

WorldVision

AUTUMN 2005

POVERTY MAKES HER SICK:

at home, at risk *in honduras*

PAGE 12

God gives the purpose.
We supply the opportunity.

You make
it happen.

You've experienced the joy of sponsoring a boy or girl living in poverty. Imagine your sense of fulfillment from helping even more children who are waiting for a sponsor. This is possible by simply giving your church friends the opportunity to become child sponsors.

A Child is Waiting gives you all the tools you need to share child sponsorship with your church. Getting your new ministry started is easy! Just send in the coupon below.

Plan now — October is
A Child is Waiting Month!



WHO WE ARE

World Vision is a Christian relief and development organization dedicated to helping children and their communities worldwide reach their full potential by tackling the root causes of poverty.

WHO WE SERVE

Motivated by our faith in Jesus, we serve the poor—regardless of a person's religion, ethnicity, or gender—as a demonstration of God's unconditional love for all people.

WHY WE SERVE

Our passion is for the world's poorest children whose suffering breaks the heart of Christ. We help secure a better future for each child by focusing on lasting, community-based transformation. We partner with individuals and communities to empower them to develop sustainable livelihoods, access to clean water, food supplies, health care, education, and economic opportunities.

HOW WE SERVE

Since 1950, World Vision has helped millions of children and families by providing emergency assistance to those affected by natural disasters and civil conflict, developing long-term solutions within communities to alleviate poverty, and advocating for justice on behalf of the vulnerable.

YOU CAN HELP

Partnering with World Vision provides many ways to honor God and put faith into action. By working together, we can make a lasting difference in the lives of children and families who are struggling to overcome poverty. To find out how you can help, see page 4, return the envelope found between pages 16 and 17, or visit www.worldvision.org.

YES! I want to make a difference by sharing sponsorship with my church!


- Please send me the **FREE** *A Child is Waiting* brochure so I can learn more about this opportunity.

Return this completed coupon in the postage-paid envelope in the center of this magazine, or mail the coupon to: World Vision, P.O. Box 9716, MS 220, Federal Way, WA 98063-9716. You may also request more information by visiting www.worldvision.org/ACHildisWaiting, or by calling 1.866.962.4453.

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 **World Vision** Building a better world for children



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ON THE COVER

Honduras, the indigenous people face grinding poverty as well as many poverty-related diseases. For 3-year-old Karita Manueles, World Vision-administered health interventions provide hope and health.
Photograph by Jon Warren

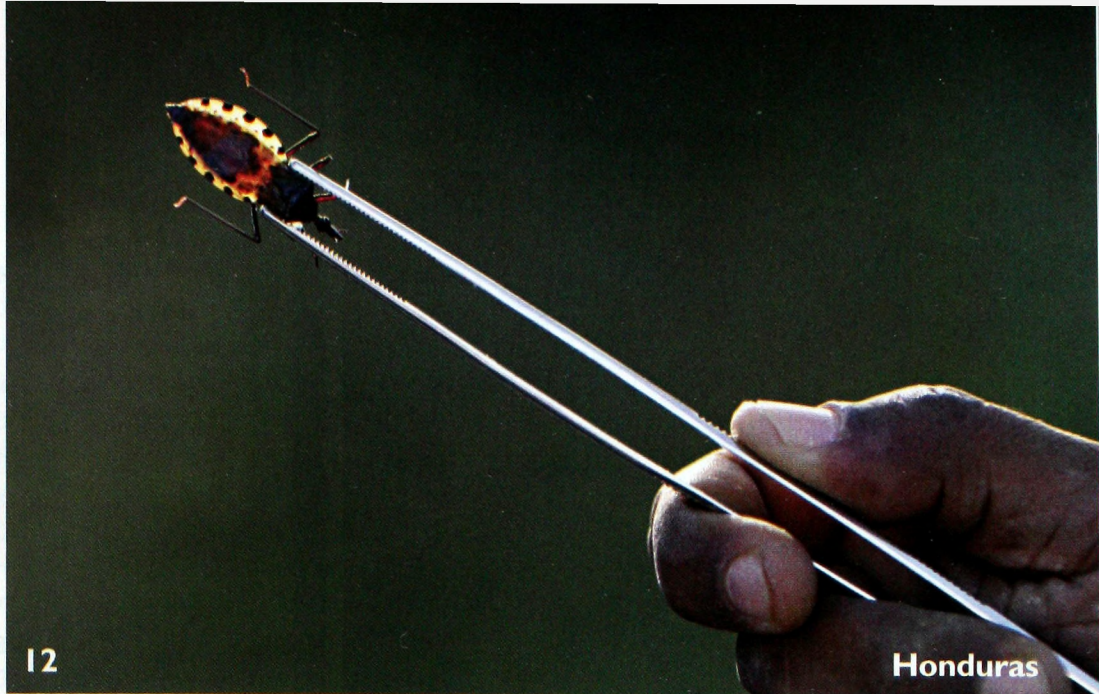
World Vision, a free quarterly publication, affirms people responding to God's call to care for the poor by providing information, inspiration, and opportunities for action, linking them to children and families in nearly 100 countries where World Vision ministers. In our effort to be careful stewards of our resources, this publication costs less than a copy to print and mail.

We welcome your comments and/or address changes. Send them to: The Editor, World Vision magazine, P.O. Box 9716, Federal Way, WA 98063-9716 or email us: wvmagazine@worldvision.org.

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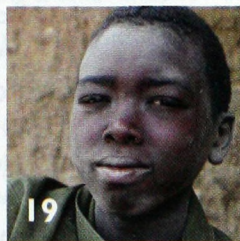


12

Honduras



8



19



28



Features

12 On the Cover: The Kiss of Death

In Honduras, a deadly disease stalks the poor—in the guise of an unassuming beetle.

19 Tackling Trachoma

An eye disease especially endemic in West Africa robs people of their sight.

24 Sickening...Heartening

Avoidable diseases kill millions of children under 5. But World Vision is responding—and you can help.

Your World Vision

8 News from the Field

Updates from Niger, Indonesia, Angola, and more; an African AIDS fighter speaks out; supplies for U.S. students make school cool.

10 In the Spotlight

TV veteran and World Vision radio host Peggy Wehmeyer goes on the record.

In Every Issue

5 From the President

Every day, 29,000 children die of hunger and preventable diseases. What are we going to do about it?

28 Where Are They Now?

Once a child alone on Ecuador's streets, Antonio Yuquilema now helps at-risk children.

30 Inspiration

Personal heartbreak leads a Rwandan pastor to his calling.

31 Reflections

AIDS awareness is breaking through in Mozambique.

[reader services

24 WAYS to take action with World Vision



1. FAMILY SPONSORSHIP

Break the cycle of poverty and sponsor a family.

2. WORLD VISION GIFT CATALOG

Give gifts such as goats, bicycles, or medicines to those in need.

3. A CHILD IS WAITING

Show your church how to make a difference through child sponsorship

4. 30 HOUR FAMINE

Get your school or youth group to join the fight against hunger. www.30hourfamine.org

5. LOVE LOAF

Help your congregation learn about poverty by collecting offerings for your church and World Vision.

6. REACHING OUT TO THE POOR

Let World Vision help your church reach out to the poor.

7. ONE LIFE REVOLUTION

Help your youth group combat HIV/AIDS. www.oneliferevolution.org

8. E-MAIL UPDATES

Get the latest on World Vision's work around the world.

9. WOMEN OF VISION

Advocate for women in developing countries. www.womenofvision.org

10. U.S. PROGRAMS

Discover what World Vision is doing for U.S. children and teens.

11. WORLD VISION ADVOCACY

Speak up for the poor and powerless. www.seekjustice.org

12. WORLD VISION REPORT

Hear World Vision's weekly news magazine on the radio or online. www.worldvisionradio.org

13. MATCHING GIFTS

Learn how your employer can match your contribution to World Vision.

14. CORPORATE PARTNERSHIP

Learn how your company can benefit by supporting World Vision.

15. GIFT PLANNING

Establish a legacy of hope by including World Vision in your will.

16. KEY CONTRIBUTORS

Donate your car, boat, or real estate to World Vision and get a tax deduction.

17. SCHOOLTOOLS

Discover ways your group can provide essential school supplies to children in need.

18. GET A KICK OUT OF SHAPE

Donate soccer balls for children in need.

19. ARTIST ASSOCIATES

Help Christian artists promote child sponsorship by volunteering at a local concert.

20. CHILD AMBASSADOR

Help find new child sponsors in your local community. www.worldvision.org/childambassador

21. VISION VILLAGES

Work alongside families in Honduras to build new homes. www.worldvision.org/visionvillages

22. TEAM WORLD VISION

Use your sports or fitness activities to help children affected by HIV/AIDS. www.worldvision.org/teamworldvision

23. EMPLOYMENT

Find out about fulfilling careers with World Vision. www.worldvision.org/employment

24. DISCOVER WHAT IT MEANS TO FOLLOW CHRIST

Simple steps to a personal relationship with Jesus.

WORLD VISION READER SERVICES

Please check the boxes below to learn more about partnering with World Vision to care for the poor. Clip this coupon and return it in the envelope found between pages 16 and 17 or mail to World Vision, P. O. Box 9716, MS 321, Federal Way, WA 98063-9716. Thank you.

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NATIONAL NEWS

Mystery Plague Kills 29,000 Schoolchildren in Single Day

President declares state of emergency. Congress closes nation's schools.

gift planning

you can do the impossible!

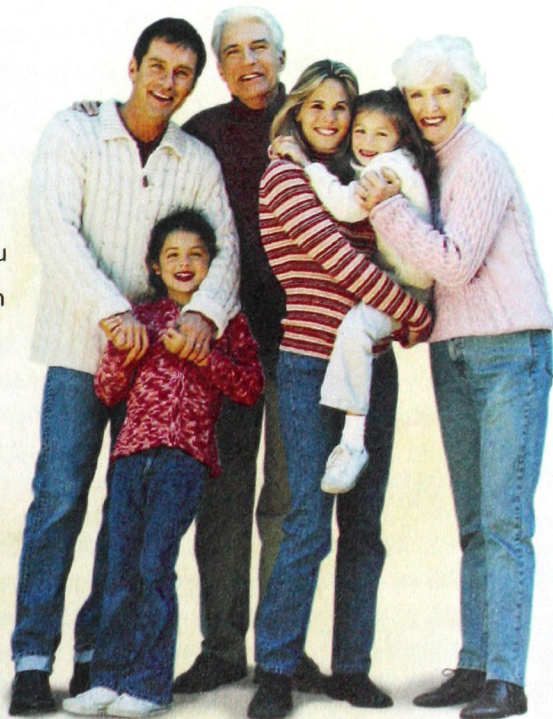
Make the difference of a lifetime

As a sponsor, you already know the joy of making a difference for one or more special children. Faithful donors like you often tell us they wish they could transform even more lives by giving a significant gift—the gift of a lifetime—but feel their dream is out of reach ...

