

## DISPATCHES



GALE ZUCKER, FOR THE CHRONICLE

Elizabeth Alderman, who with her husband, Stephen, founded a charity to honor their son, Peter (right), who died in the 2001 attacks on the World Trade Center, “to help people who survived but still cannot go on with their lives.”

## Charity Honors Memory of 9/11 Victim by Aiding Others Who Suffer Traumas

By Caroline Preston

POUND RIDGE, N.Y.

PETER C. ALDERMAN was only 25 when he was killed on September 11, 2001, while attending a technology conference on the 106th floor of the World Trade Center’s north tower. He never had a chance to decide how he wanted to leave a mark on the world, his parents say, so they have chosen to do so on his behalf.

At first, Stephen and Elizabeth Alderman had fuzzy notions of how to memorialize their son. They considered building a playground, or endowing a professorship at a university. “But that wasn’t Peter,” says Ms. Alderman.

Then, one night in June 2002, bleary-eyed from months of mourning, she saw a *Nightline* program on survivors of terrorism and mass violence. They were Cambodians and Iraqis, Rwandans and Afghans, people whose psyches had been scarred by trauma, just like the Aldermans.

The couple then met with Richard Mollica, a Harvard psychiatrist interviewed on the television show. He helped them to form the Peter C.

Alderman Foundation. The organization teaches psychiatrists and healers in strife-torn regions how to diagnose and counsel trauma victims.

“Peter was killed by terrorists,” says Ms. Alderman. “So I thought, If we can help people who survived the event but still cannot go on with their lives, that would be an appropriate thing to do for Peter.”

To date, the organization has educated 35 people from 12 countries through annual training sessions, known as master classes. The doctors, in turn, have trained another 300 people and treated tens of thousands.

Since its founding, the Alderman foundation has also added new programs. It now builds clinics—three so far, with plans for at least five more in as many years—and created an international organization devoted to mental-health research.

The Aldermans started the organization with the \$1.4-million they received from the September 11 Victim Compensation Fund. But that is not nearly enough, they say, to match their ambitions, so they are raising money.



COURTESY OF THE PETER C. ALDERMAN FOUNDATION

The Friends of Peter Alderman, a group of Peter’s high-school classmates, college pals, and colleagues at Bloomberg, where he worked in financial services, have raised about \$100,000. The Aldermans also hold fund-raising events, like one hosted by Bob Costas, the sportscaster, in June, which also raised \$100,000.

This summer, the foundation hired a development director. The Aldermans’ daughter, Jane, serves as the group’s executive director.

The growth of the organization is particularly remarkable given that so many other charities

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## Parents of 9/11 Victim Hope Their Charity Helps Survivors of Violence

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created after the terrorist attacks have closed. Mary Lovatt, a co-chair of the Friends of Peter C. Alderman and a former colleague of Peter's, says that donors respond to the organization's clear-cut mission.

"We're very lucky that the Aldermans had a great idea," she says. "The foundation is sending a very powerful message."

Sitting in their sprawling house in New York's Westchester County, the Aldermans recount how drastically their lives have changed since their son's death. Dr. Alderman, who retired from his practice as an oncologist after Peter was killed, now travels to health clinics in rural Cambodia and Uganda instead of taking trips to Cape Cod and France.

Ms. Alderman, a homemaker, once spent her days doing architectural drawing, quilting, painting, and listening to music. But now she can no longer enjoy anything beautiful, she says, because it fills her with grief to think that Peter isn't there to enjoy it along with her.

So she listens to National Public Radio instead of music, reads nonfiction instead of literature, and draws up lists of potential donors on her computer instead of drawing. "There is nothing beautiful about the computer screen," she says.

Her office is filled with photographs of Peter. A framed picture beside her computer shows him on vacation in Roussillon, France, a few days before he was killed.

Key to the organization's mission is helping countries that have been through wars become able to treat their citizens' depression and other mental-health problems on their own, rather than paying for Western doctors and health clinics that provide a temporary solution.

"We are training Cambodians to help Cambodians," says Ms. Alderman. "We're not trying to make these people happy, in a Western sense. We're trying to help them to get out of bed in the



COURTESY OF THE PETER C. ALDERMAN FOUNDATION

**Elizabeth Alderman says the charity she helped found is training people to provide mental-health counseling, like this therapy session in Siem Reap, Cambodia, to help trauma victims "return to productive lives."**

morning, to help them return to productive lives."

Not only does the organization train local care providers, but it also encourages foreign governments to supplement its donations. In Cambodia, for example, the organization spends \$22,000 annually on two clinics and the national government contributes \$7,000 each year in drugs, facilities, and other noncash donations.

That is far different from the approach that many nonprofit organizations take, the Aldermans say. Many groups don't communicate with national governments, and they stay in countries for only short periods.

"Charities come and charities go, but the only way to treat mental illness is by building local capacity," says Dr. Alderman. "We will stay as long as we have to. We're not going to change our focus to inner-city education, for example, in a few years."

The approach is one that Dr. Mollica has long propounded. But until the Aldermans, he could find few donors who were interested in supporting his ideas.

"There's a prejudice among many philanthropic organizations against mental-health care because they think it's really trivial," says Dr. Mollica. "There is also a prejudice against local

doctors, the idea that why would a doctor in Uganda need our support."

Other charities echo the notion that very few donors have an interest in building local mental-health-care systems or even supporting the field more generally.

"It's a challenge just to get donors to talk about mental health," says Stephen Tomlin, vice president for program, policy, and planning at the International Medical Corps, which maintains its headquarters in Santa Monica, Calif. "And the only way to deal with mental health is to build local capacity. We've been working in Sri Lanka, and there are more Sri Lankan doctors in London than there are in Sri Lanka."

While the Aldermans have given much through their organization, they have also benefited from the work. For example, it has restored their faith in the ability of individuals to make a difference.

Ms. Alderman says she lost that faith after her son's death and a frustrating experience as a co-chair of the memorial committee for the group Families of September 11, when she felt that relatives of the victims were marginalized after the attacks.

"What two parents can do has just blown my mind," she says.

The Aldermans are able to see the impact of their work everywhere. They speak of the Iraqi psychiatrist whom they helped to receive asylum in the United States. Then there is the story of the Bosnian and Serbian healers who shared rooms at the foundation's master class.

Ms. Alderman also talks often of the African doctor who broke into song during one year's master class. Suddenly, the whole room was full of music. Shiites and Sunnis, Bosnians and Serbians, everyone was singing together.

"To me," she says, "it was like a microcosm of what the world could be."

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