



NEWSLETTER SEPTEMBER 5, 2006

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**WELCOME NEW MEMBERS:**

Tranita Gillis, CCID/NCHSTP/DSTD – new member  
Dawn Holland, CCID/NCHSTP/DTBE - new associate member

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COMMITTEE NEWS:
EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE MEETING

EXECUTIVE COMMITTEE MEETING LOCATION & MEETING DAY CHANGE

Thursday September 21, 2006 3:00 PM - 4:30 PM

Corporate Square, building 8, room 6B

Call In: Toll free #: 866-732-9603, Passcode 873632

Executive Committee Meeting is open to all

THURSDAY night SOCIAL 5:00 pm- ???

Locos Deli & Pub in Loehmann's Plaza (Briarcliff and Druid Hills)

2480 Briarcliff Rd NE,

Atlanta, GA 30329 **404-329-1999** .

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**NOTE from our PREZ:**

My Fellow Watsonians:

Well, we've gotten through another summer, and now CDC is in the fiscal year close out. The Watsonian Society is gearing up for all kinds of activities, including

- Hands on Atlanta (October 7)
- Banquet (October 13)
- Pig Roast to honor retirees (November 4).

I've heard from many of you regarding the Honorary PHA nominations, and Outstanding PHA nominations. I am hoping that if you had someone in mind, that you had an opportunity to submit a nomination.

And speaking of nominations, soon we will have a call for nominations for President-Elect. The elected person will serve one year as President-Elect, and then one year as President. Because this is a CDC Employee Organization, the President must be a current employee. So, start thinking about which of your colleagues would be good to lead the Society, and remember that you can nominate yourself, too!

Yours in Service,  
Stacy L. Harper, President  
Watsonian Society



#### **EVENTS HELP NEEDED!**

Save the Date! **Hands On Atlanta (HOA) Day**  
Saturday, October 07, 2006  
Location: Centennial Olympic Park, Atlanta, GA

#### 2006 Hands On Atlanta Day

When 15,000 volunteers all give a little bit, we can do a lot for Atlanta! Join us on Saturday, October 4th for the 13th annual Hands On Atlanta Day-the nation's largest day of service.

After completing the service projects, volunteers will gather at Centennial Olympic Park to celebrate their tremendous contributions to the community.

The Celebration of Service Party will include free food, beverages, live entertainment, prizes, and more!

To sign up please contact Watsonian Community Service Committee Chair, Hope King, **(404-718-8528)**



**HELP! HELP! HELP!**

**Folks, we need help for EVENTS planning.**

Our Events coordinator had to resign to take care of ill family, and I can't do it alone. We need new volunteers to comprise the committee. The mission of the committee is to:

**Purpose:** To develop and organize activities and special events bringing members, prospective members, friends, and families together.

**Key Activities:** Coordinate annual meeting, social events, receptions, picnics, etc

Out of 691 members, if a few dozen of you volunteer to do one half-hour shifts, we'll be covered. You get to socialize a little, and work a little, and you'll have fun at the same time. You don't have to volunteer for a lifetime, nor for EVERY activity.

**Here's a list of areas where just one half hour will make a difference:**

**BANQUET October 13**

- Ticket sellers for the Banquet
- Ticket takers for the Banquet
- Ticket sellers at the Banquet FOR the pig roast

**PIG ROAST November 4**

**Help roast the pig** (we have a master BBQ champ who'll command this operation, but he needs a few folks to assist, and we'll keep the costs down)

- Help set up
- Help clean up
- Ticket sellers for the pig roast
- Ticket takers for the pig roast
- Barkeeps for the Pig Roast
- Drink coupon sellers for the Pig Roast

**Many hands make light work! !!!!** I saw how you all came together to help me make banners-what I thought would be a 12 hour job became a one and one half hour job! If you didn't make banners, then come take tickets or help clean up at an event for just a little while.

**And if you love the holidays, I have just the job for you-planning the December Holiday Party!!!** So, contact me if you can help, and I'll be in



your debt forever.

Thanks,  
Stacy

**COMMUNICATIONS COMMITTEE**

Please remember to notify us ( R. Varga) of a change in your email address.

Remember the WATSONIAN WEBSITE is located at

<http://www.cdc.gov/watsonian/default.htm>

Newest addition- photos from the 60<sup>th</sup> CELEBRATION



## CONDOLENCES

The National Immunization Program (NIP) sadly announces the death of **Dr. Donna Rickert**. Donna passed away on August 26, 2006.

Donna was a Senior Epidemiologist in the Health Services Research and Evaluation Branch, Immunization Services Division, NIP. Prior to coming to CDC, Donna led the Maternal-Child Epidemiology Division at South Carolina's Department of Health and Environmental Control. She started her public health career at the Jefferson County Health Department in Birmingham, Alabama.

Donna held a BA and MA in psychology, an MPH in epidemiology and doctorate in Maternal-Child Epidemiology from the School of Public Health, University of Alabama at Birmingham. She was a member of the National Honor Society, Phi Kappa Phi, and the National Science Honorary, Sigma Xi, as well as a member of a number of professional societies. She was first author of a number of publications and worked closely with WIC, developing a new methodology for WIC program personnel to use in assessing a child's immunization status at the time of voucher pickup. Most recently she was working on issues related to the introduction of new adolescent vaccines.

Donna was also a member of CDC's Katrina response, working in New Orleans to assess the availability and need for mental health services.

Donna is survived by her husband of 31 years, Dr. Edward J Rickert of Atlanta, and her sons, Adrian Rickert (Christie), Dr. Jeff Rickert (Audrey), her father, Dr. Joseph Lee, sister, Carol Slaughter (Morton) brothers, Mark Lee (Emily) and David Lee (Tammy), granddaughter, Kaylee Rickert, all of Birmingham, Alabama, three step-sons all of whom reside in Texas, two sisters-in-law in New Mexico, and a host of loving nieces and nephews.

The family requests that in lieu of flowers donations be made in Donna's name to the Public Health Education Fund, care of Joan Ohrn, School of Public Health, University of Alabama at Birmingham, 1665 University Blvd, Birmingham, AL 35294-0022.

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The Mycotic Disease Branch (MDB), Division of Bacterial and Mycotic Diseases, National Center for Infectious Diseases, sadly announces the death of **Ms. Dannetta Lewis**. Ms. Lewis passed away on August 24, 2006. Dannetta was the Program Operation Assistant for the Mycotic Disease Branch and serviced MDB well for many years as the primary travel clerk. Dannetta retired from federal service September 2005. She will be sorely missed by all who had an opportunity to know her.

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**John Lehnherr's** father, Mr. Russell Lehnherr, passed away on Friday. Services are being held today, August 14th, in John's hometown of Sparta, Illinois. His wife is **Candace Nowicki-Lenher**, another PHA, so she's lost her father-in-law.

John is the acting Director for the Division of Reproductive Health in the National Center for Chronic Disease Prevention and Health Promotion.

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Windell Bradford's mother passed away.

Sarah Robertson Bradford - Savannah - Sarah Robertson Bradford, dedicated educator, faithful church leader and devoted mother died Thursday at her home. She was born April 7, 1913, in Dover GA to **Windell Arthur** and Willie Ethel Ingram Robertson. As the youngest of four children, Sarah fulfilled her parents' dream of completing a secondary and college education.. After attending Macon, GA public schools she received a bachelor's degree from Georgia State College for Women in 1933 with majors in English and physics and a minor in chemistry. She would later earn a master's degree in education from Georgia Teachers College in Statesboro. After moving to Savannah with her family, Sarah was certified as a medical technologist by the American Society of Medical Technologists and worked as a clinical medical technologist including work in the new field of medical radiology. She married Brazil Ransom Bradford, III in 1936. After spending 15 years as a full time wife and mother she began a teaching career in 1951, primarily teaching General Science in the Savannah Public School System until her retirement in 1977. Among many honors she received a Merit Scholarship for Advanced Training in 1957, and was named Chatham County Teacher of the Year for the 1956-1957 and 1960-1961 school years. She was a dedicated member of the Isle of Hope United Methodist Church where she served on the Administrative Board, and was a leader and active participant in the Wylly-Dupon Sunday School Class, the In as Much Circle of the United Methodist Women, and the Sparklers Bible Study and Choir. Sarah was an active member of the Savannah chapter of the Daughters of the American Revolution and the Epsilon Chapter of Alpha Delta Kappa Sorority. Preceded in death by her husband in 1956, she devoted her life to the love, support and education of her five children on the limited income of a public school teacher. Her children and their spouses are Ransom Bradford of Muenster, Germany; Windell and Gail Bradford of Savannah; Dr. Sallie and the late Dr. Edward Krickel of Athens, GA; Neil and Laurie Bradford of Portal, GA; and John and Diane Bradford of Marietta, GA...

