76.1 percent and 21.1 percent respectively.



PUBLIC HEALTH PROGRAMS AND POLICIES

Tobacco-Control Program Achieves Landmark

Six years ago, all 2,500 families in the South Indian village of Pattur supported themselves by rolling beedis, small, unfiltered cigarettes. Today, only 250 families earn their living this way, with a 50 percent drop in beedi rolling in 2006 alone — to 10 percent of what it was five to six years earlier. Meanwhile, the number of companies that collect Pattur beedis has dropped from five to three in the last year, and the incidence of beedi smoking in the village is down 60 percent.



Roshni celebrates World No Tobacco Day in Chennai, southern India.

CECHE, with Chennai-based NGO Roshni, is conducting an anti-tobacco program in Pattur. The program provides vocational training and job placement in non-tobacco trades for families. It also offers incentives to refrain from tobacco-related activities. During 2006, for example, the partners celebrated World No Tobacco Day and awarded scholarships to nearly 150 boys, girls and college students with no smoking or beedi

rolling in their families. That same year, nearly 300 villagers participated in prize-filled Roshni-sponsored competitions and oratorical contests.

In 2007, Roshni-CECHE self-help groups comprising 20 women each continued their weekly sessions to train Pattur families in smoking cessation, nutrition, health and hygiene. Sponsoring regular activities such as health camps, these groups provide valuable vocational training in non-tobacco trades like tailoring and focus on income-generating skills such as using micro-credit programs. Employing print and electric media to reach its audience and promote its goals throughout 2007, Roshni celebrated World No Tobacco Day in May with the Anti-Tobacco Clinic, Cancer Institute and Tuberculosis Research Center of Chennai,

attracting hundreds of participants via a mass-media campaign complete with a poster competition and a health-education drive targeting teens.

Over the last two years, from 2005 to 2007, more than 200 individuals and 20 families have left beedi production for garment design, tailoring and embroidery, leather goods production and grocery/shop businesses. The partners have also facilitated enforcement of laws against smoking in public places.

Smoking-Cessation Program for Russian Physicians Confronts Challenge

CECHE and the Russian Cancer Research Center (RCRC), in partnership with the Moscow Public Health Department and the Moscow Medical Academy, are administering a program to educate, motivate and train Russian physicians to champion smoking cessation among patients. Since late 2003, the comprehensive program has been conducting baseline surveys to assess the problem, sponsoring seminars in smoking-cessation counseling, and holding courses on tobacco-related health problems, control measures and dependence treatment.



Responses of Health Professionals to the Question: Are You Advising Your Smoking Patient to Quit Smoking? (%)

SUBGROUPS	N	Never	Sometimes %	Always
Current smokers	114	13.2	53.5	33.3
Ex-smokers	62	6.5	43.5	50
Never smoked	309	6.2	29.1	64.7
All	485	7.8	36.7	55.5

Clinic director Dr. Levshin leads a motivational session for Russian physicians on smoking cessation.

During 2005 and 2006, nearly 1,700 health professionals participated in 45 educational sessions conducted in 32 outpatient clinics

and 10 hospitals in and around Moscow, and in the Nyzney Novgorod and Altay regions. Nine one-day training workshops have also been conducted in Moscow, and the Moscow

and Altay regions, and approximately 800 copies of smoking-cessation guidelines for physicians have been distributed via workshops and medical bookstores. In addition, a Tobacco or Health educational training course for post-graduate students devoted to treating tobacco use and dependence was started at the Moscow Medical Academy in 2006 and continues to impact newcomers to the field. Most heartening is that the number of smokers visiting RCRC's smoking-cessation service following physicians' recommendations has more than doubled, indicating that the quantity of knowledgeable and skilled tobacco-control clinicians has expanded in the Moscow area.

Tobacco Use and Control in Armenia Faces Obstacles

In July 2006, CECHE awarded a scholarship to Dr. Karine Manukyan, head of the Scientific-Research Group of the Institute of Molecular Biology at the National Academy of Sciences of Armenia, to prepare and present a paper at the 13th World Conference on Tobacco and Health in Washington, D.C. in July 2006. The scholarship was also used to conduct an assessment for CECHE on the status of tobacco control in Armenia, with emphasis on smoking prevalence in women.

Based on surveys and research, Manukyan, who is also chairwoman of Women for Green Way for Generations, submitted her report in December 2006. It was distributed via a tobacco-control list-serv to more than 3,000 subscribers from 52 countries, and was posted on CECHE's Web site at <http://www.ceche.org/communications/armenia/armenia.html>.

According to Manukyan's research, more than 70 percent of the Armenian population smokes, and the country ranks sixth in global number of smokers, with the highest number of smokers in Europe. WHO estimates that 63.7 percent of Armenian males light up. Meanwhile, in 1999, only 1.2 percent of Armenian women smoked, according to an Armenian NSS survey. By 2005, however, about 15-30 percent of Armenian women were regular smokers, and their numbers are increasing, spurred by emancipation, improved economic conditions, and increasing female power, authority and marketing in the country.



The National Tobacco Control Program was adopted in Armenia in December 2004 after being twice rejected by lawmakers, and in January 2005, the first comprehensive national tobacco-control law was signed. Yet despite the mandatory adoption of health warning labels and restrictions of smoking in public places and cultural, educational and health institutions, people smoke everywhere, and in Yerevan and Armenia as a whole, much remains to be done at the enforcement as well as public information and awareness level.



