Center Celebrates 40 Years
This anniversary cover celebrates our peace and health work in a handful of the more than 80 countries where The Carter Center has had programming since 1982. Top row: Niger, Ethiopia (Carters), Ghana; middle row: Ethiopia, Venezuela, Bolivia; bottom row: Nepal, Nigeria, Democratic Republic of the Congo.

This fall has been an exciting time at The Carter Center. We celebrated the anniversary of our founding 40 years ago, President Carter celebrated his 98th birthday, and we dedicated a 200-year-old Japanese bell on our campus.

With the anniversary, we have been looking back at some of the things we’ve accomplished in the past: bringing Guinea worm disease cases down from 3.5 million in 1986 to just 15 human cases last year; observing more than 110 elections in 39 countries; eliminating river blindness in four countries in the Americas.

And while reviewing and reminiscing have their place, we are more focused on what we plan to do next.

The Carter Center is implementing an exciting new strategic plan that will serve as the framework for our programming for the next decade. We are primed to use our experience to do new things in new ways to help tackle the emerging problems we face as a global community.

The first tenet of that strategic plan is that we will fulfill our existing commitments: We will continue to fight for human rights, observe elections, eradicate Guinea worm disease, combat the stigma of mental illnesses, and do the many other things you have supported over the years.

On top of those ongoing commitments, we are adding new programming that speaks to the realities of life in 2022.

This year, we have become more engaged in election processes closer to home, promoting democratic norms, working to avert potential election violence, and highlighting disinformation.

We are leveraging technology to follow political speech on social media in Myanmar, and we are implementing an innovative program for young people in Sudan, training them to monitor the country’s democratic transition so that they can have a say in Sudan’s future.

We are using social media to promote women’s and girls’ rights to have access to information through the Inform Women, Transform Lives campaign, which is working with a second cohort of cities around the world this year.

The last 40 years have seen some exciting Carter Center accomplishments. We look forward to what we can do in the next 40 years.
Electoral Expert Missions Sent to 3 Countries

The Carter Center in recent months has deployed electoral expert missions to Brazil, Kenya, and Colombia.

Electoral expert missions usually comprise fewer than 10 individuals; they do not carry out full election observations — that is, monitoring of voting, counting, and tabulation — but assess key aspects of the overall election process.

The Center commended Brazil’s Superior Electoral Court (TSE) and Brazilian voters and electoral stakeholders for the successful general election held on Oct. 2. The mission continued its work through Brazil’s presidential runoff on Oct. 30 with a focus on voting technology, use of social media, and the legal framework that governs both. The Center will report its recommendations in accordance with international election standards.

The Center also commended the efforts of Kenya’s Independent Electoral and Boundaries Commission and voters around the Aug. 9 elections in Kenya, saying technology helped enhance the transparency and verifiability of the process. It recommended earlier preparations for the next election.

The four-member expert team deployed to Colombia found that nation’s elections (first round on May 29 and runoff on June 19) were conducted in an orderly fashion, but the experts had several recommendations for electoral reform. These included a restructuring of the National Electoral Council to ensure its independence and professionalism.

Peace Agreement Implementation Stalled in Mali

The Carter Center, which serves as the Independent Observer of Mali’s 2015 peace agreement, has reported an impasse in the implementation process. In a report, the Center stresses that since October 2021, dialogue between the signatories of the agreement — the government, the Coordination of Azawad Movements, and the Platform — has grown increasingly difficult and there has been little progress in implementing the agreement.

While numerous factors contributed to the current situation, the Center notes the controversy over revising the agreement as a significant factor in producing the impasse. The concept of revision increased uncertainty about the peace process and impeded a sustained relaunch of implementation.

Despite these developments, the Center notes that the Malian parties continue reiterating their commitment to the agreement. Over seven years of implementation, the parties have regularly and consensually adapted provisions of the agreement to their needs and changing circumstances. To move forward, the Center said that signatories need to refocus on strengthening their dialogue and taking pragmatic steps while, at the same time, reengaging with the Malian public to restore hope in the peace process and building nationwide buy-in to the agreement.

