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CARTER CENTER



CARTER CENTER NEWS

SPRING 2019

President Carter
Marks Anniversary
with China

Guinea Worm Cases
Drop Slightly



WAGING PEACE.
FIGHTING DISEASE.
BUILDING HOPE.

CARTER CENTER NEWS

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IN THIS ISSUE

NEWS & FEATURES

- President Carter Marks 40th Anniversary of U.S.-China Relations 4
- 28 Guinea Worm Cases Reported in 2018 . . 6
- Study Finds Native Americans Still Face Voting Barriers 8
- Radio Messages Help Communities Fight Trachoma 9

DEPARTMENTS

- From the CEO 2
- News Briefs 3
- Profile: Laura Olson 10
- Philanthropy 11
- Notes From the Field: Malaria Exact's Tragic Toll 12

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ON THE COVER

January 2019 marked the 40th anniversary of normalized diplomatic relations between the United States and China, brokered by U.S. President Jimmy Carter and Chinese leader Deng Xiaoping. For the past two decades, The Carter Center has worked to preserve this legacy through its China Program, which has evolved from assisting with village elections to building civil society. See page 4 to read a Q&A with President Carter as he looks back on this historic event.



From the CEO

Communication Cultivates Grassroots Impact

The Carter Center operates dozens of initiatives addressing a range of challenging peace and health issues. Some of them seek to end human rights abuses and promote sustainable peace, while others help improve the health of at-risk people in remote places.

What all these projects have in common is reliance on communication—because information is power, and we want to empower people to change their own lives. But what sets us apart is that we not only give out information, but we listen to the perspectives of the people we are seeking to help.

For example, not only do we observe polling operations on election day; after the election, we suggest reforms to improve future elections. And we



In Cochabamba, Bolivia, Carter Center long-term election observer Daniel Barnes speaks with a traditional women's leader. Listening is a key part of every staffer's job in the field.

ask voters why they voted—or didn't—and what they believe needs to change.

In our health programs, not only do we facilitate the distribution of medicine to ward off parasites and bacteria; we train thousands of local volunteers to teach their families, friends, and neighbors how to

avoid getting infected in the first place. And from those volunteers we learn even better ways to reach their communities.

In our human rights work, not only do we speak out against abuses, but we provide human rights defenders with tools to make concrete changes in their communities and countries. And we convene meetings where we listen to defenders and amplify their voices.

The goal is to place the power where it belongs—in the hands of people who can contribute to the sustained well-being of their own communities.

Yes, we do the physical work of helping countries distribute powerful medicines, and we monitor ballot boxes being emptied for counting, but it takes the catalyst of words and visuals to bring these things to life. Never underestimate the capacity of authentic two-way communication to change the world.



Ambassador (ret.) Mary Ann Peters is the chief executive officer of The Carter Center.

Small Team Monitors Parts of DRC Elections

Following a contentious election, the Democratic Republic of the Congo got a new president in January.

Because the DRC's government chose not to accredit Western monitors, The Carter Center could not carry out its plan to send a large team of international observers to the Dec. 30 polls, but it sent a small team of experts to observe parts of the electoral process. It also ramped up support for citizen observers affiliated with Justice and Peace Congo, a local partner of the Center for more than eight years. JPC deployed more than 1,000 long-term observers and 40,000 short-term observers and conducted a parallel vote count to assess the accuracy of official results.

The race centered on three main candidates — Emmanuel Shadary, who was President Joseph Kabila's handpicked successor, and opposition figures Felix Tshisekedi and Martin Fayulu. Many feared the government would use its power to ensure Shadary's election, and concerns rose when results were delayed by more than a week. Eventually, the election announced that Tshisekedi had won. That didn't match the results of the JPC's parallel vote count nor the commission's own leaked data, both of which showed Fayulu with a comfortable lead. Many speculated that Tshisekedi and Kabila had struck a deal. Fayulu sued but lost, and Tshisekedi was inaugurated president.

As the DRC enters a new political era, The Carter Center plans to continue its longstanding work in the country, strengthening democracy through a variety of projects, protecting human rights defenders, and pushing for mining sector reform.