Complicating tobacco-control efforts, smoking prevalence is high among Armenian physicians (above 40 percent in 2005), and pro-tobacco influence in movies, radio and TV is bold and aggressive.

Discussed at length among Armenian professionals and policy makers, Manukyan's findings have stimulated new anti-tobacco activities in the country, including laws on tobacco control and implementation strategies that are directly benefiting the Armenian public.

CSPI and CECHE Promote Healthy Hearts Campaign

Cardiovascular disease (CVD) remains the leading cause of death in the United States, with coronary heart disease and stroke killing some 650,000 each year, and medical procedures, statins and other medications for these illnesses costing Americans \$90 billion annually.

Given the federal government's and industry's disappointing response to this health crisis, Center for Science in the Public Interest (CSPI) is pursuing a public-health approach to preventing and treating CVD through its CECHE-supported "Campaign for Healthy Hearts." In addition to encouraging a more plant-based diet, CSPI is pursuing:

- a total ban of partially hydrogenated vegetable oil (the main source of trans fat)
- a reduction in the sodium levels of prepared and processed foods
- less fat in meat and dairy products.

Culminating a 10-year effort by CSPI, in January 2006, the labeling of trans fat on Nutrition Facts labels became mandatory. CSPI also petitioned the Food and Drug Administration (FDA) to require restaurants to disclose the use of shortenings that contain trans fat, and launched an interactive Web site, www.transfreeamerica.com. Meanwhile, strategically pub-

licized CSPI studies and efforts have shamed many and prompted the University of Michigan, a number of hospitals and even the USDA to switch to healthier options.

Currently, CSPI is pressing the food industry to voluntarily switch to liquid oils like soy and canola, and not to substitute butter, palm oil and other artery-clogging fats. It is also generating congressional pressure to persuade the FDA to take regulatory actions to reduce trans-fat consumption, and is working at the city and state levels to limit trans fat in schools and government facilities. (So far, the boards of health in New York City, Philadelphia, Brookline (MA), and Montgomery County (MD) have banned trans fat in restaurants, with other states and cities considering similar measures).



Beginning 25 years ago, CSPI also began pressuring the FDA to require better labeling of sodium. But even with comprehensive labeling, Americans are consuming about twice as much sodium as is desirable. Identifying trends in sodium consumption and making policy recommendations to reduce sodium intake, CSPI published “Salt – the Forgotten Killer” and “Salt Assault: Brand-Name Comparisons of Processed Foods.” Meanwhile, CSPI’s July 2006 letter urging Health and Human Services’ secretary to take specific steps to lower the salt content in foods was co-signed by 21 respected physicians and public health experts.

CSPI works closely with World Action on Salt and Health, an international coalition of medical experts waging a global campaign against salt. It also partners with national professional associations: At CSPI’s urging, the American Medical Association passed a resolution emphasizing the need to achieve 50 percent sodium reductions for processed and restaurant foods and urging the FDA to revoke the “generally regarded as safe,” or GRAS status, of salt.

In July 2007, several prominent health care organizations co-signed a letter with CSPI to the chairman of the Energy and Commerce Health Subcommittee urging him to hold a hearing on salt reduction in the American diet. And most recently, CSPI co-sponsored a conference with the largest U.S. food-industry trade association during which health advocates and industry representatives explored ways to reduce sodium in packaged and prepared foods, and laid the groundwork for further efforts to limit sodium and improve the healthfulness of the

food supply. Perhaps in response, a long-overdue hearing on sodium reduction was held by the FDA in November 2007.

Project Trains NGOs on Food, Health

In 2004, CECHE began collaborating with CSPI on a Global Dietary, Food Marketing, and Health Project to combat growing public health problems in developing countries and countries in economic transition. The project focuses on problems that are caused, in part, by the marketing practices of transnational food corporations, and it is raising awareness among NGOs about the health effects of junk-food marketing in Asia, Africa, Latin America and Eastern Europe. The project is also identifying local nonprofits interested in maintaining healthful indigenous diets and helping them advocate for protective health and nutrition policies.

Under the initiative, CSPI and CECHE have assembled the International Association of Consumer Food Organizations (IACFO), a network of groups supporting global efforts to prevent chronic diseases through better nutrition and the work of multi-national consumer-advocacy organizations on food-safety and nutrition issues.

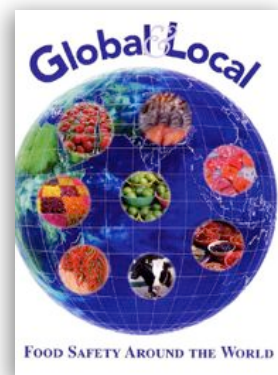
During the last 12 months, the global CSPI-CECHE project expanded membership of the IACFO to 13 members, ensuring that all regions of the world are now represented. It also



CSPI reps attend international conference in Oslo, Norway.

surveyed IACFO members for new priorities and continued to participate in WHO/ Food and Agricultural Organization nutrition and food safety activities.

During the same period, the IACFO submitted comments on the implementation of WHO's Global Strategy on Diet, Physical Activity and Health and urged Codex to play an active role in implementing the strategy by amending current standards and devising new ones. The network also surveyed the marketing practices of multinational food companies and issued press releases on global nutrition issues, such as the rising incidence of obesity and diet-related disease, including Type II Diabetes.



