

**TIME Global Health Summit  
Dinner and Guest Speaker  
November 1, 2005  
7:00 p.m. EST**

Welcome:

David Westin, President, ABC News

Guests will have the spotlight for 3 minutes to share their stories of engagement in global health. Guests to include recording artist Baaba Maal, legendary surfer Laird Hamilton, technology visionary Esther Dyson and others.

Guest speaker:

The. Hon. Madeleine Albright, 64<sup>th</sup> Secretary of Secretary of State of the United States

Interviewed by:

Robert Krulwich, Host, NOVA scienceNOW, and Correspondent, ABC News

At the TIME Global Health Summit, held in New York Nov. 1-3, TIME magazine convened leaders in medicine, government, business, public policy and the arts to develop actions and solutions to the world's health crises.

More information, including archived webcasts of sessions, transcripts and downloadable photos, available online at [www.time.com/globalhealth](http://www.time.com/globalhealth).

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BEGIN COMMERCIAL BREAK

UNIDENTIFIED MALE #1: [Kaisernetwork.org](http://Kaisernetwork.org)

END COMMERCIAL BREAK

UNIDENTIFIED MALE #2: Ladies and gentlemen, the Managing Editor of "TIME," Jim Kelly.

JIM KELLY, MANAGING EDITOR, "TIME MAGAZINE": OK, thank you ... I know you're not seated yet, but this is meant to make you sit down. Please sit down; please take your seats. Please take your seats ... thank you very much. Thanks for coming tonight. This dinner is meant to give us a little more taste of what's going to happen tomorrow.

And it is my great, great pleasure to introduce – hello, table four – to introduce David Westin, who's a very good friend of mine; he's the President of ABC News. And as President of ABC News, he has set the agenda for TV journalism with a conscience.

Ladies and gentlemen, Mr. David Westin.

DAVID WESTIN, PRESIDENT, ABC NEWS: Jim just said this is like working Secaucus. I'm not sure if that's right or not. Thank you very much for inviting me personally to be here tonight, but even more, thank you for

inviting ABC News to be part of this very important conference this week. I have a special debt of gratitude to my friend, Jim Kelly, for the leadership role he's played in putting this conference together and this issue of "TIME Magazine."

I've had the pleasure and the privilege now to work with Jim and the "TIME Magazine" now on several, very important reporting projects. And I can tell you from personal experience that there just is no better organization than "TIME Magazine" when it comes to picking some of the truly important issues of our day and reporting them out with intelligence and depth and true commitment.

I also want to acknowledge with gratitude our colleagues from WGBH (ph) and the six-part documentary that we all, I know, are very eager to see coming up. And, of course, I want to talk about Bill and Melinda Gates and the Gates Foundation, represented here tonight by Patty Stonesifer. Just – there's Patty – just yesterday, they announced – as you all know – a further commitment of \$258 million toward their goal of eradicating the scourge of malaria around the world.

I think it's truly no exaggeration to say that the more we see and hear of what the Gates are doing, the more in awe we are of the monumental commitment being made and the real difference being made around the world. And lastly – and perhaps most importantly – I want to acknowledge so many of you here tonight and, literally, the thousands of people that I know you all represent.

There's so many here that have been fighting the good fight of public health around the world for years now, long before some of the rest of us could see both the awful situation, but also the opportunity, frankly, raised by some of the terrible diseases, such as tuberculosis, AIDS and malaria around the world. You all collectively know far more than most of the rest of us will ever know about both the causes of what's going on, but also the opportunities presented.

For those of us in the media, to speak broadly for a moment, I think it really lies to us to try to follow your lead as best we can and to bring the truth of the situation from around the world to all of our audiences all on the hope that when people truly understand what the situation is, that we move to action.

So, I think – would you mind giving me a glass because I didn't bring one up, Jim?

We're such good friends we can share wine – thanks.

And so I do want to raise a glass to all of you fighting on the frontline in public health and let's hope that this conference will be a step towards focusing the United States and, really, all the rest of the world on our – on our common goal – cheers.

JIM KELLY: Thank you very much, David.

Now, I have a favor to ask: tomorrow afternoon, I get to interview the 42nd President of the United States and the Chairman of Microsoft, and the co-founder of the Bill & Gates Foundation Bill Gates. And I have my own questions, but my guess is your questions are going to be more interesting than mine. So, on the table – each table – there's a few cards and a couple of pens. And if you could write down the question that you would ask the President or – and/or Mr. Gates, I will take them home tonight and I will stay up for a couple of hours looking through these questions.

If you could write your name down on the question, I would appreciate. And if I do use your question tomorrow, I will get you an autographed copy of this week's "TIME Magazine," autographed by James Notwick (ph). So that's called "making an incentive to donate." So just write those – and someone will come around before this is over (ph) and collect them.

Now, it is my privilege Robert Krulwich, who as you know, is one of ABC's best correspondents. "TV Guide" has called Robert "the most inventive network reporter in television," and that does not mean, as I first thought, he makes things up. What Robert does very well is he takes very complicated subjects and explains them to viewers in ways that are both informative, entertaining and accurate. Robert also serves as Host and Executive Director of the PBS

program, Nova Signs Now (ph), and is a regular correspondent for “Frontline.” It is my pleasure to introduce Robert.

ROBERT KRULWICH, CORRESPONDENT, ABC NEWS: All right ... so it’s my job to introduce – the room is filled with people who are more than a little bit special, but they told me about four of you. So I’m just going to – and you’re all on different levels, so you just bear with me.

Number is Laird Hamilton, who is right over here. The story of Laird begins almost in the water. You were born under peculiar circumstances. Can you describe to me what were you doing to your mother when you entered the world?

LAIRD HAMILTON: My mom was at the University of ...

ROBERT KRULWICH: Stand up, actually, so that the cameraman can find you better.

LAIRD HAMILTON: My mother was at the University of San Francisco and they were putting like a vacuum bubble over her stomach for the last trimester of her pregnancy and then ...

ROBERT KRULWICH: Why were they doing this?

LAIRD HAMILTON: Just using a vacuum to relieve the abdominal pressure on the fetus and – so that I could kind of move more freely.

ROBERT KRULWICH: Did you move more freely or can’t you recall?

LAIRD HAMILTON: I’m not sure yet. It had some sort of effect ... I’m not sure the long-term effects of it yet, but ...

ROBERT KRULWICH: When did you begin – now your father – so she, your mom, was a surfer; your father was actually a legendary surfer, Bill Hamilton, in the 60s. You began surfing when?