Some progress has been made in recent months. A commission was established in August to help integrate officers formerly with the opposition into the military chain of command, one of the requirements of the peace agreement.

Liberia, Carter Center Announce Mental Health Champions

The Carter Center and the Ministry of Health and Social Welfare in Liberia have announced a new initiative to train nine Liberian citizens from diverse backgrounds to serve two-year terms as Liberia Mental Health Champions.

The champions were selected by The Carter Center and received training on mental health issues in Liberia: the national mental health care burden, ways to advocate for better policies, and interventions and treatments. The initiative follows more than a decade of collaboration between The Carter Center, Liberian governmental agencies, health partners, and health facilities to elevate mental health as a national priority, decrease stigma, and increase access to services.

“Since 2009, The Carter Center has worked closely with the Liberia Ministry of Health to build a sustainable mental health system,” said Eve Byrd, director of the Carter Center Mental Health Program. “By dedicating their time to learning and lifting voices, these mental health champions will become effective advocates for reaching our shared goal of a better mental health workforce, improved policies, and increased access to mental health services and affordable psychotropic medications in Liberia.”

At the launch event in early October, Ellen Johnson Sirleaf, former Liberia president, spoke about the opportunities ahead for the champions, the longstanding partnership with The Carter Center, and the 50 years of distinguished mental health advocacy by former U.S. First Lady and Carter Center co-founder Rosalynn Carter.
Standing in Awe

In 2016, I was in Shewa Robit, a farming community in the Amhara region of Ethiopia. We were visiting a new community latrine, built to help combat trachoma, a devastating bacterial eye disease.

I was standing in awe of everything this community had done to fight this disease and improve their own lives when a woman approached me. She greeted me with the widest smile and took my hand and kissed it and put it to her forehead and then kissed it again and repeated this several times. My interpreter said that his woman was thanking me and The Carter Center.

She said she had received surgery in both eyelids the previous year. (This simple surgery, supported by The Carter Center, preserves sight and alleviates eye pain.) Her relief, as was explained to me, became her beacon. She told everyone in her community to get the surgery if they needed it and said her daughter also received the surgery.

As I heard the interpretation of her words and, more importantly, felt her emotions, we both cried. Mine were tears of joy for our collective ability to make life better for each other. I was in awe of our work, our focus, dedication, and ability to improve lives in partnership with the communities we serve. I was in awe of the courage and commitment of the woman before me.

I could not imagine a better life than having dedicated 25 years to working with The Carter Center to reduce suffering and save sight.

— Kelly Callahan, director of the Trachoma Control Program, began working for The Carter Center in 1998
Moving In
I was part of the White House staff as a presidential appointee and continued to work for the Carters as they moved from Washington to Atlanta. The Carters’ transition offices were housed in the Richard B. Russell Federal Building downtown. I remember watching a number of 18-wheelers bringing presidential papers across the street to be stored in an archive building until the presidential library was built.

A few years later, as we prepared to move from the Russell building into the new Carter Presidential Center, some of us pulled long nights ensuring everything was fit for the dedication, including awaiting a long list of dignitaries and guests.

I’ve been with The Carter Center ever since, and its growth has exploded far more than I ever thought it would. I think it’s due to the genuine love the Carters demonstrate — people appreciate it.

— Bernstine Hollis, senior accountant, began working for The Carter Center on its first day

It’s the People
I have so many wonderful memories from my time at The Carter Center. I was an observer at the 1999 Nigerian presidential elections. I helped organize awards ceremonies in Atlanta and Nigeria for countries that had eliminated Guinea worm disease. I’ve had the opportunity to meet heads of state and other notable people.

But I think the people I’ve met and formed friendships with are the most treasured. Silvia Sagastume works in our Guatemala office. We bonded years ago while planning an event together, and now we even take vacations together. I visited her a few years ago, and we managed to climb a live volcano together. It was an amazing experience.