In addition, IACFO and CSPI presented a paper in Oslo, Norway in 2006 entitled “WHO Forum on Marketing for Food and Nonalcoholic Beverages to Children,” with CSPI leading American NGO participation in the EU/US platform on Diet, Physical Activity and Health in Brussels, Belgium in 2007. CSPI and IACFO are also coordinating national anti-obesity efforts with NGOs in India, Brazil, Thailand and the United Kingdom.

Safe Food International Project Concludes

In June 2005, Safe Food International (SFI), a joint project of CSPI and CECHE, hosted the first-ever international meeting of consumer and public health organizations to discuss and draft



a set of recommendations for food safety and food-bioterrorism preparedness. During the three-day meeting at WHO headquarters in Geneva, 32 delegates from 25 different countries representing every region of the world produced “Guidelines for Consumer Organizations to Promote National Food Safety Systems,” a document to help NGOs monitor their governments’ food safety activities and advocate adequate systems for detecting, preventing and managing food-borne illnesses and food-related bioterrorism outbreaks. Released in November 2005 and circulated internationally, the report can be found at

www.safefoodinternational.org/guidelines_for_consumer_organizations_20050727.pdf.

Also resulting from the meeting was “Global & Local,” a report describing food-safety issues unique to seven different geographic regions. This report informed and sensitized meeting delegates to food-safety concerns specific to their areas, and can be found at

www.safefoodinternational.org/international_report_051905.pdf. The meeting also:

- Initiated the first major discussions among NGOs – and between NGOs and the WHO/Food and Agriculture Organization – on issues of food safety and food bioterrorism, providing a unique networking opportunity for public-health groups.
- Increased membership in the IACFO, a consumer-group coalition pioneering efforts to ensure that the consumer’s voice on food policy is heard by international agencies.

The partners hope that, although concluding, SFI will live on through regional conferences designed to increase the number of countries discussing the “Guidelines” and efforts to develop better tools for evaluating national programs and to formulate regional action plans.

PUBLIC EDUCATION THROUGH MASS MEDIA

Global Soft Drinks Campaign Combats Consumption

The prevalence of overweight and obesity is increasingly becoming a global worry, with an upswing leading to increases in diet-related diseases and mortality in less developed countries. Surges in soft drink consumption contribute to this problem. In fact, less developed countries now represent the largest growth markets for soft drink producers, as consumption has leveled off, or slightly declined, in the United States and parts of Europe. Consumers in countries such as Mexico, Egypt and China are currently being targeted by the soft drink industry with aggressive marketing campaigns, sometimes aimed at children and youth.



To raise awareness of the growing problem and foster improvement, CECHE is collaborating with Center for Science in the Public Interest (CSPI) on its Global Dump Soft Drinks Campaign. The initiative, launched in October 2007 at the Consumers International Conference in Sydney, aims to reduce consumption of high-calorie carbonated beverages worldwide to improve diet and health. It seeks to establish relationships with industry leaders in areas where progress can be made and to provide communications points for advocates, including a detailed Web site, www.dumpsoftdrinks.org, which spotlights the program's mission, features a full description of the health repercussions of soft drink consumption and showcases prominent international media coverage surrounding the initiative.

CECHE has specifically provided support for CSPI's collaboration with VOICE, a consumer-advocacy coalition in India that is among more than a dozen NGOs partnering with CSPI to "dump soda." Citing rising rates of overweight and obesity and the increased risk of heart disease and diet-related illnesses, VOICE has urged India's government to safeguard the health of the food supply and Indian youth by curbing soft drinks marketing, particularly to children. VOICE has also demanded the promotion of lower-sugar products; a reduction in portion sizes; a limit on sponsorships; a value-added tax on soft drinks to fund physical activity and nutrition education programs; and mandatory calorie labeling and serving sizes. In addition, VOICE is working with CECHE and CSPI on a nationwide push to

remove soft drinks from Indian schools. The coalition is bolstering its efforts by mounting local media campaigns and putting pressure on industry.

On the international front, in January 2008, CSPI reported the launch of a number of “dump soft drinks” movements, including one in New Delhi supported by the Indian Federation of Consumer Organizations; one in Malaysia organized by the Consumers Association of Penang; and another in Stockholm under the auspices of the Swedish Consumers Coalition. National campaigns are also underway in Mexico, Australia, Uganda and Canada.

As part of these initiatives, the consumer organizations wrote letters calling on Coca-Cola and PepsiCo to:

- Cease all marketing of sugar-laden or caffeinated beverages to children under 16
- Stop selling sweetened beverages, including sports drinks and non-carbonated fruit-flavored beverages and teas, in all public and private elementary, middle and high schools
- Display prominently per-serving calorie contents on front labels of drink containers



• Include rotating consumer alert messages on the labels of sugary beverages

• Limit sponsorships promoting physical activity and health to blind trusts overseen by government agencies.