LAIRD HAMILTON: I started swimming before I could walk and probably – had my first board built for me when I was about four or five years old. I surfed on pieces of surfboards when I was between the age of two to three years old.

ROBERT KRULWICH: Before you could stand? I mean – does (ph) that mean (ph) – you were at the front of the board, the back of the board?

LAIRD HAMILTON: Well, actually, the first real wave that I stood on was on my dad’s back ... he bodysurfed the wave and then I rode him.

ROBERT KRULWICH: Now, the reason you’re here is not to discuss your early years. The reason you’re here is because of something called – the reason you’re here is because of something call SurfAid. Now this actually turns out to be kind of a fascinating story ... what is it?

LAIRD HAMILTON: SurfAid is a – is a foundation that was established by a doctor who went on a remote surf trip in Indonesia, in the Mentoi (ph) Island, and discovered that there was a massive malaria epidemic there and began to work in these small villages and help them kind of deal with this epidemic through education and medication and ...

ROBERT KRULWICH: So he told other surfers, “here’s what you want to know: here’s how mosquitoes get born, here’s how mosquitoes do trouble, here’s the story about nets,” and then the would surf in and educate?

LAIRD HAMILTON: Well, no, it was a little bit more complicated than that ...

ROBERT KRULWICH: I hope so.

LAIRD HAMILTON: ... but surfers are a pretty proactive group and I think because of our nature, that we're so kind of so reliant on nature to provide our conditions and we're so aware of nature because it creates our joy and our passion that it makes – it makes us hypersensitive to people in need, I would think. And – at least that's the case for me and the doctor made the other people in the foundation – they started doing it through donations, private donations and then the surf industry through Quiksilver and Billabong, these other billion-dollar corporations started donating money towards it. It was moving slowly until the tsunami hit.

ROBERT KRULWICH: Now when the tsunami hit, there were communities in Indonesia – isolated communities that were cut off ... this is the cowboy part: the surfers got together, got boats that they had and led people to the people who were isolated.

LAIRD HAMILTON: Absolutely, yes ... took doctors, took medicine, took, you know, went really as first responders into these villages that really had not been – that no one had gotten to yet and they ...

ROBERT KRULWICH: so I don't have it (ph) too romantic, they're not surfing in ...

LAIRD HAMILTON: No.

ROBERT KRULWICH: ... they're going on boats?

LAIRD HAMILTON: Yes, they're going in – going in on boats. It's not that romantic, with a surfboard. But yes, going in on boats that would normally be on a surf trip, we're taking these boats and bringing supplies and trying to go into villages and re – you know, reestablish the water base and trying to like deal with the potential malaria epidemic that would be caused by, you know, stagnant water and other ...

ROBERT KRULWICH: The surfers did or rescue people?

LAIRD HAMILTON: Surfers are everybody. Se that's – you're isolating us ...

ROBERT KRULWICH: Yes ...

LAIRD HAMILTON: ... and you should ...

ROBERT KRULWICH: Get over that.

LAIRD HAMILTON: We're – surfers as doctors, surfers are lawyers, surfers are presidents; surfers are surfers, but they are people most of all.

ROBERT KRULWICH: I think I'll end it on that note – but wait, before I leave you, did they rescue folks?

LAIRD HAMILTON: Yes, there was a – I mean, besides medevacating people out, more than 70 or 80, we treated probably more than 100,000 people for different – you know, different ...

ROBERT KRULWICH: So there were hundreds of these people doing ...

LAIRD HAMILTON: Yes ... eventually, it grew, but initially, it was a small group of people and then it grew and other organizations got involved. But they spoke of (ph) – they were there for days before they saw any military helicopters or anybody showing up. They had already been there for days on end.

ROBERT KRULWICH: So the surfers go there first.

LAIRD HAMILTON: ... do that, if that's what you're thinking.

ROBERT KRULWICH: I've christened you.

LAIRD HAMILTON: All right.

ROBERT KRULWICH: I disappear here behind the – number two, hero number two from “TIME Magazine’s” selection. This is, of course, a selection – “TIME Magazine’s” gone through their other heroes here: Zacchi Akmad (ph)? That would be you. Could you stand up and – let’s see, where should you look? ‘Cause there’s going to be a camera over there, but ... let’s look – so let me – tell the audience a little bit about you: you are a – come from Freetown (ph)?

ZACCHI AKMAD (ph): Yes I do.

ROBERT KRULWICH: You were an activist in school in the 70s. Is it true that you so opposed apartheid that you set fire to your school?

ZACCHI AKMAD (ph): Yes.

ROBERT KRULWICH: Are they related (INAUDIBLE)?

ZACCHI AKMAD (ph): Yes ...

ROBERT KRULWICH: You were arrested and detained five times for 10 years you worked as an underground activist for the African National Congress. You organized youth groups ...

ZACCHI AKMAD (ph): Clearly (ph), I just have to issue a disclaimer: I can’t work for 24 hours so my brain’s dysfunctional.

ROBERT KRULWICH: Well, you notice I’m doing a lot of the talking anyway. I watch eyeballs carefully ... but you’re a gay man?

ZACCHI AKMAD (ph): Fag, yes.

ROBERT KRULWICH: And you’re HIV positive? These shirts that you’re wearing, would you mind – could you do a full rotation so people can see it. Tell me a little bit about this shirt because it’s become kind of fashionable.

ZACCHI AKMAD (ph): I wish it was fashionable and help (ph) Calvin Klein and U.S. people, I think (ph). Eventually, in December of 1998, a woman disclosed her HIV status in Gebelin (ph), Mozululu Kalim (ph), South Africa, and she was stoned to death. And our organization, the Treatment Action Campaign, started by using this T-shirt. And we used the maxim of the king of Denmark when Hitler entered Denmark and said Jewish people had to wear the Star of David. So we said, everyone has HIV.

ROBERT KRULWICH: Is this shirt now being worn by people all over Cape Town or all over South Africa?

ZACCHI AKMAD (ph): ... one I actually saw was made in Nepal, which is embroidered by people living with HIV in Nepal.

ROBERT KRULWICH: Next you – you’re fighting not only the stigma, you’re also very, very upset by the price of the medicines. And so, you went off to Thailand. Why did you go to Thailand and what did you do when you got there?

