Dr. Frank Richards specializes in the infectious diseases that are rampant in developing countries, especially diseases that target children.

For the last 25 years, he has been regularly spending weeks or months away from his home and family, traveling on nearly impassable roads in hot, uncomfortable places to work with people who are struggling to survive.

Richards, 53, is a get-it-done kind of guy who usually doesn’t worry much. But he does remember a moment of anxiety in 1995, in a nameless hotel in Nairobi, Kenya. A physician had just come out of the strife-ridden southern Sudan where Richards was headed.

The physician and his colleagues had been abducted by bandits and beaten, released after a frightening 15 hours. Richards listened to the story as he put things into his backpack.

“I’m stuffing each item more reluctantly as the story gets more and more terrifying,” Richards recalls.

Richards had a seat on a cargo plane going into southern Sudan the next day.

“I really began to wonder if this was the business that I wanted to be in,” he says.

EARLY INSPIRATION

From the start, Richards had been sure about his career—as far back as medical school in the early 1970s where he studied infectious diseases with professor Ben Kean.

“Dr. Ben Kean was a character who reminded me of W.C. Fields,” Richards says. “He was kind of short and stout, his eyes were squinted and he smoked a cigar.”

Kean taught infectious diseases by telling stories of his own work.

“His stories would deal with the Far East or Africa, or ‘Here we are in Latin America,’ or even, ‘When I took care of the Shah of Iran,’” says Richards. “All of his stories almost could begin, ‘Once upon a time in a faraway land.’

It was everything Richards wanted for himself: faraway places, strange customs, science fiction parasites that would drill their way into your body. The mission was another important factor for the idealistic 24 year old.

“At the end of the day, it was about how and why we’re here to help others.”

DISEASE AMIDST THE BEAUTY

Since then, there have been those rare, terrifying moments as in Nairobi, but Richards says he has been having a great time—not an easy time, he clarifies—but a great time. He particularly enjoys driving the back roads to beautiful places.
Richards prepares to travel from central Nigeria to the village of Seri. He is going with local staff members of the Carter Center, an organization that addresses public health problems worldwide. A couple of Carter Center cars were hijacked on Nigerian roads in the preceding weeks.

The drive to Seri takes the group by beautiful countryside—blooming wildflowers and verdant hills.

Yet amidst the beauty, Richards remains focused on his work. Passing a house with open doors and without window screens, Richards imagines mosquitoes carrying the sub-Saharan African scourge—malaria—entering and biting people at night.

Passing a pond of quiet standing water, Richards says it is a "pond that has schistosomiasis." The parasitic disease attacks peoples' intestines and bladder. Richards identifies residents of remote villages in greatest need of drugs to prevent the debilitating disease.

Richards combats what he calls "horror movie diseases"—diseases that eat away almost every imaginable organ—skin, brain, muscle, liver, kidney, bladders, lungs and eyes.

THE POWER IN COMMUNITIES

Richards arrives at the small village of Seri two-and-a-half hours later. Local health workers are waiting amid several clusters of thatched roof huts. The men are out in the fields but women and children crowd around the American as he inspects the dark, airless, cobweb-ridden huts.