The letters also called on the companies not to op-

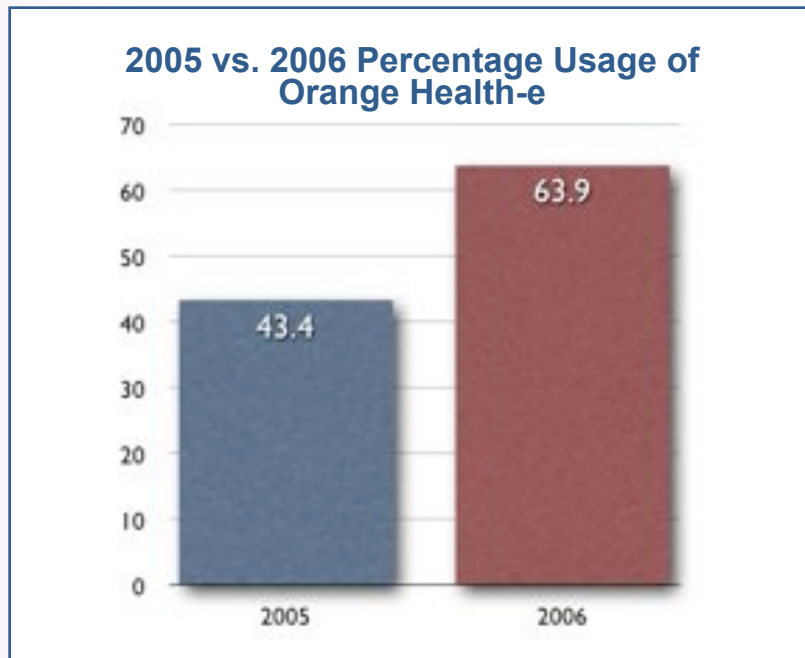
pose small taxes on soft drinks, the revenues from which could be used for health-related programs. Soft drinks are already taxed in some jurisdictions in the United States and Canada, and last year in America, Coke and Pepsi actually supported legislation that would have removed non-diet soft drinks from schools. Coca-Cola has also agreed to front-label disclosure of calorie content in Australia.

Advances like these are a step in the right direction, but they are often confined to one country in response to national political pressures. Going forward, CSPI, CECHE and the campaign’s partners will continue their international push to limit the marketing and sale of soft drinks worldwide to reduce exposure and consumption, and improve global health.

Electronic Health Newsletter Increases in Popularity

In spring 2005, the S.I. Newhouse School of Public Communications at Syracuse University, with support from CECHE, unveiled “Orange Health-e,” an electronic newsletter intended to provide Syracuse University students with preventive health advice and healthy tips about nutrition, exercise and risky-behavior avoidance.

From April 6 through May 10, 2005, the school conducted an electronic survey among 6,000 randomly selected students to assess their primary sources of health information as well as the newsletter’s usage and helpfulness. This survey yielded a 5 percent response rate and revealed that friends were the most widely used source of health information, closely followed by parents and the



Internet, and that the newly launched electronic newsletter rated 4.8 on helpfulness on a 1-10 scale and was used by 43.4 percent of the students.

A second electronic student survey was conducted 12 months later from April 4 through April 25, 2006 among 4000 randomly selected students. A total of 323 responses was obtained yielding a response rate of 8.1 percent. Like the first survey, demographics showed that the sample skewed female (71.5%) and included more graduate students (28.1%).

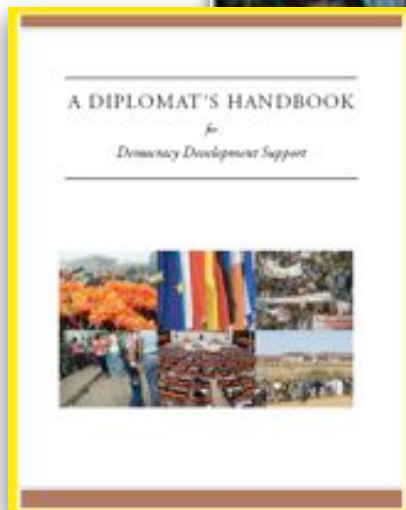
Highlights of this survey showed parents to be the most helpful as well as the most widely used source of health information, with nine out of 10 students rating their parents 7.0 on a 1-10 helpfulness scale. The family doctor tied with parents on the helpfulness rating and was used by 87.8 percent of the student respondents. The third most helpful source of health information according to this survey was the Internet (6.7 helpfulness mean). This was followed by health-focused coursework (6.2 helpfulness mean), which involved only 50.2 percent of the students. Meanwhile, the newsletter’s helpfulness rating increased 1.1 points to 5.9, and its usage among the students rose more than 20 percentage points to 63.9 percent. These results indicated that the electronic health newsletter broadened in its reach and helpfulness, and was therefore effective in serving the student population.

PUBLICATIONS AND DISSEMINATION

Global Democracy and Health Project Leads to Congressional Legislation

With its partners, CECHE made notable strides forward in the past two years in its efforts to support people around the world striving for human rights and democracy.

In 2003, CECHE Vice Chairman Ambassador Mark Palmer published *Breaking Down the* based on this Senate on July W. Bush on Democratic Val-Endowment for islation in this strengthens U.S.



lished *Breaking the Real Axis of Evil: Bring World's Dictators by 2025*. Legislation book was passed by the U.S. House and 30, 2007 and signed by President George August 3, 2007. Entitled "Advancing ues," it was described by the Carnegie Peace as the most important piece of leg- field in two decades. The act significantly government and non-governmental de-

mocracy programs. Among other things, it requires that the State Department, working with local democrats and civic activists, for the first time develop written strategies for the promotion of democracy in all countries which are currently non-democratic or transitioning to democracy.