ZACCHI AKMAD (ph): Well, the most important thing is to treat all illnesses and topologies (ph) in the public healthcare system, but one of the opportunistic infections for HIV is a thing call peptococcal meningitis and systemic thresh. And that’s treated with Fluconazole, drug made by Pfizer. And Pfizer charged 150 rand per capsule and in Thailand, we bought it for one rand, 73: a generic bioequivalent ... really great and oh, we say to them ...

ROBERT KRULWICH: Why don’t we just say (ph) in like proportions, that’s like 1/100 of the price?

ZACCHI AKMAD (ph): You can do the math. I was never good in math at school. I burned my school up.

ROBERT KRULWICH: Yes, I'd say (ph), and you've been on a plane.

Now, have you taken – since you're HIV positive, are you – are you on meds yourself?

ZACCHI AKMAD (ph): Well, I started taking meds in August 2003 – actually September 2003 and the meds I take right now cost me 450 rand or about \$78 per month. It used to cost \$10,000 a month which was 1,500 – it was 2,000 (ph) rand a month - \$1,500. And so, our government gets – for about \$35 a month the same meds. So it shows the enormous power that ordinary citizens have not only here, but across the globe.

We're assisted by American activists, CPT (INAUDIBLE) many, many organizations and individuals and it's ordinary citizens that are banding together that can take on the power of companies that profit. I think profits a good thing, but profiteering is a bad thing.

ROBERT KRULWICH: And lastly, I've read that you have refused to take anti-retroviral drugs until everybody in South Africa have portable access to them.

ZACCHI AKMAD (ph): Today we have – today we have more than ...

ROBERT KRULWICH: All right, before you applaud, I mean, here's the question: I mean, you could take medicines and be – feel better ... you're not taking the medicines?

ZACCHI AKMAD (ph): Well, I am taking the medicines now and I'm very healthy. My viral load is undetectable; my C4 (ph) count's the best it's been in six years and I'm healthy, but our government still today – we're a country and our people are decaying in one of the worst systems in the world. And our government today still denies the fact – our president denies the fact that HIV causes AIDS. And that is causing this (ph) on an untold scale. We had 200,000 AIDS deaths last year. Most of them, the AIDS-related deaths are from TB and obviously, TB can be cured. But we don't have good new drugs, we don't have good new vaccines, we don't have a whole range of things.

But apart from that, what I'd like to say is that we need systems globally to fight denialism in South Africa, but also globally ...

ROBERT KRULWICH: Denialism.

ZACCHI AKMAD (ph): Denialism – HIV denialism and above all, the scientific denialism that HIV causes AIDS. And I believe that one of the worst crimes in humanity is being committed in our country by the fact that many people do not have access to treatment and that 500,000 thousand new infections occurred last year because our president does not believe that HIV causes AIDS.

ROBERT KRULWICH: Thank you ... I now rise to the third level – there's only four of these, not – you needn't worry, the hors d'oeuvres will be served shortly at the course table.

Esther Dyson is the daughter of Freeman Dyson, the very famous physicist, the most read and one of the most listened to technology-wise folks. You want to stand up? You might as well.

He's constantly playing with technology ...

UNIDENTIFIED FEMALE #1: (INAUDIBLE)

ROBERT KRULWICH: ... you have a notion that "TIME Magazine" and you have shared, that's an interesting health record. Now, right now my health records are with my doctor. Some of them are in the hospital; some of them are with my insurer, and some of them are with A. Westin, my boss and employer – technically, not at his desk, but somewhere. Your notion is ...

ESTHER DISION: You're missing some. Your records are also in the test labs, they're probably at several doctors; they're at pharmacy; they're with, you know, the insurer you had four years ago ... I mean, everywhere. So there's – there in virtual matrices (ph) all over.

ROBERT KRULWICH: And your notion is: Why don't we pull all the records about me or all the records about him, gathered online in one place under my control, her control, his control ... why would you do that?

ESTHER DISSON: We would do it so that when your doctor gives you a drug, he will also know or she will also know the drug the other doctor gave you, so that when you go to a third doctor, that when you go to a third doctor, that doctor can get the lab test from the first two doctors, so that if you change jobs, the information would go with you. And from the point of view of society, what it means that if you now stop eating all this wonderful stuff (INAUDIBLE) and everything, and you start ...

ROBERT KRULWICH: You're dreaming (ph) ... you don't know what they're going to say?

ESTHER DYSON: I looked, I care. Five years or 10 years from now, when you don't get the (INAUDIBLE), it will be just the way John Snow said, "all these people are getting sick getting water from the same pump. That was the first epidemiology. Epidemiology depends on good data (INAUDIBLE) treatment data, what you did 10 years ago affects whether you get sick five years from now.

ROBERT KRULWICH: Now wait, so the doctor could – the doctor that I meet could see that I'm allergic to this or that I'm taking that. The pharmacist could see the same thing. But what about my employer or what about my employer or what about "Big Brother"?

ESTHER DYSON: It's under your control. Right now, your employer has access to your medical records. There are protections, but the problem with most medical records now is they are in fact – they're collected by insurers, they're collected by health institutions. They're not under your control. In theory, they are, but not actually. And – but to go back to the other point: it's not just for that "Rich America" culture (ph).

It's also if you have all this information aggregated, again, with proper privacy protection, you can also see which drugs people take that five years later, cause an unusual (ph) kidney disease or you can see people in this type of genome react well and ...

ROBERT KRULWICH: It's a scholarly leader base (ph) here.

ESTHER DYSON: Well, I would say humanitarian – research ...

ROBERT FULLWITH: As the surfer says, scholars and surfers are humans too.

ESTHER DYSON: Fair enough.

ROBERT FULLWITH: Thank you.

Last is Baaba Maal – hold on a second, I'll just come down the stairs. He's at my table so, it's – I'm going to go down several levels. The choreography of this – the choreography of this evening was by a choreographer who chooses to remain unnamed.

Yes, Baaba Maal, can you rise please?

Baaba Maal was born in Senegal River, his family was fishermen and according to traditional cast structures – oh, I see, we're supposed to take a look at that camera. Under traditional caste structures (ph), you should have been a fisherman, but what happened?

BAABA MAAL: What happened is I went to school and I defied (ph) the standards. Being in this caste system would never have allowed me because I did recognize since the beginning I had a nice voice and my vocation was to

be a musician. But this caste system was going to keep me just strongly in this – in this place and I wanted to travel to discover the world to know it ...

ROBERTH KRULWICH: So you became a musician. You not only became a musician and a songwriter and championing the idea of going to school and learning on your own – the first in Senegal one year became extremely popular then in Paris and Brazil and New York. And now the reason you're here is you've been singing about HIV/AIDS and organized other musicians to do the same.