Sudan Receives Health Training Equipment

In December, essential training aids and equipment were distributed in Sudan as part of the Carter Center's Public Health Training Initiative.

The initiative aims to strengthen the health care teaching environment in Sudan,



In Sudan, health training equipment was distributed in December for use by medical educators. The training aids will help strengthen the teaching environment for Sudan's science institutions and were presented in a ceremony at the Omdurman Midwifery Training Center.

providing training supplies and tools, textbooks, and teaching aids. The initiative also supports the modernization of the curricula of Sudan's health sciences schools and vocational training centers. The goal is to improve Sudan's maternal and child health services in particular and the state of the nation's health care in general.

The training aids distributed in eight states include skill labs, scientific reference books, computers, and more. The December distribution event coincided with the graduation of 114 students from North Darfur at the Omdurman Training Center for midwives.

The initiative is overseen by The Carter Center in collaboration with Sudan's Federal Ministry of Public Health and its Health Sciences Academy, with support from the Qatar Fund for Development.

Center Releases Third Mali Report on Peace Process

The Carter Center's Mali team recently issued its third report on the status of the nation's peace agreement, applauding the sustained cessation of hostilities among former combatants but

pointing out that nearly three-quarters of the commitments laid out in the agreement have yet to be completed.

The Center is acting as the Independent Observer of the implementation of the 2015 Agreement on Peace and Reconciliation in Mali, tasked with reporting on progress, identifying barriers to implementation, and recommending ways to move past impasses.

The team, which determined that the agreement contains 78 commitments, has conducted hundreds of interviews with government officials, rebel leaders, and members of civil society and the international community as part of its reporting. Most of the commitments that have been achieved thus far are preliminary steps rather than final objectives.

The most pressing challenges in 2019 include fully integrating ex-combatants into the national security services or into civilian life; renewing efforts to provide basic services in the northern part of the country, where much of the conflict took place; creating a new, decentralized political system; and advancing inclusive constitutional reform.

The Center will continue observing the implementation and issuing quarterly reports on progress.



President Carter Marks 40th Anniversary of U.S.-China Relations

Forty years ago—during the height of the Cold War—former U.S. President Jimmy Carter and Chinese Vice Premier Deng Xiaoping looked beyond their nations’ many differences and found common ground.

On Jan. 1, 1979, the two leaders normalized diplomatic relations between their countries, which had been estranged since the Communist Party established the People’s Republic of China in 1949 and the United States chose to back the Nationalists, who fled to Taiwan. In the years leading up to 1979, the U.S. imposed trade embargoes and forbade Americans from traveling to China; China, meanwhile, seized nearly \$200 million in American assets and properties within its borders.

There wasn’t much love lost between the nations.

But President Carter and Vice Premier Deng believed that rapprochement would make the world safer and benefit both the U.S. and China.

After President Carter left office, he continued his efforts to improve relations between the two countries. He has visited

China many times over the years and established a China Program within The Carter Center. The Center commemorated the anniversary with a symposium in January that featured discussions on Sino-U.S. relations, past, present, and future.

Below, former U.S. President Jimmy Carter reflects on the 40th anniversary of diplomatic normalization between the United States and China, excerpted from the Shanghai Institute of American Studies’ “Forty People, Forty Years” series.

Despite years of efforts by your predecessors, it was during your presidency that China and the U.S. established formal diplomatic relations. When you took office in 1977, there still existed quite strong political resistance against normalization within your administration. What made you so determined to proceed with normalization?

President Carter: I believed that the normalization of relations between our two nations would advance the cause of peace in Asia and the world. The People’s Republic of China comprised about one-fourth of the world’s total population and played a major role in international affairs. That reality needed to

President and Mrs. Carter meet with villagers in Hong’an, Hubei province, in 2009. In the decades after the White House, the Carters visited China many times to promote the work of The Carter Center.

be officially recognized by my country.

Furthermore, it was clear to me that both the Chinese and American people would benefit greatly from the commercial and cultural relations that normalization would bring. I also was confident that normalization would include a renewal of the historic friendship between us.

During my 1976 presidential election campaign I had announced my commitment to pursue normalization. After my election, the people who joined my administration supported that commitment.