Legislation co-sponsors, senators Joseph Lieberman (I-CT) and John McCain (R-AZ) both stated that the ADVANCE Democracy Act strengthens America's ability to promote freedom, the rule of law and social modernization. Their sentiments were echoed by Rep. Frank R. Wolf (R-VA), co-chair of the Congressional Human Rights Caucus, and Rep. Tom Lantos (D-CA), the recently deceased chairman of the House Foreign Affairs Committee.



CECHE Vice Chairman Ambassador Mark Palmer moderates a session on human rights and democracy challenges in China.

Meanwhile, China has more than 60 percent of the world's people still living in a Not Free country. CECHE support enabled Freedom House, America's oldest global human rights organization, to launch a program focused on China. The program initiated with a day-long conference in Washington, D.C. on September 24, 2007. Experts from across the United States and China gathered to examine the Asian giant's internal repression and growing support for other non-democratic countries around the

world, with CECHE's Mark Palmer moderating one of the sessions. Going forward, CECHE will continue to work with the NGO to develop its China program.

Another CECHE initiative in the democracy field received widespread international support in 2007: a guide for diplomats on democratic development support. Long concerned that diplomats from democratic countries frequently shy away from supporting movements for democratic change, whether students in Iran, monks in Burma or women in the Arab world, former ambassador and CECHE Vice Chairman Mark Palmer proposed that a *Diplomat's Handbook for Democratic Development Support* be created by the Community of Democracies (which brings together the world's 120 democratic governments and nongovernmental organizations from free and not free countries).

A leading Canadian diplomat, Ambassador Jeremy Kinsman took charge of compiling successful case studies of diplomatic assistance and composing a tool box of practical measures. With financial contributions from the foreign ministries of India, Canada and the United States, and from private sources, including Princeton University, Freedom House and the International Center on Nonviolent Conflict, an initial draft of the handbook was completed and positively received by the Ministerial Meeting of the Community in Mali on November 14-16, 2007.

The final version of the *Diplomat's Handbook for Democratic Development Support* will premier in spring 2008 (www.diplomatshandbook.org). It will be distributed to all embassies and foreign ministries of the democratic states, and will be used for training and guidance. NGOs also have indicated an interest in using it in their work.

Global Health & Environment MONITOR Concludes

The *Global Health & Environment MONITOR* first appeared in May 1993 to communicate worldwide the gravity of the health crisis in Central and Eastern Europe and the Newly Independent States, and to report on programs being implemented to combat this crisis. For 13 years, the once printed and then online biannual publication increased its circulation to 10,000, adding an e-mail database of more than 3,000 subscribers to reach its target audience of health professionals and policy-makers in more than 50 countries through an international collaboration with the World Health Organization (WHO).

In Winter 2006, CECHE decided to conclude publication of the *MONITOR* and launched a new online publication entitled *In Focus* (see below).

The spring 2006 issue was the final issue of the *MONITOR*. It featured the relationship between dietary factors and cancer, examining the current state of scientific knowledge and rationale for dietary recommendations to reduce cancer risk.

Archived issues of the *MONITOR* can be found on CECHE's Web site at <http://www.ceche.org/mol>.



In Focus Expands CECHE's Online Presence

In late 2006, CECHE launched a new online series entitled *In Focus*. Aimed at analyzing and promptly disseminating the latest information on key health and lifestyle issues, *In Focus* encompasses comprehensive scientific articles on major public health topics by leading authorities, accompanied by an interview with an expert. It is featured on CECHE's Web site, www.ceche.org (in addition to having its own site,

<http://www.ceche.org/publications/infocus/fall2007/index.html>), and it is disseminated to an e-mail list-serv database of more than 3,000 subscribers, who are health professionals and policy-makers in approximately 50 countries.



Unveiled in winter 2006, the first issue focused on eating green, discussing the book *Six Arguments For A Greener Diet*, and explained why eating fewer animal and more plant foods protects our health, planet and livestock. The spring 2007 issue, “Global Health in Transition,” addressed major gains in health and life expectancy in the West in the 20th century and discussed epidemics of chronic diseases alongside poverty in developing countries. It recommended a prevention-oriented global health agenda to forestall the onslaught of death and disability.

The winter 2007 issue highlighted the World Anti-tobacco Atlas of 2006, which is published by the American Cancer Society and disseminated globally. Lead author Judith Mackay presented a summary of the major issues in the atlas and hosted a Q&A. CECHE’s anti-tobacco programs were also summarized in the CECHE News section.

PARTNERS IN ACTION

CECHE is indebted to dedicated professionals in many institutions, organizations and government agencies around the world for their assistance with and support of CECHE programs. We would like to thank and name our major partners and acknowledge the hundreds of other organizations that have made valuable contributions to CECHE's efforts since its inception in 1990.