— Shandal Sullivan, executive administrative assistant, began working for The Carter Center in 1998

Bittersweet Success
It was 2007, and I was in Sudan, working in a remote area next to the Nile River called Abu Hamed. Back then, it was the site of the northernmost focus of the parasitic disease river blindness in the world. The area’s isolation limited the breeding range of the black flies that spread the disease, so we were optimistic that it could be eliminated there if mass drug treatment could be provided twice a year.

But there was a glitch. A massive dam was soon to be constructed nearby. We thought it might create new fly breeding grounds downstream, so we went to talk to a community that would be displaced to this area of potential new risk about the importance of taking the medicine.

But upon arrival, a new concern troubled me as we walked through rows and rows of tall, beautifully cultivated date and palm oil trees; these ancient trees would soon to be submerged by the new dam. I was followed by a number of young boys. It struck me how their lives would soon be forever changed by the rising waters. Their parents, grandparents, and great-grandparents had cultivated these century-old trees that in turn provided for their livelihoods. These boys’ futures would no longer be tied to palm oil and dates. What would that mean for them?

In the end, our program in Abu Hamed was wildly successful and acclaimed as one of the first that eliminated river blindness in Africa. The spillways created by the dam we were so worried about did not result in an explosive bloom of biting black flies. Despite our success, however, I wonder what happened to those beautiful boys, now adults, who lost their lovely palm trees to the consequences of development.

— Frank Richards, senior advisor for river blindness, lymphatic filariasis, schistosomiasis, and malaria; began working for The Carter Center in 1996

Frank Richards met these boys in 2007 in a remote region of Sudan and has always wondered what happened to them.
Many schoolchildren in Georgia don’t have the mental health resources they need. Fortunately, they have Ellen Eldridge to let the world know about the problem.

Eldridge, a reporter for Georgia Public Broadcasting, is a 2021–2022 recipient of a Rosalynn Carter Fellowship for Mental Health Journalism. The fellowships provide a stipend, guidance, and valuable contact with other journalists who cover topics related to mental health. For her fellowship project, Eldridge chose to cover school-based behavioral health, substance use and addiction treatment, and mental health in the criminal justice system.

“I believe I’m like Mrs. Carter in finding community the most important,” Eldridge said. “I may be idealistic or even naïve, but I want to live in a world in which neighbors genuinely look out for one another.”

One way for that to happen is through schools, she said. For example, Eldridge said, a perceptive and properly trained teacher may notice a student is struggling with depression or anxiety or other mental health issue and take the step of speaking with the child’s parents or making a referral to a school counselor, putting the student on the path to better mental health.

“Schools are an entry point into society’s systems,” she said.

Unfortunately, like many other states, Georgia has a dearth of school-based behavioral health professionals, Eldridge noted. She said the state has a ratio of one school psychologist per 6,390 students; the recommended ratio is 1:500.

The COVID-19 pandemic was problematic for many students in a number of ways, Eldridge said. Many had more exposure to domestic violence than they had in the past, compounded by fewer opportunities to lean on friends and school-based support such as counselors.

She noted that recently more people are being encouraged to pursue counseling careers. It takes real commitment to follow that path.

“Like journalism, it can be a tough job, but at least it doesn’t pay well,” Eldridge joked.

Eldridge also is a member of the Mental Health Parity Collaborative, a network of journalists covering the issue of treating and insuring mental health on a par with physical health. For the collaborative, she reported stories about how mental health issues are not well covered by insurance. Part of the problem is a lack of providers, while another part is a lack of mental health practitioners who accept insurance, making service too costly for many patients.

Some progress is being made. The Georgia State Legislature passed the Mental Health Parity Act last spring, and the governor signed it into law in May. The legislation reinforces federal law that requires all health insurance plans to cover mental health the same way they cover physical health. It also provides for more training for law enforcement officers and offers student loan forgiveness for people pursuing mental health professions.

Although her fellowship has concluded, Eldridge’s passion for the subject is just heating up.