Presidents Nixon and Ford had faced political resistance to normalization from members of the U.S. Congress who wanted to maintain a close relationship with the government of the Republic of China in Taiwan. Those two presidents held back. I did not intend to allow this resistance to prevent me from moving ahead, but I wanted to move at the right time.

This came about as Deng Xiaoping



On Jan. 31, 1979, Vice Chairman Deng Xiaoping and President Jimmy Carter sign diplomatic agreements between the United States and China.



Deng Xiaoping, Jimmy Carter, Madame Zhuo Lin, and Rosalynn Carter pause before attending a state dinner for the vice chairman of China in January 1979.

emerged as the paramount leader of China. For him, normalization was as important a goal as it was for me. We announced our agreement simultaneously in Beijing and Washington, on Dec. 15 and 16, 1978.

During the process of negotiations, a number of disagreements arose that required management by both countries — the subject of Taiwan, for example. What do you consider as the biggest challenge?

President Carter: Taiwan definitely was the biggest challenge we faced throughout the negotiations. We recognized that for the People's Republic of China, its relationship with Taiwan was considered a domestic issue. Nevertheless, the American people had had an extensive, close, and friendly association with the Taiwanese people. It was important that this be continued through nongovernmental means. We also intended to state publicly that the ultimate relationship between mainland China and Taiwan should be settled peacefully.

Rather than immediately and directly confront the sensitive issue of Taiwan, chief negotiator Leonard Woodcock proposed that we obtain early successes on the less controversial issues, which would set the tone for the two sides to settle the hard issues involving Taiwan at the end of the process. This principle of elevating areas of agreement over disagreement proved to be quite effective and constantly moved the negotiations forward.

I believe that the same approach is relevant today. Negotiations are not about

getting everything that you might want. Negotiating parties must focus on the advantages of success versus the disadvantages of failure for both sides, not just for one. China and the U.S. will always have differences of opinion, but we should reject the view that compromise, no matter how minor, is a sign of weakness.

China-U.S. relations today are confronted with circumstances quite different from 40 years ago. Do you think there are any opportunities for today's leaders to set a new tone for this relationship in the next 40 years? What advice would you give them to keep our relations resilient and robust?

President Carter: Some observers of China are saying that China is not adapting its government to become like the U.S., and therefore we should reject the principle of engagement that has served as the basis of American policy.

I would remind people who make such claims that when we normalized relations, we knew that the U.S. and China had vastly different cultures, histories, forms of government, interests, and levels of development. We acknowledged these differences and anticipated that differences between our two countries would persist. But we also believed that the goals that bound us together—mutual respect, the pursuit of peace, prosperity, and progress—were much



President and Mrs. Carter view a gift of double-sided embroidery from Deng Xiaoping during a state visit at the White House in January 1979 following the announcement of the normalization of relations with China.

more important than the differences that divided us.

The most important piece of advice I can give to current and future leaders in both countries is to remind them of their obligation not only to be committed to world peace but to engender that commitment in the people of their countries.

I believe that the most important bilateral relationship in the world is between the U.S. and China. I think that leaders on both sides of the Pacific should agree on this point. They know that they have no choice but to navigate through the current challenges in the relationship. Maintaining mutual respect and understanding is essential in order to address the issues facing humanity in the 21st century.



28 Guinea Worm Cases Reported in 2018

Just 28 human cases of Guinea worm disease were reported in 2018, down slightly from 30 cases reported in 2017. When The Carter Center began leading the international campaign to eradicate Guinea worm disease in 1986, there were an estimated 3.5 million cases annually in 21 countries.

During 2018, 17 cases were reported in Chad, 10 in South Sudan, and one in Angola.

“Each of these cases is a human being with a family and a life,” said Adam Weiss, director of the Guinea Worm Eradication Program. “Tens of thousands of volunteers, technical advisers, and staff are working in thousands of villages to find and contain the last cases of this disease.”

No cases were reported in Ethiopia, where there had been 15 in 2017, all linked to a single water source. Nor were any reported in Mali, where none have been reported since 2015. Mali continues to be recognized as an endemic country, however, because security problems make some areas inaccessible to the program.