BULGARIA

National Center of Hygiene & Medical Ecology, Sofia

CANADA

Nutrition Res. Div., Health & Welfare Canada, Ottawa
University of Western Ontario, London

CROATIA

Rebro Clinical Hospital, Zagreb
Ruder Boskovic Institute, Zagreb

CZECH REPUBLIC

Center For Independent Journalism, Prague
Czech State Television, Prague
European Foundation for Family Studies, Prague
Institute of Clinical & Experimental Medicine, Prague
Litomerice District Hospital, Litomerice
National Centre for Health Promotion, Prague
National Institute of Public Health, Prague
NOVA Independent Television, Prague
Open Society Fund, Prague
US Agency for International Development, Prague

DENMARK

WHO, Regional European Bureau, Copenhagen

GREECE

Athens School of Hygiene, Athens

HUNGARY

Children's Rehabilitation Center, Debrecen

Hungarian Institute of Cardiology, Budapest

Hungarian State Television, Budapest

Independent Ecology Center, Budapest

Institute of Public Health, Budapest

Nat'l Instit. of Food, Hygiene & Nutrition, Budapest

National Institute of Health Education, Budapest

National Institute for Health Promotion, Budapest

National Public Health Center, Budapest

Semmelweis Medical University, Budapest

Soros Foundation, Budapest

US Agency for International Development, Budapest

US Information Agency, Budapest

INDIA

INDCARE, New Delhi

Lady Irwin College, New Delhi

Minis. of Health Services, Family Welfare, Gov't of Punjab

Roshni, Pattur, South India

Society for Service to Voluntary Agencies, New Delhi

Technical Teacher's Training Institute, Chandigarh

POLAND

Independent Polish Television (NTP), Warsaw

National Institute of Cardiology, Warsaw

Nat'l Research Instit. of Mother and Child, Warsaw

Polish TV, Warsaw

State Environmental Protection Inspectorate, Katowice

ROMANIA

Copsa Mica Hospital, Copsa Mica

Institute of Hygiene & Public Health, Bucharest

RUSSIA

All-Russia State Radio & Television, Moscow
Association of Physicians of the Don, Rostov-on-Don
Consumer's Union of Russia, St. Petersburg
Health & Environment Foundation, Moscow
Internews Network, Moscow
Ostankino Television Network, Moscow
Research Center for Preventative Medicine, Moscow
Russian Academy of Medical Sciences, Moscow
Russian Cancer Research Center, Moscow
Russian Institute of Nutrition, Moscow
US Agency for International Development, Moscow
World Learning Inc., Moscow

SLOVAKIA

International Center for Family Studies, Bratislava
National Cancer Center, Bratislava
National Instit. of Hygiene & Epidemiology, Bratislava

SWITZERLAND

International Baby Food Action Network, Geneva
World Health Organization (WHO), Geneva

UNITED KINGDOM

Central European Media Enterprises, Ltd., London
Skyscraper Productions, London
World Cancer Research Fund, London

UNITED STATES

Advocacy Institute, Washington, DC
Albany Medical College, Albany, NY
American Cancer Society, New York, NY
American Heart Association, Chicago, IL
American Instit. for Cancer Research, Washington, DC
American Lung Association, New York, NY
American Public Health Association, Washington, DC
Arthritis Foundation, Metro DC Chap., Washington DC

Cancer Research Center of Hawaii, Honolulu
Capital Systems Group, Inc., Rockville, MD
Cardiovascular Research Institute, UCSF, CA
Cause Kids Count, Washington, DC
Center for Science in the Public Interest, Wash., DC
DC Peaceable Schools, Washington, DC
DeWitt Wallace Center, Duke Univ., Durham, NC
Division of Nutrition, Cornell Univ., Ithaca, NY
Emory University, School of Medicine, Atlanta, GA
Environmental & Occupational Health Sciences
Institute, Piscataway, NJ
Essential Information, Washington, DC
Freedom House, Washington, DC and New York, NY
Garden Resources of Washington, Washington, DC
Garfield Elementary School, Washington, DC
Georgetown Univ. Child Development Ctr, Wash., DC
The Independent Journalism Fdation, New York, NY
National Cancer Institute, Bethesda, MD
National Ctr. for Tobacco-Free Kids, Washington, DC
Nat'l Endowment for Democracy, Washington, DC
Nat'l Heart, Blood & Lung Instit., NIH, Bethesda, MD
NBC/PKO Television Ltd., New York, NY
New York Academy of Medicine, New York, NY
The New York Times, Editorial Dpt., New York, NY
School of Public Health, Univ. of Mass., Amherst
Stanford University, Center for Research in Disease
Prevention, Palo Alto, CA
Syracuse University, Newhouse School of Public
Communications, Syracuse, NY
Time-Warner International, New York, NY
Univ. of Pittsburgh Health Sciences Center, PA
Univ. of the District of Columbia, Washington, DC
US Agency for Internat'l Developmt, Washington, DC
US Chamber of Commerce-CIPE, Washington, DC
US Dpt. of Health & Human Services, Wash., DC
US Environmt'l Protection Agency, Washington, DC
World Federation of Public Health Assns., Wash., DC
World Learning, Inc., Washington, DC

FINANCIAL SUPPORT

Since 1990, CECHE's efforts have been made possible by support from the following organizations and individuals:

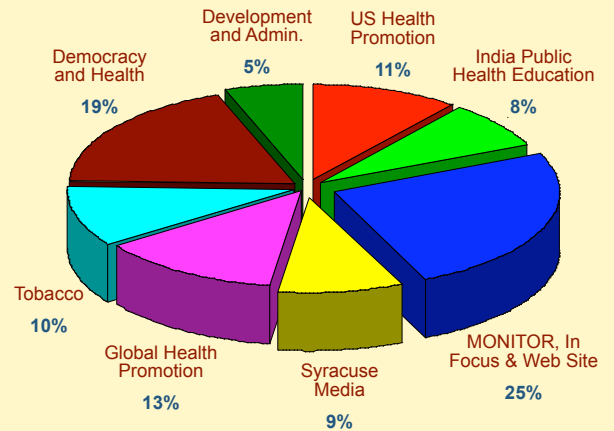
- ◆ **American Cancer Society** – Atlanta, Georgia
- ◆ **American Heart Association** – Dallas, Texas
- ◆ **Agency for International Development** – Through the Univ. of California, San Francisco
- ◆ **Agency for International Development** – Through World Learning, Inc., Washington, DC
- ◆ **Ambassador Ronald Lauder** – New York, New York
- ◆ **American Institute for Cancer Research** – Washington, DC
- ◆ **Anonymous Philanthropic Sources** – The United States
- ◆ **Capital Systems Group, Inc.** – Rockville, Maryland
- ◆ **CECHE Board & Council Members and Friends** – United States, Europe, Asia
- ◆ **Central European Development Corporation** – New York, New York
- ◆ **DC Department of Health; Addiction Prevention & Recovery Admin.** – Washington, DC
- ◆ **Fannie E. Rippel Foundation** – Annandale, New Jersey
- ◆ **Flack + Kurtz and Integ International Consulting Engineers** – Berlin, New York, London
- ◆ **March of Dimes, National Capital Area** – Washington, DC
- ◆ **National Center for Tobacco-Free Kids** – Washington, DC
- ◆ **Open Society Institute** – New York, New York
- ◆ **Pitney Bowes, Inc.** – Stamford, Connecticut
- ◆ **Procter & Gamble** – Germany
- ◆ **Rockefeller Family and Associates** – New York, New York
- ◆ **Skyscraper Productions** – London, United Kingdom
- ◆ **Soros Foundation-Hungary** – New York, New York
- ◆ **The American Hungarian Friendship Forum** – New York, New York
- ◆ **TRUST for Mutual Understanding** – New York, New York
- ◆ **US Environmental Protection Agency** – Washington, DC
- ◆ **W.K. Kellogg Foundation** – Battle Creek, Michigan
- ◆ **World Bank, InfoDev Trust Fund** – Washington, DC

FINANCIAL POSITION

Balance Sheet

	Dec. 31, 2007	Dec. 31, 2006
Current Assets		
Cash and Investments	\$545,827	\$656,749
Grants Receivable & Advances	0	0
Pledges Receivable	0	0
Total Current Assets	\$545,827	\$656,749
Fixed Assets		
Furniture & Equipment	\$14,850	\$14,850
Less: Accumulated Depreciation	(14,850)	(14,434)
Net Fixed Assets	—	\$416
Total Assets	\$545,827	\$657,165
Liabilities and Net Assets		
Unrestricted Assets	\$545,827	\$657,165
Temporarily Restricted Assets		
Accounts Payable	0	0
Total Liabilities and Net Assets	\$545,827	\$657,165

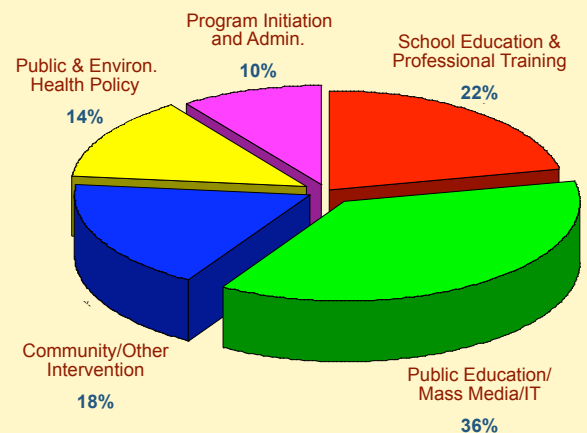
PROJECTS Expenses: Fiscal Year 2007



Income Statement

	Dec. 31, 2007	Dec. 31, 2006
Unrestricted Income		
Contributions and Grants	21,369	27,134
In-Kind Income	108,125	130,587
Investment Income	44,585	51,998
Subtotal, Unrestricted Income	\$174,079	\$209,719
Temporarily Restricted Income	\$0	\$0
Total Income	\$174,079	\$209,719
Program Expenses		
Program Expenses	\$84,928	\$91,818
In-Kind Expenses	108,125	130,587
Management and General	4846	5158
Fund Raising	508	599
Total Expenses	\$198,407	\$228,162
Net Assets, Beginning of the Year	\$657,165	\$614,757
Unrestricted	657,165	614,757
Temporarily Restricted	0	0
Change in Net Assets	(\$111,338)	\$42,408
Net Assets, End of the Year	\$545,827	\$657,165
Unrestricted	545,827	657,165
Temporarily Restricted	0	0

PROGRAM ACTIVITY Expenses: Fiscal Year 2007



Notes to Financial Statements

1. Description of the Organization:

The Center for Communications, Health and the Environment (CECHE) works with public health and medical experts, scientists, democracy promoters, educators and policy-makers in North America, Asia, Central and Eastern Europe, and other parts of the world. The organization addresses health and environmental needs, including global health and democracy issues, in cooperation with local experts, and reports on them.