Savannah Morning News August 25, 2006 Please sign our Obituary Guest Book at www.savannahnow.com

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From **CHRIS HAYDEN**:

Just a note to thank my Watsonian friends who contributed so generously to Amnesty International in memory of my father, Henry Hayden who passed away on June 7<sup>th</sup> in Hanover, NH at the age of 91. We held a memorial service this past weekend in Hanover with family members coming from as far away as California and Maine. It was a blessed celebration, with sharings, songs, prayers, and poetry. It was also a great comfort to know that my colleagues and friends at CDC were keeping me in their thoughts and prayers.

--Chris

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LEAVE DONATION

WHO: ANNETTE GARDNER
PUBLIC HEALTH ADVISOR
NCCDPHP

REASON: MEDICAL EMERGENCY

ELIGIBILITY PERIOD: AUGUST 7, 2006 THRU SEPTEMBER 29, 2006

DONATION PERIOD: (Leave will be accepted through OCTOBER 29, 2006)

HOW Submit an approved OPM-71 to your timekeeper and latest earning and leave statement. Indicate name of recipient and the number of annual leave hours you wish to donate.

Have your timekeeper send them to the payroll office, MSK-15, so that a record of donated hours can be maintained. Then enter the number of hours you wish to donate in TAS Net.

FOR QUESTIONS,
CONTACT: ROBERT BLALOCK

NOTE: The decision to donate annual leave is solely voluntary. Thank you in advance for your participation.

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WHO: ELIZABETH WEIRICH  
PUBLIC HEALTH ADVISOR  
NCID

REASON: MEDICAL EMERGENCY

ELIGIBILITY PERIOD: HAS BEEN EXTENDED THRU NOVEMBER 17, 2006

DONATION PERIOD: (Leave will be accepted through DECEMBER 17, 2006)  
HOW Submit an approved OPM-71 to your timekeeper and latest earning and leave statement. Indicate name of recipient and the number of annual leave hours you wish to donate.

Have your timekeeper send them to the payroll office, MSK-15, so that a record of donated hours can be maintained. Then enter the number of hours you wish to donate in TAS Net.

FOR QUESTIONS, CONTACT: LINDA LAWRENCE

NOTE: The decision to donate annual leave is solely voluntary. Thank you in advance for your participation.

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MEMBER NOTES
Many thanks to the Watsonians for their kind words during my recovery from angioplasty and a stent implant. Sorry to say that the event kept me from attending any of the 60th anniversary events.

DICK CONLON

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**NURSERY NEWS**

**Vic Tomlinson** is a GRANDFATHER

My grandson was born 8/8/06 at 7:57 am Central Time in Austin, Texas. His name is Luke (Lucas Benjamin Brummer). He was 7 lbs, 10 ounces and 20 and 1/2 inches tall. Mom and baby are doing well.

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SPECIAL NOTICES

**Federal Managers Association
CDC Federal Credit Union**

**11th ANNUAL GOLF and
1st ANNUAL MIXED DOUBLES TENNIS**

**TOURNAMENT
FEEA SCHOLARSHIP FUNDRAISER**

**Wednesday, October 18, 2006
Country Club of Gwinnett , Snellville, Georgia**

For the past decade, this event has been the "driving" force behind college scholarships for CDC/ATSDR employees and their families. The scholarships are awarded through the Federal Employees Education Assistance Fund (FEEA), which is a Combined Federal Campaign (CFC) recognized charity.

Some notes on the tournament and scholarships:

- ❖ The sole purpose of the tournament is to raise money for scholarships, and **all** CDC employees and their families (not just FMA members) are eligible to apply for the scholarships.
- ❖ We've given out over \$50,000 so far, including five \$1,000 scholarships this year. The more players and sponsors we get, the more scholarships we can award. Our goal is to give ten \$1,000 scholarships next year, and we have almost enough sponsor pledges to accomplish that goal. But we still need as many players as possible to help us lock in those sponsors.
- ❖ And finally, **Dick Conlon** is still in charge of the tournament. **Dan Riedford** - who is a Watsonian member - is the current FMA chapter president.

TOURNAMENT INFORMATION

Golf Advance Entry Fee is \$75* per golfer, which includes:
Greens Fees, Cart Fees, Driving Range Privileges, & Lunch

Tennis Advance Entry Fee is \$25* per player, which includes:
On-Court Warm-Up, Continuous Round-Robin Play, & Lunch

**After October 13, 2006 the Golf entry fee is \$85.00 and the Tennis entry fee is \$35.00*

Tournament Schedule:

8:30 a.m.....Registration
9:30 a.m.....Shotgun Start
2:00 p.m.....Lunch
2:30 p.m.....Prizes and Awards

Tournament Location:

Country Club of Gwinnett
3254 Clubside View Court
Snellville, Georgia 30039
www.countryclubofgwinnett.com

Electronic Application Available At:

CDC Federal Credit Union web page
<http://www.cdccu.com/ASP/home.asp>

For More Information, Contact:

Dick Conlon Dan Riedford

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To ALL Watsonian Members

The National Association of ACTIVE and Retired Federal Employees (NARFE) will hold its annual luncheon picnic on September 20, 2006 at Mason Mill Park, 2340 McConnell Dr. Decatur (off of Clairmont Road) from 10:30 am to 1 pm. Food service will begin around 11-11:30 am with the time before then as "social" time. We will have baked and fried chicken and all the "fixens." The cost is \$10 per person.

You are invited and welcome. In order to adequately plan for the correct amount of food, please pay in advance for each person. You can make your payment to Fred Martich, 4056 White Oak Lane, Lilburn, GA 30047. Make checks payable to NARFE. Please let us know if you are coming. You can also contact **Fred Martich**.

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Senior Management Officials (SMO) note

Senior Management Officials were created by the CDC Portfolio Management Project (PMP) and they serve as a member of the executive staff within the respective State/local Health Department. For the past 4 months, I have served as the SMO for the District of Columbia Department of Health.

For certain, as with most large metropolitan areas, the District of Columbia has its challenges in managing CDC's investment through effective business practices. However, unique to the District as it relates to CDC's investment is that the District has very complex fiscal, personnel, and business system policies and procedures that significantly impact program performance; and 2) the lack of a critical support infrastructure leads to inefficient and redundant business practices.

With the assistance of 16 CDC program and fiscal representatives from 11 different CDC CIOs and 2 CDC officials from the PMP, we provided grants management training to over 125 District of Columbia Department of Health employees (fiscal and program) who manage CDC grants. (see Attachment). The training was an example of *shared leadership* between CDC and the District in *improving business practices and performance through effective grants management*. Moreover, it was an example of

stellar collaboration among CDC program and fiscal staff in addressing common issues experienced in the District across CIOs. It is my understanding that never before has something like this been achieved at CDC.

The training facilitated **communication, collaboration, consideration, and contribution** from all participants.

Thank you,

Duiona R. Baker, M.P.H.

Senior Management Official

HAVE YOU HEARD?

I am pleased to announce that **Joseph E. McDade, Ph.D.** and **Gerald P. Naehr** with Carter Consulting, Inc. have been contracted to provide services for an Ombudsman Office for the Centers for Disease Control and Prevention (CDC). As contractors, they will be uniquely positioned to not only make recommendations as to the proper role and best practices of an Ombudsman, but also to act as ombudspersons for internal issues and concerns.

