From Peasant To Doctor In 18 Months
Amity Expands Village Doctor Training Program

The Amity Foundation is in need of an extra five million US dollars for a planned program under which 15,000 newly selected health workers will be trained between 1997 and the year 2000. The training scheme, which will cost Amity a total of US$6.67 million, has already received partial funding from EZE (the German-based Protestant Association for Cooperation in Development) and the Swedish Alliance Mission.

Since 1992, Amity has sponsored some 5,000 village health workers, half of them women and all below the age of 45, to attend one-year training courses at prefecture-county-level medical schools. This program is designed to alleviate the shortage of grass-roots medical personnel in poorer parts of China. According to government statistics, in 322 counties below the official poverty line in six provinces of western China (Gansu, Qinghai, Sichuan, Yunnan, Guizhou and Guangxi), there are 15,407 villages without either clinics or registered health workers. In some of these areas, according to Amity Medical Division Director Li Enlin, health workers have left and clinics have been abandoned since the introduction of health system reforms in the 1980s. But in many of the poorest and most remote communities there never were such services in the first place.

Even in villages equipped with small clinics, health workers are often poorly trained and lack the most basic diagnostic skills. It is not uncommon for their training to consist of only a few weeks’ internship in the gynecology room of a township hospital.

In order to meet urgent demands and make greater use of the connections established over the years, the Amity Foundation decided to expand its medical training program in three different ways. To the six provinces listed above which have had Amity-training courses so far, Ningxia and Inner Mongolia will be added. In order to provide more in-depth training, courses will be lengthened from 12 to 18 months. The curriculum will include one school year in the classroom, one semester internship in a hospital and one month for a community investigation project.

Evaluation of training results in the past has revealed that some 20% of the Amity graduates failed to open practices in their villages because they lacked the financial means to establish their own clinics (see story below). In the future, therefore, Amity will not only cover two-thirds of the tuition fees and contribute towards textbooks and maintenance, but will also provide 700 yuan per graduate in “seed” money (start-up capital), usually needed for the purchase of necessary equipment and basic medicines before medical practices can generate income by themselves through consultation fees.

Network of shared responsibilities

In its training scheme, Amity targets remote mountain areas mostly inhabited by ethnic minority groups. Village committees identify suitable candidates, who must have completed nine years of schooling. At least half of all trainees must be women. The trainee, the village committee and the county health bureau sign a three-way agreement stipulating that graduates will return to the village to work, that the village will provide a site to set up a
clinic and also some start-up capital, and that the health bureau will license the clinic, supervise the health worker and supply medicines.

Total costs for each trainee, including tuition fees, board and lodging, textbooks and travel, are estimated at 8,450 yuan (US$ 1,000 approximately). Amity will provide 2,985 yuan per student, the provincial or prefectural government will contribute another 2,265 yuan and the village and/or the individual trainee must find a further 3,200 yuan. When the health worker has returned to the village and established the clinic, Amity will reimburse the contribution paid by the village committee / trainee, and will help to stock the clinic with equipment and medicines.

Adjustment to grassroots needs

In addition to financial sponsorship, Amity will be involved in the program by cooperating on curriculum development. Training will cover the use of 40 basic drugs and encourage referral of more complex conditions. Major emphasis will be put on prevention, rural hygiene and the administration of village clinics, including the keeping of case notes. Amity plans to produce and distribute a set of three videos on how to set up rural clinics.

Other Amity-produced teaching materials that will be used in the training courses include the primary health care classic Where There Is No Doctor. Originally written by the US-aid worker David Werner for Latin America, it has been translated into many different third-world languages. In 1993, Amity published a Chinese version, which was adapted for use in mainland China’s rural areas by a team of doctors at the Jiangsu People’s Hospital. More than 90,000 copies of the book have since been distributed to health workers.

Over the next three years, a parallel training program will sponsor a six-month in-service training course for 3,000 health workers from township and county hospitals. While in the past hospitals paid their employees only part of their salaries during course time, they will continue to pay full salaries in the future. Amity will cover tuition fees, and the trainees will undertake to return to work in the hospitals they came from.

For the training of medical personnel on township and county level Amity has compiled and produced a series of 50 training videos, illustrating 210 distinct diagnostic, preventive and curative procedures. This project was undertaken in cooperation with Western China Medical University in Chengdu, Sichuan Province.