While human cases dwindle, Guinea worm infections in animals continue to be



Left, top: Residents of Geulengdeng, Chad, pass by a pond while carrying out daily tasks. Chad reported 17 cases of Guinea worm disease in 2018. Left, bottom: In South Sudan, Lucia Nakom Lopeyok describes where she may have contracted Guinea worm disease.

reported. Most animal infections have been found in Chad, where 1,040 dogs and 25 cats were affected in 2018. Ethiopia reported infections in 11 dogs, five cats, and one baboon, all in one remote district in the southwest. In Mali, Guinea worm infections were found in 18 dogs and two cats. South Sudan had no animal infections.

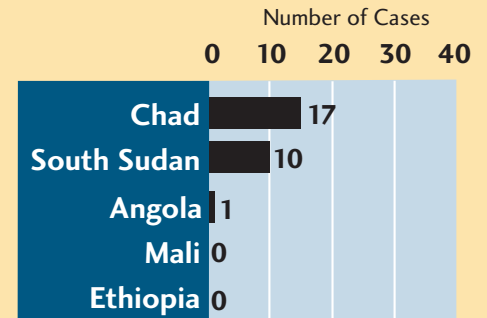
The government of Angola, The Carter Center, the World Health Organization, and their partners are working to understand how an 8-year-old girl in southern

Angola acquired a Guinea worm despite living more than 1,000 miles from the nearest known case and in a country where Guinea worm had never been detected before. DNA testing at the U.S. Centers for Disease Control and Prevention confirmed the parasite was a Guinea worm.

Kenya's elimination of Guinea worm disease received WHO certification in 2018. The last reported indigenous case there was in 1994. The WHO has now certified 199 countries as free of the disease.

Another disease, smallpox, was eradicated in 1980 after a worldwide immunization campaign that stretched over many years. There is no vaccine for Guinea worm, nor medicine to treat it; it is being defeated by human behavioral change that interrupts the parasite's life cycle.

Reported Cases of Guinea Worm Disease, 2018



Since 1986, 17 countries have stopped Guinea worm transmission: Ghana, 2010; Nigeria, 2008; Niger, 2008; Burkina Faso, 2006; Cote d'Ivoire, 2006; Togo, 2006; Benin, 2004; Mauritania, 2004; Uganda, 2003; Sudan, 2002; Central African Republic, 2001; Cameroon, 1997; Yemen, 1997; Senegal, 1997; India, 1996; Kenya, 1994; Pakistan, 1993.

Nigeriens Remember Final Guinea Worm Case

Yacouba Moustapha, 43, is a tailor in the village of Goulouské in Niger's Zinder region. He sits for hours at his foot-powered sewing machine, making and mending dresses for women and shirts and pants for men, just as his father did.

Moustapha had plenty of time to learn the trade. Starting at age 14, he came down with a Guinea worm infection every year for several years at the start of growing season, forcing him to stay home instead of doing farm work like the rest of his family.

"It was a painful, good rest," he jokes, but admits that it bothered him that he couldn't help his family in the arid fields.

Guinea worm is no laughing matter in a subsistence farming community.

"If you are a farmer and can't work, you don't eat," said Moustapha's uncle Ousseini Maman. "You must sell your possessions to buy food."

Maman, 80, is the chief of the village of 2,380 people. He also was the Carter Center-trained Guinea worm warrior in Goulouské, responsible for treating cases, teaching villagers how to avoid infection, and keeping meticulous records.



Tailor Yacouba Moustapha is the last person who had Guinea worm in Niger's Zinder region, in 2005. Right: Moustapha points to one of his Guinea worm scars.



Those records, which he has to this day, show that the village's last case of Guinea worm occurred in 2005. That was also the last case in the entire Zinder region, which is about the size of the U.S. state of Illinois. That last worm emerged from the foot of his nephew, Yacouba Moustapha.

Study Finds Native Americans Still Face Voting Barriers

Their ancestors were the first to live on the land that came to be known as America, and yet many still have trouble exercising the most basic of American rights—the right to vote.

Native Americans face a variety of barriers on their way to the polls, some of which seem almost unbelievable in 2019.

