

## **Anthony Masso**

This is an interview with Anthony R. Masso on July 14, 2006, at the Centers for Disease Control and Prevention in Atlanta, Georgia, about his involvement with the West African Smallpox Eradication Project. The interview is being conducted as part of a reunion marking the 40th anniversary of the launch of the program. The interviewer is Kata Chillag.

**Chillag:** So, what we want to hear is any stories. We have a series of issues we'll want to cover, but it's a bit loose. So, the first is, how did you come to public health as a career?

**Masso:** I was in the Peace Corps for several years before joining the Smallpox Eradication Program. I saw a piece in the Bulletin that CDC [Centers for Disease Control] and the World Health Organization (WHO) were about to launch a smallpox eradication-measles control program in Africa. I was interested in continuing my international experience, learning another language, and doing something good. So I decided to send in an application.

I also thought it was a good thing to do in the '60s instead of going to Vietnam. After my application went in, I was interviewed by D. A. Henderson [Donald A. Henderson], the WHO Director at that time. We met in Washington, DC, in a bar, and over a couple of beers he said, "Hey, listen, you're great for the program. Come and join us," and that was it.

**Chillag:** Where had you been in the Peace Corps?

**Masso:** In Latin America. So it was a completely different experience to go from Panama in Latin America to Africa.

**Chillag:** And where were you in Africa?

**Masso:** Niger.

**Chillag:** And so, what was your role in the smallpox program?

**Masso:** My role was to be the operations officer along with a medical officer, Don Moore [Donald J. Moore]. Together, we formed the team of about 16 West African health workers, all male. The West African health workers, the nurses, were men; no women. It was a

Muslim country. I'm sure that's the reason.

And with about 25 trucks, our job was to go throughout the entire country and make sure everyone got vaccinated and to contain any outbreak that we saw.

**Chillag:** What were your expectations of the work?

**Masso:** Well, there was no real expectation other than knowing that it was hard work and that the conditions would not be good. I had lived in the United States, a privileged citizen with all the modern conveniences. And even as a Peace Corps volunteer, although there were no real conveniences, Panama had a lush environment, with greenery and the ocean. To go to a desert country, Niger, the size of Texas and California combined, with a hundred miles of paved road in the entire country and virtually all desert and mountain, and to see people live at the edge of existence was quite a different experience completely. There was no way to prepare for that.

Our training was mostly to learn French and to study epidemiology, but it didn't prepare us for the life in that country.

**Chillag:** And what were you most prepared for? You mentioned the sort of people living at the edge of existence.

**Masso:** Well, we were prepared to do the work. We knew what we were there for, so from a technical point of view, we knew how to operate the equipment, how to maintain the vaccines, how to map out each town we were going to for vaccination.

I remember one of my first impressions was seeing people living as they did 2,000 years ago, during the time of the Bible. You saw people literally with no more than one little clay pot and a little fire and a few seeds. and certainly no meat or anything-there are no conveniences at all-moving from place to place on the back of a donkey. I mean, it was exactly the way the world was 2,000 years ago. And many parts of that country are like that today. So there's very, very little progress. The country is exceptionally poor, large and vast, no real resources, no real agriculture. There's almost no rainfall.

I remember many times I'd say to myself, people shouldn't be living in places like this. Not very hospitable.

But our job was to contain the disease and wipe it out over a period of a couple of years, which we did, of course.

**Chillag:** What were your specific living conditions?

**Masso:** Our personal living conditions were good because we were attached to the American Embassy, and they gave us a small ranch-style house with a couple of bedrooms and a kitchen. We had air-conditioning, we had nice furniture, which was brought in just for the smallpox program. We had a car for our family as well as a truck that we would use for our work. We had servants, a houseboy. That was the norm. So the living conditions weren't bad at all. We were all young, and we didn't care that much to have super luxury.

**Chillag:** And you traveled around the country.

**Masso:** We traveled around the entire country. We worked so hard. We would try to schedule the trips to go to look at certain villages to see if smallpox was still rampant. Don and I would try to schedule a trip on a Thursday or toward the end of the week so we could travel and do the work outside the capital city on the weekend, on Saturday and Sunday, then come back during the beginning of the week to do anything we needed to do back at the health ministry. It was an arduous type activity because we'd be out for sometimes days at a time, and on big long trips, sometimes a couple of weeks at a time away from home, with no communications, no cell phones, no faxes, no telephones. When we were gone, we were really gone.

**Chillag:** And you were there with your wife too.

**Masso:** I was there with my wife. She was pregnant when we arrived. We had 2 children born to us while we were in Africa, which was a little bit unusual, although not too unusual. There were several people who had children there. And it was because we were young and we had both been in the Peace Corps that we were able to endure the conditions. But even others who hadn't had a prior international experience did fine. Being young and well motivated, I think I always rolled with the punches.

**Chillag:** You had to work, I'm sure, with lots of local partners. What was that like?

**Masso:** Well, the work with local partners was mostly frustrating

because what you expect in a counterpart in a country like that is different from what reality is. Their motivation, especially at the higher echelons, was how to do the minimal amount of work and take a lot of credit, and they just didn't have the drive that we did. We were very focused on what we had to get done.

Now, on the local level, with the people who worked "under us," who were the health nurses, it was completely different. I mean, we'd get up at a 4:30 AM, 5 o'clock in the morning and we were off. We would travel all day long, 12 or 14 hours, to get to a location. We'd work all night setting up camp. These people, the vaccination teams, would go out in the worst of conditions to perform the vaccinations. So they would work very hard and very long with meager pay and meager food available to them.