Mr. Naehr will serve as the Management Ombudsman. In addition, he will be responsible for conducting the investigation of Ombudsman Offices in other Federal agencies and for developing recommendations for ongoing improvement of the office within CDC. Mr. Naehr has more than 30 years of experience managing CDC programs and field staff. As Chief of the National Center for Prevention Services' Field Services Office, Mr. Naehr was responsible for planning, development, and oversight of the recruitment, training, development, and deployment of field staff assignees. This experience exposed him to CDC practices and issues regarding training, merit promotion, conflict resolution, employee performance, and other personnel issues.

Following this position, Mr. Naehr served in various management positions at branch and division levels where he participated in reorganizations and development of policies, program goals, and objectives.

Dr. McDade will serve as the Scientific Ombudsman to address any concerns that are raised about CDC's scientific work. Dr. McDade will also provide a scientific perspective to how the office should operate. Dr. McDade, a nationally recognized scientific and laboratory expert, retired from CDC as Deputy Director of NCID. Prior to that position, he served as Associate Director for Laboratory Sciences at NCID. He currently is an Adjunct Professor at Shorter College and Floyd College in Rome, Georgia. Since his retirement from CDC, Dr. McDade has provided general consultation to NCID, served on a team that assessed the organizational alignment of the Division of AIDS, STD, and TB Laboratory Research, and is providing assistance to CDC's Office of Health and Safety on the development of a biomedical safety manual.

An Ombudsman Office will not only provide an effective mechanism for listening to staff concerns, but also will assist greatly in the development and implementation of new management and programmatic initiatives. I hope that you will join me in welcoming Mr. Naehr and Dr. McDade as they begin this important task.

Stephen B. Thacker M.D., M.Sc.

Rear Admiral (Ret.), USPHS

Director, Office of Workforce and Career Development

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I am pleased to announce that **Glen Nowak, Ph.D.**, has been selected as the Chief of Media Relations for the Centers for Disease Control and Prevention (CDC), effective September 3, 2006. Dr. Nowak has served as the acting director of media relations since June 2004.

Dr. Nowak received his Bachelor of Science degree in Mass Communication and Economics from the University of Wisconsin-Milwaukee, and his M.A. in Journalism and Ph.D. in Mass Communication from the University of Wisconsin-Madison. Prior to joining the Division of Media Relations in June, 2004, Dr. Nowak served five years as the associate director for communications at the National Immunization Program (NIP) at CDC. As NIP's associate director of communication, Dr. Nowak was responsible for a wide range of communications activities, including public information and education campaigns to increase awareness and adoption of immunization recommendations, vaccine safety-related communications and issues management, websites, media relations, and communication research related to vaccines and immunizations. In the past four years, Dr. Nowak has been extensively involved in developing, implementing, and evaluating media and communication plans for seasonal influenza, vaccine safety, smallpox preparedness, and pandemic influenza.

Prior to joining NIP in January 1999, Dr. Nowak was an associate professor of advertising and marketing communication at the University of Georgia. At Georgia, Dr. Nowak taught undergraduate and graduate courses in principles of advertising, communication and advertising research, communication and advertising management, social marketing, and health communications. In the past twelve years, he has authored or co-authored a number of peer-reviewed journal articles on communications practices, social marketing, and health communications. He currently serves as a regular reviewer for *Journal of Health Communication*, *Journal of Advertising*, and the *American Journal of Public Health*, and is a member of the editorial review board of the *Journal of Interactive Advertising*.

In 2003, the CDC/ATSDR Communicators' Roundtable presented Dr. Nowak with its "Excellence in Health Communications Award" for his lifetime achievements in communication and for "excellent vision, exemplary service, and outstanding performance" in using and fostering communications to "further the mission of CDC/ATSDR."

I know I can count on your enthusiastic support of Dr. Nowak as he assumes this senior executive position at CDC/ATSDR.

Donna M. Garland, Director,  
Office of Enterprise Communication

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SMALLPOX PIONEERS SHARE PUBLIC HEALTH HISTORY 8/10/2006

More than 80 former CDC staff who were part of the West and Central Africa Smallpox Eradication Program returned to CDC July 13-15 with their wives, children, and grandchildren to reminisce, reflect on the experience, and offer their perspective on today's public health challenges.

One of the major events in the globalization of CDC was the USAID/CDC Smallpox Eradication Measles Control Program in 20 countries of West and Central Africa from 1966-1972.

The idea for the reunion was initiated by Rafe Henderson, MD, and his wife, Ilze Henderson, RPh, who were part of the CDC group that went to West and Central Africa in 1966. Their thought was that the reunion would be a modest, backyard affair attended primarily by those living in the Atlanta area. However, alumni scattered around the US returned to Atlanta for the occasion and the backyard affair turned into three days of activities.

Four events marked the weekend:

Across the span of the 3-day reunion, 70 hours of oral histories from the alumni, their wives, and children were videotaped. Videotapes and transcripts will be provided to public health and history scholars.

On Friday evening, the group gathered to renew friendships and to share stories of African adventures and misadventures.

On Saturday morning, a plenary session provided an overview of the program and alumni described some of the legacies.

The reunion concluded with a gathering at the Emory Conference Center, where current CDC Director Julie Gerberding, MD, MPH, congratulated the group for their contributions to CDC and global health.

The history of the Smallpox Eradication Measles Control Program was well summarized in a recent MMWR article by **David J. Sencer, MD, MPH**, celebrating the history of CDC. Sencer joined CDC in 1960 and was director of CDC from 1966 to 1977. (The following remarks are excerpted from MMWR's 60th Anniversary Director's Perspectives.)

"CDC envisioned a smallpox eradication program, based on efforts begun by CDC's Alexander Langmuir and D.A. Henderson, for 20 countries in West and Central Africa. CDC agreed to a request from USAID to assist in a measles-control program in the area on the condition that the program be combined with smallpox eradication. This arrangement was supported by USAID, which agreed to fund the program. Henderson was assigned to WHO headquarters to head the global effort, and J. Donald Millar led CDC's efforts in West Africa.

Staff Trained In Epidemiology, Clinical Care, Vaccine, French and Auto Repair

"To prepare for their field work, epidemiologists and operations officers were trained in smallpox epidemiology, clinical aspects, and vaccine properties; they also received French language instruction and lessons in motor vehicle repair. They embarked on a program that demonstrated that smallpox eradication was possible, but only if the standard approach was altered drastically. Although original plans had called for mass vaccination, CDC staff in Nigeria demonstrated that eradication was best achieved by surveillance, the detection of cases and containment, the control of local outbreaks. The last case of smallpox in West Africa was reported in 1970; the program was successful, under budget, and a year ahead of schedule. Technology and supplies were vital to the effort; however, more important was the ability of CDC staff members to establish

collegial relations with their counterparts in the countries in which they worked, motivating them to assume responsibility and leadership. This ability has proven indispensable and remains a key to CDC's successful global activities.

"The expertise gained in Africa served as a major resource for WHO in the two countries that posed the greatest obstacle to global smallpox eradication, India and Bangladesh. In addition to full-time staff assigned to both countries, hundreds of CDC staff members served short-term assignments in India and Bangladesh. The last known case of naturally acquired smallpox in the world occurred in 1977 in Somalia."

"If CDC Had Failed There would Have Been No Second Chance"

At the plenary session of the 2006 reunion, **Donald J. Millar, MD, DTPH** (Lond.), director of the West African Program from 1966-1970 summarized high points of the effort. He also told the Smallpox alumni, their families, and current EIS officers that "had CDC failed, endemic smallpox would be in the world today. There would have been no second chance."

Millar was the first of several speakers who credited the success of the West African and Global Smallpox eradication campaign to the "persistence and tenacity" of then-CDC Director David J. Sencer.

Stanley O. Foster, MD, MPH, provided a brief history of CDC's early activities in global health and cited two of its most important global legacies: the global eradication of smallpox and the expanded program on immunization. He also emphasized the critical role of the Operations Officers (OOs), non-medical staff who provided managerial expertise. He noted the initial reluctance of many Ministries to accept such personnel. Once they learned how important these OOs were in strengthening the capacities of country health programs, their assignment became a priority.