They are sometimes forced to drive more than 100 miles round-trip to cast a ballot; others are denied the chance to even register because they have nontraditional mailing addresses—rural route numbers, for example, or post office boxes.

The Native American Voting Rights Coalition conducted field hearings on or near tribal lands in seven Western states in early 2018, interviewing more than 125 voters and would-be voters about their election-related experiences. The coalition gave the first presentation on its findings at a conference about Native American participation in U.S. elections that The Carter

Center organized in December. In addition to barriers related to geographical isolation and mailing addresses, the coalition noted other issues that suppress voter turnout.

One such issue is poverty. Native Americans have the highest rate of poverty of any population group, which results in higher-than-average rates of homelessness and illiteracy and exacerbates transportation issues.

Language can create another barrier to voting. More than a quarter of single-race Native Americans and Alaska Natives speak a language other than English at home, but many jurisdictions don't translate voting materials into Native American dialects or hire enough bilingual poll workers.

Finally, less than 10 percent of people on tribal lands have broadband access, which means they often miss out on voting information and have no ability to register online.

The coalition's findings came as a surprise to many conference attendees who

work in election administration: "I was shocked that we're talking about solving problems that I thought were solved 40 years ago," said Kim Wyman, Washington's secretary of state and co-chair of the Carter Center meeting. "I believed we'd gotten rid of these barriers."

Because her state conducts all voting by mail, she said, she thought it was doing a good job dealing with these issues. But what she heard during the conference made her realize that election officials need to do more to ensure that obstacles are effectively addressed.

For her part, Natalie Landreth of the Native American Rights Fund said that hearing from the election officials at the conference made her aware that activists need to work harder to educate the public about these barriers.

"Too often, Native American voting activists and election officials only meet in the courtroom," said Avery Davis-Roberts, an associate director in the Carter Center's Democracy Program. "We wanted to give them a chance to connect and exchange ideas in a neutral environment."

Though Native Americans win about 95 percent of their election-related cases, according to one expert, lawsuits can't entirely break down voting barriers.

"We cannot litigate our way out of this problem," said Virginia Davis of the National Conference on American Indians. "It's an important tool, but it's too expensive and not available to everyone. It doesn't build relationships on the ground. We need diplomacy."

Participants agreed that more meetings like this one are needed.

Democracy Program Director David Carroll said The Carter Center hopes to make that happen: "A lot of people told us that they'd made helpful connections at the conference. We want to do whatever we can to help those connections grow, because The Carter Center believes that the right to vote should be available to all."



Deb Haaland, one of the first two Native American women elected to the U.S. Congress, addresses a Carter Center conference last December on impediments to Native American voting.



Radio Messages Help Communities Fight Trachoma

A low, boxy building made of rough but neatly mortared concrete blocks stands in the city of Mirriah, located in central Niger. Out back are a three-panel solar power array, a satellite dish, and a 100-foot-tall mast antenna. Inside are two desks with whirring computers, a small room with an electronic audio control panel, and a glassed-in room equipped with a round table, chairs, and two microphones on bases fashioned out of machinery gears.

Radio Albichir—“Good News” in the Hausa language—is a 300-watt community radio station that plays hip-hop and other popular music that listeners request by phone and online. But it does more than that: Throughout the broadcast day, the station’s on-air personalities work into their breezy chatter a litany of messages about health, hygiene, and community betterment.

One of those three-minute messages, developed by the Ministry of Health and the Carter Center’s Niger staff, informs people they can avoid trachoma through washing their faces frequently and keeping their environment clean to discourage flies that can spread the infectious eye disease.

“This town is filthy in places, but since the Carter Center’s trachoma message has been airing, it’s getting cleaned up,” says station director and jocular host Amadou Roufai Ousmane. “People are learning.”

The large, historic city of Zinder is just a few miles away. There, a more powerful state-owned station called ORTN (Office of Radio and Television, Niger) performs a similar role for a wider regional audience.

ORTN’s daytime hosts are Zara Oumarou and Rakia Adamou. Backed by a team of technicians in the well-appointed, modern studio, the two women take turns sitting at a checkerboard table and speaking into a microphone suspended at the end of a long boom. They and ORTN’s other hosts pepper their shows with music, jokes, advice, official announcements, and oft-repeated messages about avoiding trachoma and other threats to health.