To support the Amity Foundation in the coordination and supervision of the training classes, which will be held at 22 medical schools (selected from a total of 315 such facilities in China), Amity established an office in Lanzhou, capital of Gansu Province. The Medical Coordination Office of the Amity Foundation in Western China employs seven staff members. For salaries are paid by Amity, and the remaining three by the Provincial Health Ministry. The office also publishes the Rural Doctor Quarterly, Chinese newspaper distributed free-of-charge to grassroots medical personnel which may help to keep in touch with Amity graduates and provide further professional support.

Gotthard Ochs
in cooperation with Nick Young

The Amity Foundation is now active in most parts of China. The provinces (including provincial-level autonomous regions) mentioned in this issue are named on the map.
Training Completed - And Then?
What It Takes To Become A Village Doctor

The following story has been taken from the Rural Doctor Quarterly, published by the Medical Coordination Office of the Amity Foundation in Western China, located in Lanzhou, Gansu Province. Since the publication networks health workers in China's remote and less-developed regions, this particular article depicts an example of the difficulties faced by anyone who have graduated from Amity's village doctor training programs.

Whoever enters Chen Zanyuan's health station cannot overlook the scroll on the wall in the village doctor's own calligraphy:

Searching high and low to relieve people from their miseries!

With so many patients flocking to his clinic, it is hard to imagine what a difficult start Chen had as a village doctor.

Struggling for a doctor's reputation

September 1993. Autumn had brought cool and crisp weather to the Qinghai plateau. Chen Zanyuan had just graduated from a one-year Amity training course for village health workers and returned happily to his home in Xiamei Village, Gonghe County. Only seventeen years old, he was enormously proud of his success and felt ready to cure his villagers from all their illnesses.

He settled down again in his parents' farm house, and waited for his first patients to show up. He waited for days, but not a single person knocked at his door for treatment. Instead, he heard people gossip behind his back: "How could this young boy ever be a doctor? He can't treat us anyway; he has neither pills nor injections!" Hearing this, his heart sank. The country folk in this area, most of them ethnic Tibetans, were extremely poor. There was no doctor far and wide. When people fell sick, their only option was to turn the prayer wheel, hoping that the gods would heal them. They urgently needed a doctor. Then decided not to be defeated by his people's talk. Things would only be lost if he allowed them to strip him of his self-esteem.

The Amity training course had prepared him. He had learned not only medical knowledge, but also, even more importantly, to face hardships and to serve his fellow villagers in love and with dedication. He was willing to start from scratch and make do with the most simple means. He made up his mind and stopped waiting for the people to come to him. Instead, he went out looking for them. Dropping by their homes for chats, he jumped at every opportunity to share his newly acquired knowledge with the villagers, dropping hints and suggestions of how they could improve their diet and hygiene, and how they could stay healthy in winter.

He felt confident with massage, acupuncture and moxibustion. To break through people's reluctance, he offered them free treatment. An old herdsman named Zhao Youcai was miserable enough to give it a try. Suffering from acute rheumatoid-arthritis, he could hardly walk. Chen saw him every day at noon and gave him acupuncture treatment. It took only days until the old man's legs had recovered enough for him to carry him through the village. He was amazed and the news quickly spread: "Old Zhao can walk again! A miracle! Little Chen is a doctor!"

From that day on, people called on Chen with all their ailments, seeking his treatment and hoping for a cure.

Creating a clinic out of nothing

Suddenly flooded with patients, Chen saw himself confronted with their sufferings as well as their aspirations. But what could he really do for them? Without a single penny to spare, he was unable to buy even the most basic medicines or the simplest equipment. He had hardly more than his bare hands, with which he could only give massage or set a few acupuncture needles. The seriously ill he had to turn away, crushing the hopes that had brought them to him. Chen felt increasingly frustrated and unsettled. How could he let his people down? He simply needed cash - sufficient start-up capital for a health station of his own. Somehow he had to earn it, come what might.

In the spring of 1994, a group from his village prepared to set out for the mountains to dig up Chinese caterpillar fungus, a rare and precious plant used in traditional herbal medicine. Chen decided to join them. He borrowed 400 yuan and made himself a simple travel suit. The men, however, finding him too young and physically unfit, tried to talk him out of it. But Chen, in his determination to do anything for his practice, kept pestering them stubbornly, and when they set out on their journey, he simply joined them and followed them on their arduous trip into the snowy mountains, up to an altitude way over 4,000 meters.