Jean Roy and **Dave Newbery**, both West African alumni OOs, shared their current work with national and international teams to eradicate polio and to reduce the burden of measles in Africa.

Foege Says "Sencer Always Found A Way"

William H. Foege, MD, MPH, observed that Sencer "always found a way to provide people with equipment and other tools in creative, perhaps indictable, ways. I learned to be sure I knew what I was asking for because I would get it," he added.

A member of the EIS class of 1962, Foege urged the EIS Class of 2006 to stick to three principles that worked during the smallpox eradication campaign and would still work 40 years later:

- make recommendations based on scientific evidence,
- be optimistic, and
- be sensitive to the culture of the people you're working with.

"Too Young To Know That They Couldn't Succeed."

A common theme of the reunion among its alumni was that the team that made its way to West and Central Africa was "too young to know that they couldn't succeed."

Reflecting on the Africa experience, Henderson said, "I've been asked if we were extraordinary individuals in West Africa. I knew we were not. But many became extraordinary because of this experience."

"The lesson for me is that this transformation is not unique. Many programs, particularly those that explore new areas, that have caring and visionary leadership, and that achieve their goals, can and do generate lifelong enthusiastic and dedicated individuals. So while it's great to look back to celebrate the special successes of this program, it is also important to continue the legacy by creating additional extraordinary people through more such programs."

Posters Part of Pox Campaign

You can check out some of smallpox history right now in a new display at the Roybal campus, in the lower level of the Global Health Odyssey, Tom Harkin Global Communications Center.

It's The Campaign to Eradicate Smallpox: West African Posters 1967 – 1970.

Posters were among the tools used to educate local populations about the campaign and played an important role in motivating people to get smallpox vaccinations. The majority were designed and printed in Africa, using regional artists to illustrate both the dangers of smallpox and immunization procedures.

Take a walk through history, as you visit this new exhibit.

This Inside Story by CDC Connects reporter Kathy Nellis and Kathy Harben, Enterprise Communication Officer, Coordinating Office for Global Health, with guidance from Foster, Henderson, and Sencer.

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#### **CDC Connects**

Time Capsule Captures Past for Future 7/17/2006

Do you remember 1959? That was the year Barbie made her debut. Pantyhose were introduced. Space monkeys Able and Baker were successfully launched into space in the nose cone of the Jupiter missile. NASA, a fledgling agency, picked the 7 Mercury astronauts. Hawaii and Alaska became states. CDC's Dr. Robert Kisling developed the florescent antibody test for rabies. The average American worker earned \$91.53 a week. Ben-Hur won the best picture Oscar and Bobby Darin's "Mack the Knife" won the Grammy for best record. And CDC buried a time capsule in Building 2.

Well, Building 2 is gone and that time capsule was opened recently in celebration of CDC's 60th anniversary. A new time capsule will be buried soon. Here's a look at what we found and what we're leaving for the future.

#### Box Unearthed from Building 2

As construction crews demolished Building 2, an old box with lead solder was unearthed from a cavity in the bricks. It was taken away, to be opened close to CDC's 60th anniversary celebration.

"For nearly 50 years, Building 2 housed Auditorium B, classrooms, the original CDC cafeteria, and the Global Health Odyssey," says Chief of Staff Lynn Austin, PhD,

“Auditorium B was the site where some of CDC's most historic decisions were either debated or announced, and this building also housed CDC's first emergency response center. Building 2 was demolished to accommodate the security set back zone, house a portion of Building 23 as part of the east campus lab consolidation project, and create landscaped green space allowing emergency vehicle access. This time capsule, which contains various items that have had an impact on CDC's history and achievements for nearly half a century, was recently unearthed and opened.

I hope you enjoy this glimpse into what has proved to be an exciting time of change for CDC.

#### *Old Time Capsule Looks Back 47 Years*

When opening day arrived, CDC Director Julie Gerberding, MD, MPH, and Chief Operating Officer **Bill Gimson** were joined by three of CDC's long-time employees: Myron “Mike” Schultz, MD, Division of Health Studies, NCEH/ATSDR; Mary Ann Fair, research microbiologist, NCID; and Marty Ledbetter, electrician foreman, Buildings and Facilities Office.

Each has 40 years or more of service with CDC. So while they weren't around when the time capsule was buried, they are virtual walking time capsules, enthusiastic and knowledgeable about CDC's rich history.

Bill Trent, BFO pipe fitter foreman, stood by to pry the box open. As a safety precaution, the box was x-rayed before it was opened and the celebrants on hand wore latex gloves for protection when handling the box.

Anticipation grew as the small group gathered around a table. What would be inside the long-buried box?

Nothing strange, it turned out. The small container held only a bunch of musty-smelling papers, among them documents and photos and organizational charts detailing life at CDC 47 years ago. Part of the Public Health Service, CDC came under the Bureau of State Services back then.

Some of the papers included a Communicable Disease Center phone book, internal memos, and a CDC report of activities from 1956-1957, a sort-of “state of CDC” from bygone days. The report described the communicable disease problem in the U.S., “For many years the mortality caused by communicable diseases has been considered the chief criterion of their importance. Today they are responsible for 1 out of every 10 deaths in this country—or for 130,000 deaths each year, with the highest rate among the younger population.”

Groups of diseases which CDC was studying in 1959 included poliomyelitis, dysentery, rabies, plague, and amebiasis.

Even back then, CDC was involved in disaster response. “Epidemic and disaster aid are CDC's most dramatic functions. This year CDC answered requests for assistance in 23 epidemics, involving 15 different diseases and in 18 disasters.”

Old photos showed staff and branch chiefs, including Alexander Langmuir, Chief of the Epidemiology Branch, a photo which brought a smile to the face of Schultz, who enjoyed

looking at the historic pictures . “Well, I certainly did not feel like I was Howard Carter opening King Tutankhamen's tomb,” says Schultz (of the annual trivia contest fame), “The contents of the time capsule were very prosaic. The contents were entirely written material made up of newsletters, a telephone directory and an annual report. The newsletter had human interest stories in it such as single and group awards, retirements, etc. It is the same material that we see now, 50 years later, although some of it now appears in digital format. Toward the end of the session, I said to Dr. Gerberding, ‘Plus ça change, plus c'est la meme chose’ which means The more things change, the more they stay the same.’ That was my strongest impression from that event.”

Gerberding reads aloud from The Communicable Disease Center report. Groups of diseases which CDC was studying in 1959 included poliomyelitis, dysentery, rabies, plague, and amebiasis. Photo by Kathy Nellis

#### A Look Back in Time

An internal monthly “newspaper” called the Info Memo from Sept-Oct 1958 proclaimed the news of the day. Seven CDCers received incentive awards. “Mr. Henry L. Talton, supervisor of Laboratory Supply) was awarded \$75 for his suggestion which saves \$3,000 annually on the laundry of coveralls and towels used by animal caretakers. His suggestion was that existing contracts for laundry of these coveralls and towels be replaced by the purchase and local operation of an automatic washer and dryer.”

Also, “in Savannah, Mr. Bernard O. Smith and Mr. Fred Freeman (biological aids) each receive \$12.50 for a joint suggestion that resulted in field-use vehicles being equipped with turn signal lights as a safety measure.”

Then there was a riddle of sorts. “Which would be easier to do—fold a piece of paper in half 50 times or reach the moon? It’s not a riddle; accomplishing either is equally possible. Because if you were to manage the 50 fold business, your paper would be so thick that it would reach beyond the moon.”

According to the story, just thirty fold would result in a diameter just about the size of the earth. (CDC Connects did not independently confirm this statement. If anyone does, please contact us!) The moral of the story—little things add up.

And the paper reported that Miss Charlotte Simpson of the VD branch was chosen as a finalist for Miss White Columns on Peachtree, a contest celebrating WSB TV’s 10th anniversary.

The actual burial date remains a mystery after all these years. The cornerstone in the old photo is engraved 1958, but the small metal box holds documents dated from late 1958 and early 1959. That made it eventful for Ledbetter.