BAABA MAAL: Because I was telling to myself and to other musicians, that's we had a challenge. If every person (ph), next generation, proactive (ph) and seize all opportunities that we have all over the world, being African music – because it's not my music, it's African music. It comes from the traditional African music that became popular all over the world. So I have to give back something to the population, to the society.

And when I go to the other musicians to join our forces together and to write songs talking about HIV/AIDS, how to face poverty (ph) (INAUDIBLE) ... to talk about education because people listen to our voices and we needed to – the only person to know the importance of the things is to bring children to school. They have to go to school ...

ROBERT KRULWICH: Girls particularly.

BAABA MAAL: Particularly girls because the place where I grew up, a lot of the little girls don't go to school and I feel sad when I see that because I know that with just (ph) the lack of education, they're never going to be able to understand what's going on in the world or how to organize their lives for the future.

ROBERT KRULWICH: Now you've apparently been so successful at this that someone in New York City at the United Nations decided to – kind of like in "Wizard of Oz," they gave you like a title; you're now the UN Youth Emissary. Does it feel – I mean, you would have been that anyway, but ...

BAABA MAAL: It opened – it opened a lot of doors. It did, yes. It did open a lot of doors for me and access to other fields. But I was doing it long time ago and I have to thank the member of my band because after every tour from the United States and Europe, we go playing from village to village with generators, with little, little (INAUDIBLE) to do the things. And we did use – for years and years – more than 10 years, to use that like an opening to – into (ph) the association of women or for young people, old persons (ph) talk to them about everything: about education, about HIV/AIDS, about everything in the country.

ROBERT KRULWICH: And they don't shut you down or say, "please be quiet" or ...

BAABA MAAL: I was very lucky because I make a privilege in my music, which is traditional African music. You know, in Africa, you can say the most important tool (ph) now, the most important way to communicate with people, to give advice to people is the culture because we did grow up with that. This is why I think if all this goes for the millennium, if we use that power of music, of culture and we use the person that comes – either in the small village, speak their language, come sit down with them and talk to them about these things, we're going to succeed in some point.

And I think we should do that: use the power of music.

ROBERT KRULWICH: Well, thank you for being here ... we all thank you (ph).

It's dinner time and then, in the second act is Senator Sam Brownback and Madeleine Albright: an unusual, tripsichord duo.

UNIDENTIFIED MALE #2: ... seat. This is the last part – the second to last part of the program because after we listen to our next guest, then you're all invited to go across the hall and watch the first hour of "Rx for Survival." It really is a terrific documentary, which is actually airing tonight across the country.

Anyway, our next two guests, if you could not afford to buy tickets to see Sam Brownback and Nathan Wayan (ph) and the “Odd Couple” on Broadway, you are in for a treat because for one night only we have the next two people. The first, it is my pleasure to introduce Secretary Madeleine Albright.

Dr. Albright served as our permanent representative to the United Nations during President Bill Clinton’s first term. And then, for four years, served as our Secretary of State – the first woman appointed to that post. During her extraordinary tenure, Secretary Albright made human rights her primary calling card to some of the neediest nations in the world.

And as you know, there are some secretaries of state who are moralistic. And there are some secretaries of state who are very realistic. And I think Secretary Albright managed the exquisite balancing act of being both a realist and also someone who believes strongly that the United States could be a moral force in this world. She may be as close to a global diplomat as exists today ... Secretary Albright.

And now, she’s joined by the other half of the team, Senator Sam Brownback, Republican from Kansas. Senator Brownback has a long list of things in his career in public service. Including in his impressive record as United States Senator, he is Chairman of the Helsinki and continues to – this is a history moment, folks – and continued to expand the relationship between the U.S. and Europe on human rights and trade issues. He’s also an active advocate for human rights conventions in Sudan, Uganda and Vietnam.

And once again, I call upon Mr. Krulwich to moderate this discussion – Robert?

ROBERT FULLIWITH: OK, are we all on? Can we all say hello, hello.

MADELEINE ALBRIGHT, SECRETARY OF STATE: Hello.

SAM BROWNBACK, REPUBLICAN: Hello.

ROBERT KRULWICH: So I did a little Googling – I’m not sure if you’re allowed to Google at a AIDS event, but I Googled.

SAM BROWNBACK, SENATOR, REPUBLICAN (R) ... of me.

ROBERT KRULWICH: So Sam Brownback, I learned, who is by the way Republican Senator from Kansas, recently addressed the New Hampshire Institute of Politics at St. Anthony College. I just couldn’t imagine why someone from Kansas would turn up in – what is it now – Manchester, New Hampshire.

SAM BROWNBACK: They invited me.

ROBERT KRULWICH: Oh, OK .... and Googling her, I learned how many of you were WB fans – probably very few of you – one of you. But if you look up – one of you – but if you look up Madeleine Albright today, her appearance on the “Gilmore Girls.”

SAM BROWNBACK: Beats New Hampshire ...

ROBERT KRULWICH: Yes, you’re right, beats New Hampshire ... so, Rory, who has dropped out of Yale is having a terrible fight with her mother who feels all of this (ph) you appear in a dream, I believe?

MADELEINE ALBRIGHT: Right ...

ROBERT KRULWICH: What happened? What did you do?

MADELEINE ALBRIGHT: Well, I played her mother, so I repeated the same dialogue that the mother always does on her birthday. And I had to memorize, which is not one of my better acting ...

ROBERT KRULWICH: You got through it.

MADELEINE ALBRIGHT: I got through it.

ROBERT KRULWICH: So will Rory go back to college?

MADELEINE ALBRIGHT: I hope ... I don't like the script ...

ROBERT KRULWICH: Oh, OK ... so since you both get around, you should pardon the expression, how did you guys hook up exactly? Like why are we here? Did you ask him or did you all ...

SAM BROWNBACK: I'm not sure (ph) that I like that term ...

ROBERT KRULWICH: No, I do actually – how did you happen to get together.

MADELEINE ALBRIGHT: Well, first of all when I was secretary, I knew very well about Senator Brownback's interest in good works (ph) in Sudan because that was something that he had been interested in all along. So I went up to see him in his office. I – just a little advertising here – I was writing a book about the role of God and religion in American foreign policy. So I went up to see to talk about that ...

ROBERT KRULWICH: You should be flattered.

SAM BROWNBACK: I was – I was.