“This is the beginning for me, not the end,” she said.

“While my fellowship year is ending, I know I have The Carter Center at my side. School-based behavioral health and mental health parity are issues I plan to follow for years.”
With political polarization and democratic backsliding in the United States showing no signs of abating, The Carter Center stepped up its U.S. election efforts in 2022.

“There’s no quick fix for U.S. democracy, and no single organization can solve its problems,” said Barbara J. Smith, vice president of the Center’s peace programs. “But what we learned during our first-ever foray into U.S. elections in 2020 was that our decades of experience working on elections and conflict abroad uniquely positions us to address our struggles at home.”

The Center’s democracy and conflict resolution teams worked to support democratic norms, encourage civil political behavior, educate the public about how our elections work, and organize small-scale nonpartisan election observation missions. Staff undertook several projects.

**Candidate Principles for Trusted Elections**

With support from nearly 80 organizations across the political spectrum, The Carter Center launched this initiative in September. Its goal was to get political candidates to agree to uphold five ideals fundamental to a successful democracy — simple, commonsense tenets such as denouncing violence and agreeing to accept election results once courts have made final rulings.

High-profile pairs of candidates who signed on include Georgia’s Republican Governor Brian Kemp and Secretary of State Brad Raffensperger, along with their respective opponents, Stacey Abrams and Bee Nguyen; and Colorado’s Democratic Secretary of State Jena Griswold and her challenger, Pam Anderson.

Though the principles were aimed at candidates, anyone was able to sign on at principledcandidates.org, thus sending a message to politicians.

**Democracy Resilience Networks**

Many people who won’t listen to an organization will listen to their friends and neighbors. With that in mind, the Center organized bipartisan networks of community leaders in four states: Georgia, North Carolina, Florida, and Arizona.

Each state network was led by a team of two — one who leans right and one who leans left. Their mission is to bring people together in support of elections. They also help push out facts about election processes and push back against misinformation. They shared much of this information online, using materials based on months of messaging research. But they also held in-person events; in North Carolina, for example, the network organized a 14-city discussion tour featuring election officials, judges, and cybersecurity experts talking about how elections work in the state.

**Nonpartisan Election Observation**

While nonpartisan election observation is an internationally accepted best practice and common in much of the world, it remains uncommon in America. In fact, many states’ laws prohibit it.

In Arizona, where nonpartisan observation is not allowed in polling stations on election day, the Center conducted a data-driven observation campaign. And in Michigan, where such observation is legal, the Center conducted a small pilot project to supplement data-driven approaches with direct observation by trained local observers.

In Georgia, the Fulton County Board of Elections and Georgia’s Performance Review Board jointly invited The Carter Center to observe elections in Fulton County. While Georgia law doesn’t allow for nonpartisan observation under normal circumstances, Fulton County’s elections are currently under state review because of alleged problems, and the Center’s impartial findings will be used to help assess the situation.

Other U.S.-themed projects include the creation of a resource guide to assist election workers — who regularly face harassment and intimidation — in protecting their mental health and finding help when they need it.

“Everything we did this year will be relevant in 2024, when the competition will be even more intense,” Smith said. “We’ll take the lessons from 2022 and incorporate them into future programs as we continue to work to restore Americans’ trust in their democracy — and in each other.”
Fred Matalocu, a 65-year-old Ugandan, remembers when his community was devastated by a disease that caused intense itching. So intense, in fact, that people scratching themselves with their fingernails was “insufficient” at getting relief. People sometimes turned to using rocks and sticks to ease the pain. Skin damage and vision loss followed later, all caused by river blindness, a parasitic disease spread by the bites of tiny black flies.

Matalocu’s community of Moyo district lies at Uganda’s border with South Sudan, 280 miles (455 kilometers) from Uganda’s capital, Kampala. The Albert Nile River flows north and east through Moyo before turning north again and joining the White Nile in South Sudan. The rapidly flowing tributaries of the Nile make ideal breeding grounds for the black flies that transmit river blindness.