Conditions were harsh. In May, the Qinghai's high mountain through the snow... their feet froze, and their backs ached from theconstant bending and digging. To make things worse, altitude sickness overcame them one after the other, caus-

Chen Zanyuan (left) with Amity's health director Li Enlin in front of his village clinic.
ing breathing problems, headaches, nausea and vomiting. Whenever they could not stand it any more, they climbed down a bit, sought shelter in a nomad tent and had a little to eat. But since they were not used to local food, they often went hungry.

As days went by, Chen’s liver started to bother him, and some of his companions developed symptoms of edema. But it would have been unthinkable for Chen to return home empty-handed. He forced himself to work even faster, frantically digging up the plants and filling his basket until his back hurt and he could carry no more. When his friends tried to slow him down, he ignored them. Bending and crouching, climbing over rocks and stepping through muddy soil, he covered seven to eight kilometers every day. At night, he treated his group and himself with acupuncture and moxibustion.

When, after two months, he finally returned home, Chen had twenty pounds less on his body but 4,000 yuan more in his pockets. But he did not allow himself to rest. Knowing that summers are short in Qinghai, he lost no time and threw himself into forming mud bricks, felling trees, sawing beams, and purchasing medicines.

In November of the same year, Chen’s dream came true. His health station opened accompanied by the crackle of fire crackers, with the entire village showing up to celebrate. On the neatly whitewashed front wall, between two little window counters, Chen put up a wooden sign with a red cross. The characters read: “Amiti Health Station”. He let his eyes rest on the fresh red paint of the sign, then looked into the hopeful and expecting faces of his fellow villagers, and his exhausted body felt satisfaction, his wounded heart some consolation.

Relieving the peasants from their miseries

After starting his practice, Chen became more familiar with the miseries and agonies of the villagers. Many people who saw him had suffered for years but never seen a doctor before. Instead, they had visited shrines and temples and had consulted holy scriptures - not because they mistrusted modern health care, but simply because they lacked the money to pay for a consultation in town. Chen has learned to work around this.

If patients are in financial difficulties, he treats them free of charge and sells them medicines on credit. People usually do not exploit his generosity; on the contrary, they tend not to see him as often as they should. For the sake of their health, Chen has to encourage them to use his services more regularly, regardless of their financial situation. The mountain tribes are simple and honest people and keen on saving face. Having been exempted from payment once, most of them feel too embarrassed to go back to the clinic before they have the means to clear their debts. Chen once treated a next-door neighbor for free. When she came back the next time, needing more medicines but still unable to pay, she was visibly uncomfortable and ashamed. But Chen skated over her embarrassment. Displaying his broad, boyish smile, he asked her to sit down and said, “You know, so far I am not short of money but rather short of patients.” Every year after the autumn harvest, many of Chen’s patients show up to pay back what they owe him.

In order to help people understand that his clinic is not primarily a commercial venture, Chen has put up a wall poster on which he has written his self-composed code of professional conduct. “Patients too sick to come to the clinic shall be given home visits. Patients in economic difficulties shall have their payments postponed by a period of their own convenience.” For people too shy to bother him with trifles or too penny-pinching to see him before they are in deep trouble, Doctor Chen has this admonition: “It is better to be healed from a light illness than to die later from a severe one.”

Acupuncture and moxibustion are, according to Chen, the most suitable and appropriate means of treatment for China’s poor rural areas. To save money, Chen did not buy his own chart of acupuncture points. Instead, he borrowed one from somebody else, took to the city and had it xeroxed for a fraction of its purchasing price. Since then, he has gone over it a lot, studying an reviewing the points and their locations, and even trying them out on himself. If Chen comes across an illness he cannot cure himself, he tries to persuade the patient’s family members to take the sick person to a hospital. Often he comes along, on the one hand to assist the patient but also to learn something new for himself on the other. If he cannot accompany the patient, he pays a house call later to find out meticulous detail about the check-up, diagnosis and treatment done by the hospital doctors.

Today, Chen is liked and trusted throughout the area. People seeking treatment are no longer from among his own folks in Xiamei only, but come from at least three other villages nearby. With the radius of the area he serves increasing, he now tends to the needs of a population of 1,300.

When, some time ago, one of Chen’s old and long-time patients from a neighboring village died, the son of the deceased arranged for the funeral procession to pass through Chen’s village. When the son called on Chen’s house to pick him up, he invited him to climb on to the back of his hand tractor insisting that he take his seat among the senior relatives and village leaders.