“Going back in time is has always been interesting to me,” he says. “Being present when the capsule was opened was exciting. It was like the day, when we were standing by Clifton road and the 1996 Olympic runners caring the torch, came by; you can't put it into words the feeling that it gave, it wasn't like watching it on TV or reading about it in the paper, it was a feeling inside of you that you can't describe. The opening of the capsule and the runners were really touching and it was really great to be present at such a time in history.”

### Tips to Run Away from a Problem

The info memo also listed 12 ways to run away from a problem. Some might sound familiar even after all those years. The participants laughed out loud at a few of the suggestions, which were reprinted from Supervisory Management Magazine. Find a scapegoat and ride him.

Profess not to have the answer. That lets you out of having any.

Say that we must not move too rapidly. This avoids the necessity of getting started.

For every proposal made, set up an opposite and conclude that the middle ground (no motion whatever) represents the wisest course.

Say that the problem cannot be separated from the other problems and, therefore, it cannot be solved until all the other problems are solved.

Ask what is meant by the question. By the time this has been clarified, it will be time to go home.

Discover that there are all sorts of dangers in any specific formulation or conclusion.

Appoint a committee.

Wait until an expert can be consulted.

State, in conclusion, that you have all clarified your thinking. This will obscure the fact that nothing has been accomplished.

Point out how the deepest minds have struggled with the problem. This implies that it has done you credit to have even thought of it.

To close the meeting, thank the problem. It has stimulated conversation, contributed to our growth, opened new vistas, shown us the way, and challenged our inventiveness. We may have wasted two perfectly good hours to be sure, but the problem should get a medal.

### New Time Capsule Captures Today's Technology and More

The new time capsule will capture CDC news and also send forward a bit of today's culture. The cylinder will be larger than the old time capsule. It will be 12 inches in diameter and 24 inches long. It will be placed in one of the horizontal surfaces in the seating area of the CDC Memorial and will be covered with a plaque commemorating the event and noting the date of sealing. That date has not yet been announced. Meantime, Betty Loy, member of the 60 th anniversary planning committee, has been collecting items to include in this new time capsule. Some of them include:

Photos of senior management and employees

Organization chart

CDC Connects – first article and Home Page, and Special Edition

Photo collage of buildings at Roybal and Chamblee

Master Plan for Roybal and Chamblee campus buildings

Atlanta Journal Constitution newspaper for July 5, 2006

Key fob – (used for security purposes for remote access to CDC computers)

Blackberry – (mobile hand-held computer)  
Cell phone  
Pedometer – (for walkers to clock number of steps)  
CDC Now brochure with CD  
FY 2006 CDC/ATSDR Appropriations Fact Sheet  
CDC Foundation brochure  
DVD of CDC history  
Handwritten letter from Gerberding to future director (when time capsule is opened)  
Aerial photo of Clifton Road  
Business cards  
Program from dedication of buildings in 2006  
Postal stamps  
2006 coins  
CDC Pin  
>CDC Coin  
Steve Thacker's history presentation with copies of slides  
Time Magazine, May 8, Nancy Cox, Chief, Influenza Br., 100 Most Influential People  
Newsweek Magazine, July 10, 2006 – Nancy Cox on Avian Flu, Page 80  
HPV vaccine – approved in 2006  
Zoster vaccine – approved in 2006  
Rotavirus vaccine – approved in 2006  
Get Smart – know when antibiotics work (antibiotic resistance)

Ledbetter says he hopes lots of photos go into the new time capsule. "If it is another fifty years before a capsule is opened, the people present will not have any idea, what the place looked like, throughout CDC's history." He wants people to know and to know what a great place it was to work. "It has been a blessing that I have been able to spend my whole career at CDC at the Clifton road facility."

Loy hopes the new time capsule will be opened at CDC's 100th anniversary in 2046. She says, "it has been a lot of fun selecting items for the capsule that will have historical significance in 40 years and will also show the tremendous progress of CDC's move into the 21st century. It has been an exciting couple of years seeing the growth of CDC from a few buildings to multiple new ones opened on the beautifully designed new Roybal and Chamblee campuses. There will be photos of the new buildings as well as CDC staff. In 40 years much of the technology will be obsolete and I wish I could be around in 2046 to see the puzzlement on the faces of those opening the capsule and wondering what a Blackberry or thumb drive is!"

The items from the old time capsule and those to be placed in the new time capsule are on display in the glass cases in Building 19 in the library.

This Inside Story by CDC Connects reporter Kathy Nellis.

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### **TDY/ PROMOTION/ TRANSFERS**

**Paula Casillas** was selected by COGH/Global Disease Detection(GDD) for a 3-month TDY to the CDC Regional Office for Central America and Panama in Guatemala. She will be coordinating Avian Influenza activities with the other countries in the region. In June, Paula was on the technical assistance team that went to South America to provide

assistance to the countries responding to the AI RFA, so this will involve working on related activities

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I want to let everyone know that **Wendy Heirendt** is moving on to a new job with CDC. She will join up with the Division of Diabetes Translation at CDC/Atlanta on 10 September. Many of us have known and greatly appreciated Wendy over her nearly 15 years with DTBE. Wendy started her career with DTBE with her first assignment to Puerto Rico in 1991, then off to Indiana in 1993, and finally to Virginia in 1999. Wendy has been the consummate Public Health Advisor in all of her assignments and numerous TDY's. She has a keen ability at translating and incorporating CDC goals and objectives at all levels of local program activities; especially with surveillance, DOT and incentives and enablers. She also has a strong reputation for guiding and developing state and local staff. Without question she will be truly missed. We wish her the best in her new position as project officer in Diabetes.

Footnote: Since Wendy is an avid baseball fan I guess this move is like going from the minors, since the Braves farm team is in Richmond, to the majors here in Atlanta with the Braves.

Good luck and thanks for a job well done.

Greg Andrews

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**Kathryn Koski** began another detail as Acting Deputy Chief, Program and Training Branch, DSTDP in July.

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Heather Duncan has been selected to provide assistance to Mike Melneck at NCHHSTP/OD starting 28 August and lasting up to 120 days.

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**Dr. Fred Fridinger**, a project officer for DNPA's Nutrition and Physical Activity Program to Prevent Obesity and Other Chronic Diseases, has moved to the National Center for Health Marketing, where he joins the Marketing Communication and Consultation Branch within the Division of Health Communication. Fred started his new job August 21.

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It is with the mixed emotions that Debbi and I announce that **Lynn Mercer** will be leaving GAP and CDC at the end of September for a new career opportunity with the Federal Law Enforcement Training Center on the Georgia coast. The below email provides more information on this.

In addition to her years with the domestic HIV/AIDS program and other parts of CDC, Lynn has been part of the fabric of GAP since its beginning, having worked in GAP's infancy to get its initial grants out and then returning to GAP a couple of years ago to take over as GAP's Deputy Director for Management and Operations. In this role she has not only been responsible for overseeing the business needs of GAP's operations through the rapid expansion under PEPFAR, but has also been an innovator in developing new systems that have served GAP and the rest of CDC. It would be hard to overestimate Lynn's role in keeping GAP running. In addition, her leadership has

been critical to the COGH team establishing the new Global Program Services Unit. Even in our extremely hard-working division, Lynn has been among the most tireless, reliable, and effective. She will be sorely missed.

Debbi and I are working on a transition plan to minimize the impact of this change on GAP's operations and to prepare for the post-Lynn era.

In the meantime, we wish Lynn well in her new job, hope her transition from Tucker to St. Simons is as great as it sounds, and congratulate FLETC on a really great hire.

R. J Simonds



RETIREMENTS

Our esteemed colleague and friend, **Timothy Glenn Baker**, retired from the Centers for Disease Control and Prevention (CDC) in June after thirty four years with the agency. His career was distinguished by an entrepreneurial spirit as he developed new and innovative approaches to public health. Over the years, Tim had positions in nearly every Center, concluding his career in the dual role of Director, State Projects – Portfolio Management Project, OCOO and as the original “drop-in” CDC State Senior Management Official for the State of Louisiana to oversee Katrina response.