CECHE is exempt from federal income tax under Section 501(C)(3) of the Internal Revenue Code and was incorporated under the nonprofit status of the District of Columbia on October 25, 1990, as the Central European Center for Health and the Environment. During 1996, CECHE formally changed its name to the Center for Communications, Health and the Environment.

2. Significant Accounting Policies:

CECHE records revenues and expenses on the **accrual basis** of accounting. All accruals are recorded on the balance sheet. The preparation of financial statements in conformity with generally accepted accounting principles requires management to make **estimates** and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates. For purposes of preparing the statements of financial position and the cash flows, CECHE considers all investments purchased with a maturity of three months or less to be **cash equivalents**.

Pledges receivable represent promises to give, which have been made by donors but not yet received by CECHE. Pledges that are not received in the subsequent year are discounted using the estimated rate of return, which could be earned if such contributions had been made in the current year.

Furniture and equipment are recorded at cost or estimated fair market value at the time donated. Depreciation on equipment is computed over an estimated useful life of five years using the straight-line method.

CECHE receives **donated goods and services**, which are used in its program activities. Donated goods and services include the use of office facilities and equipment, publishing and broadcasting services, and program development and management services. Donated goods and services are recorded at their fair market value at the time received and are reported as in-kind contributions and in-kind expenses on the statement of activities and the supplemental schedule of expenses by program.

Net assets consist of *Unrestricted Net Assets*, which are neither permanently restricted nor temporarily restricted by donor-imposed stipulations, and *Temporarily Restricted Net Assets*, which are associated with donor-imposed restrictions and which permit CECHE to use up or expend the donated assets as specified and are satisfied either by the passage of time or by the actions of CECHE.

3. Benefits and Related Party Transactions:

CECHE receives a significant amount of cash and in-kind contributions from its officers and directors. In addition, as of January 2001, CECHE's program director is donating full-time pro bono services to managing CECHE programs. CECHE continues to contribute to health insurance premiums for its program director. During the year ended December 31, 2007, CECHE received approximately \$62,000 in cash and in-kind contributions from its officers and directors.

CECHE entered into a rental agreement for office space in March 1999 with a related party. Rental payments made to related party are below market value, and accordingly, are considered to be an arms length transaction. The same related party reimburses CECHE for its proportional share of copier use.

DIRECTORS, COUNCIL AND STAFF

CECHE's corporate offices are in Washington, DC. The organization is managed by a board of directors, and assisted by a council.

BOARD OF DIRECTORS

Sushma Palmer, D.Sc. (Chair)

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CECHE
Washington, DC*

Ambassador Mark Palmer (Vice Chair)

*President and Chief Executive Officer
Capital Development Company
Washington, DC*

Dr. C. Wayne Callaway (Director)

*Internal Medicine, Endocrinology and
Metabolism
George Washington University
Washington, DC*

Leonard Silverstein, Esq. (Director)

*Silverstein and Mullens, PLLC
Washington, DC*

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and Academic Programs
Director, International Medical Affairs
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Pittsburgh, Pennsylvania*

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*Dean, School of Public Health
University of Massachusetts
Amherst, Massachusetts*

Bernard Goldstein, MD

*Director, Dept. of Environmental and Com-
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Robert Wood Johnson Medical School
Piscataway, New Jersey*

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*Cardiovascular Research Institute
University of California, San Francisco*

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*International Center for Civil Society Law
School of Law, Catholic Univ. of America
Washington, DC*

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Cancer Research Center of Hawaii
Honolulu, Hawaii*

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*Director, Child Development Center
Georgetown University
Washington, DC*

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Athens School of Public Health
Athens, Greece*

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*Copsa Mica Hospital
Row City, Romania*

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*Deputy Director
Institute of Nutrition and Food Hygiene
Chinese Academy of Preventive Medicine
Beijing, China*

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*President
Health and Environment Foundation
Moscow, Russia*

Mihaly Kokeny, Ph.D.

*Parliamentary Secretary of State
Hungarian Ministry of Welfare
Budapest, Hungary*

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*Russian Institute of Carcinogenesis
Russian Academy of Medical Sciences
Moscow, Russia*

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*Director
Hungarian National Institute for Health
Promotion
Budapest, Hungary*

Rudolf Poledne, Ph.D.

*Associate Professor of Biochemistry
Institute for Clinical and Experimental
Medicine (IKEM)
Prague, Czech Republic*

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*Associate Professor
National Center of Hygiene and Medical
Ecology
Sofia, Bulgaria*

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*Lecturer, Lady Irwin College
New Delhi, India*

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*Deputy Head, Health Promotion Dept.
National Institute of Cardiology
Warsaw, Poland*

David Zaridze, MD

*Director
Russian Institute of Carcinogenesis
Russian Academy of Medical Sciences
Moscow, Russia*

STAFF & CONSULTANTS

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Kathy Lewis, Administrative & Publications Consultant

Valeska Stupak, Editorial & Design Consultant

Fiona Chew, Syracuse University, Communications Consultant

Balagan Arumugaswamy, CPA, Consultant

Shiraz Mahyera, Volunteer Systems Manager

Rohit Tote, Web Site Consultant

A large, faded circular logo is centered in the background. The logo features the letters 'C E C H H E' arranged in a circle. Inside the circle, there are illustrations of a carrot, a tree, and a dog.

CECHE

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Email: ceche@comcast.net

Web site: <http://www.ceche.org>