God all things are possible."
HEW 19:26 (NIV)

Anyone can be a philanthropist

You don't need to be a financial genius or be independently wealthy to be able to give a gift of significant impact. Generous friends just like you are discovering ways to do more than ever thought possible with the help of World Vision's Gift Planning team. We can show you several meaningful and practical ways to give that significant gift you've always dreamed of giving.



...ed war on a disease that struck 50,000 children each year in the United States alone. The world had the obligation to stop the disease, and we fifty years later, only a few hundred cases of polio remain worldwide, and we are close to eradicating polio from our

...believe we can do it again. But we'll have to get a little angry first. Here are ways to channel your anger: the ONE Campaign, a historic global movement of which World Vision is a founding member. The ONE Campaign asks world leaders to commit to reducing poverty this year. Go online to sign the ONE Declaration at www.worldvision.org/one.

...to your church congregation about what you can do to help children living in poverty, such as holding a child sponsorship drive or drilling a well. Pray for these children and their families. There is no mystery what kills 29,000 children worldwide every day. And because of this, we have to do something. With your help, in 2004, World Vision supporters reached 1.1 million children to get vaccinated, provided access to clean water to 1 million people, and trained 810,000 workers in health and nutrition so they can better care of their children. We need to do more. We can do more. Don't get angry. Please help. ■



Rick Warren

See reverse for more details. Then complete the card between pages 28 and 29 to start doing the impossible!

[reader services

24 WAYS to take action with World Vision



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14. CORPORATE PARTNERSHIP

Learn how your company can benefit by supporting World Vision

15. GIFT PLANNING

Establish a legacy of hope by including World Vision in your will

16. KEY CONTRIBUTORS



Imagine your possibilities

Imagine making the impact of a lifetime. Saving hundreds of children from the grip of poverty, restoring families' health and hope, demonstrating God's love to entire communities around the world—it's all within your reach!

Let us show you how you *can* do more than you ever thought possible.

Start doing the impossible today

There's no reason to wait. Powerful gift planning tools can help you realize your giving dream. Here are just a few possibilities:

- Name World Vision in your Will or Trust.
- Name World Vision as a beneficiary of your retirement assets or life insurance policy.
- Give assets you no longer need, such as stocks, bonds, land, a boat, or jewelry.
(World Vision must first review and approve the transfer of all assets.)
- Donate your home now and continue to live in it for your lifetime.

Your dream, your gift

At World Vision, we love to help donors and friends realize the impossible. To learn how our Gift Planning team can help you discover and plan a gift that meets your unique needs and goals, please call us at **1.866.962.4453** or e-mail giftplanning@worldvision.org.

Complete the card between pages 28 and 29 today!



WORLD VISION

Please check the boxes below to let us know how you want to care for the poor. Clip this coupon between pages 16 and 17 or mail to World Vision, 1000 Federal Way, WA 98063-9716. Thank you!

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AUTUMN 05

World Vision

Building a better world for children

Nothing contained herein is intended to provide legal advice or services. It is recommended that you consult with independent legal and tax professionals to address your individual needs.

NATIONAL NEWS

Mystery Plague Kills 29,000 Schoolchildren in Single Day

President declares state of emergency. Congress closes nation's schools.

IMAGINE WAKING UP TO THIS HEADLINE. Now imagine that the very next day, it happened again—and again. Each day for weeks, more children mysteriously died. Mass hysteria would break out. World governments would mobilize a global response. Congress would hold an emergency session. There would be a media frenzy. The world would not—could not—tolerate these catastrophic losses of innocent human lives. Or would it?

In fact, the world tolerates exactly this kind of horror every single day as more than 29,000 children under the age of 5 die, most of hunger and preventable diseases. They die for lack of medicine or doctors. They die suffering and neglected. They die from simple things like diarrhea, respiratory infections, and measles, and they die of diseases virtually unheard of in America: malaria, whooping cough, or Chagas (see story, page 12).

“Rescue the perishing; don’t hesitate to step in and help. If you say, ‘Hey, that’s none of my business,’ will that get you off the hook? Someone is watching you closely, you know—someone not impressed with weak excuses.”

—Proverbs 24:11-12 (The Message)

Many of you reading this have children. Can you imagine your desperation at seeing your child slip away because of a bite from a malaria-bearing mosquito? What if all that was needed to save his life was a course of antimalarial medication costing just a few dollars? But imagine that you cannot afford this, or there is no doctor or pharmacy nearby. I have visited many communities in which more than one out of four children die before their fifth birthday.

What these children really die from is apathy and neglect. The developed world has the knowledge, medicines, treatments, and enough money to save the lives of most of these children. What is lacking is the moral outrage to do something about it.

I don’t often get angry in this column because those of you reading this magazine are doing your part. But pulling the statistics together for this editorial made me angry. Who will speak up on behalf of these children and their mothers and fathers if we don’t?

Earlier this year, the media ran stories commemorating the 50th anniversary of the polio vaccine. It brought back memories of my mother taking me to school to stand in line with hundreds of other children to be vaccinated. It was a time when the world

declared war on a disease that struck some 50,000 children each year in the United States alone. The world had the determination to stop the disease, and we won. Fifty years later, only a few hundred cases of polio remain worldwide, and we are close to eradicating polio from our planet.

I believe we can do it again. But we’ll have to get a little angry first. Here are three ways to channel your anger:

1. Join the ONE Campaign, a historic global movement of which World Vision is a founding member. The ONE Campaign urges world leaders to commit to reducing poverty this year. Go online to sign the ONE Declaration at www.worldvision.org/one.
2. Talk to your church congregation about what you can do to help children living in poverty, such as holding a child sponsorship drive or drilling a well.
3. Pray for these children and their families.

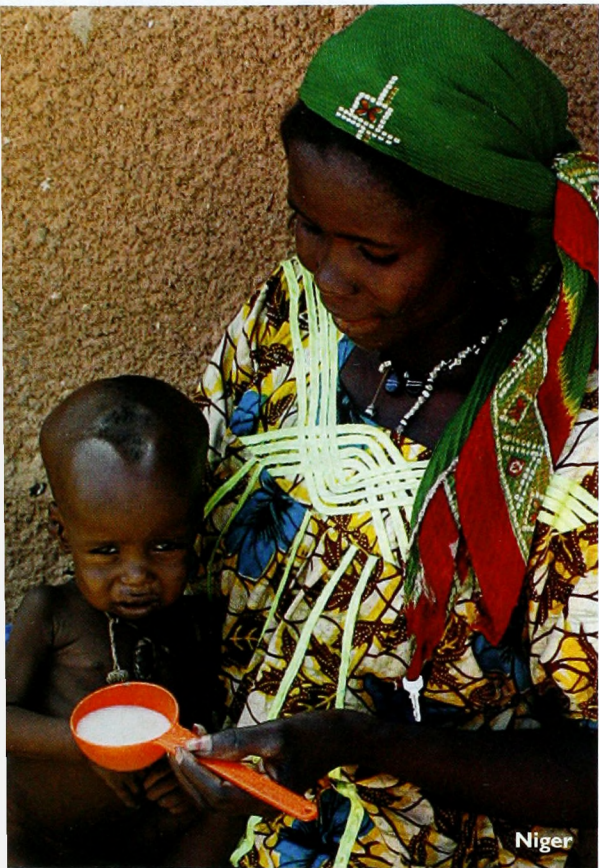
It’s no mystery what kills 29,000 children worldwide every day. And because we know, we have to do something. With your help, in 2004, World Vision supporters enabled 1.1 million children to get vaccinations, provided access to clean water to 1.9 million people, and trained 810,000 mothers in health and nutrition so they can take better care of their children.

We need to do more. We can do more. Please get angry. Please help. ■



News From the Field

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Parlia



AL-KASSOUM AOUJIDI DIALLO / WORLD VISION

Niger

Niger: Children go hungry.

Burundi: Hunger Buster > A World Vision feeding program in drought-stricken Karuzi, run in conjunction with WFP, will expand to cover the entire province—providing daily meals to more than 35,000 children. Forty-five percent of Burundian children under 5 suffer from malnutrition.

Angola: Marburg Mayhem > World Vision pledged to combat the mysterious Marburg virus that has claimed scores of lives and caused alarm around the nation. The agency is assisting the health ministry by providing protective clothing and disinfectants, and supporting surveillance teams to monitor and control the spread of the epidemic. Marburg is a close relative of the deadly Ebola virus and can cause catastrophic bleeding.

Niger: Famine Fight >

World Vision signed a contract with the World Food Programme (WFP) to distribute 1,480 tons of food after drought and locust swarms destroyed harvests. Nutrition surveys conducted by World Vision show child malnutrition rates are comparable to war-torn countries. The Niger government has declared an emergency, appealing for international aid to feed 3.6 million people in critical need.

Indonesia: Wicked Wave >

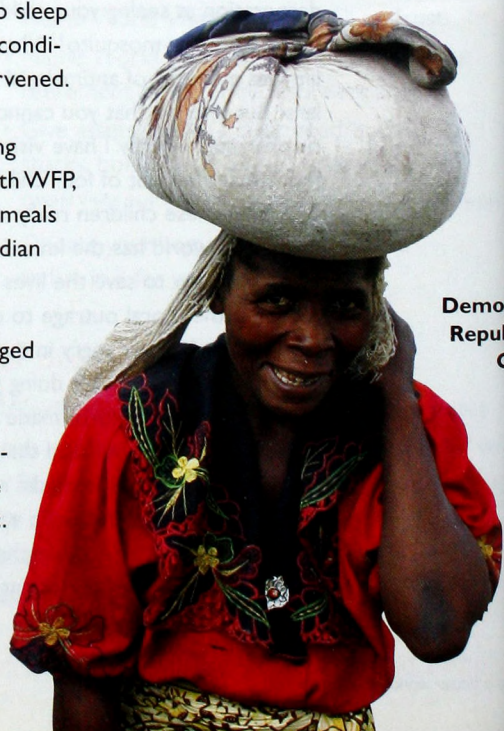
World Vision contributed new sheets and mattresses to Nirmala orphanage, Aceh, as part of a multi-agency clean-up effort following the Asian tsunami. Previously floodwaters soaked mattresses, rendered bathrooms inoperable, and caused fungi to grow on the walls. Children had been forced to sleep on the floor in damp, filthy conditions until aid agencies intervened.

Democratic Republic of Congo: Homeward Bound >

World Vision distributed World Food Programme rations to more than 30,000 people in Nyabiondo, following a spate of factional fighting that saw the town looted. Residents fled to hilly areas and spent weeks without help. But the distribution gave many the confidence to return home. A program to integrate armed groups in a national army will, many hope, pave the way for peace in DRC.

Romania: Presidential Campaign >

President Traian Basescu took calls during a four-hour telethon to assist Romanian communities affected by the worst flooding in 35 years. World Vision and Realitatea TV jointly organized the event. Romanians responded by pledging \$1 million. World Vision will use the funds for reconstruction of houses and schools in affected areas.