In 1972, after receiving his Bachelor of Science degree – and after deciding to “delay” Medical School for a year - Tim entered public health as a Public Health Advisor in North Carolina as so many before and since. He continued this STD phase of his career in Ohio, serving as program manager and initiating development of the prototype STD Prevention Training Center. During this period, he got hooked on technology through developing an early “electronic medical record” for STD clinical case assessment. In 1980, Tim came to CDC to serve as the Training Coordinator for STD programs. In 1985, he joined CDC's Agency for Toxic Substances and Disease Registry as emergency response coordinator in the early days of state and local preparedness. In 1986, Tim joined the National AIDS Information and Education Program as the first permanent staff member, later serving as Chief of the Information Services Group. He helped with the initial Ryan White program (initially called HOPE for those of the era), and developed the National AIDS Hotline and National AIDS Clearinghouse. From 1989 – 1992 he helped guide the development of a fore-runner of the HealthImpact.net and IRIS systems as Data Manager for the CDC Office of Deputy Director (HIV). In 1994, Tim became Associate Director for National Immunization Program during the Childhood Immunizations Initiative.

In 1996, Tim was asked to organize the development of the CDC Office of Genomics and Disease Prevention – now the National Office of Public Health Genomics - where he was the original employee and Deputy Director until 2004. Most of the early meetings about “genomics and public health” began with Huh? In 2004, Tim joined the CDC Portfolio Management Project as the Director of State Portfolio Management Projects, and coordinated the initial development projects and CDC state grant portfolios strategies. After Katrina hit Louisiana, Tim was asked to “drop-in” as the CDC Senior Management Official to serve as the CDC official overseeing emergency response and recovery related to Katrina and Rita. He was recognized for shared leadership with HHS, State and local officials.



After more than 32 years of federal service, **Mike Donnelly** will retire from CDC on September 1, 2006. Mike began his CDC career in 1978 and was assigned to the Fulton County Health Department working at the old Neighborhood Union Health Center and the Butler Street clinics as a "VD investigator." His next field assignment was to Albany, New York where he served as the Northern Regional Supervisor in the NY State STD Program. He returned to Atlanta and served as an instructor of new Disease Intervention Specialists. In 1985 he was moved to Olympia, Washington to serve as the Senior Public Health Advisor for the Washington State STD Program. It was during this time that he also traveled the country as one of 4 instructors providing newly developed "HTLV-III Counseling and Testing" training to state and federal health professionals. Mike returned to Atlanta and CDC headquarters in 1987 to serve as the overall Field Training Coordinator for STD training. In 1994, he joined the National Center for Environmental Health, Radiation Studies Branch (RSB), moving to Seattle, Washington to manage CDCs activities at the Department of Energy's (DOE) Hanford Nuclear Site and served as Project Manager of the Hanford Environmental Dose Reconstruction and the Hanford Thyroid Disease Study. He later returned to RSB in Atlanta and became Deputy Chief of that branch. In September 2001, Mike became Deputy of the Office of Integrated Health Information Systems working under Dr. Claire Broome. He returned to NCEH/ATSDR in 2003 to serve as Deputy of the newly formed NCEH/ATSDR Office of Terrorism Preparedness and Emergency Response. In January 2005 he began his current and final CDC assignment as Deputy Director, Division of Environmental Hazards and Health Effects, NCEH.

Mike will leave CDC and pursue new career challenges as Business Development Manager with Computer Sciences Corporation (CSC).

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**Dennis Sayers**

As you might have heard, I've been planning to retire but hadn't done all the paper work or set the date.

After consulting with the folks at CDC, getting annuity estimates and with the "reluctant" permission of my wife and kids, I've decided to make it official.

My last working day will be Friday September 29 and my last official day will be 9/30/06.

I started my career with CDC in Newark, N.J. on July 16, 1967 then spent 4 years in the Navy as a Corpsman during Vietnam from 1968-1972. When that was over I returned to Paterson, New Jersey to pick up where I'd left off with the CDC as an STD "DIS". Back then we were simply called *program representatives* and later *public health advisors*.

In 1975 I transferred to Fayetteville, NC to become a regional coordinator. In 1978 I trekked across the West to Olympia, Wa. where I served for 3 years as the Asst. State Representative.

In 1980 I moved to Chicago as the Screening/Surveillance Coordinator, then the Asst City Rep and finally the acting City Rep. My final move came in 1985 when I arrived at ODH in Columbus as the CDC Senior Representative for the STD Program. I will have been with the ODH for nearly 21 years when I leave in September and my total service time will be 40 years and 4 months.

Along the way I've met all my best friends. These were the ones who were dedicated to the best interests of others and not merely their own. They were often those who didn't wait to be told what to do but had the initiative to identify and solve problems on their own.

It's been a wonderful career and I could never ask for more rewards than the ones I already have.

Thanks everybody, I'll be around.....

Please forward to anyone who needs/wants to know.

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After 30 years of service as a Commissioned Corps Officer in the U.S. Public Health Service, our esteemed colleague and friend, **Dr. Brian McCarthy**, retired from the Centers for Disease Control and Prevention on August 1, 2006. Since joining CDC as an EIS officer in 1976, Dr. McCarthy has provided leadership and formed collaborative partnerships within CDC and with many NGO's aimed at reducing maternal and infant mortality worldwide.

After retirement as a Commissioned Corps Officer in the Public Health Service, Dr. McCarthy will return to CDC to continue his work within the WHO/CC in Reproductive Health as a Senior Service Fellow.

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Please join us in celebrating the retirement of **Larry Wells** after 34 years of government service. Larry joined the Navy in 1967 and was honorably discharged in 1971. He began his career at CDC in April 1974 in the warehouse while still in college. After graduating from Georgia State University in 1981 with a B.S. in microbiology, he moved to the Parasitology Branch. In 1983, Larry was the second person hired in the HIV diagnostics lab under Charles Schable. Larry currently works in the HIV Laboratory Branch. He is looking forward to traveling with his lovely wife Sheree and spending time with their children and grandchildren.

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After more than 23 years of service in the U.S. Public Health Service, **Frank DeStefano** will retire from CDC on September 1, 2006.

Dr. DeStefano is a medical epidemiologist in the Immunization Safety Office where he serves as the director of the Vaccine Safety Datalink project. Dr. DeStefano received a bachelor's degree from Cornell University in 1974 and a doctor of medicine degree from the University of Pittsburgh School of Medicine in 1978. After an internship in pediatrics at the University of Rochester School of Medicine, Dr. DeStefano joined CDC's Epidemic Intelligence Service (EIS) in 1979 and completed the CDC preventive medicine residency in 1982. In 1984, he received a master of public health degree from Johns Hopkins University School of Hygiene and Public Health. He is board certified in preventive medicine and is a fellow of the American College of Preventive Medicine.

Dr. DeStefano's Public Health Service career included assignments with the Immunization Division and Family Planning Evaluation Division during his EIS and preventive medicine years. From 1982-1984, he was a medical officer at the National

Institutes of Health, where he continued his research in reproductive health and contraceptive evaluation. In 1982, he returned to CDC as a senior epidemiologist in the Agent Orange projects. In 1988, he assumed the Branch Chief position of the Epidemiology and Statistics Branch of the Division of Diabetes Translation. Dr. DeStefano left government service from 1992 to 1996 to take a position at the Marshfield Medical Research Foundation in Marshfield Wisconsin, where he headed the epidemiology section. He returned to CDC in 1996 and has worked primarily in immunization safety for the past 10 years. In October 2004, he was appointed Acting Chief of the Immunization Safety Branch of the National Immunization Program and was subsequently selected to serve as the Acting Director of the Immunization Safety Office when immunization safety activities were relocated to the Office of the Chief Science Officer in April 2005. He served in that capacity until January of this year.

