

# Moving Mountains to Prevent Disease

Adam Weiss brings a wealth of old experience to his first-year class at Rollins because of his full-time job: assistant director of Guinea worm eradication programs at the Carter Center.

Weiss first learned of the disease in 1997 as a Peace Corps volunteer in rural Ghana. By his

“kinship model” of health delivery that he tailored to fit his nation’s context.

That program’s success—more than 90% of communities achieved treatment coverage of 90% or greater annually—led to a senior post in Atlanta with the Carter Center’s programs in river blindness, lymphatic filariasis, and schistosomiasis.

Although they work on different diseases, Katarbarwa has much to teach a young colleague. “Adam and I often chat away about dealing with government ministries and how to, let’s say, get a car imported into the country,” he says. “Most people don’t think of these things as public health. But it can be very challenging. And you can’t succeed in

Moses Katarbarwa (left) and Adam Weiss are partners in the Atlanta community.

second year, he’d become the public health unless you know who can move mountains. —Patrick Adams

coordinator for the nation. When his Peace Corps service ended, he remained in Ghana five more years as a Carter Center consultant,

helping design and implement interventions that resulted in disease eradication. After serving for a year in Ethiopia—and likely witnessing the last case there as well—Weiss returned stateside to pursue his PhD and join the Carter Center team in Atlanta. Like dozens of Rollins students before him, he is learning from leading experts in health, human rights, and conflict resolution.

One of those colleagues is medical epidemiologist Moses Katarbarwa, who joined the Carter Center in his native Uganda to map the prevalence of river blindness, the second leading infectious cause of blindness worldwide. He also directed a *Bill & Melinda Gates Foundation*-sponsored program to control the disease using a community-based

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