At both stations, everyone seems to enjoy their work and take their influence seriously.



Top: Rakia Adamou gives listeners a trachoma prevention message during a live broadcast at ORTN, Zinder Regional Radio Station in Niger. From left: Souleymene Tahirou Aboubacar, health communications advisor; Amadou Roufai Ousmane, director of community radio station Radio Albichir; and Barmou Moudi, Carter Center sanitation technician, discuss health programming at the station.

“I am using my voice to guide people to more sanitary behavior,” Radio Albichir’s charismatic Ousmane says. “I am not political, but this makes me feel like a leader of the community.”

Laura Olson

Director Sees Security, Civil Rights as Integral Partners

Laura Olson came to The Carter Center from the U.S. Department of Homeland Security in 2017 because she wanted her work to once again have more of an international focus.

She'd started her career at the International Committee of the Red Cross, living in Geneva and Moscow, among other places, before taking a job in 2010 at Homeland Security in the Office for Civil Rights and Civil Liberties. There, she worked on immigration policy and human rights, focusing on detention as well as on ways to protect people from human trafficking and to help law enforcement avoid profiling.

"We stressed to law enforcement that you can't 'balance' security and civil rights; they are integral to one another," said Olson, who now heads the Carter Center's Human Rights Program. "Ensuring rights enhances security."

Olson grew up in Duluth, Minnesota, with parents who worked in the medical field. She attributes her passion for justice to their influence.

"They instilled in me a respect for all people, regardless of differences," she said.

She went to law school at the University of Iowa and then got a Master of Laws in international legal studies at New York University.

That led to the Red Cross, where she first worked with universities in the former Soviet states, helping them enhance their instruction of international humanitarian law. Later, she worked on the issue of state-sponsored disappearances, serving as the ICRC's representative to the U.N. working group that drafted the treaty to prevent enforced disappearances. Her last few years at the ICRC were spent in Washington, D.C., dealing with issues related to the Afghanistan and Iraq wars and making several trips to the Guantanamo Bay Detention Facility to assess conditions there.

Olson jumped at the chance to work at The Carter Center because of the opportunity to work directly with communities in other countries.

"What spoke to me was that The Carter Center really listens to people. We are there to facilitate the changes they want to see and not to tell them what they should do. I also like that we help build local capacity so that communities can independently accomplish their goals."

Much of the Human Rights Program's work in the last two years has centered on the Mobilizing Faith for Women and Girls Initiative in Nigeria and Ghana. The program partnered with Tostan to offer human rights training—with a focus on gender equality—to local religious and traditional leaders, who then create



Laura Olson

projects to address abuse or discrimination against women and girls in their communities.

"One of those projects sought to address the stigmatization women can face upon the death of their husbands," Olson said. "I visited with a widow who had received a small-business loan through the project to help her gain financial independence. She told me that this project 'wiped the tears from my face.' I was humbled by her strength and perseverance."

Olson also admires the grit and determination of the human rights defenders she meets during the program's annual forum, which brings together activists from around the world to learn and gain strength from each other.

Times are hard for human rights defenders, but Olson remains positive.

"I will always be optimistic," she said. "There will always be work to be done in human rights. It takes time. But human rights are too important to not be optimistic, lest we lose our momentum. It's more challenging now than five or 10 years ago, but that just means we need to reinforce the solidarity of those working on human rights. Ensuring equal enjoyment of human rights matters. Everyone deserves the chance to reach their full potential and live in dignity."



Olson leads discussion during last year's Human Rights Defenders Conference at The Carter Center.

USAID Awards New Five-Year NTD Program

The Carter Center is one of a handful of organizations led by RTI International on a new five-year program to control or eliminate seven neglected tropical diseases (NTDs) in 13 countries. The U.S. Agency for International Development chose RTI International to implement the program, known as Act to End NTDs–East, and RTI has partnered with The Carter Center and others to help carry out the work.

The implementers will work together with endemic countries, using proven, cost-effective interventions to control or eliminate lymphatic filariasis, trachoma, river blindness, schistosomiasis, and three soil-transmitted helminths. Through Act to End NTD–East, RTI and The Carter Center will support countries to achieve and document their progress in reducing or eliminating NTDs.