MADELEINE ALBRIGHT: ... and we started talking about our common interests and found that, in fact, there are a whole series of issues on which right and left – or Republicans and Democrats – can find a common ground. And today is a very good day for us because we've just completed a conference that we did most of the day in which we found – there were a number of issues, but we focused on four issues today in which we all agreed. And one was trafficking and people and Senator Brownback and Senator Clinton did a panel together. Then I did a panel with Congressman Wolf on refugees. We had a panel on how to stop genocide, which General Clark and Dave Gumford (ph), were a part of. And then we had a panel on religious tolerance with Rabbi Saberstein and Reverend Lance.

So we really did spend the day pulling right and left together. And I think the point of it was, I think, we've found a constituency for those who want to do good. So that's how we hooked up.

ROBERT KRULWICH: All right ... well, let's see how you do in the evening session. I guess you danced all afternoon ... we'll see how you do. \

I want you guys to both imagine a village, we'll make it a small one: 300,000 families somewhere in West Africa, and let's decide that in that village, there's a boy or a girl who may be 18 months old who is sick with malaria. There are probably three million people who will die this year of malaria and most of them are poor and under five and in Africa.

So here's the first problem I want you to consider: the mother of this child decides to buy some medicine. Now, there are medicine. And there are medicines, quinine's been available for \$0.15 a dose, SP (ph) is a very cheap – but when she gives her child the available medicines for malaria, she discovers that they don't fix the kid – that the disease somehow has become resistant to that drug which is often the case. What can we do for that child and that mom right now?

SAM BROWNBACK: Buy the more expensive drug that work – more expensive drug – and this is something that's actually in the Malaria Initiative that we're putting forward that we've – we've just had the foreign operations committee meet today to put another – to put 100 million into malaria and get it into drugs and drug treatments that work. Although they're more expensive ...

ROBERT KRULWICH: Why do you – if the drug doesn't work, why do you buy it all, why do we use it if it doesn't work?

Let's imagine that this family maybe \$100 for the whole year. To buy a drug that's more expensive for them would not only prohibitive, but it would be impossible.

SAM BROWNBACK: So we have to subsidize and support it. We have through private and public sector. That's part of the initiative that we're doing on malaria.

SAM BROWNBACK: I might point out and this audience knows it better than any other: 60 percent of sub-Saharan children have malaria. You're talking about a typical situation, not an unusual – 60 percent, and this is a – this is one we know what to do with – how to deal with and how to fight it. I mean, you have to have – you need to have bed nets, you need indoor spraying and you need effective drugs to be able to do this. And that, to me, is well worth investing into helping to save that next – and you should invest in product, not on consultants and conferences. We spent too much time and money on.

ROBERT KRULWICH: ... let's suppose that the better drug, the expensive drug, if President Bush has a plan: \$1.2 billion to fight malaria over the next two years, including the distribution of a combination drug that would work, but the American position is that this should be U.S. approved drugs. There are leaders in Africa who say that a U.S. approved drug is unnecessarily expensive. They would prefer generic drugs and President Clinton's took (ph) off and bought generic drugs. President Bush much choose generic drugs.

How do you feel about generic drugs?

MADELEINE ALBRIGHT: Well, I think that it becomes a very difficult issue because the question is how good are the other drugs. And I think there's some reason to have the U.S. drugs because we think that, in fact – for the most part – they do the right the right job. And there's not an ethical question as to whether they work or not. On the other hand, I think it is also essential to try to get as many drugs to as many people as possible. And the question is how in fact to make sure that the generic drugs are the kind that can do the job. And so I think it becomes a kind of ethical question.

ROBERT KRULWICH: All right, WHO said those drugs made in India, made in Brazil, made in somewhere else are OK ... what do you say?

SAM BROWNBACK: Well, I think you get into a real politic question now on this one then. If you can do that and if it will work and you can buy drugs with U.S. money, that's great. If you're going to have trouble getting the funds at all, because you're not supporting the U.S. based company and intellectual property rights with them, so we can actually get the product out there to deliver.

ROBERT KRULWICH: What if the president of Rwanda says, "hey, excuse me, why should we pay more for a drug – why are you giving us money so we can give it back to U.S. companies? Why can't we give it to him? Why are you limiting our choice and limiting our options? And you would answer ...

SAM BROWNBACK: If this is part of the process of us being able to get the money actually out there and on the table – there's just no additional money at all – then, OK, that's what we've got to do to get the product out there. And then there's also is – this is an American Congress, this is an American president and this is a great American country. We try to support and use this basis as much as we possibly can, with good-hearted intentions, but we need to use the basis of this nation as much as we can.

MADELEINE ALBRIGHT: I think one of the hardest parts in terms of doing it in real (ph) terms is how you persuade Congress at all to give money to any kind of foreign assistance. There's such a misjudgment by the American people who think that 25 percent of our budget goes to foreign assistance, when of course, it's less than one percent. And I would agree that we need to get the money out. And if it takes making that kind of conditionality that may be necessary – and I think the issue of intellectual property rights is important because with a whole series of other issues. With me, some of the questions also are whether the generic drugs are also effective. And ...

ROBERT KRULWICH: But sometimes they aren't ...

MADELEINE ALBRIGHT: Which they aren't, but I do think there has to be some way to get the largest number of drugs to the largest number of people.

ROBERT KRULWICH: How would you go about the problem of incentivizing pharmaceutical companies, whether in Europe or in America, to do something that no businessman would ordinarily do, which is "I've got this idea. Why don't you give more drugs, more inexpensively to people who can barely pay you at all, so – here's my plan for you, Mr. Businessman, make more of something that they can't buy. Why would a drug company do that?"

SAM BROWNBACK: Well, I've met with some of the drug companies and they've said we can do a certain amount of that, but not a lot of that because they're not charitable entities; they are for-profit companies with those shareholders and they have to meet those needs.

ROBERT KRULWICH: You've come up with a kind of cool idea ...

SAM BROWNBACK: That's what - and I mentioned this to you earlier. I met with the head of Pfizer just before I was headed to Sri Lanka after the tsunami and presented him that very question: you know, we have all of this research – 90 percent of all drug research goes into 10 percent of the drugs – targeting on diseases that you and I get ...

ROBERT KRULWICH: Ten percent (ph) of drugs that is rich folks (ph)?

SAM BROWNBACK: Well, they're (ph) wealthier parts of the world. And they're heart disease and cancer. And I'm glad we're researching those. But that means 90 percent of the disease is affecting 90 percent of the people get 10 percent of the research dollars on pharmaceutical products. And I went to him and said this is a big concern about what happens to everybody. It just doesn't seem right.