All the gratefulness and respect he receives from his people do not, how-
From Child Of Illiterates To Queen's Interpreter
To Scholarship In Thailand
Overseas Study Program Shapes Remarkable Careers

Amity's Education Division is best known for its Teachers Program, under whose auspices 75 to 80 foreign language teachers from 10 different countries serve in a variety of institutions of higher learning in eastern China each year. Lesser known but no less important for its impact on the opening and reform of China's education is another program in the same division, through which the Amity Foundation sponsors Chinese English teachers for overseas study programs of one or two years, thereby enabling them to improve their language abilities and to acquire new teaching skills.

In the Spring of 1997, Amity selected four women teachers from Yunnan, Guangxi, Guizhou and Sichuan provinces and enrolled them in a masters program in TEFL (Teaching English as a Foreign Language) at Payap University in Chiang Mai, Thailand.

Though Chinese nationals, the four candidates are not Han-Chinese but from the Zhuang, Tujia and Hui ethnic minorities. All in their late twenties or early thirties, they have years of experience in teaching English at provincial institutions for ethnic minorities.

Apart from improving the teaching of English in China, Amity hopes that this particular assignment will help promote friendship and mutual understanding between China and her neighboring countries and strengthen the role of women within China's ethnic minorities. For all four candidates, the Amity program will be the first opportunity in their lives to travel abroad.

Considering their family backgrounds, these women have come a long way. "My primary school was dozens of miles away from my village," recalls Ma Lin, one of the four.

"Though my parents were illiterate, they encouraged me to study hard so that I could later help others overcome poverty. Every day I walked for hours and hours, and I studied even longer. It was not in vain. When I was admitted to university, my fellow villagers were overjoyed and very proud of me. Wherever I go, I will never let them down."

Ma Lin, from a Muslim Hui family, has taught at the Yunnan Institute of Ethnic Minorities since 1987. She interpreted for Britain's Queen Elizabeth II during her visit to Yunnan Province in 1986.

Funding for this training program comes from the US-based United Board for Christian Higher Education in Asia.

"Personnel Changes"

In January this year, the Amity Nanjing office bid farewell to two of its longest-serving staff members. Ms. Gu Xinhui, who coordinated the Foundation's support to small-scale projects run by local churches, moved to Guangdong Province, where she took up a job as a business executive. Ms. Cao Jingxin, lately in charge of publications and formerly assigned to the Teachers Program, was transferred to the Nanjing Office of the China Christian Council.

Many friends of the Amity Foundation have come to know Ms. Cao as an interpreter at international meetings in China or with Amity delegations traveling overseas. We wish both Ms. Gu and Ms. Cao well in their future ca-
Amity To Establish Model Project On Blindness
In Run-Up To WHO-Conference In Beijing

When the WHO-sponsored World Conference on Blindness Prevention opens in Beijing August 1999, the Amity Foundation hopes to have a model project in place which may demonstrate to world experts how blindness can be effectively dealt with in developing countries. The project will be located in the southern Sichuan prefecture of Luzhou, a remote mountainous area inhabited by many ethnic minorities and where many of its counties fall below China's official poverty line.

In Luzhou, Amity aims to combat blindness and its effects with a prefecture-wide comprehensive program covering prevention, treatment, education, rehabilitation and employment schemes. Treatment and education activities will be carried out on prefecture, county, township and village levels, thus involving the entire hierarchy of Luzhou's health administration. For each of these levels, specific targets and adjusted methods have been defined.

For years in many parts of China, the Amity Foundation sponsored and organized the training of county-level doctors in the performing of cataract operations under basic rural conditions. In order to extend its blindness prevention programs at the grassroots level, Amity has selected two poor counties in Luzhou Prefecture, Hejiang and Guiling. In these counties, medical doctors employed in township hospitals have undergone one-month training courses, taught by county-level ophthalmologists, to learn to perform extra-ocular operations for the curing of common ailments such as trachoma and conjunctivitis. The township doctors, in turn, have been instructing the health workers practising in local villages how to identify the most common eye-diseases. By April this year, 500 village health workers had finished their four-day training courses.