According to Matalocu, the people of Moyo began avoiding farming near the rivers and nearby small streams to avoid the effects of the disease.

The tide began to change in 1993, when The Carter Center and Uganda’s Ministry of Health commenced activities in Moyo to control the disease with drug treatment and health education. And in 2007, Uganda shifted its river blindness program from mere control to elimination, which calls for more frequent drug treatment. Significant progress has followed.

After 28 years of treatments with Mectizan® (donated by Merck & Co., Inc., Rahway, New Jersey), the entire Madi-Mid North area, which includes Moyo, has reached a stage where experts suspect that transmission of river blindness is interrupted, a major step toward eventual elimination. For now, transmission interruption must be confirmed in various ways, such as the testing of black flies. Later, drug treatment will be halted followed by at least three years of post-treatment surveillance.

The decline of river blindness has changed everything, Matalocu said. Crops can be planted near the fast-flowing rivers and streams now; people are healthier and more productive; children can go to school instead of staying home to help blinded family members.

He appreciates what the program has meant for him, his family, and his community: “Because of the treatment, our grandchildren will have a better future,” he said.
A 200-year-old temple bell that had sat silent in the Carter Center's lobby for decades rang out clearly Sept. 30 at the end of a dedication ceremony around an ornate new tower built for it on the Center's campus.

Several hundred people attended the dedication ceremony, which was sponsored by the Japan-America Society of Georgia, the Japanese Chamber of Commerce of Georgia, the Japan External Trade Organization, and the Consulate-General of Japan in Atlanta. It featured a blessing by priests from the 350-year-old Shoganji Temple in Japan that was the bell's first home.

"We're excited for this bell to be a permanent part of The Carter Center," said Jason Carter, chair of the Carter Center's board of trustees and eldest grandchild of Jimmy and Rosalynn Carter. "It already is a part of the Carter Center's spirit, and it is certainly a part of my grandparents' life. This bell and this tower are a great testament to my grandfather and to many of the things he cares about."

During World War II, the Japanese military confiscated the bell from Shoganji Temple in the town of Konu, which lies within the city of Miyoshi, about 50 miles from Hiroshima. The military intended to melt the 500-pound bell down for ammunition. An estimated 95% of all temple bells in Japan were destroyed during the war, but somehow this bell survived, said Jessica Cork, chair of the Japan-America Society of Georgia and an official at YKK Corp., a longtime supporter of The Carter Center.

After the war, the Peace Bell traveled a twisting and sometimes mysterious trail of ownership that led it from Japan to England to Florida before it was given on behalf of the people of Konu to President Carter for the 1986 opening of the Carter Center campus. When he learned of its origins, the former president's first response was to offer to return it to its original home. But the people of Konu insisted that he keep it. They cast for the temple a replica bell, whose dedication President Carter attended in 1990.

The Peace Bell sat on a pedestal in the Carter Center lobby for many years. But it could not be rung. In 2021, the sponsor organizations became determined to let the bell ring again and started a fundraising campaign to build a proper tower for it.

The tower, an exact replica of the Shoganji Temple's bell tower, was painstakingly crafted in Japan out of wood from a 150-foot-tall cypress tree. The artisans then disassembled the structure and shipped it to Atlanta, where a team of Japanese and American carpenters reassembled it. Jason Carter predicted his grandfather, a skilled woodworker, would spend time admiring the craftsmanship of the tower.

"Understanding and exchange are difficult to express in a tangible way," said Tetsuya Takemoto, chair of the Japanese Chamber of Commerce of Georgia. "By participating in this project, we believe that we will be able to express the meaning and importance of deepening mutual understanding and continuing exchange through the symbol of the Peace Bell."
Mulat Zerihun cares about the eyes and speaks from the heart.

After working in ophthalmic care with the Ethiopia Ministry of Health for 27 years, Zerihun joined The Carter Center in 2005. The grandfather of six is the Carter Center Trachoma Control Program’s senior technical advisor for Ethiopia’s Amhara region, based in the regional capital, Bahir Dar.