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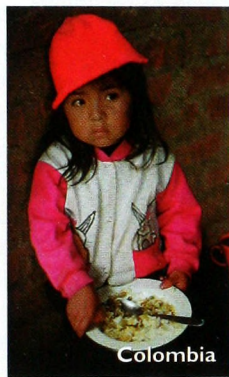


Bolivia

WORLD VISION

Bolivia: Rights Demanded > More than 150 young people from across Bolivia came together for the Third National Congress of the Children's Parliament. World Vision-sponsored children from Santa Cruz, Cochabamba, La Paz, Oruro, and Potosí development programs participated. Children pressed for representation on Bolivia's proposed Constituents' Assembly and their rights.

Colombia: Peace for Persecuted > An additional 2,500 children and their families will benefit from sponsorship through World Vision, thanks to Colombian donors. Most of the children fled their homes in rural areas due to violence and are now living as refugees. World Vision will carry out projects to improve the education, health, and economic prospects of the children.



Colombia

OLIVER CASTELLANOS/WORLD VISION

Why AIDS: A Sexist Disease

Percentage of young people HIV-positive by gender.

Source: UNICEF/UNAIDS 2004



Hope Update

Zulu Warrior

PRINCESS ZULU (her name, not a title) began life in a dusty Zambian village. Now she talks to world leaders about the fight against AIDS. The HIV-positive mom recently came to the United States to take part in the United Nation's Global Coalition on Women and AIDS Tour. Princess works for World Vision as a HIV/AIDS educator.

What is the heart of your message?

To personalize AIDS—to put flesh on the HIV virus. Hearing people like me and hearing the stories of children who are affected helps people understand that those impacted by AIDS are human beings. Then people will ask, "What if this was my own child?" If we start talking in this way, it will break the stigma and denial.

Are we winning the war?

We're making progress because we are seeing more people educated. In Zambia, young people are more willing to abstain or delay sex. The more you delay sex, the more you mature and make good decisions.

Why is AIDS a gender equity issue?

Abstinence is not enough. If women are not educated, or if there are no rights for women to own land, inherit property, or get equal pay, then even if you tell women to abstain from sex they can't because they are in a desperate position. Some girls in Africa are forced to become prostitutes to buy food and pay for school.



JON WARREN/WORLD VISION

Princess Zulu

You seem so upbeat. Why?

I'm joyful because I have hope in this hopeless situation, and I believe my hope comes from God. What good will it do if I nag about my situation? In doing that I will lose my inner peace. ■

News From the Field

Making School Cool

World Vision storehouses are transforming school for kids in need. *by James Addison*



JAMES ADDISON/WORLD VISION

Almeta (back row, left) and Jennifer find that school creates deep bonds.

CHILDREN FORCED TO LIVE IN CARS. Children brought up by struggling teen mothers. Children fleeing persecution in their homeland. These are the kinds of children who find their way through the gates of Wing Luke Elementary School each fall. They live in Beacon Hill—one of south Seattle's poorer neighborhoods.

Such a cocktail of social problems might make the toughest teacher wince, but it doesn't faze Jennifer Watling, 57, and Almeta Magee, 55. They've taught at Wing Luke for 23 and 18 years respectively, and neither can imagine a more fulfilling environment.

Jennifer admits she did once spend a year teaching in a more affluent school but found the experience a drag. Bossy, unreasonable parents and racist attitudes were her main gripes—

plus a certain distance between herself and her pupils. Not so at Wing Luke where children from split families find the stability school provides creates deeper bonds.

"You become special to these children—an important part of their lives—not just someone they see between 9 and 3," she says.

Almeta agrees: "I've had children come back as adults, and they will say, 'Thank you for what you did, Mrs. Magee!'"

It's incredible feedback, given the serious challenges. Take communication. Children arrive at Wing Luke from all corners of the globe—Vietnam, Cambodia, Samoa, Ethiopia, Afghanistan, Korea, Eritrea, Somalia. During class, seven or eight different languages might be parlayed at one time.

"Put all those languages together and it can easily end up making you feel dizzy," says Almeta with a laugh.

But one thing the children's families usually do have in common is a shortage of cash. Recent school budget cuts have hit these children hard, since they can't rely on cash-strapped parents to provide school supplies.

Jennifer can't hide her frustration when she reveals that the \$245 she gets for classroom supplies will be slashed completely for the upcoming school year.

As a result, the teachers rely heavily on The Storehouse, a ministry of World Vision. Three times a year they get the chance to visit the agency's warehouse in nearby



JAMES ADDIS/WORLD VISION

Children at Wing Luke enjoy quality supplies, thanks to The Storehouse.

...t to stock up on essentials. Jennifer ...
 ...omes animated as she throws open ...
 ...board after cupboard in her classroom ...
 ...eveal her storehouse—pens, pencils, ...
 ...ebooks, whiteboard markers, staplers, and ...
 ...lity art supplies.

Could they manage without The Storehouse? Jennifer shrugs. ...
 ...be they could spend precious hours scrounging from other ...
 ...rces. Maybe they could get by with broken crayons and ...
 ...cycled paints. But she says it would be a drab way to operate. ...
 ...nks to The Storehouse lessons can be more creative and ...
 ...eiting.

“It’s great that these kids can come to school and feel good ...
 ...ut their environment and themselves.” ■

yi FEELING POOR? See how your ...
 ...salary stacks up against your 6 billion global ...
 ...ighbors. Go to www.globalrichlist.com, ...
 ...but your annual income, and find out ...
 ...where you rank among the world’s rich and ...
 ...por. A London-based creative agency, Poke, ...
 ...signed the site to help people in developed ...
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 ...global scale.



JON WARREN/WORLD VISION

➔ Get Involved

Scout's Honor

Teenage guys might like to write letters to their sweethearts, but getting them to put pen to paper for children they never met could pose a challenge.

But Scout Paul Cochran, 17, of Omaha, Neb., thought boys from his troop should not only participate in a SchoolTools drive to help tsunami-affected children, but also write and let them know that young people in the United States were thinking of them.

After a pep talk from Paul, the 50-strong Troop 408 St. Wenceslaus wrote expressing their sympathy and sharing their personal lives on paper.

The Scouts also set to work asking members of their church and community to contribute essentials like pens, paper, and notebooks, to be sent via World Vision.

Paul says the response was positive both in terms of the donations received and in raising awareness about the desperate need for classroom basics around the world.

Paul’s leadership in dreaming up and organizing the event will contribute to his quest for the Eagle Scout Award—the highest in the Scouting movement. He needs only the Citizenship in Community badge to win the honor and plans to tackle the local government over lax anti-smoking laws to get it. Smokers of Omaha beware. ■

— James Addis



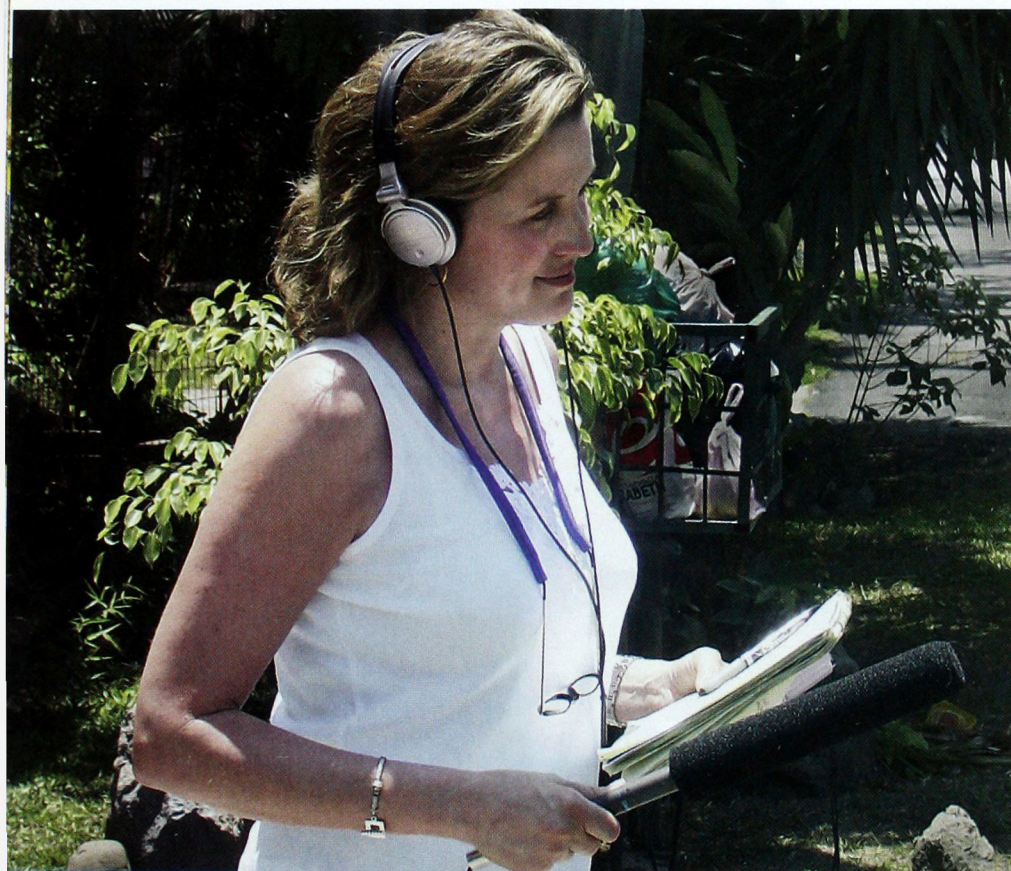
COURTESY PAUL COCHRAN

Paul Cochran (left of center) with boys from Troop 408.

SEND SCHOOL TOOLS > Through World Vision’s SchoolTools program, individuals and groups can assemble kits of school materials for children in need. Learn more at: www.worldvision.org/schooltools

In the Spotlight

On the Record with Peggy Wehmeyer *by Jane Sutton-Redner*



CHRISTINA DARDEN/WORLD VISION

In Costa Rica, Peggy reported on women trapped in the sex trade.

PEGGY WEHMEYER IS THE HOST and managing editor for “World Vision Report,” a radio newsmagazine show covering people, events, and issues affecting the world’s poor. A true pioneer in broadcasting, Peggy trail-blazed the first religion beat for WFAA-TV in Dallas, Texas. Later, at ABC News, she became the first network correspondent to regularly cover faith issues.

Editor’s Note: “World Vision Report” won three World Medals as well as the prestigious United Nations Department of Public Information Gold Medal in New York City in June. World Vision Report’s winning entries were among more than 500 received from 32 countries.

Tell us about your family.

My husband, Mark, is a psychologist specializing in marriage counseling. My daughter Lauren is 20 and a student at Texas A&M University; Hannah, 17, is a high school junior.

When did you decide you wanted to be a journalist, and why?

I decided in college, because I wanted a career that allowed me to seek the truth, expose darkness, and give voice to the voiceless.