But at the Ministry of Health, where the bureaucrats were, it was completely the opposite. They just saw this as a free ticket for them.

**Chillag:** Was there general receptivity at a government level to the program as a whole?

**Masso:** Yes, there was. These countries really are developing or Third World countries, and they knew that the United States was coming in with lots of equipment, lots of money, talented Americans, to "give them something" that they wanted and needed to improve their health. But it was also free, and so they were very receptive to opening their doors and getting the equipment and the opportunity to do something in public health. We encountered no resistance to our work at all from any government leaders or local chieftains. We were there to do good, and they knew it.

**Chillag:** Were there any particular cultural differences that were very striking to you or very challenging to you in living there?

**Masso:** Well, I remember having learned in the history of medicine that the little lighted, red-and-blue swirly cone with a white background that you still see today outside of barber shops, symbolized blood. Because the old barbers were blood letters, even in Europe and in this country, 150 years ago. When a person was really sick, they would let out blood. I had thought this was a practice that you only read about in history. When we got there, sure enough, there were practitioners right outside our office—a modern office with maps on the wall and vaccines that

came from the States and the latest in hydraulic vaccination equipment. There would be people out there paying some practitioner to cut their backs or their arms and put suction devices on them to pull blood out. They thought if they were being bled, it would cure them of a headache or a stomachache or whatever it was. So that was a weird practice.

There are a lot of Muslim practices that were unusual: the feast of Ramadan, where they'd fast every day for 40 days and not eat until sundown; slaughtering of animals in a ritualistic Islamic way; preparing sheep, kind of skewered, spread-eagled, which is called mishlee [phonetic], roasting the sheep.

So we saw plenty of unusual practices. But after a while, they just became part of life. We didn't see them as strange; we saw them as part of their culture. And I think that's the way it's supposed to be.

**Chillag:** What do you think was the biggest challenge about the work?

**Masso:** I think the biggest challenge for us was the logistics. It was unbelievably difficult. We were forced to use American Dodge trucks, which was unfortunate because we should have been using Land Rovers. The trucks broke down frequently; axles would break. It got so bad that we'd have axles air-freighted in from Detroit to Niger at a humongous cost just because we had to use American equipment. And Niger was not like the coastal countries, like Ghana or Nigeria, where you drove on paved roads. We were in mountainous dirt-road locations, with these trucks that just wouldn't keep up. So the logistics of that, plus moving the vaccine around, keeping measles vaccine refrigerated where there was no refrigeration, was a big problem. And getting around the country, I mean, the size of Texas and California combined, with a small team and doing all of that in a couple-year period was very challenging. But, nonetheless, we got it done.

**Chillag:** Yes. What were the biggest rewards?

**Masso:** Well, the reward was very simple. I didn't realize that, in a couple of years, we would actually be able to see that there was no more smallpox in the whole country, and that was phenomenally rewarding.

I can remember being out under the desert skies with a team of African male health workers, and we looked up at the

stars. That was about the time, by the way, when we first went to the moon, the late '60s; '69 was the first moon landing. And I remember saying, "Look at those stars and look at the moon." The American space program was going up there. And here we are, and we're going to do something just as important. We're going to wipe a disease off the face of the earth. And we're not alone, you know; like that big sky, those stars are not alone; we're not alone. We are in each of 20 West African countries doing the same thing, and if we all do our job, we'll see it removed from Africa as a disease. That was tremendously rewarding to be able to say that to those people, to believe it, and then to leave when it was all done.

**Chillag:** Has that affected the choices you've made afterwards, your career and your personal life?

**Masso:** Well, certainly. I think what it's done to me as a person was to realize that there's no hardship you cannot endure. There's no obstacle that you can't surmount. There could be nothing tougher. You can be successful at something if you put your mind to it, if you work hard at it, and if you've got the tools to do it. CDC gave us tremendous tools to work with. And I don't mean just physical tools. We had the backing and support that were required to do it. And like the space program or like any other major achievement in history, we were able to get it done, and that leaves you with the sense that you can do almost anything if you have the right approach and the right support.

**Chillag:** I didn't ask anyone else this, but I'm just interested. Did you have any issues coming back to the United States in terms of reintegrating here?

**Masso:** When I came back, I went to Syracuse, New York, where there was 157 inches of snow that first winter. And, of course, when you leave a country which is 120°F in the shade, not unusual in the Sahara, and you come to New York, you get the climate difference. But the bigger difference wasn't that. It was that after 3-1/2 years of living like this in Africa, getting back into modern society doesn't seem real. The United States was now not real. Africa was real. Speaking French and speaking dialects were real. The superficiality of normal American suburban life, which is what we came back to, seemed like a movie, and Africa, then, was the real place, where at first it had seemed just the

opposite. So the biggest cultural change was readjusting, which, of course, we were able to do after 6 months or a year or so.

**Chillag:** Do you think there's anything else that it's important for people to know about the endeavor?

**Masso:** I think that the most important thing for people to know is that it's unusual for the USAID [US Agency for International Development] program, or for any type of American foreign aid, to be looked at as being very successful. But I think CDC leadership in Atlanta and the people they were recruiting were uniquely able to demonstrate to the world that you could say we have a goal of eradicating a disease, and spend a modest amount of money doing it, and be tremendously successful in accomplishing it. I think that's a once-in-a-lifetime activity. The legacy is certainly something that we should all be proud of. People who listen to these tapes or people who see what's been done should realize that it was accomplished by normal people under abnormal conditions, but with exceptional leadership and dedication on the part of everyone.

**Chillag:** Well, thank you very much.

**Masso:** Thank you very much, Kata.