“Because of its longstanding support, The Carter Center is a well-known and well-trusted organization in our region,” he said. “It makes me proud to be a member of this organization.”

In collaboration with the regional health bureau, Zerihun oversees the training of health professionals to perform sight-saving eyelid surgeries for people suffering from a condition called trachomatous trichiasis, or TT, caused by repeat trachoma infections. TT can force a patient’s eyelashes to turn inward and scratch the cornea, causing intense pain and possibly leading to blindness. The 20-minute eyelid procedure turns the lashes back outward, stopping the blinding progression. The Carter Center has supported the provision of such surgeries to more than 740,000 people in Amhara since 2001.

Zerihun estimates that The Carter Center-supported program in which he plays a significant role has trained more than 1,200 TT surgeons. Would-be surgeons practice on mannequins with 3D-printed eyelids that mimic human tissue, which has greatly improved the quality of training.

Zerihun’s support for the program goes beyond his technical expertise. In 2005, soon after he joined The Carter Center, Zerihun was tasked with organizing a visit to the Amhara region by former U.S. President Jimmy Carter. It made him nervous to be responsible for planning such a high-profile event, “but excitement was part of the nervousness,” he recalled.

“That visit was really remarkable: an American president visiting Mosebo, a very small village in Ethiopia, is very impressive,” Zerihun said.

President Carter said during the visit that he couldn’t sleep after seeing the prevalence and severity of trachoma in the village, and he promised to search the world over for partners and funding to improve conditions there.

“He kept his promise,” Zerihun said.

Today, after decades of implementation of the World Health Organization-endorsed SAFE strategy (surgery, antibiotics, facial cleanliness, environmental improvement), The Carter Center has supported the Amhara Regional Health Bureau and Ministry of Health of Ethiopia to provide not only TT surgeries, but also distribute more than 200 million doses of antibiotic in nearly 3,500 villages and reach more than 8,700 schools to provide trachoma prevention education. As a result, Amhara is making significant progress, with 54 health districts, home to more than 5 million people, that no longer require mass drug administration to combat trachoma.

Zerihun believes trachoma can be eliminated, despite Amhara’s status as the most trachoma-endemic region in Ethiopia.

“If we work in an organized way, with the leadership of the government and the support of partners and the participation of the communities, I don’t think it will take more than seven to 10 years,” he said. “Well organized, well integrated, implementing the SAFE strategy, it’s gone…. I’m very optimistic.”

Zerihun feels it would be “a sacrilege” not to be a part of the work.

“I consider myself a servant of my community,” he said. “These are my people. And if they lose their sight, it is my country that will shoulder the burden, and it is me who is supposed to support my people. So, if I can contribute to keep them producing, to keep them healthy, to keep them happy, that is what inspires and motivates me. If I do the service, it is because it is my responsibility.”

Zerihun looks for signs of trachoma infection in the eyes of a fellow Ethiopian. Zerihun joined The Carter Center in 2005.
Grant Supports State Election Work

The Carter Center is working to increase trust in electoral processes, reduce anti-democratic behavior, and mitigate violence through the 2022 and 2024 election cycles. Efforts are focused on Georgia, Arizona, Michigan, Florida, and North Carolina.

Rockefeller Philanthropy Advisors, through the nonpartisan Partnership for American Democracy, awarded The Carter Center a $100,000 grant to support the Center’s programming around the 2022 elections in the state of Georgia. The Center developed an election education campaign, which included messaging about making a plan to register and to vote under the state’s new rules and asking more Georgians to consider serving as poll workers in their local precincts. The funds also support the establishment of conflict resilience networks in Georgia communities that were identified as being at heightened risk of political violence and other disruptions to the democratic process.