What is your favorite story of all those you’ve covered?

There are too many to list. I enjoyed doing the one-hour network special on the Iowa septuplets for “20/20” because it had a fascinating faith angle. We brought the conflicts between science and faith together in a way that treated Christian belief with respect and dignity, rather than condescension and contempt. More recently, I enjoyed reporting for World Vision in Costa Rica where I interviewed women trapped in prostitution who are struggling to make better lives for themselves and their children.

Who is the most interesting person you’ve ever met?

That’s a tough one. I loved interviewing Bill Clinton and George W. Bush. Peter Jennings, my former mentor and friend, is one of the most adept multitaskers and intuitive newsmen I’ve ever known. I have a huge amount of respect for Rich Stearns because he voluntarily gave up the best the world had to offer in order to serve the poor. I admire the theologian N.T. Wright for staying true to the gospel while rising to the top

the heap of Jesus scholarship. And I'm inspired by Os Guinness, who has helped me understand the importance of being a thinking, authentic Christian in a culture that is pulling apart at the seams.

What do you need to do your best work?

I need to connect with my stories so that my enthusiasm can be conveyed to the audience with creativity, clarity, and compassion. I usually connect best with a story when I'm personally centered at peace with God.

Why do you care about helping the poor?

My whole life mission can be summed up in wanting to be a faithful follower of Jesus. The better I know and love him, the more I want to serve those I believe he had a special burden for: the poor.

Your favorite Scripture?

One that is always a favorite is Hebrews 11:27, which says that Moses kept right on going because he kept his eye on "him who is invisible." I love that. God's invisibility confounds me at times, but the key to fulfilling my calling is to keep my eye focused on the One who is invisible.

What is the one thing you'd most like to accomplish in life?

I want to be used up by God to help prepare for the coming Kingdom ... until I reach the finish line. ■

"World Vision Report" airs on Christian radio stations nationwide. To find a station in your area, go to www.worldvisionradio.org.

Did You Asked

Can I adopt an orphaned child through World Vision?

World Vision cares for children in their own communities and does not arrange for foreign adoptions. But it can refer you to other agencies, such as Holt International Children's Services—a Christian organization—based in Eugene, Ore. (www.holtintl.org). Another helpful source is the "Report on Intercountry Adoption," available from the Adoption Resource Center of Connecticut at www.arcct.org. These agencies can explain the qualifications, procedures, costs, and other aspects of the adoption process.

As a supporter of World Vision, your gifts to children in need—from those affected by Asia's tsunamis to the millions of children orphaned by HIV/AIDS—have great value. Your assistance improves their quality of life and helps them become self-reliant in their own cultures. ■



➔ Upcoming Events

SEPTEMBER

- > Women of Faith's "Extraordinary Faith" conferences: Sept. 9-10 in Anaheim, Calif.; Sept. 16-17, Philadelphia, Pa.; Sept. 23-24, Albany, N.Y.; and Sept. 30-Oct. 1, Hartford, Conn. www.womenoffaith.com



COURTESY WOMEN OF FAITH

- > International Day of Prayer and Action for Human Habitat, Sept. 18, www.habitat.org

OCTOBER

- > A Child is Waiting: weekend to present sponsorship to your church, Oct. 1-2, www.worldvision.org/achildiswaiting
- > World Vision's annual Day of Prayer, Oct. 3
- > Women of Faith's "Extraordinary Faith" conferences: Oct. 7-8, Seattle, Wash.; Oct. 14-15, Des Moines, Iowa; Oct. 21-22, St. Paul, Minn.; and Oct. 28-29, Charlotte, N.C. www.womenoffaith.com
- > Pastor's Vision Trip to East Africa, Oct. 24-Nov. 2, www.worldvision.org/c2c
- > 30 Hour Famine national observance, Oct. 28-29, www.30hourfamine.org

NOVEMBER

- > Women of Faith's "Extraordinary Faith" conferences: Nov. 4-5, Oklahoma City, Okla.; Nov. 11-12, Orlando, Fla. www.womenoffaith.com

DECEMBER

- > World AIDS Day, Dec. 1, www.worldvision.org or www.unaids.org

JON WARREN/WORLD VISION



THE KISS OF *de*

For families in Central and South America, THERE IS A FATE WORSE THAN POVERTY—sudden death due to a killer disease they may know nothing about >

A “SILENT KILLER” LURKS among them. It is so silent they live entire lives not knowing it is there. Stalking them at night, the killer sucks their lifeblood, slowly destroying families and endangering every child’s future.

The predator numbers in the thousands—a legion of doom that hides within thatch roofs and mud walls, waiting for its victims to fall asleep before attacking. And yet, for all its stealth and cruelty, the predator is something quite ordinary: a beetle. A simple blood-sucking beetle that carries a murderous parasite—*Trypanosoma cruzi*—that transmits a life-threatening disease named Chagas.

“People had been dying for many years in this zone because of Chagas, but they never associated it with the ‘kissing bug,’” says José Antonio Velasquez, municipal assessor in San Francisco de Opalaca, in western Honduras. “They associated [the deaths] with myths, witchcraft, and other diseases, but never Chagas.”

Drawn by the warmth of mammals and the carbon dioxide they exhale, the beetles—known in Honduras as *chinchas* (pronounced “cheen-chayz”)—prefer to feed near the face, thus earning the “kissing bug” alias.

“Before, people had no idea about Chagas disease, until they got help from World Vision [and others],” says José. “Only then did the population begin to be educated and understood that Chagas meant death.”

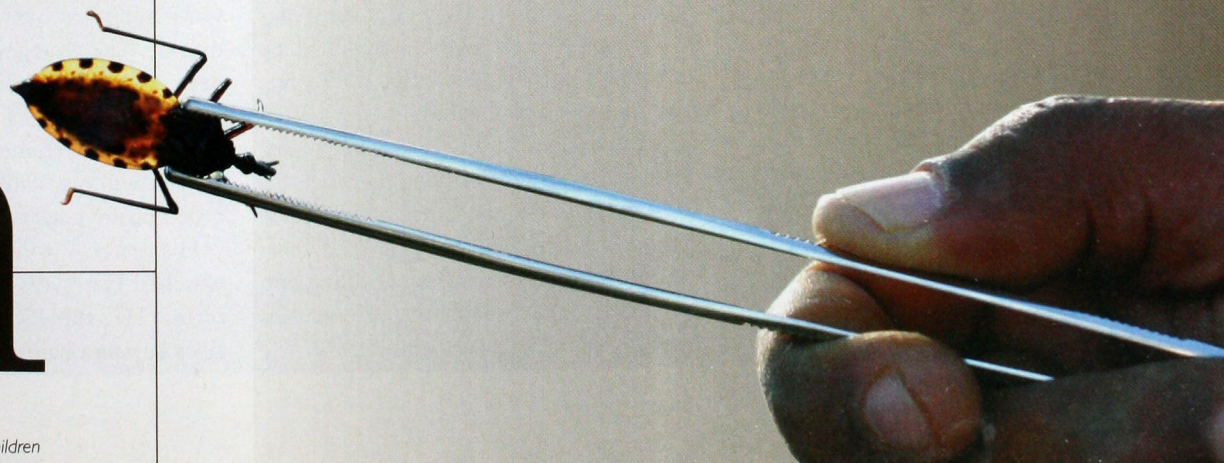
In the poverty-stricken foothills of Honduras, the bugs find an ideal environment within the stick or mud-block houses of the indigenous Lenca people. Deep in those lush hills, the Lenca live off the land in isolated communities that are at least a day’s walk from the nearest city and often hours by foot from the nearest public health clinic.

One in three people bitten by the *chinchas* will die of Chagas disease. Once in the bloodstream, Chagas parasites—

Facing page: Mayra Gomez, 12 (center), and her brother, Roney, 10 (left), both have Chagas disease. “What scares me the most is that any time my kids could drop dead,” says their father, Marino. **Below:** Two types of beetles host the life-threatening parasite for Chagas disease. *Triatoma dimidiata* (pictured here) is native to Honduras.



h





Above: Once a house is fumigated, and the beetles eradicated, constant vigilance is required. Lombardo Ardon, Chagas project director for World Vision Honduras, searches Gregoria Gomez' house for *chinch*. It's a relief when he finds none—the positive result of the project's fumigation phase.

Top of page: “We’ve looked here and never found the bug,” says Gregoria. “But I am worried because the *chinch* could come and drink the blood of my kids, and then my kids would get sick.”

found nearly exclusively in Central and South America—invade and destroy some of the body’s organs. Over the course of 10 to 20 years, the parasites damage the heart, intestines, and esophagus beyond repair. For up to 30 percent of those infected, the damage will be fatal. With some 18 million Latin Americans infected, Chagas disease (named for its discoverer, Dr. Carlos Chagas, in 1909) kills an estimated 50,000 people annually.

But even with widespread infection rates, many communities remain unaware of how Chagas disease is killing them.

‘We didn’t know’

Expectación Rodríguez, 37, is a subsistence farmer in the Monteverde community of San Francisco. A cowboy hat shades his face from the sun, but deep concern is still evident in his dark eyes. Expectación explains that his community spent years unaware of how Chagas disease was silently destroying them.

“We found out about it through World Vision,” he says. “We didn’t know anything about the bug before. When we found out, we began to worry. Our fear, as parents, is that the bug will bite our children.”

Children and women are highly susceptible to the beetle’s bite. In poor households without enough beds, children are likely to sleep on the dirt floors, while women slumber next to the stick or mud walls of the house—giving the bugs easy access to their next meal.

“I learned about Chagas about 10 years ago, when [government] testing was first done,” says José Carmen Vasquez, 55. “Before that, we lived with the *chinch* but we saw them in the house, but we didn’t know anything about Chagas. [Once I learned] about it, I felt in danger, and feared that my kids or I could die at any time.”

José’s son, Herman, is slightly smaller than his 13-year-old buddies. His school uniform—white pleated shirt, dark trousers—hangs from his bony frame; he tires quickly. The youngest of José’s four children, Herman was tested for the disease in recent months. “I was afraid, because people would tell me that when you turn 20 you will die,” Herman says. The boy tested positive for the disease.

His sister, 20-year-old Perfecta, had watched Herman’s health struggle from birth. “He’s the sickling,” she says. “Even since he was a baby, he’s always been sick.”

lungs hurt, his heart hurts, he is achy. cannot go to the fields to work much cause he gets tired really quickly. He 't work or play too much. If he runs, gets too tired."

disease of poverty

Where you will find Chagas disease, you will find the worst poverty imaginable," says Dr. Gilles de Margerie, coordinator of health subprogram for CIDA (Canadian International Development Agency) in Honduras. "You have to live in an awful place to get Chagas. It's as simple, and unfortunately, as complicated, as that." The disease affects the poorest of the poor—those unable to seek medical help, those whose deaths often go unrecorded—making absolute statistics hard to come by. Even so, it is estimated that nearly 300,000 Hondurans are infected, nearly 6 percent of the population. The pressing need to control Chagas disease has climbed onto most Latin

American countries' national agendas. The government of Honduras recently implemented a strategy to combat Chagas with a goal of eradicating the disease-carrying bugs by 2010. World Vision has been working in Honduras since 1974 and notes among its most recent successes the reduction of Chagas disease in the northern region of Yoro. As a result, the organization was a natural fit as a key partner in the Honduran national strategy along with others such as CIDA, the Pan-American Health Organization, JICA (Japanese International Cooperation Agency), government housing agencies, and the Secretary of Health.