Utilizing the fruits of this training, the local administration will now screen and register the entire blind population and all people with eye diseases residing in Hejiang and Guiling. Later this year, eye operation teams consisting of county doctors and provincial experts will visit township hospitals in the two counties to give eye treatment and perform surgery. This will represent the final stage of the current ophthalmological training program.

Luzhou Prefecture is also going to see Amity's second community-based rehabilitation (CBR) program, under which incurably blind villagers will be trained in their homes to look after themselves, do household chores, improve their social lives and engage in productive labor. Amity's first CBR project was started in Yixing, a county in southern Jiangsu Province, where 138 clients received rehabilitation training in 1996 (see also Amity Newsletter No. 37/38, 1996).

Most of Amity's blindness-related projects are implemented in professional cooperation with the German-based Christian Blind Mission, which also acts as financial sponsor.

Gotthard Oblar

China Keeps Struggling For Food Security

The world's food problem is far from being solved, according to Amity's Rural Development Director Qiu Zhonghui. Though the annual world grain production has reached an average per-capita amount of almost 400 kg, over 800 million people worldwide do not have enough to eat. These problems are most pressing and massive in scale in Africa and south Asia. Increased production and fairer production could best be reached through drastic land reforms, said Qiu in a recent interview in Hong Kong.

With socialist land reforms in place for almost half a century, China manages to feed 22% of the world's population with only 7% of its arable land. While this is rightly hailed as a great national achievement, China's limited land and growing population put great pressures on the country's environment. As Qiu pointed out, much research needs to be done to develop better ways of carrying out sustainable agriculture.

Another problem, according to Qiu, lies in the fact that 5.6% of China's population still live in absolute poverty. While the percentage figure may look modest, the absolute number is overwhelming. It means that 65 million Chinese are unable to fully feed themselves. As this figure is based on government statistics, the real number could well be considerably higher. Greater efforts are needed to shift from relief to development work in the fight against poverty.
More Ophans Enjoy
The Care of "Amity Grannies"
Domestic Adoption Remains Top-Priority

After significantly expanding its support for Chinese orphanages in 1996, the Amity Foundation is now also involved in 12 Social Welfare Institutes. These are located in Nanjing, Zhenjiang, Changzhou, Wuxi, Suzhou, Nantong, Zhanjiagang, Gaoyou, Gaoshun and Danyang (all located within Jiangsu Province), as well as in Nanchang (Jiangxi) and Shanghai.

At each of the above institutes (with the exception of Nanjing, Nantong, Gaoshun and Danyang), Amity sponsors four women, mostly retired medical workers or teachers, who attend to the orphaned babies and toddlers, thereby alleviating the pressures on regular staff and enhancing practical child care. This so-called "Grandmother Project", which was first started at the Nanjing orphanage in 1991 (see Amity Newsletter No. 20, 1992), has won great acclaim among Amity's overseas supporters. The volunteers are usually recruited from local Christian churches and receive a monthly allowance from Amity in recognition of their commitment. Living out practical examples of love and care, the "grandmothers" have a positive effect on the children's psychological development as well as staff morale.

For 42 of the handicapped or deformed children in the orphanages listed above, the Amity Foundation has sponsored and arranged correctional surgery and medical treatment, thereby enhancing their chances of finding adoptive parents within China. Most of the non-handicapped orphans in China are adopted by infertile Chinese couples, whereas children with certain deformities or handicaps are usually doomed to childhood in an institution, unless they find a new home overseas. The medical problems dealt with in the Amity-sponsored surgery program in 1996 included, among others, harelips and cleft palates (17), congenital hearing problems (6), heart diseases (3), spine inflammation (3), club foot (2) and facial-burn scars (2).

In addition to infant care and medical treatment, Amity has taken care of the educational opportunities of some of the brighter orphans. While most orphanages run their own classes, which are commonly attended by learn-ing impaired, disabled as well as non-handicapped children alike, Amity has provided scholarships covering school fees and textbook expenses for 42 orphans to enable them to attend regular schools within their community. Of the 42 children selected in 1996, 38 were enrolled in primary schools, two in high schools and another two in colleges.

In another program, Amity supports foster parents of orphans in Fei County (Shandong Province), an extremely poor area in which Amity started its shoulder the additional burden of raising their grandchild. Since these "lost-a-generation" families live in abject poverty, Amity has decided to support them with monthly grants of 100 yuan (US$12).