And you've got all these crying problems in the developing world, sicknesses that don't get any research. And he points out, "well, we have no market here." They ought to develop (ph) a new product for malaria, for sleeping sickness for river blindness, for – you list the one, and they can't afford to buy it. So we put forward a bill (INAUDIBLE) – I told him I – we've got to do something about this. I said to him, I don't want to go to my maker (ph) ...

ROBERT KRULWICH: On the Senator ...

SAM BROWNBACK: There we are ... I tell you, I don't want to go to my maker and when he says, "you knew about all these people getting sick and you didn't put any research into this ... what's your answer?" And I say, "well, I had great sex when I was 60." I – you know, I don't want to say that. And – so he presented an idea: give us a patent extension on a patent of our choice, and you list those 10 diseases you want a cure for and if we get a cure on your 10 diseases you've got on your hit list, we get a patent extension on a product that we get to choose.

(INAUDIBLE) we've got a bill in, got bipartisan support on full-year patent extension on lifestyle drugs – certain category of drugs, listing of developing world diseases that we're asking for a hit. You get a hit, the cure is this, we will give you a two-year patent extension on a lifestyle drug in this market, in this category.

ROBERT KRULWICH: So let me just make sure I get this: you've got a two-years' extension (ph) to sell and outgrown and exclusive license (ph) ...

SAM BROWNBACK: ... if you cure malaria, river ...

ROBERT KRULWICH: ... did you ?

SAM BROWNBACK: Yes I did.

ROBERT KRULWICH: OK (ph), think about this – it's clearly (ph) a Kansas state that they're doing it (ph).

SAM BROWNBACK: This is very much a Kansas state.

ROBERT KRULWICH: Let me ...

MADELEINE ALBRIGHT: I'll just (ph) say this, I think that something that Senator Brownback said is essential to understand: the pharmaceutical companies are not charitable organizations. What is important is to try to figure out public, private partnerships that allow for there to be distribution of drugs to various places. He mentioned Pfizer, I'll mention Merck. Merck and the Gates Foundation in Botswana, for instance, in order to try to get an HIV and AIDS program.

Or, for instance, now in order to get money into the system and also in order to give incentives to countries and companies to get ahead of the problem David Brown, the Chancellor in – the ex Secretary in Great Britain has developed this international, financial facility that would allow money to get into the system early as their way of fudging (ph) companies knowing that there would be money for production down the line.

So I think we have to look at programs that understand that we are dealing in a capitalist system, that it takes money to do the research and that, at the same time, find partners that are willing to put forward in the civil society and public and private partnerships, to be realistic about how to solve this very important problem and all these diseases.

ROBERT KRULWICH: If we leave things for the moment and go to other solutions, malaria is something you get (INAUDIBLE) bit by a mosquito. The mosquito usually waits until you (ph) fall asleep – it's dusk and then it comes down and it bites you. Now, nets – how much does a mosquito net cost - 12 (ph) bucks or something.

So I noticed that the President said, "let's do some net stuff." Is there a focus here? Should it be more meds or more motorcycles to get you medicine – more nets – I mean, there are other strategies available (ph).

SAM BROWNBACK: There are other strategies available, but I think we do them together and we will drive this group of people that have malaria – it will cut in half in a period of five to 10 years. And we've seen that in the past when we really do the combined efforts: you need the bed nets, you need the medicines, you need indoor spray and using DDT. And that gets a little controversial for some people, but you're not going to kill the mosquitoes and these are mosquitoes – I'm generally told – that hang around indoors. Their feeding opportunities are people. That's what they like to feed off of.

MADELEINE ALBRIGHT: I think that what we have learned today is how all these issues are linked together. And obviously there are environmental questions that have to be dealt with and you have to try to figure out what the greatest way (ph) is. I do think that there are probably other ways also to deal with how to get rid of mosquitoes and a lot of it has to do with water issues and environmental issues and I think the thing that we need to figure out is how not to have people and their expertises so separated, but an ability to work together on these problems.

ROBERT KRULWICH: Let me give you a class of solutions: on the one hand, you could use what we've got – mosquito nets, medicines that have already been invented, motorcycles, DDT or we could shift our emphasis to invent new tools. The Gates Foundation talks about changing the drugs, can we invent a malaria drug that wouldn't take six months and all those doses. Maybe half of six months or a quarter of six months. They talk about let's create medicines that don't require refrigeration. Let's talk about that do not require needles that have to be sterilized. So they're thinking, they're tilting towards invention and new technology. You guys have been talking about using what we've got ... how do you strike that balance? Is it half and half or (INAUDIBLE) move in with what you have?

MADELEINE ALBRIGHT: You obviously have to do both and we are a country that is capable of funding and thinking about growth (ph). This is where we forget how rich and powerful we are and what we're using our money for. The issue here is that we can do the research. That takes time. Even with the activities that the Gates Foundation is doing, it takes time. And so we have to look at both issues and when you think about what we spend our money on, I think we could figure out how to put both our money into research and into net.

ROBERT KRULWICH: (INAUDIBLE)

SAM BROWNBACK: God bless the Gates Foundation, \$300 million announced this week for this. I mean, that's really, putting your money on the line. Thank you guys for doing that ... that is wonderful.

ROBERT KRULWICH: Who do you think spends money more effectively, governments or non-government organizations. So let me quote Bill Gates – while talking about R&D and (INAUDIBLE) last week. “We are in this unusual position,” he says, “where we can spend \$100 million on something we think might work, and it can fail and nobody gets fired. Political institutions can't handle risks like that.”

So, Bill Gates would argue, I think, that maybe governments are a bit burdened by the need for consensus and all that and maybe businesses aren't. And therefore, businesses should spend more of the money than the government. You're both government guys ...

MADELEINE ALBRIGHT: I was ...

ROBERT KRULWICH: (INAUDIBLE)

MADELEINE ALBRIGHT: I actually learned the following thing when I was in government, which is there's a very good possible partnership between businesses and government and people should do what they're good at. And businesses are very good at prioritizing and accountability and the bottom line and the governments are not. So I do think there's a very big role for business. I also think there's a very big role for non-governmental organizations.

However – and this may not go well with this audience, but non-governmental organizations don't actually coordinate with each other and so there's a lot of duplication and to some extent, there's not a lot of accountability among some NGOs. So, I think we need to use more NGOs, but we also need to figure out a way where they cooperate with each other and with businesses and with governments because we need all three parts to work together.