Together, the agencies are working to implement a comprehensive battle plan to fight Chagas disease—an approach most experts agree is the only hope for success.

"Ask anyone who knows anything about Chagas," says Gilles. "The intervention is quite simple. You find the bug. You spray the house. You find the infected

Below: Alex Arturo Martinez, 14, is president of the local children's vigilance committee. He and his classmates study Chagas every day in school. Bottom of page: Five-year-old Francis Orellana's parents recently partnered with World Vision to build a new house. Its zinc roof, plastered adobe-block walls, and concrete floor will provide a safe haven from the threat of Chagas disease.



Solid housing is key to defeating Chagas disease. Families in San Francisco de Opalaca build better housing by contributing local materials and labor, while World Vision contributes roofing, cement, metal studs, and more.

children. You treat them if they're under the age of 15. Then, you make sure the houses stay bug-free. Ideally, if you want to keep the bug away, you have to improve the housing."

That last step is crucial. Improved housing will keep Chagas from coming back. In Yoro, World Vision constructed 421 new houses. They are simple, decent, 400-square-foot structures, and feature the key elements that prevent the beetles from moving in: zinc or clay-tile roofs,

plastered adobe walls and concrete floors. With that simple intervention, families can live without fear of Chagas. "It's not rocket science," says Gilles. "You fix the house, you seal the fate for the disease will not come back into that house."

Declaring war on the *chinchas*

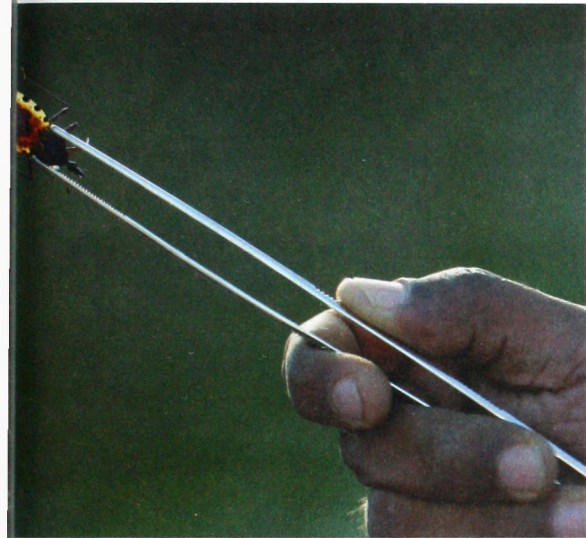
World Vision's Chagas Project focuses on the municipality of San Francisco de Opalaca. Home to the Lenca people, Opalaca ranks 297th out of 298 municipalities in terms of poverty. There is no potable water, no telephone, no electricity and no transportation.

Opalaca's population of 8,600 is scattered over 116 square miles, about the size of Las Vegas. Even if the people don't thrive here, crops do—from coffee and corn to bananas and beans. Still, the people of Opalaca endure isolation and poverty and are marginalized by a sheer lack of resources, opportunities, employment, education, and agricultural expertise. Despite the yielding land, some 87 percent of the population is malnourished, with 95 percent living in poverty. Perhaps it is no coincidence that the word Lenca means "man of rock": It takes rock-solid grit to survive this hardscrabble existence.

But World Vision is there, bringing



World Vision



JON WARREN/WORLD VISION

Small & silent... but deadly



"I know I'm going to get well," says Herman Vasquez, 13, who has Chagas but will soon receive treatment. His family—including his father, José, and sister, Perfecta—worked hard to build a more healthful house.

With Chagas, they were very interested in working together."

For now, fumigation has eradicated most if not all the *chinch*es from Opalaca. But housing improvement or replacement is the only long-term prevention. And that takes time. As a result, vigilance remains critical to preventing the return of the beetles.

Further steps include medical evaluations for the 349 Chagas-infected children.

Soon, the treatment acquired and administered by the government health ministry will be under way. But that treatment must be carefully administered according to a child's weight and age—twice-daily tablets for up to 60 days—and many parents are illiterate, with more

Solid housing is key to defeating Chagas disease. Families in San Francisco de Opalaca build better housing by contributing local materials and labor, while World Vision contributes roofing, cement, metal studs, and more.

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Please update your address if necessary

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CITY _____ STATE _____ ZIP _____

() TELEPHONE _____ E-MAIL _____

- Please use my gift of \$_____ to help families build strong, beetle-free homes.
 - Please use my gift of \$_____ to help fight trachoma, a disease that can lead to blindness.
 - I want to sponsor a child for \$30/month.
 - a girl a boy living in
 - Asia Africa Latin America
 - Middle East Honduras Where most needed
 - Check payable to World Vision
 - Credit card payment
 - Visa MasterCard American Express Discover
- Card no. _____ - _____ - _____ - _____
- Exp. Date _____ / _____ / _____

YES!
I want to
fight Chagas
in Honduras



JON WARREN/WORLD VISION



Up to 18 million people in Latin America suffer from Chagas disease after being bitten in their sleep by beetles carrying a dangerous parasite. Disproportionately affecting the poor, the disease slowly attacks internal organs and eventually kills.

In Honduras, poor housing is a haven for Chagas-bearing beetles. Building homes with zinc or adobe-tile roofs, plastered walls, and concrete floors keeps the bugs out and saves lives. By contributing to World Vision's house-building efforts in Honduras, you can help families protect their children from an insidious yet preventable disease.

"I know I'm going to get well," says Herman Vasquez, 13, who has Chagas but will soon receive treatment. His family—including his father, José, and sister, Perfecta—worked hard to build a more healthful house.

When they were diagnosed with Chagas, they were very interested in working together."

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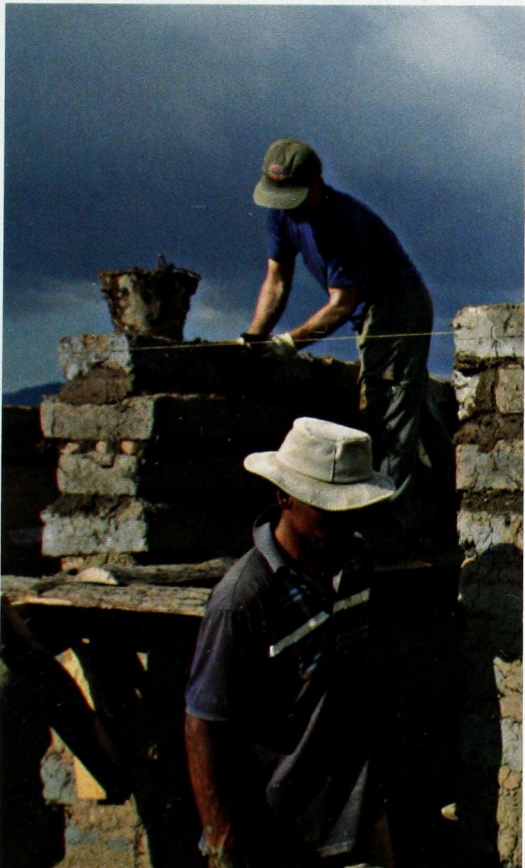
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That last step is crucial. Improved housing will keep Chagas from coming back. World Vision provides 421,000 people with the knowledge and skills to build better housing from

Solid housing is key to defeating Chagas disease. Families in San Francisco de Opalaca build better housing by contributing local materials and labor, while World Vision contributes roofing, cement, metal studs, and more.



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BUSINESS REPLY MAIL

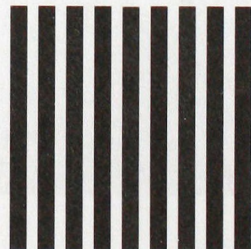
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TACOMA WA 98471-0081



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UNITED STATES





ld sponsorship to 1,800 of the area's
arly 9,000 children. As in other commu-
es where child sponsorship helps shape
a better future, Opalaca is benefiting—
slowly, but surely—through World Vision-
assisted health care, educational support,
microenterprise, agricultural techniques,
and community development.

Community development is crucial
in any Chagas intervention, say experts,
because once houses are sprayed, children
are treated, treatment administered, volunteers
educated, and houses improved—vigilance
is necessary to prevent the beetle's return.
Chagas project manager Lombardo
don says that the first step in World
Vision's battle plan was to fumigate the
150 houses in the area, then to test all
160 children under the age of 15. Why
under 15? The sad reality of Chagas dis-
ease is that for anyone older than 15,
the parasite's unremitting destruction of
human organs likely has gone too far for
community-based treatment to be effec-

tive. "Chagas kills you in the prime of
your economic productivity," says Gilles.
"These children are born in houses that
are infested [with the beetles]. They don't
become infected at 10. They become
infected at 10 days or 10 months."

To fight back, the World Vision team
created "vigilance committees" composed
of adults and children in every village.
Volunteers were trained to provide help
for at-risk houses, demonstrating how to
find and safely capture the *chinche*, and
how to accurately report back to the com-
mittees about the insects.

"We knew that [involving] the commu-
nity would be very important, and that was
World Vision's stronghold," says Gilles.

One year into the project's two-year
timeframe, Lombardo can see how commu-
nity involvement has improved the
villages' chances for survival. "A lot of
merit has to go to the community mem-
bers themselves," he says. "Once they
found out there were a lot of kids infected

"I know I'm going to get well," says Herman Vasquez, 13, who has Chagas but will soon receive treatment. His family—including his father, José, and sister, Perfecta—worked hard to build a more healthful house.

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according to a child's weight and age—
twice-daily tablets for up to 60 days—and
many parents are illiterate, with more

than one child infected. Successful treatment will depend greatly on community support and involvement.

"It works," Gilles says. "We know there are fewer children getting the disease. And that means these kids are not going to die when they're 30 or 40 years old."

No longer afraid

As evening falls, Herman sits on a wooden bench in a darkening room of the community center with four of his friends. The group is part of their school's vigilance committee. As they talk about Chagas disease, they explain why they joined the committee.

"We don't want Chagas to be in our community anymore," says Efrain Vasquez, 13. "It causes death!" His

cousin, Elvin Vasquez, 12, agrees: "I was afraid to die. It was said that it caused death. We know now how to be OK."

The youthful vigilantes are perfect for the job—who better to look for bugs? "We look for *chinchas* in the roofs of houses," explains Elvin. "We look in piles of wood, cracks in the walls. So far, we haven't found any." Lombardo explains this positive development: "Because the entire community was sprayed, it's hard to find the bug now."

