

How to Mend a Sole

She waited almost half her life for the chance to change the lives of others. Now, each day, Chesca Colloredo-Mansfeld '87 picks up where her mother's example left off.

by Beth McNichol '95

She was preparing to leave a remote Liberian village last June when a boy named Henroy appeared. He was barefoot and thin, wearing a soccer jersey and an expression too broken for a face that was only 9 years old. Someone had sent for him so that Chesca Colloredo-Mansfeld '87 could see his condition, but walking across the muddy earth from the road was a terrible balancing act. How could it not be? Henroy's left foot twisted inward and upward. The sole of his foot faced the sky.

There are times — fleeting moments — when Colloredo-Mansfeld worries that she's overselling the need for the work of her nonprofit, MiracleFeet. All the fundraising pitches she's given, all the stories she's told about fixing feet and fixing lives — were they exaggerated? People can get caught up in what they're passionate about; they can feel the weight of the promises they've made to donors — most of all, perhaps, the promises they've made to themselves. But the stories that she knows? They burrow into the deepest pockets of your heart.

The infant girl in India, 4 hours old, who because of her clubfoot was buried alive — later rescued and treated by MiracleFeet. The 5-year-old Tanzanian boy with clubfoot who fled with his mother to a MiracleFeet clinic after his father had twice tried to kill him.

And here, in a tiny village in a tiny country on the West African coast, where Colloredo-Mansfeld had just visited a family with three generations of the birth deformity — including an 11-month-old girl being treated at the local MiracleFeet clinic — here comes Henroy, a kid with so much

vulnerability that Colloredo-Mansfeld wonders if her pitch is too understated. Here comes a kid who had the courage to struggle through a crowd of laughing children to get to her. A kid who can't go to school, can't help his mother support his 10 siblings, can't run and play, and is too stigmatized to make friends.

Here comes a boy she almost missed.

The first time Colloredo-Mansfeld saw a boy like Henroy, she had been sitting in her office at the University of Iowa, about as far away from Africa as one could be. A colleague came by, asking for advice

on how to get a professor's groundbreaking treatment for clubfoot to the developing world. The colleague showed her a video of a Ugandan boy standing in a doorway, watching his peers play soccer. Both his feet were twisted inward.

Something visceral broke free in Colloredo-Mansfeld in that moment — even she couldn't explain exactly what at the time — and she began to cry. She was the wife of an anthropology professor and the mother of three. A British Morehead Scholar at UNC, she had an MBA from Stanford, a reputation as a savvy corporate strategist and a



Henroy, born with clubfoot, was too stigmatized to make friends in his village in Liberia. He struggled through a crowd of laughing children to get to the person who could help him.

résumé dotted with names like Goldman Sachs, eToys and CitySearch. On paper, her life was full.

But in her heart, something was missing. Something, and someone, had been missing for a long time.

“I don’t quite know when,” she told her husband that night, “and I don’t quite know how, but I’ve figured out what this thing I need to do with my life is. I’ve found a place in the world where I can make a difference.”

Colloredo-Mansfeld hasn’t just made a difference with MiracleFeet, the 8-year-old Chapel Hill-based nonprofit that she’s built from the ground up. She has transformed 27,000 lives and counting in 24 of the world’s most desperate countries, including 1,500 children in Liberia, a country whose health infrastructure was decimated by a decade of civil war and burdened by an Ebola outbreak in 2014.

That 11-month-old girl she visited will be the first female in her family to walk properly.

And soon, Henroy will be able to run for the first time in his life.

A curse from God

When babies are born with clubfoot in the U.S., the problem gets fixed, usually beginning in the first days of life, when their tendons and ligaments are at their most elastic.

Corrective surgery — which still may be used in some rural areas — usually results in early onset arthritic pain and additional

BY THE NUMBERS: MIRACLE FEET

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ANNA ROUTH BARZIN '07



A scholar, wife and mother with a stellar résumé, Chesca Colloredo-Mansfeld was missing something, and she didn’t even know it until she saw a child with clubfoot.

operations. For decades, the preferred treatment has been the Ponseti method, named for an Iowa professor, Dr. Ignacio Ponseti, who developed it. The nonsurgical technique uses a series of gentle manipulations and casting procedures to coax the tendons and ligaments — which are shortened in clubfoot, causing the foot to turn inward — into proper alignment.

The procedure is not an overnight fix. The hip-to-toes casting can take four to 12 weeks, and a temporary brace, made up of a bar connecting two boots, must be worn consistently for about three months and then at night for about three years. But most children born in wealthy countries today won't remember much, if anything, about the treatment process as they grow up.