Dr. DeStefano has had a rich and productive research career. As project director of the Vaccine Safety Datalink project, he has provided scientific and managerial leadership resulting in numerous peer-reviewed publications and presentations at major scientific conferences, many of which have helped inform national immunization policy. He published one of the first studies suggesting an association between periodontal disease and coronary heart disease, which has since been confirmed in other studies and a growing field of research has developed on the role of infectious diseases in coronary heart disease. He directed the development of a national diabetes surveillance system and the publication of the first national surveillance report on diabetes. He developed the protocol and helped implement an examination survey in Egypt of diabetes and diabetic complications. He led the team that performed the analyses and wrote the reports of the medical and psychological examination findings of a large CDC study of Vietnam veterans' health; the findings helped guide policy and recommendations by the Veterans' Administration and Congress. Dr. DeStefano's research activities have resulted in authorship of over 100 scientific publications. His research accomplishments and productivity have been recognized by his appointment to the Research Officer Group of the Commissioned Corps of the U.S. Public Health Service.

After retirement from the Public Health Service, Dr. DeStefano will be joining the Atlanta office of RTI International.

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**Mary D. Brewington**, Public Health Analyst, Division of Health Information Dissemination (DHID), National Center for Health Marketing, (NCHM), CCHIS, CDC is retiring on September 2, 2006, after more than 36 years of federal service. Please join us for her retirement celebration on Thursday, August, 31, 2006, from 2 to 4 PM, Conference Rooms 1200-1201, Building 2500 Century Center.

Mrs. Brewington is currently in the Division of Health Information Dissemination, Center for Health Marketing, CCHIS, CDC and serves as a Public Health Analyst. She provides consulting services to senior staff and employees on interpretation of all personnel and other resource management guidelines, and launches major initiatives (e.g., Diversity Management, Employment Performance Management, Recruitment, Workforce Development) designed to improve the effectiveness of human resource practices and programs throughout the organization

Since joining CDC as a Personnel Staffing Specialist in 1976, Mary has had a rewarding and productive career in Human Resource Management. This included, but is not limited to, Workforce Development, Career Development and Counseling, Recruitment

and Staffing, Training, Minority Health, and Public Health Analysis. She served four years as the Equal Employment Manager and eight years as Personnel Staffing Specialist and External Recruiter for the Centers for Disease Control and Prevention (CDC). Before coming to the CDC in 1976, she served as Personnel Staffing Specialist with the Department of Army.

Mary will be celebrating this wonderful milestone with family and friends on an Hawaiian cruise. We, her CDC family, want to give her a fond farewell with love and appreciation for all these years as a civil servant.

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SERVICES TO HELP ALL REGULAR EMPLOYEES SHARE:

It's that time of year again.
The Annual membership Drive
The 2006-2007 Membership fee is \$4.00.

Contact your SHARE Representative or Visit the Nearest SHARE Store to join.
Click on the SHARE Rep. link to find the representative nearest you.

<http://intranet.cdc.gov/share/shnews.html>

Thank you for your support.

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**SESAME STREET LIVE**

**Grover, Big Bird, and Bert & Ernie are back!!**  
**Philips Arena**  
**Saturday, September 9, 2006, 2:00 pm or 5:30 pm**  
**Sunday, September 10, 2006, 4:30 pm**  
**\$18.00 per person, (12 months and older)**  
**Parking at CNN Center and Centennial Park, \$10+**

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POSITION VACANCY

CTS GLOBAL, Inc.
(a division of Comforce Technical Services)
Position Vacancy List as of September 1, 2006

Senior Laboratory Scientist, Angola

Under this task order, the contractor will provide support services to satisfy the overall operational objectives of the Director of the National Institute of Public Health (INSP). Serve as a key advisor to the Director of INSP on programmatic, fiscal, technical and/or scientific issues for Public Health Laboratory services and supervises operations of the molecular biology laboratory. Analyzes laboratory processes and/or agency programs; with a primary focus on joint international collaborations on HIV /AIDS and Avian Influenza Initiatives. Communicates with colleagues, across Institute, and other contacts outside the agency to gather and analyze information about collaborative programs.

Writes peer reviewed reports, letters, contracts, and other documents with recommendations for said research projects, policies and activities. Performs analytical and evaluative work associated with program activities and/or related operational research. Responsible for: Policy and Program Development, Carrying Out Study Procedures, Preparing Reports and Making Recommendations, Serving as a Scientific Specialist, Reviewing Literature and Develops Methodology

Contractor must have: Master's degree in Microbiology or Molecular Biology Experience must reflect the knowledge, skills, and abilities listed above.

Please submit your CV to emyers@comforce.com Due to the volume of resumes received, we are unable to accept phone calls.

Avian Influenza (AI) Advisor, Rwanda

Under this task order, the contractor will provide support services to satisfy the overall operational objectives of the CDC, GAP, Rwanda and the Avian Influenza Division. Coordinate technical and programmatic areas in AI activities. Work with Chief of Party to define priority areas for AI implementation. Serve as point of contact with Rwanda Government AI preparedness and response activities. Coordinate AI activities of other AI team members. Define long term needs for AI implementation with Rwandan government, donor community and other US Government agencies in conjunction with the Chief of Party. Serve as primary technical consultant, advising on crosscutting functions related to the implementation of AI activities (e.g., M&E, epidemiology, data collection and analysis, health care delivery systems, community-based programs, and behavior change and communication)

Contractor must have: DVM, MD, PhD with at least 1 year direct work experience in outbreak response for AI surveillance as well as disease response and planning in developing countries. Experience with implementing or managing public health programs in the developing world, as is an interest in issues related to AI and a solid background in coordinating a wide range of organizations and activities. Must have the ability to develop and assist in the implementation of strategic plans involving multiple international partners; skills to conduct critical analyses and evaluation of technical and programmatic aspects of programs; and an understanding of programs and organizational aspects of major international donors, multilateral agencies, and NGOs/private voluntary organizations. Extensive travel assignments in difficult field situations. Viral Epidemiology -Basic epidemiological understanding of avian viruses, including an understanding of the dynamics of the spread of the avian virus in a developing country and significance of mutations in H5N1 AI viruses Ability to assess the laboratory capacity of developing countries to detect and identify AI. Preparation of samples for international shipment to renowned reference laboratories. H5N1 Expertise- Current expertise in the prevention, detection, eradication of the H5N1 strain in developing countries (experts who have been involved in the surveillance, detection, cleanup programs of afflicted Southeast Asian countries)

Please submit your CV to emyers@comforce.com Due to the volume of resumes received, we are unable to accept phone calls.

Senior Program Advisor, Tanzania

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of Tanzania's influenza activities.

Provide technical and programmatic assistance in support of influenza activities conducted by CDC-Tanzania in conjunction with other US Government agencies in Tanzania, e.g., USAID, the Tanzania MOHSW, Epidemiology Unit, the Ministry of Livestock and Development, and other in-country partners. Works closely with the AI surveillance officer in the MOHSW, Epidemiology Unit to monitor and assist CDC's activities, in conjunction with USAID supported surveillance activities. Advises CDC on the implementation of a table-top simulation of Tanzania's influenza emergency preparedness and response plan with the National Institute of Medical Research. Updates the Strategic Information and Human Capacity Development Program Director

Contractor must have: Masters in Public Health with minimum of 2 years experience in infectious disease epidemiology with a working knowledge of virology, with emphasis on influenza. Experience must reflect the knowledge, skills, and abilities listed above.

Please submit your CV to emyers@comforce.com Due to the volume of resumes received, we are unable to accept phone calls.

CTS GLOBAL, Inc.

(a division of Comforce Technical Services)

Position Vacancy List as of September 1, 2006

Epidemiology Resident Advisor, South Africa

Under this task order, the contractor will provide support services to satisfy the overall operational objectives of the CDC, Division of Epidemiology and Surveillance Capacity Development (DESCD), Coordinating Office for Global Health (COGH). The primary objective is to provide contractor services and deliverables through performance of technical assistance to the Ministry of Health and the National Institute of Communicable Diseases (NICD).