Herman admits to being fearful about Chagas disease. But knowing he will receive treatment, he shows a child's lighthearted spirit: "I am happy now, because I will be OK," he says.

In many ways, this isolated community is winning the war against its once-silent

killer. Partnering with World Vision, the parents of Opalaca are fighting back through education and community vigilance. The silence has been broken.

And yet, for Herman's father and other parents, the battle's initial victory is bittersweet. They can save their children, but these same children may very well become orphans.

"As adults, we don't know who has Chagas," says Expectación. "We know we have no treatment, and that's why we are conscious we are going to die. We know we are bitten, so there is no other remedy but to wait for what is coming to us. But we don't want that to happen to our kids. Being able to do something for our kids—that's what we're trying to do. We want to protect our children." ■

"A BALL OF BLOOD"

Do you know how transmission occurs? It's gross," says Dr. Manuel Sierra, 46, nationally recognized Chagas expert and formerly the national health coordinator for World Vision Honduras.

In the beginning, he explains, the beetles are sterile. But after biting an infected mammal during a "blood meal"—perhaps an opossum, a cow, or a human—the parasites move into the beetle's abdomen, safely harbored until they reach a mature stage. At that point, the parasites migrate to the insect's rectum.

"[The beetles] feed at night, so you are sleeping," Sierra says. "With their antenna, they catch two signs to indicate a blood meal. One is heat, the other is carbon dioxide. So what is the big draw for the insect? It's a warm mass that exhales CO₂. The insect comes to the warm mass, probably they will feed around your face because of the CO₂."

The insect slips its proboscis into the skin. "It can feed up to 15 or 20 times its body weight, so it becomes like a ball of blood. When they get like a ball, it's big, really large. Then they have a defecation reflex. As soon as they are engorged, they defecate on the surface of your skin. So, the parasite, remember, was near the rectum [of the insect]. Very clever parasite. The parasite is contained in the feces of the vector and it can move—it's like a sperm. They can swim."

The parasite penetrates through the little hole left by the proboscis, or through the mouth, eyes or nose. While the bug is feeding—for up to three minutes—analgesia and anticoagulant in its saliva prevent its host from feeling the bites until later. "You will not feel it," says Manuel. And victims may unwittingly help the parasite succeed; once bitten, people rub the bite with their hands, continuing the parasite's transmission via the feces on the skin.



While "gross," this transmission process is fortunately not as efficient as some other diseases, such as malaria, which are transmitted through the parasite-bearing insect's saliva rather than feces. Chagas infection greatly depends upon the number of parasites and where the feces get deposited. But that's not much help for people like the Lenca, Manuel says.

"In order to have infection of the parasite from the beetle, you have to be exposed and exposed for a long time," he explains. "In other words, you have to be poor and poor and poor for a long time." ■

Actual bug samples help the adult vigilance committee identify Chagas-carrying beetles.

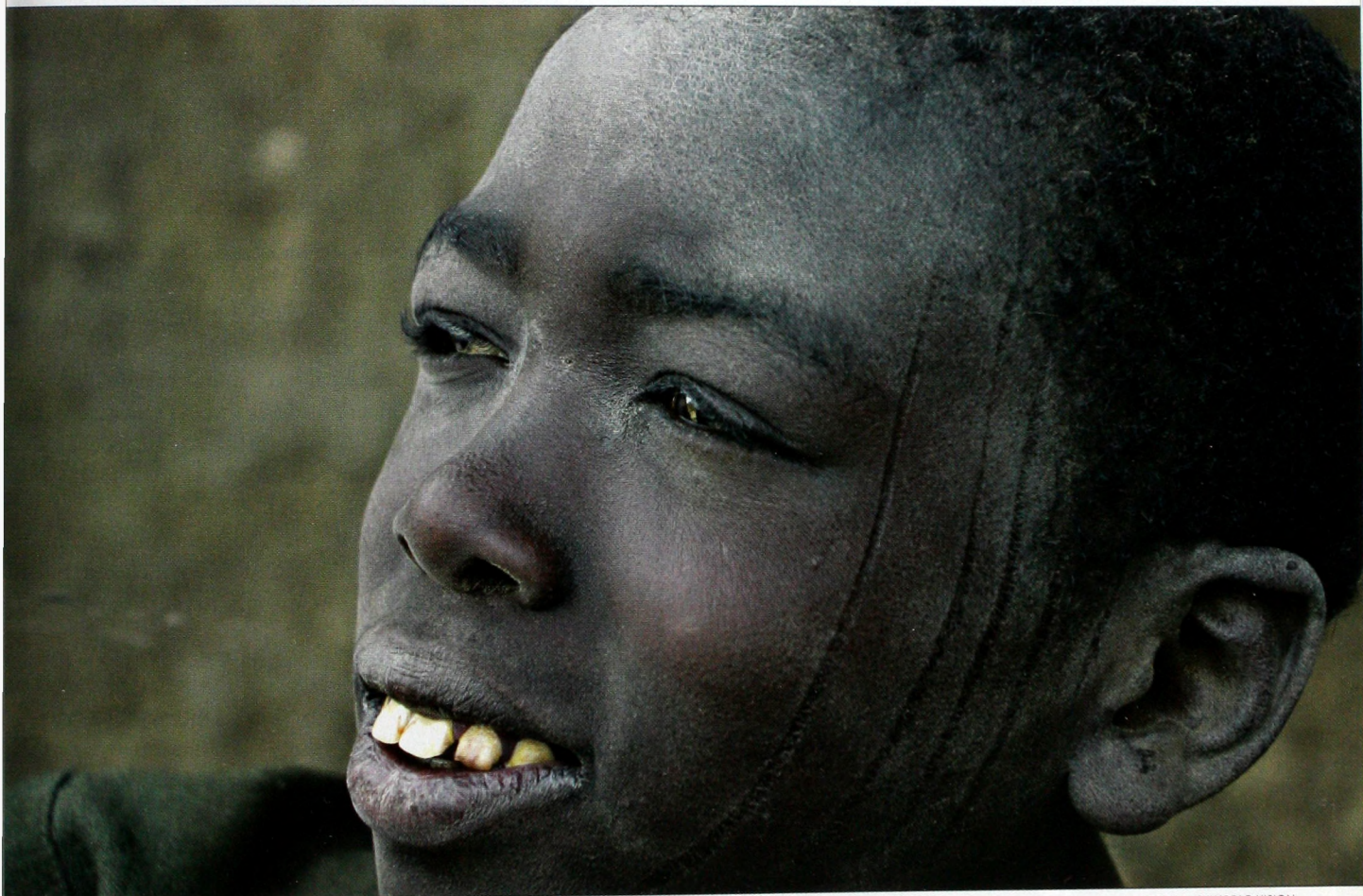
WHAT YOU CAN DO

To help World Vision battle Chagas disease, use the envelope between pages 16 and 17.

TACKLING

trachoma

in NIGER



SCOTT LOU/WORLD VISION

NEVER HEARD OF TRACHOMA? *Take a closer look at this eye disease that has robbed more than 6 MILLION PEOPLE—including countless children—of their sight. >*



DAVID WARD/WORLD VISION

IN MANY WAYS, Adamou Sitou is a typical 12-year-old. He loves soccer; he loathes chores. He enjoys hanging out with friends after school; he dislikes homework. But unlike most kids his age, Adamou faced a devastating disability. Three years ago, this boy went blind.



SCOTT LOUT/WORLD VISION

“I remember what it was like before I lost my sight,” says Adamou, sitting in the cool darkness of his family’s adobe home in Daudari, a remote village in Niger, West Africa. The simple home offers a welcome escape from the punishing, 112-degree heat outside. “My eyes were so itchy and sore that I thought my eyelids would fall off. When I woke up in the morning, I could see, but by noon everything became dark. Then gradually after a few months, I couldn’t see at all. It hurt even to open my eyes.”

Sick with worry, Adamou’s parents, Mahamadou and Nanou, took their son to the village clinic. Sadly, they had waited too long. Adamou became yet another victim of trachoma, *amadari*, as the dreaded eye disease is known in the local Hausa language.

Trachoma is the world’s leading cause of preventable blindness according to the International Trachoma Initiative, a World Vision partner agency that is also fighting the disease. The disease generally occurs in poor countries where people have limited access to water and health care. It can be prevented by keeping one’s hands and face clean, using as little as one quart of water daily. But people living in drought-prone Africa, including Niger, consider even that amount too precious to waste on washing when they struggle to find enough to drink.

Adamou lives in Zinder—the most endemic region in the world for trachoma. An estimated 68,000 adults and more than 1 million children under age 10 are infected with the disease here.



DAVID WARD/WORLD VISION



DAVID WARD/WORLD VISION

Previous page and above right: Adamou Sitou (with traditional scarring on his face) recovered his sight. Above left: A community in Mali gathers as a World Vision drilling rig hits water. Left and far left: Women’s work is never done—but with this well in Niger, it’s easier.



Face washing is a key way to prevent trachoma.

According to a study conducted by Niger's National Blindness Prevention Program in 2000.

It's a tragedy for anyone to lose their sight. But the blind in Africa face extraordinary challenges. Social assistance and services for the disabled are almost nonexistent. The blind have become a social and economic burden on their already impoverished families and communities. A woman who is blind can no longer cook or gather firewood. With no means of income, many blind men leave their villages and move to the cities, where prospects for street beggars are better. They congregate at traffic lights, weaving dangerously between cars and pleading drivers for a few coins to buy a bowl of rice.

When Adamou contracted trachoma, he had to drop out of school. He sat alone in his family's hut while friends went to work and played soccer. He could do little to help his family. He managed to pound grain, wielding his mother's long, wooden pestle, but he was ashamed of doing what's considered girl's work.

The devastating rate of trachoma in Adamou's community is directly linked to lack of water. The one well in this 700-member village often runs dry between rainy seasons. Likewise throughout unlocked Niger, 41 percent of the country's 12 million people lack access to sufficient water. "It's easy to tell people, 'You need to wash yourselves and your children regularly to prevent trachoma,'" says Aboubakar Maman, a World Vision program manager based in Zinder. "But how can they do this when they only have one pail of water a day for the whole family? They are forced to choose between drinking and washing."

Most Nigeriens—up to 80 percent of whom are illiterate—

don't understand that trachoma is both preventable and treatable. "It's God's will. If you are born with this disease, you are born with it," says Adamou's father, Mahamadou.

World Vision's response to trachoma relies on a strategy known as SAFE: surgery to correct advanced cases; antibiotics to treat active infection; face washing to reduce disease transmission; and environmental improvement to increase access to clean water, hygiene, and sanitation.

But like water, health care is a luxury for Amadou's family, as it is for most people in Niger. His father, Mahamadou, is a subsistence farmer who struggles to support his two children, Adamou and 1-year-old Zeinabou, on the \$100 he earns monthly on average.