In fact, when Colloredo-Mansfeld asked Mia Hamm '94 how her clubfoot was corrected, the legendary soccer star had to get her mom on the phone to confirm. One out of every 800 kids worldwide is born with the deformity — that includes Olympic figure skater Kristi Yamaguchi, Heisman Trophy winner Charles Woodson and that guy on the treadmill at your gym.

But 80 percent of clubfoot cases occur in low-income countries with high birth rates, where treatment is unaffordable or unavailable. In these places, you never forget you have the condition. You're likely to be ostracized by your village in poor countries. Your parents — one or both — probably will abandon you. And if your mother does stand by you, both of you will be vulnerable to abuse and neglect.

"Clubfoot in Liberia has been regarded as a deformity of witchcraft or a curse from God," says Augustine Chiewolo, director of MiracleFeet's clubfoot program in Liberia. "Clubfoot meant that the woman had been unfaithful in her marriage, and that's why the child had been born with clubfoot."

MiracleFeet finds local partners like Chiewolo in impoverished countries who can perform the Ponseti method, preferably in public hospitals where they can reach the greatest number of kids. The organization provides training and funding and supplies clinics with treatment materials.

As part of a \$1 million Impact Challenge grant awarded by Google in

When's Too Late for the Ponseti Method?

At what age is it too late to be treated for clubfoot?

It's never too late, really.

But with age, the situation does become more complicated. The casts are bigger. The elasticity is less.

"This is a good question," Chesca Colloredo-Mansfeld '87 said. "Adults can be treated with Ponseti. However, they usually require a small surgery after casting so they are really only treated in locations where there is a) a very experienced Ponseti practitioner, since it is more challenging to treat older feet and, b) there is a

skilled orthopedic surgeon and operating room/anesthesiologist so the surgery can be done. The only adults that I know of treated by one of our partners are in India and in Nicaragua, where both of the above conditions exist.

"In other locations, we routinely treat up to about age 10- to 12-year-olds with good results. However, even this requires a more experienced practitioner, so we do not encourage our newly trained Ponseti practitioners to treat older kids. They need to get comfortable treating babies, whose feet are typically the easiest to treat, first."



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2016, MiracleFeet is rolling out several technology initiatives, including text messaging to send reminders and moral support to parents; an embedded sensor in its brace to provide information about its use; and online Ponseti training. While Colloredo-Mansfeld and her 18-member staff in Chapel Hill monitor clinics through site visits, they also let their

health partners in each country develop plans on how best to run their clinics.

From casting to braces to follow-up care, it costs the nonprofit only \$250 to treat a child. But first, the children must be located. The stigma is so great, kids with clubfoot often are in hiding. So local partners also work with MiracleFeet to build awareness that clubfoot is a

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KEEP CLIMBING



Ambassador Jeremy Varcoe took his family on adventures in Africa. Wendy Varcoe's struggle with bipolar disorder had a deep effect on her daughter, Chesca.



COURTESY OF CHESCA COLOREDO-MANSFELD

treatable deformity.

The most powerful message often is a treated child. One couple in India, told by their village that they had produced a “useless child,” used the little money they had to travel to a clinic for treatment and then travel back home to prove them wrong.

“What we do, it’s way beyond just treating clubfoot,” Coloredo-Mansfeld says. “It’s such a human business.”

All the light, all the darkness

She wasn’t born with clubfoot. She was born healthy, in an American mission hospital in Swaziland on Easter Sunday, 1964. But Coloredo-Mansfeld always has known what misfortune looks like. It was all around her growing up.

Her father was a member of the British foreign service who worked in Turkey, Malaysia, Nigeria and Zambia, eventually becoming ambassador to Somalia. The family’s life in England was yawningly middle-class, as defined by a civil servant’s salary. But when Jeremy Varcoe was posted abroad, they lived in homes with hired help and rode in cars with designated plates and flags flying on the front.

Meanwhile, in villages, they knew families with goats and chickens bleating and clucking on the bottom floor of a home

It was their mother, Wendy Varcoe, who grew Chesca’s and younger sister Lucy’s empathy for those around them. She especially taught them how to connect with people who faced insurmountable odds in their lives. If the Varcoes had a family motto, it was this: Always pull for the underdog.

while their children slept on straw mats above. That juxtaposition of two kinds of lives, two kinds of luck, was striking to Chesca, an awareness she never would get out of her system.

Her father, though posh enough to rub elbows with heads of state, was keen on adventure — an exotic elixir Chesca sipped and would carry with her into adulthood. The family went on safaris through game parks in Zambia that no other Englishmen would have done at the time, equipped with a bag of oranges, a ham and an intrepid Range Rover.