ROBERT KRULWICH: (INAUDIBLE), you agree (ph) that the government – that is the U.S. government has trouble spending effectively. You were (ph) with the USAID (ph) and so what have you been spending that money on and what have you discovered?

SAM BROWNBACK: Well, on malaria – and that's the one that's very problematic. We had hearings on this and couldn't figure out what percentage of the money was actually spent on product and what percent was spent on conferences and consultations. And it looked like a high percentage was spent on conferences and consultations rather than on products. So it wasn't effectively spent, wasn't actually curing people out in the rural villages that you were talking about.

ROBERT KRULWICH: Do you think the governments have a tendency to give money to other governments? And in Africa, some of those governments are very corrupt. So you could be (INAUDIBLE) problem because you give some money to a government and they turn it into mansions and Mercedes instead of something else. So are governments worse than NGOs in that respect. I mean, you get \$10 for your government and five of them turn into a Mercedes; you give \$10 bucks to an NGO, only one dollar turns into a Mercedes, or whatever ...

SAM BROWNBACK: It's – yes, oversimplified in the ...

ROBERT KRULWICH: I'm ...

SAM BROWNBACK: ... that's fair.

ROBERT KRULWICH: You weren't supposed to say that.

SAM BROWNBACK: But what I think it points to is that we have to design programs that I think are a, different that what they were in the past and b, that have specified results and measurables along the way. Former Senator Monaghan (ph) – I had the pleasure of being able to server on the Senate – the governments rarely find a way to

change something until they find a way to measure it. It's saying (ph) "measurables" are the things when we set targets.

So, on a malaria initiative, we set a target that at least 50 percent must be put into product and in a five-year period, these malaria rates have to be cut in half in these five countries. So you have a series of measurables within it. OK, within that, now we're going to spend some money ... how are we going to allocate that. there will be a certain amount that will go to government – we actually favor non-governmental organizations. I personally favor ways that you can incentivize the private sector to do what it does best. That's why the effort to extend a patent on something that's very valuable if you'll give us a product here on something we really need.

ROBERT KRULWICH: One other thought, this is the "Geneva Tribune" headline: "The health of the world depends more on Bill Gates than on the World Health Organization." If you looked at the copy in that article, it essentially said, "look how much money these people have: \$29-billion is more than the gross domestic product of Tanzania. So, my question to you is: whatever your feelings about the group – the worthiness of NGOs has this tilted – for whatever reason – so that the main actors will not be governments in the next 10 years but will be private citizens, businesses and NGO coalition.

SAM BROWNBACK: Yes, it will be ... I think the coalition will clearly be different than it's been in the past. There has been too much corruption – there remains too much corruption, too many governments and a number of countries. And we cannot go down that path that has failed in the past. We have to have measures, we have to have accountability, to deliver real product in the system.

MADELEINE ALBRIGHT: Let me say I definitely think that there is an incentive system in business and NGOs that is different from government. But I also think that we have to realize that we cannot exist in the world without government. It requires us to ask for reform in governments and to deal with other issues like corruption and problems in government, but you can't all of a sudden privatize everything in the world. And the WHO has a very important role; we are going to see its role in terms of dealing with (INAUDIBLE).

It is important that we make sure that we make sure that the international organizations function properly because we do need those in order to deal with a variety of partnerships and situations. And while I think that there's no question – while also Bill Gates and (INAUDIBLE) is unique, and we're all incredibly grateful to it. But there has to be this partnership also with functioning governments and our government itself also has to function better in terms of dealing with these issues.

ROBERT KRULWICH: I'm getting sort of "uh, oh" signs ... so I was going to ask about condoms, you'll be happy to know that I don't have time to. And I was going to ask that (INAUDIBLE) fascinating – but let me quickly run to the end of my notions here: why don't Americans give world health problems more attention? Among the advanced countries, United States ranks last in giving as a percentage of national income.

I'm going to give you some excuses and just tell me what you favor since we're running out of time. "I didn't know this was happening." "These diseases, TD, malaria, I thought they were over." Or "I never heard of river blindness shistosomiasis, or encephalitis." Or "this is somebody else's problem." Or "this is far away, I don't have to think about it." Or "American lives are more valuable to me than non-American lives." Which of those do you think is – are all of those in play or some ...

MADELEINE ALBRIGHT: I would like to hope that it's only that people are not informed. Because the other issues – the way you described it – are so unbelievably selfish, and I actually think that the American people are the most giving people in the world. And so, there has to be better information about this. And if it's also true that we all are one world and, in many ways, when people know that diseases do come home to America, then there may be some way to motivate. But I think it's up to you all to help us educate people about what these diseases are and that they do exist out there.

ROBERT KRULWICH: Is this to you guys a moral – you don't think it might be a question of (INAUDIBLE), and that if you make people see the suffering and become aware of their "present-tenseness," they will – as they did, by the way with the tsunami that affected people that utterly – what was the number? Nancy (ph) wrote about this in

the “TIME”: \$1.3 billion raised by Americans for something that took place in Thailand, Indonesia. So, and \$1.7 billion for New Orleans.

So is it a question of invisibility or is it a question of immorality or is it a question of self-interest? Could you argue that those microbes don’t stay over there, they tiptoe in – SARS, avian flu ... and that maybe fear is your friend here, that things aren’t so far away anymore?

SAM BROWNBACK: I think maybe that could be useful although I would put it in a different answer there. I would put in an answer of, “we tried solving that before and it didn’t work.” A lot of people would look at the model in the past or many people think, as the Secretary said, that we do spend 25 percent of our budget on foreign aid. They look at these intractable problems and say – this just hasn’t worked. That’s why I think it’s incumbent upon us to come up with different solutions that work with through different entities and have measurables and then tell the story.

Like the HIV/AIDS initiative has been working quite well – and coming up with measurables for that and then you need to pronounce that back to the public – well you – we put this kind of money in and look how many people are getting this drug and look how many people are getting better, so that when they say, 50 percent of Sub-Saharan Africa has malaria, in five years (INAUDIBLE) the rate is down in these targeted countries to below 20 percent.

ROBERT KRULWICH: So you think success is its own advertisement. If we can make that little boy that we started with a healthy little boy, then people are like, “good, I’ll give you some money, then I’ll support you. And if you do good (ph),” I’ll make it (INAUDIBLE).