"There are many cases of trachoma out in the villages that we never see," says Salifou Alio, head nurse at a World Vision-supported health clinic near Daudari. "These patients don't come for treatment because they know they can't pay the 3,500 francs (US\$7) for the operation. It's shocking to see a child condemned to blindness by a disease that can be prevented with a small amount of clean water."

Thankfully, Adamou, a World Vision-sponsored child, was among the 50 fortunate children in Zinder who had eye surgery in 2003. The subsidized operation was performed at Salifou's clinic. Adamou—usually timid—describes his surgery enthusiastically, punctuated by bold, brave smiles. "It wasn't too bad. The pain wasn't any worse than when I went blind with the eye sickness. I wanted to see more than anything."



When Adamou recovered his sight, he returned to school and joined his friends on the soccer field again. And he saw his baby sister's face for the first time.

Adamou goes for follow-up treatments, covered by World Vision. The nurse peels back Adamou's eyelid and snips off scar tissue from his inner eyelid with a small pair of scissors. He uses no freezing, but Adamou doesn't cry or flinch. He leaves the clinic smiling, thankful to have his sight back. It's moving to see a child so full of joy—and crushing to realize that he could contract the disease again tomorrow without enough water to maintain proper hygiene.

"It is good to do surgeries to treat those who have trachoma, but meanwhile, more and more people are being infected. We've got to focus on prevention," says Arlette Yepdjuo, manager of World Vision's water and health project in Niger.

World Vision combats trachoma in Niger through the West Africa Water Initiative, a partnership with the Hilton Foundation and 12 other organizations that will drill 825 borehole wells—175 in Niger, 200 in Mali, and 450 in Ghana—by 2008.

Drilling in Niger began in April 2004. Heavy-duty rigs extract groundwater locked in aquifers up to 280 feet below the sand-and-rock surface. Each borehole is equipped with a manual hand pump that makes it easy for women to draw water from such a depth. World Vision staff members are teaching villagers how to maintain and repair the pumps and organizing

public-health education campaigns about trachoma prevention.

Adamou is excited about the borehole installed in Daudari. "I don't want any of my friends to get trachoma. I'm praying that this new well will stop this eye sickness in our village forever

As head of the water program, Arlette has a vision: to stop more children from losing their sight to trachoma—and get them battling the disease. "I want to have children on the local water-management committees, including some of the 2,500 sponsored children in this area. They need to have a say in how their community uses the new water source," she says, her dark eyes flashing with enthusiasm.

"I want to get children to dream about becoming a driller or a hydrologist themselves one day, just like kids dream about being a fireman. It's one way to ensure that the next generation is involved in wiping out trachoma."

Arlette plans to outfit the water-committee kids with yellow hardhats and blue jumpsuits—just like the drill rig operator wear. Adamou wants to wear one of those uniforms. And he can even see himself becoming an engineer—an impossible dream that had trachoma permanently claimed his sight. ■

Karen Homer is the West Africa communications manager for World Vision.

Trachoma awareness benefits the young and old in Mali

HOW TRACHOMA CAUSES BLINDNESS

Blinding trachoma is common in 46 countries. An estimated 148 million people are currently infected in the initial stages of the disease.

Trachoma is caused by the bacterium *chlamydia trachomatis*, which causes repeated infection of the upper eyelid. Trachoma is transmitted between family and friends via hands and clothing, as well as by flies that have touched discharge from an infected person's eyes or nose. It spreads rapidly in communities where people don't have enough water to wash their faces and hands regularly. At this early stage, the disease can be treated with antibiotics. Repeated infections lead to scarring, thickening of the conjunctiva, and distortion of the eyelid. The eyelashes turn inward, scratching the eyeball every time the sufferer blinks. Some people try to pull their eyelashes out to get relief. The cornea is gradually damaged and becomes opaque, causing blurring of vision—and eventual blindness, if left untreated.

Source: www.sightsavers.org.uk

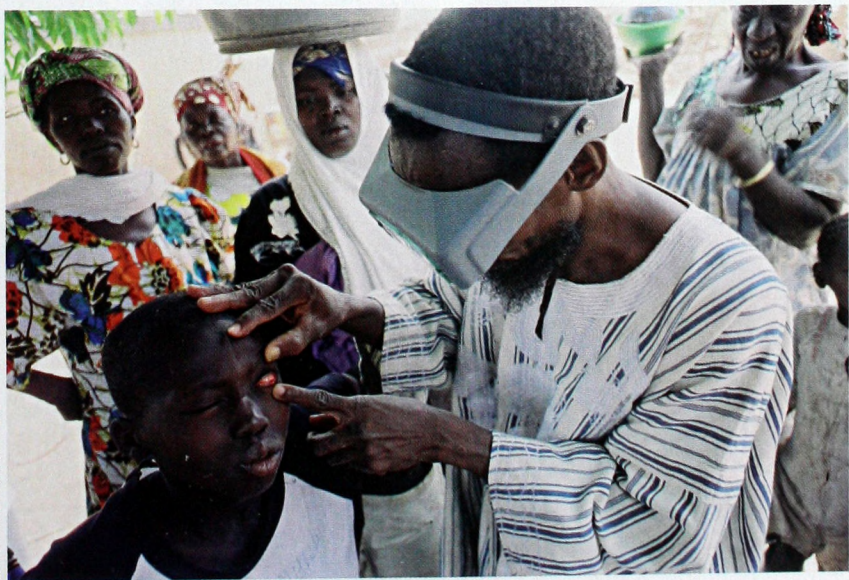
WHAT YOU CAN DO

To help World Vision combat trachoma, use the envelope between pages 16 and 17, and check the second box on the coupon.

In Mali, where World Vision is drilling 200 wells, hygiene improvements and eye exams help villagers avoid eye disease.



DAVID WARD/WORLD VISION



DAVID WARD/WORLD VISION



DAVID WARD/WORLD VISION

TOP 5 CHILD KILLERS. *Each year 9 million* children die of a preventable disease before they reach their fifth birthday.* BY JAMES ADDIS / Photographs by Jon Warren

sickening

1. CHILDBIRTH COMPLICATIONS

Cause: Lack of health care for mothers during pregnancy and birth, poor hygiene, and little understanding of newborn care.

Effect: Children are traumatized by the birth process, deprived of oxygen, and vulnerable to fatal infections.

Annual death toll: 4 million children under 5.

2. RESPIRATORY INFECTIONS

Cause: Includes pneumonia—an infection of the lungs caused by a virus, bacteria, or parasite. Respiratory problems are also found in families dependent on cooking inside their homes on open, poorly vented stoves with wood or dung.

Effect: Pneumonia leads to the lungs filling with pus and mucus until they no longer function properly. Poorly vented stoves lead to children inhaling a lethal cocktail of carbon monoxide and sulfur dioxides.

Annual death toll: 2 million children under 5.

3. DIARRHEA

Cause: Poor diet, poor hygiene, or contaminated water, allows bacteria or parasites to enter a child's body.

Effect: Loose, watery stools, which cause rapid dehydration—leading to loss of muscle strength, exhaustion, and collapse.

Annual death toll: 2 million children under 5.

4. MALARIA

Cause: A parasite that is spread to humans by the bite of a female mosquito. Especially common in environments featuring stagnant water, where mosquitoes can breed. These include swamps, pits, or even garbage. Water can collect in discarded car tires, for example.

Effect: Chills, sweating, vomiting, and high fever. Malaria kills an African child every 30 seconds.

Annual death toll: 800,000 children under 5.

5. MEASLES

Cause: Highly contagious viral disease primarily affecting children. Usually spread by contact with nasal or throat secretions of those infected.

Effect: Red, blotchy rash, coughing, and high fever.

Annual death toll: 400,000 children under 5.

**Figures derived from The World Health Report 2005, published by the World Health Organization.*



discouraged?
Just turn the page...



heartening

at 90 percent of early child deaths can be prevented at minimal cost.

HILDBIRTH COMPLICATIONS

World Vision's response: Establishment of dozens of health clinics in Africa, Asia, Latin America, and the Middle East, providing care for mothers and infants. Clinic staff advise on breast-feeding, nutrition, and hygiene to prevent problems in childbirth. In 2004, World Vision trained 810,000 mothers in health and nutrition.

Want to help? Go online to contribute to World Vision's Early Childhood Care Fund. \$100.*

2 RESPIRATORY ILLNESS

World Vision's response: Health staff treat respiratory infections with antibiotics, and the agency supplies clean-venting stoves to rid homes of lethal fumes. World Vision also promotes breast-feeding, known to combat respiratory infection. Last year a breast-feeding campaign in Posoltega, Nicaragua, slashed respiratory cases by 26 percent.

Want to help? Go online to buy a clean-venting stove for a family in need. \$100.*

3 DIARRHEA

World Vision's response: World Vision educates communities about basic hygiene and promotes the use of oral rehydration salts—a cheap, effective treatment. Last year 1.9 million people gained access to clean water through World Vision programs funded by U.S. donors alone. Access to clean water is a crucial means of countering diarrhea.

Want to help? Go online to buy a hygiene kit for a family in need. \$10.*

4 MALARIA

World Vision's response: World Vision supplies and promotes the use of insecticide-treated mosquito nets in malaria-prone regions in Africa and Asia. World Vision currently has multi-million dollar antimalarial programs in Tanzania and southern Sudan, where the disease is a major killer of children. Both programs target pregnant women who are liable to suffer the loss of their child if they contract the disease.

Want to help? Go online to equip a family with mosquito nets. \$25*

5 MEASLES

World Vision's response: World Vision aims to have all 2.4 million children in sponsorship programs vaccinated against measles and five other killers—whooping cough, tetanus, polio, tuberculosis, and diphtheria.

Want to help? Go online to immunize a child against six killers. \$25*

*Visit www.worldvision.org/health to contribute or to read more stories about how World Vision works to fight the top five child killers. Your gift can save a child's life.

Like to tell us why you chose a particular gift? Write to: wvmagazine@worldvision.org.



Seeing Sponsorship From Both Sides

Once a sponsored child, now a World Vision worker, Antonio can identify with the children he helps. *by Bárbara Aguirre and Jane Sutton-Redner*



BARBARA AGUIRRE/WORLD VISION

Above: Antonio, recalling his difficult childhood, says, "I felt so insignificant until I met our Lord." **Facing page:** Today, Antonio shares his compassion with others.

TEARS GLISTEN IN ANTONIO YUQUILEMA'S EYES when he remembers himself as a young teen trying to survive on his own in Quito, the capital of Ecuador. "I used to see other children," he says, "and I just couldn't understand why the world has these unfair differences—why some children have toys to play with while I had to work."

The world hasn't changed; such disparities persist. But thanks to child sponsorship, Antonio escaped the dead-end life of an uneducated worker. Today, as a World Vision sponsorship facilita-

tor, 40-year-old Antonio's mission is to keep children from feeling as marginalized as he once did.