Partnership for American Democracy is a collaborative center attracting resources to advance American democracy. Launched on July 1, 2021, the partnership has a National Leadership Council of close to 80 leaders from across a broad spectrum of sectors and issue-area experts heading each of its five pillars: civic learning; service and volunteering; bridging divides; effective governance; and information, media, and technology. Over 70 organizations, nonprofits, foundations, and centers have joined its founding coalition of partners.

Japan Awards Prize for Guinea Worm

The Guinea Worm Eradication Program, led by The Carter Center, received the Fourth Hideyo Noguchi Africa Prize in the medical services category, the government of Japan announced in August in Tokyo. The prize recognizes the program’s efforts to make Guinea worm disease the first human disease to be eradicated since smallpox in 1980.

The Hideyo Noguchi Africa Prize comprises a citation and a medal for each laureate and an honorarium of 100 million yen (more than 750,000 U.S. dollars at today’s exchange rate). A nominating committee identifies a list of finalists for the prizes, and the prime minister of Japan makes the final decision.

“We at The Carter Center are very grateful for this prestigious award from such an important partner,” said Adam Weiss, director of the Guinea Worm Eradication Program. “The Hideyo Noguchi Africa Prize signifies the government of Japan’s high level of interest and involvement in the health and welfare of the people of Africa. We appreciate the support we consistently receive from Consul-General Kazuyuki Takeuchi here in Atlanta.”

The government of Japan has supported The Carter Center and its partners in the Guinea worm eradication effort since 1989. When The Carter Center assumed leadership of the global Guinea Worm Eradication Program in 1986, an estimated 3.5 million cases occurred annually, mostly in Africa. In 2021, there were just 15 cases.

Annual Auction Raises $4.4 Million

The 2022 Carter Center Weekend raised $4.4 million in donations and auction sales to support the Center’s work worldwide. Events for the annual fundraiser, held June 15–19 in Colonial Williamsburg, Virginia, included live, silent, and online auctions, as well as a town hall with Carter Center senior leadership, presentations by Center staff, and a variety of social events.

There were 191 items in this year’s auctions, including signed photographs, artwork, and presidential memorabilia. The biggest-ticket item from the live auction was an original painting titled “Great Egret” by former President Jimmy Carter, which sold for $2.1 million.

Other items that drew top bids included a guitar autographed by John Mayer and the Grateful Dead, $150,000; a rare Peter Force print of the Declaration of Independence, $110,000; an oyster fly fishing rod collection signed by President Carter, $110,000; and a luxurious Hawaii vacation, $75,000.

Next year’s event will take place June 21–25 in Atlanta.
Myanmar is home to the world’s longest continuing civil war, spanning seven decades. The inevitable toll on mental health cannot be ignored, and recent events such as COVID-19 and economic decline have only intensified the unmet need for services. Given the Carter Center’s deep expertise in mental health and the limited number of mental health workers in Myanmar, we saw an opportunity to innovate.

In the summer of 2022, The Carter Center began implementing a peer-to-peer mental health support training project for women’s civil society and faith-based organizations. The pilot, implemented in partnership with the Counseling Corner, a Myanmar-based organization that provides mental health counseling, psychotherapy, and support, capitalizes on existing community networks and expands upon relationships the Center has already built.

Community-based and civil society organizations have long played a significant role in bridging treatment gaps. This project will equip a wide range of women with the knowledge, skills, and support needed to increase community access to basic mental health support. If successful, it could be expanded to other civil society and community-based organizations and geographic areas in Myanmar.

It is uncommon to speak about mental health issues in Myanmar, but participants are learning new skills and how to apply them in their daily lives.

Though mental health in Myanmar is a critical issue, access to care is neither easy nor cheap.

There’s also the cultural implication of seeking out help. Historically, it has been considered taboo to openly discuss negative emotions like depression and anxiety. But that school of thought is slowly changing among the younger and more progressive Myanmar people.

In Myanmar, there is a daily risk of violence, sometimes extreme violence, which has exacerbated mental health care needs. The case for expanding peer-to-peer mental health support to other parts of the nation is strong. As one staffer put it: “It is really important to validate your feelings and not ignore them.”