Provide expert medical guidance to health professionals related to the control and prevention of the spread and outbreak of disease and other adverse health events, working with programs that are a major component in the world-wide effort to control and prevent the spread of the introduction of infectious diseases and other health hazards. Responsible for providing assistance to the National Department of Health (NDoH), Provincial Departments of Health (PDoH), and the National Institute of Communicable Diseases (NICD) regarding project activities and training programs to continue the institutionalization process. Serve as the technical advisor in all aspects of project implementation, with the project consisting of three components: communicable and non-communicable disease surveillance; a training program for field epidemiologists; and in-service training program for sub-national public health officers and central program managers. Work to strengthen the surveillance of infectious and chronic diseases, including mortality surveillance utilizing the South African Field Epidemiology and Laboratory Training Program (SAFELTP) as the major training approach in providing trained field epidemiologists and mid-level public health professionals in order to improve human capacity in the country. Advise and assist a variety of officials and trainees in the conduct, management, and implementation of on-site epidemiologic investigations of public health problems – including chronic diseases, acute outbreaks and clusters of illness, environmental, occupational and other threats to health – in an international setting. Prepare technical and periodic reports on projects and training efforts under the training program and materials for marketing of the program within the country and internationally. Serve as team leader of on-site epidemiologic investigations

of public health problems – including acute outbreaks and clusters of illness, including infectious chronic, environmental, occupational, and other threats to health in the region. Provide advice and assistance in the development and implementation of procedures, methods and strategies for obtaining and using data which describes the prevalence of major health risks. Evaluate and analyze data collection, quality control, and data utilization methods; and develop strategies and methods to improve the quality of the data collected.

Contractor must have: A doctoral degree or equivalent education in medicine, epidemiology, or a public health field. At least two years' experience in the Epidemiology Intelligence Service, a Field Epidemiology Training Program, or similar field epidemiology service. Four years of additional education/training or field epidemiology experience in public health. A Master's of Public Health or an equivalent degree will also be considered but must include extensive experience in field epidemiology and experience in running international public health training. Experience must reflect the knowledge, skills, and abilities listed above.

Please submit your CV to emyers@comforce.com Due to the volume of resumes received, we are unable to accept phone calls

Local Avian Influenza Surveillance Officer, Nigeria (Local Hire Only)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the CDC, GAP, Nigeria and the Avian Influenza Division.

Implement surveillance initiatives and recommends priorities to the AI Team Lead, CDC Nigeria and the Nigeria FMOH for program activities. Implement surveillance-related systems in conjunction with FMOH, CDC, WHO, and other donors. Implement surveillance strategies to decentralize surveillance from the federal to the state level. Interact with individual state ministries of health to implement national plans for influenza surveillance at the state level. Define evaluation activities that can inform mechanisms for improving coverage and sensitivity of the IDSR surveillance system as it is rolled out for influenza surveillance throughout Nigeria in conjunction with WHO. Develop appropriate data management systems to monitor objectives and indicators for human AI surveillance activities. Represent CDC Nigeria in the area of Influenza Surveillance and attempts to influence other collaborative organizations engaged in AI programs to adopt appropriate surveillance strategies for their program activities.

Contractor must: have: MBBS or Doctoral degree in Medicine or Epidemiology. Professional training and extensive knowledge in communicable disease surveillance programs. At least five years experience in the communicable disease surveillance programs at the local, state or international levels that entailed responsibility for the evaluation of program activities. Experience in use of measurement methods required for M&E of large populations and health programs, including quantitative and qualitative research. Knowledge of WHO's Integrated Disease Surveillance and Response (IDSR) is preferred. Fluency in Level IV English, both written and oral. Basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

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CTS GLOBAL, Inc.
(a division of Comforce Technical Services)
Position Vacancy List as of September 1, 2006

Local Avian Influenza Laboratory Specialist, Nigeria (Local Hire Only)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the Centers for Disease Control and Prevention, Global AIDS Program, Nigeria and the Avian Influenza Division

Provide technical expertise to assess laboratory systems of implementing partner laboratories conducting avian or seasonal influenza testing for human surveillance. Evaluate quality and consistency of laboratory standards practiced, make recommendations for improvement, and provide the necessary technical assistance or training to implement these recommendations.

Regularly provide laboratory support to the AI lab, including receiving, logging, testing and reporting results for specimens collected through rapid response or surveillance activities. Conduct central and on the job training of laboratory technicians, other laboratory staff and laboratory managers to address skill deficiencies. Provides guidance in the implementation of qualify laboratory systems and directs technical staff to professional resources pertinent to assigned tasks as needed. Implement laboratory-related systems in conjunction with FMOH, CDC, WHO, and other donors.

Contractor must have: A Masters of Science degree or higher degree in Chemistry, Microbiology, or related laboratory science degree. Four years work experience in a multi-disciplinary hospital or health department laboratory. The incumbent should possess training in laboratory management and laboratory systems with specialized training in testing and viral diagnostic tests supporting related to viral isolation, and identification. Knowledge of advanced laboratory procedures, diagnosis and management related to viral isolation and identification.

Skill in providing leadership, direction, and technical expertise in the laboratory systems to include being able to analyze and interpret the spectrum of laboratory medicine services related to viral identification. Possess basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

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Local Avian Influenza Surveillance Officer Seconded to Ministry of Health, Nigeria (Local Hire Only)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the CDC, GAP, Nigeria and the Avian Influenza Division. This position will be housed at the Nigeria Federal Ministry of Health (FMOH) to assist the Government of Nigeria in building its capacity to implement AI preparedness and response infrastructure.

Implement surveillance-related systems in close collaboration with the CDC, WHO, and other donors. Move AI activities from federal to state level and work with individual ministries of health to implement national plans for influenza surveillance at the state level. Help define evaluation activities that can inform mechanisms for improving coverage and sensitivity of IDSR surveillance system as it is rolled out throughout Nigeria. Develop appropriate data management systems to monitor objectives and indicators for human AI surveillance activities. Serve as an expert in the area of influenza surveillance and attempts to influence other collaborative organizations engaged in AI programs to adopt appropriate surveillance strategies for their program activities.

The contractor must have: A doctoral level degree in: Medicine, Public Health; Epidemiology; Behavioral Sciences or strongly related discipline. Professional training and extensive knowledge in communicable disease surveillance programs. The incumbent should have at least five years experience in public health surveillance programs at the federal, state or international levels that entailed responsibility for the evaluation of program activities. Experience in use of measurement methods required for M&E of international populations and health programs, including quantitative and qualitative research. Incumbent should have two years of supervisory experience. Experience in use of measurement methods required for M&E of large populations and health programs, including quantitative and qualitative research. Knowledge of WHO's Integrated Disease Surveillance and Response (IDSR) is highly preferred. Fluency in Level IV English, both written and oral.. Basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

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CTS GLOBAL, Inc.
(a division of Comforce Technical Services)
Position Vacancy List as of September 1, 2006

Local Avian Influenza Surveillance Officer Seconded to Ministry of Health, Nigeria (Local Candidates only)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the CDC, GAP, Nigeria and the Avian Influenza Division. This position will be housed at the Nigeria Federal Ministry of Health (FMoH) to assist the Government of Nigeria in building its capacity to implement AI preparedness and response infrastructure.

Provide technical expertise to assess quality of laboratory systems at the federal and state level conducting avian or seasonal influenza testing for human surveillance. Move AI activities from federal to state level and work with individual ministries of health to implement national plans for influenza laboratory diagnostic testing at the state level. Evaluate quality and consistency of laboratory standards practiced at the federal and state level, make recommendations for improvement, and provide the necessary technical assistance or training to implement these recommendations. Regularly provide laboratory support to the AI lab, including receiving, logging, testing and reporting results for specimens collected through rapid response or surveillance activities. Conduct central and on the job training of laboratory technicians, other laboratory staff and

laboratory managers to address skill deficiencies Provide guidance in the implementation of quality laboratory systems and assist technical staff with professional resources pertinent to assigned tasks as needed. Implement laboratory-related systems in conjunction with FMOH, CDC, WHO, and other donors.

The contractor must have: A Masters of Science degree or higher in: Chemistry, Microbiology, or related laboratory science degree. Four years work experience in a multi-disciplinary hospital or health department laboratory. Should possess training in laboratory management and laboratory systems with specialized training in testing and viral diagnostic tests supporting related to viral isolation, and identification. Knowledge of advanced laboratory procedures, diagnosis and management related to viral isolation and identification. Skill in providing leadership, direction, and technical expertise in the laboratory systems to include being able to analyze and interpret the spectrum of laboratory medicine services related to viral identification. Possess basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

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