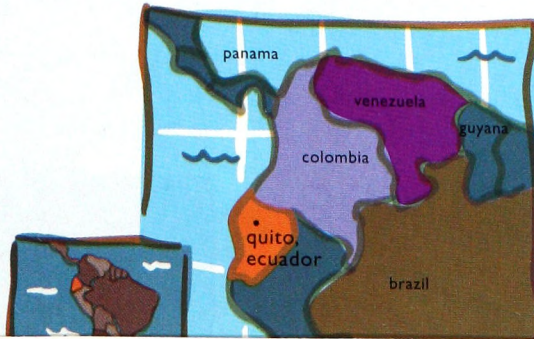
Antonio was born into a farming family from the indigenous Puruha group in Miraflores, a community in Chimborazo province. When he was 13, his father became ill with rheumatism. The family couldn't afford medical care or medicine. So Antonio, the oldest boy of 10 children, decided to go to the capital to look for work.

Employers were reluctant to hire Antonio because of his size. "I was a very small boy; I suffered malnutrition," he explains. He moved from city to city, eventually winding up in Riobamba, where he worked for a shoemaker.

Antonio says his boss was a tight-fisted alcoholic who beat Antonio when he asked for his money and forced him to sign an oppressive three-year contract. Antonio ran away and lived on the streets for a week, but the employer found him and dragged him back.

"I just prayed in my heart: *Please, God, keep me alive to see my father again. Please don't take him away from me. I am doing my best—I can do anything. But please, God, don't let him die.*"

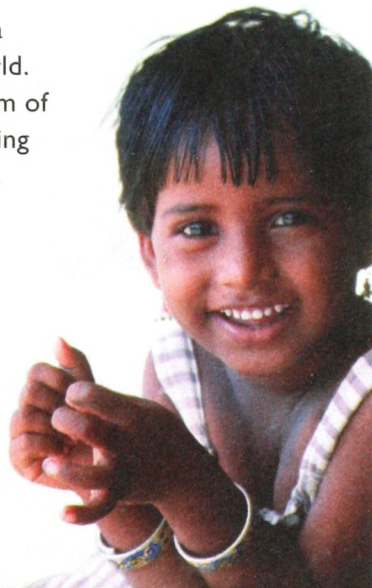
To raise money, Antonio cleaned shoes behind his boss' back. He saved every cent, often going without food. "When I eventually returned to my community with the money I earned, I was able to take my father to the doctor," he says. "He was s



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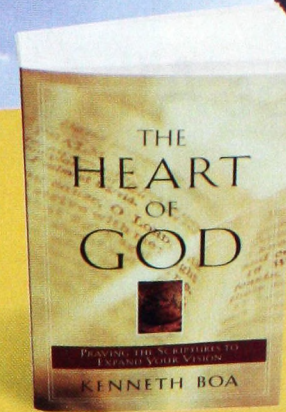
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a fresh look at God's Word

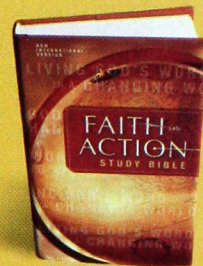
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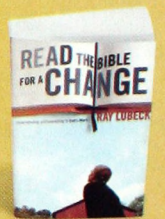
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Where Are They Now?



Seeing Sponsorship From Both Sides

Once a sponsor
the children he



World Vision

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PHILIPPIANS 4:13 (NASB)

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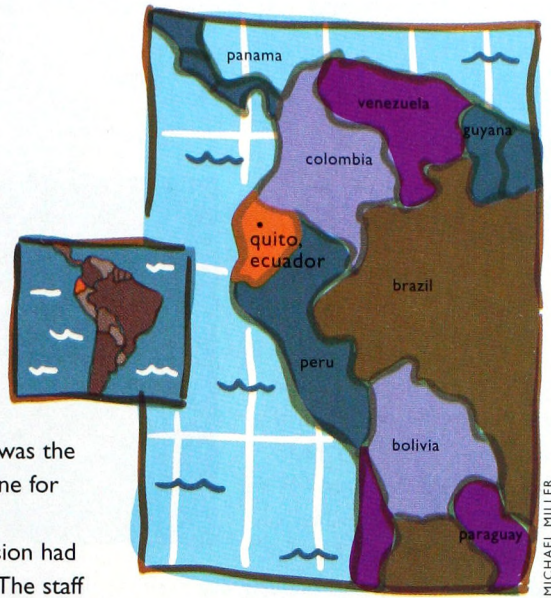
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Above: Antonio, recalling his difficult childhood, says, "I felt so insignificant until I met our Lord." **TEARS GLISTEN IN A** remembers himself as in Quito, the capital of differences—why some to work." **Facing page:** Today, Antonio shares his compassion with others. The world hasn't c to child sponsorship, A uneducated worker. T





but taking him to the doctor was the most important thing I feel I've done for my family." By the grace of God, World Vision had started working in Miraflores. The staff reached Antonio, looking for ways to help his family. "They told me about being a sponsored child, and I was so glad to be given that chance." Sponsorship allowed Antonio to finish his schooling and earn a diploma in systems technology. After graduating, Antonio went to Quito to look for work. In 1983, he was hired up at World Vision's office, where some of the staff members recognized him from the Miraflores project. They gave him help organizing the delivery of sponsors' Christmas cards to sponsored children. "At that moment, I felt it was a message from God saying, 'It is your turn to help someone else like a generous person helped you.'"

That first job led to others with World Vision. Twenty-two years later, he oversees sponsorship projects, enforcing high standards of care for children and families.

He encourages them never to resign themselves to the misery of poverty.

The work is personal for Antonio. When a child is sick or has a problem, it dredges up the pain of his past. "I will do anything to help a child in need," says Antonio, who has two daughters with his wife, Maria Cecilia.

His dedication impresses his colleagues. "Something that I always admire in him is his desire to overcome obstacles," says sponsorship director Jenny Torres, who has known Antonio for more than 20 years. "Considering the adverse circumstances of his life, he really knows how to achieve."

Antonio still has letters and photos from his sponsor, a doctor in Finland. One prescient letter reads, "I am happy to be able to help you in your preparation for the work of the Lord."

Now serving in a Christian organization and caring for children he can identify with only too well, Antonio finds strength in God's presence. His favorite Scripture, "The Lord is my shepherd, I shall not want" (Psalm 23:1), is deeply significant to him.

"God tells us about all the times we will be needing something," Antonio says, "but he will always be there for us, in the good and bad times." ■

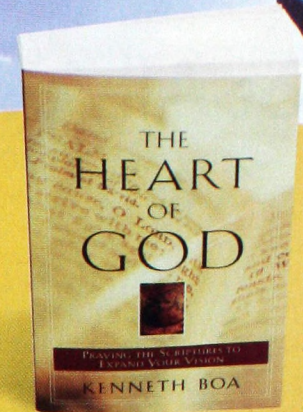
Barbara Aguirre is a communications officer for World Vision in Ecuador.

BARBARA AGUIRRE/WORLD VISION

a fresh look at God's Word

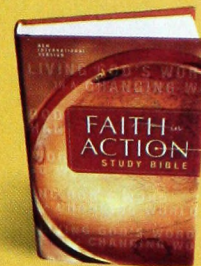
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Not All for Nothing

AFTER A LONG TIME OF WAITING for the person whom the Lord had taken from my ribs—not only a wife, but also someone who would encourage me in ministry—the Lord brought the lady, Hope, into my life.

I was studying theology at the Ugandan Christian University. She was doing the same. The day before our wedding day, Hope became weak. On the wedding day itself she was late, but she eventually turned up and we had our wedding with the blessing of everyone.

On our first night together she was sick. A wedding is a long day of standing, sitting, and waiting, so I felt it would be inconsiderate to demand anything. I said to myself, *We have time*. But Hope became so sick we went to the hospital.

“Cast all your anxiety on him because he cares for you.”

—1 Peter 5:7

While there, I perused her laboratory report. It said Hope was HIV positive.

My heart shouted, *No!* This was a lady who had tried to walk with the Lord and was now an ordained minister. I said, *God, I know I am a sinner, but I don't deserve this.*

Then I received a letter from a lecturer at the seminary that quoted from the first epistle of Peter, I didn't like that at the time. But I kept going back to re-read it.

I said to myself, *If God didn't care for me, he would have sent Hope to me with a year of health left, and I might have been infected by her.* I decided that if God loved Hope enough to send her to me, I would give her all the care I could afford.

But that year was difficult. People knew little about HIV/AIDS in 1991. There were no anti-retroviral drugs. Hope deteriorated to a skeleton covered with skin. I would sit holding her in my lap, waiting, praying. One morning I went to buy medicines, and while I was there her brother came and told me she had died.

After her death, so many unkind words were spoken about us. My friends found it difficult to approach me. My heart was wounded.

In 1994 I decided to go to Rwanda. The church there needed people during the chaotic post-war situation. In 1995 I was made secretary of the Kigali Diocese. I was busy and I liked it like that. I did not want to talk about my past experience.

One day a pastor friend from Uganda came to visit and



insisted I should marry again. I fought the idea but he persisted. There was one girl, Eva, who knew me from when Hope was sick. I decided this was my last effort. If she accepted my proposal I would marry. If not, I would never marry. So I went to visit her in Uganda. Six months later, we married. I have four children now. God really blessed us.

Still, I didn't want to tell my story. But in 2001 at the Anglican Initiative conference in Johannesburg I saw the spectacular response of the whole world to HIV/AIDS. That changed my attitude. I realized if I had spoken out earlier maybe my testimony would have been a blessing to many people.

I had been blaming God, but I had not been seeing the people who are in agony because of HIV/AIDS. God loves them and died for them. He wanted me to have some experience of what his people are going through.

It was not all for nothing. The fight against HIV/AIDS is now my calling from God. ■

The Rev. Francis Kalemera is coordinator for HIV/AIDS projects for the office of the Archbishop of the Episcopal Church of Rwanda.





ROBERT MICHEL/WORLD VISION

Reflections

M O Z A M B I Q U E

HIV/AIDS awareness is breaking through in rural Africa. Here in Mozambique, where 14 percent of the population is infected with HIV, people in World Vision project areas gather to address the disease through song, dance, and drama—a public discussion of what once was private agony. “Clubs of hope,” set up by World Vision in schools, keep the talk flowing among youth, the best hope for an AIDS-free future. And every year, Mozambique hosts World Vision’s AIDS Cycle Relay, a newsworthy event attracting local celebrities and government leaders.

Be the reason for her smile

Give hope and help to a Honduran child in need

Honduras is one of the poorest countries in the western hemisphere. Almost half of all children do not finish primary school—and one in three people has no way to get health care. You can make a lasting difference for one special child by sponsoring him or her today!

Your \$30 monthly gift will provide basics that will change your sponsored child's life—as well as benefit their family, community, and other children in need.

You'll provide access to things like:

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- the chance to go to school
- economic development opportunities for the family

Give a child a brighter future today!



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Please send me information and the photo of a child in Honduras who needs my help.

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