While this may sound heartless, it is simply a result of socio-economic realities in the backwaters of rural China. In order to make a living, a young widow usually remarries within less than a year after her first husband's death. According to tradition, she moves in with the family of her husband. Due to the one-child policy, the new family does normally not accept a child from a previous marriage. In most cases, this child is therefore raised by its paternal grandparents or its father's brother. Especially if there is no uncle, the child's grandparents have not only lost their only son and breadwinner, but also have now to

*Granny* Wang Xisheng, foster mother of three orphans who underwent Amity-sponsored correctional surgery.

At present, Amity supports over fifty of these and other foster families in several villages in Fei County's Shaoyaoshan Township. Funds for this program are covered by the Norwegian-based Christian Mission to Buddhists.

Gotthard Oblau
Rural Projects Expand To Guangxi Province

In January this year, the Amity Foundation started implementing its fourth integrated rural development project. Located in Lingyun County, Guangxi Province, the project's major objectives and strategies are similar to the program which Amity began 16 months earlier in Puding County, Guizhou Province (see Amity Newsletter No. 40, 1997). The Lingyun project, however, contains several more ecological components, the biggest of which is a scheme of Zenia tree planting. Great importance has been attributed to the afforestation of mountain tops, without which newly terraced slopes are left vulnerable to rainfall-related erosion. In addition, it is hoped that the setting-up of tea plantations in the low-lands will take away cultivation pressure from steeper slopes.

Also in Guangxi Province, three counties of Baise Prefecture have been selected as the site of a large-scale afforestation project, in which 10,000 hectares of land will be covered with Zenia trees. The Zenia, a very robust species needing little soil and water, grows well on dry and rocky land, providing natural protection against further erosion on already parched and exposed slopes. While the Zenia's leaves can be used as animal fodder, the tree can be cut after ten years and sold as timber.

The two projects in Guangxi will be partially sponsored by Germany's EZE (the Protestant Association for Cooperation in Development) to the equivalent of almost one million US-dollars.

Local cadres inspecting Zenia trees in preparation of Amity's afforestation project in Guangxi.

******

Recommended Reading:

China Development Briefing

This quarterly bulletin of around 24 pages per issue is compiled by the Kunming-based, independent journalist and development expert Nick Young. It provides lucid information on a wide variety of social development projects in China, undertaken by Chinese and international NGOs as well as government bodies. With regular and accurate reports on the Amity Foundation, this journal is a useful tool for all who seek to understand Amity's activities in the broader context of China's aid, development and social work.

China Development Briefing maintains an Internet Home Page (http://www.cityu.edu.hk/cdb/) and can be subscribed to through Prof. Stewart MacPherson, Asia Pacific Social Development Research Centre, City University of Hong Kong, Tat Chee Ave., Kowloon, Hong Kong (Fax: 852-2788 8926, E-mail: sasmapch@cityu.edu.hk).

The Amity Foundation was created at the initiative of Chinese Christians for the purpose of promoting health, education and welfare in the People's Republic of China. It is an independent Chinese voluntary organization in which people from all walks of life may participate. Amity represents a new form of Chinese Christian involvement in society, through which Chinese Christians are joining hands with friends from around the world to serve the needs of China's modernization. The Amity Newsletter is distributed free of charge four times a year. If you would like to receive the Newsletter, or desire further information on any of our projects, please feel free to write. Institutions receiving the Newsletter are welcome to reprint any article from it. Credit should be given to the Amity Newsletter, Quarterly Bulletin of the Amity Foundation.

Funding for the work of the Amity Foundation comes from sources, both Chinese and foreign, religious and nonreligious, individual and organizational. Inquiries and suggestions concerning possibilities for new project initiatives are welcomed, as are contributions for the direct support of the Amity Foundation, Cheque or bank draft made payable to the Amity Foundation may be sent to the Nanjing Office.

Overseas Coordination Office:
The Amity Foundation
4 Jordan Road
Kowloon, Hong Kong
Phone: (852) 27238011
Fax: (852) 23662769
E-mail: amityhk@hk.super.net

The Amity Newsletter is prepared by the staff of the Amity Foundation and printed by the Amity Printing Company, Ltd.
Editor: Gottfried Oblau

Headquarters:
The Amity Foundation
71 Hankou Road
Nanjing 210008, P.R. China
Phone: (86-25)331-7093 / 331-7034 /
Fax: 231-4118 / 661-4128
Account No.: 9580 1148 3420 169
Bank of China, Jinling Branch