Specifically, The Carter Center will continue to provide leadership in Uganda in river blindness and in Nigeria in river blindness, lymphatic filariasis, schistosomiasis, and soil-transmitted helminths.

This new USAID award builds on the previous successes achieved through ENVISION, an eight-year global NTD project, on which The Carter Center was also a partner with RTI International.

ENVISION funding helped enable a large expansion of lymphatic filariasis treatments in seven states in southern Nigeria; prior to 2013, no treatment had taken place in these states. In 2014, treatments reached 10 million. They have exceeded 17 million each year since.



In southern Nigeria, health worker Violet Ogechi measures Martha Ndidi Ekeanyawu for a drug treatment to protect against river blindness and lymphatic filariasis. The Carter Center is working with RTI International to implement a five-year program targeting neglected tropical diseases.



Aniya Borachi, a former intern in the Carter Center's Democracy Program, traveled to Liberia to assist with an election observation mission. A grant from the Coca-Cola Foundation will help support the Center's intern program.

Interns Benefit from Coca-Cola Grant

The Coca-Cola Foundation has provided a three-year, \$300,000 grant to support the Carter Center's internship program. Some 140 students and recent graduates serve as interns at the Center each year over three sessions, spring, summer, and fall.

The grant helps foster a committed, informed, and skilled workforce advancing peace and health locally and around the world. Interns work alongside Carter Center staff to support programmatic and operational activities. Participants gain a multifaceted understanding of international issues through unique opportunities for applied learning. Recent interns have traveled to China to assist with a forum on U.S.-China relations, Lebanon to help with a workshop of Syrian legal experts, and Kenya to establish a Carter Center field office.

While the internship is unpaid, needs-based financial aid is available each semester to defray living expenses and enable qualified candidates to participate. Interns commit at least 20 hours per week to the program, and about half of them work full time.

Over the past three years, The Carter Center received 2,208 applicants of which 442 interns and 23 graduate assistants were selected for the highly competitive program. Around 20 percent of the interns are from outside the United States, and 75 percent of the interns speak multiple languages.

The Coca-Cola Foundation supports learning inside and outside the classroom and has given back more than \$1 billion to communities worldwide since its inception in 1984.

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Hunter Keys is a consultant with the Carter Center's Hispaniola Initiative.

NOTES FROM THE FIELD

Malaria Exacts a Tragic Toll

By Hunter Keys

In the poor neighborhoods of the Dominican Republic, people describe someone who hustles through everyday life as a *chiripero*, a “lucky sort.”

Juan Carlos Gutierrez was a *chiripero*. He scraped out a living shoveling sand at construction sites, painting houses, and delivering water. At 35, he lived with his widowed mother, sister, and 7-year-old son in a *barrio* along the mosquito-infested Río Haina west of

Santo Domingo.

When Gutierrez came down with a fever and body aches, he tried taking multivitamins and cold baths. When he became so sick that his eyes turned yellow and he could not keep food down, he was taken to a nearby hospital, where he was diagnosed with malaria. Three days later, he died.

With assistance from the Carter Center's Hispaniola Initiative, the Dominican vector-borne disease authority, known as CECOVEZ, is working toward eliminating malaria and a second mosquito-borne illness, lymphatic filariasis, throughout the country. Neighboring Haiti is doing the same. Both countries are making progress, but even one death is too many.

Out of Gutierrez's tragedy, a bright spot emerged. With the

permission of Gutierrez's mother, the family home became both a place of mourning and an impromptu test site for malaria. A small team from CECOVEZ gathered information about Gutierrez and offered testing for anyone interested. People of all ages lined up to have their fingers pricked and get their results within minutes.

An older woman said Gutierrez's death was completely unexpected. Indeed, since 2012, malaria has claimed fewer than 10 lives per year in the Dominican Republic. CECOVEZ and The Carter Center are committed to bringing that number to zero.



In the Dominican Republic, the slow-moving, polluted Río Haina west of Santo Domingo provides a ripe environment for the mosquitoes that spread malaria.