SAM BROWNBACK: I think that’s a fair portion of it because all they’ve been told is Mercedes and mansions. And they’ve been told people still have all this AIDS and look there’s 60 percent of the malaria, look at all that’s taken place in XYZ country. I’ve given to Sudan for 10 years and look what’s happening here. What would your boss say to you if you (ph) kept putting money under your project and there was no solution, there was no bottom line, there was no leadership, no viewership ... he’ll say, “Love you, Robert, but it’s just not working.”

ROBERT KRULWICH: He’s in the room ...

SAM BROWNBACK: Oh, OK, all right ... well, I don’t want to hurt you.

SAM BROWNBACK: Why don’t we finish with you ... if you could say something to everyone – not these people because they’re obviously convinced – something to everybody that doesn’t care or doesn’t know or hasn’t tried (ph) to notice, what do you say to them.

MADELEINE ALBRIGHT: I have said and I would say that we have to understand that we are all exactly the same. There is a tendency (INAUDIBLE) it’s the American life not other people’s lives. So, I have been pretty much everywhere. So I have seen children, mothers, old people and it occurs to me always that physically, we’re all the same – that we get hot, we feel dirty, we get hurt. And I think the extent that American people can see bare-face in everybody else’s face, then I think we can make a difference. And for me, the personal stories are the ones – the way you start it.

Because I do think that we’re generous people. We have a short attention span, but we are very generous. And for me, I have come to this, and this is why Sam and I actually are working together because we have seen that it’s – every individual counts ... and that that is the way you make a difference, if you can personalize it. so that’s what I would do because I do think people are compelled by this from the right or the left, that you can identify with the fact (ph) that child is probably itching as much as your child and that makes a difference.

ROBERT KRULWICH: So you show them the little boy up close and personal and you say, “we mad the little boy feel better.” And in combination (ph), you may get a parade (ph)

SAM BROWNBACK: I think you’re starting to see a parade (ph). I think Rick Warrington, from what he is doing, the Gates Foundation and what you’re doing, you’re focused well on problems here, but what I see is a parade of

people from this country – an organization that’s starting to address real problems in practical ways – in difficult spots in the world. And I am heartened.

I’ve been in many of these places: I’ve been in Northern Uganda, I’ve been in the Burmese corner (ph). I’ve been in the North Korea and Chinese border. Every single place I see some group or generally, group of groups, unknown, unheard of, unheralded doing very practical things helping people on the ground. And it is happening, folks, and we shouldn’t belittle it. And also, the reason Madeleine (ph) and I are working together – this should come from left and right and does. And as we grow both synergies together, you’re going to see, I think, a tremendous benefit as we bed those organizational entities from either side together.

ROBERT KRULWICH: Well, as David Westin, the President of ABC said, when he trusted you – before you sat here (INAUDIBLE). Thank you all ...

UNIDENTIFIED MALE #4: And now the President of “TIME Magazine,” Ilene Mauden (ph).

ILENE MAUDEN (ph), PRESIDENT, “TIME MAGAZINE”: Am I wired? I’m wired. Senator Brownback and Robert, you know, throughout the evening, a number of people have come up to me to thank me and to thank “TIME” for what it’s doing here. And that’s all well and good and I appreciate that. Frankly, I imagine what they mean is thank you for the issue and also thank you for this summit. The issue is sound journalism; it’s an important story. And “TIME” would and should have covered that regardless. But for the summit, yes we did invest a lot of time and planning making this happen, but we couldn’t have done it without several organizations.

So I just want to quickly thank first the Bill and Melinda Gates Foundation for their support of the summit. You know, we all know the Gates Foundation has made public health the cornerstone of their farsighted philanthropy and advocacy. And in that spirit, they made a substantial and very early financial commitment to make this gathering possible. So with that to start, we knew we had something to go on.

But this is New York and this is a big crowd and this is an expensive city, so for the additional underwriting that made this summit possible, I’d like to thank this new coalition of NGOs and businesses in the order in which they signed up: The Coca-Cola Company, Africa’s largest (INAUDIBLE), who are keenly interested in clean water – it’s their strongest input. So thank you, Coca-Cola for coming in.

And next the UN foundation for all its philanthropy and all (INAUDIBLE) measles and malaria; then ExxonMobil, a large global employer where (ph) malaria is a significant issue; and last Steven Dickinson (INAUDIBLE) and the American Red Cross who frankly (INAUDIBLE) spectrum of health issues. So thank you all, you’ve made tonight possible; you’ve made this whole event (ph) possible. The PD Lanyards you’re wearing have come from Cape Town and were made by Mother’s Creations, which provides economic empowerment for pregnant women and new mother’s living with HIV/AIDS. I don’t know if Robin Smalley is still here – the Executive Director – hi, Robin.

My house sold tonight (ph), last week - well, not last week. I want to thank Alicia Keyes and clear up something. There is a concert Thursday night, TIME is preventing it (ph), but is it not TIME conscious per se. It’s a fundraiser for keep a child alive. Bob LaMall (ph) who was gracious enough to speak tonight, and who has a voice that will serve this room and fill Rose Theater, will be performing along with Alicia Keyes, as well as Usher, Tom and Paul Simon, John Mayor, and the works you saw tonight. That is the separate undertaking, everyone is welcome. There are still tickets available, but they’re not mine to give you. They’re available for \$300, so if you’d like to come, we’d love you to come, just see someone at the registration desk, and we’ll, by all means, have you with us.

Of course, you know, PBS, the work they’ve done on “Rx for Survival,” which for those of you who have energy and want to come over Rose Theater and watch the first hour of this remarkable series. Vulcan Productions, the WGBH unit, they came to us very early on, two years ago, frankly, with this idea. They were working on this program and they said could we do something together, and from that really sprung up this idea of a very large, global health package around the world for [inaudible] and this summit. So, to WGBH, PBS, and Vulcan Productions...

OK, tomorrow morning there’s some activities I’d like to tell you about. Breakfast discussion with civic leaders will meet at 7:30 p.m. in the - at the 7:30 a.m. in the Mandarin Hotel on the 36<sup>th</sup> floor. All are welcome, breakfast will be

served, please try to attend if you're interested. Otherwise, breakfast will be available beginning at 7:30 here in the atrium. There's a high tech, low tech session lunch tomorrow, like a science fair, we want you to come too. Otherwise, the general session tomorrow gets underway at 8:45 a.m., and with that I invite those of you diehards, energetics to come over with me to the Rose Theater and see this first hour of this remarkable series "Rx for Survival."

Thank you.

END

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