“The rougher the road and the more lost we were, the louder he would sing and the happier he was,” Coloredo-Mansfeld said. “If a tire blew out for the third time, you fixed it and kept going. There was

always this projection of ‘this is what life was about.’ ”

But it was their mother, Wendy Varcoe, who grew Chesca’s and younger sister Lucy’s empathy for those around them. She especially taught them how to connect with people who faced insurmountable odds in their lives. If the Varcoes had a family motto, it was this: Always pull for the underdog.

Chesca spent her vacations from school with her mother at Cheshire Homes, a home for disabled children in Zambia that Wendy frequented, singing songs and playing games. And when a servant’s child fell ill, Wendy took her girls with her to the hospital, where she would bring food and sheets and check in with doctors to make sure the child was getting proper care.

“It was never that the ambassador’s wife was showing up,” she said. “It was: ‘We just have to make sure everybody’s OK.’ She brought us down to see the human side of the life we lived. It wasn’t just an us-and-them kind of upbringing, which it could have been.”

Their mother gave her husband’s favorite shoes to the gardener; she gave Lucy’s clothing to whomever in Somalia needed it; she invited people in need and people who were sick and people who

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were lonely to their table at Christmas. She spread her warmth far and wide, like a woman who had been born with more light than one soul could contain.

But beneath her exquisite compassion, beneath all that light, Wendy Varcoe battled the relentless grip of bipolar disorder. In 1991, when then-28-year-old Chesca was a top MBA student at Stanford, her mother committed suicide. She was 50.

“She hid her condition from us when we were young,” Colloredo-Mansfeld said. “Looking back, you realize that’s why she would do X or Y. Or why my father would protect us sometimes if she wasn’t doing well. But once she felt we could talk about it, then, as a family, we talked about it a lot.”

Colloredo-Mansfeld had read William Styron’s *Darkness Visible* and recognized in the memoir the same suicidal language her mother often used. In the back of her mind, she was always dreading that call.

“She suffered terribly, and nothing helped. But she always found ways to make a difference and to help other people. She would’ve wanted me to make a difference, too.”

Lost and found

Colloredo-Mansfeld had always pined to return to the developing world, where her character was first drawn. It held her history, all the joy and all the pain. She wrote about that goal frequently, and after taking a job out of Carolina as an analyst at Goldman Sachs — her primary motivation was to secure an American visa — she finally got her shot.

In 1989, when she was 25, she traveled to the border of Pakistan and Afghanistan for the International Rescue Commission, where she wrote reports and trained Afghan refugees at the Peshawar camp.

Walking to work in head-covering, Colloredo-Mansfeld was spat on and grabbed at. Some of her co-workers fended off kidnapers. At night, she’d lie in bed and hear rumbling transport planes overhead — ostensibly carrying supplies but actually ferrying weapons. She would switch on her short-wave radio in the dark and drink in the crackling sounds of the BBC, reveling in the immediacy of her experience.

She loved each minute. It was like a safari in Zambia all over again, except she was more likely to be hit by a bag of orang-



The Varcoes and daughter Lucy at Buckingham Palace.

COURTESY OF CHESCA COLLOREDO-MANSFELD

es than to eat from one. Her letters home were long and detailed and passionate, and when her mother pointed out that it was perhaps not the most sensible place to be, Colloredo-Mansfeld didn’t miss a beat.

“I said, ‘Mom, you are living in Somalia right now, so I don’t really think you can talk.’”

Colloredo-Mansfeld, who had a deeply talented mind for business strategy, fiercely fought the notion of getting an MBA from the moment she began at

Goldman Sachs. She belonged in the developing world, she told everyone. She belonged in foreign aid work. Even in school in England, where she earned plaudits for her math and physics prowess, all she really wanted to do was study liberal arts. (At Carolina, she majored in political science and economics.)

But after her year in Peshawar, her IRC mentors counseled her that the best way for her to make a difference was to learn how to run an organization, and the best

way to do that was business school. So, off to Stanford she went.

But after her mother’s death, after business school in Palo Alto, she embarked on an adventure of a different sort. She married her college sweetheart and fellow Morehead Scholar Rudi Colloredo-Mansfeld ’87, whose demanding graduate academic pursuits at UCLA and his later, frequent anthropologic work in Ecuador kept her happily connected to her roots in the developing world. It also kept any notion of “picking up and starting something in Africa” at bay. Instead, while raising their three children, she helped build the high-flying internet economy of the late 1990s at CitySearch and eToys. When the latter folded, she moved to the University of Iowa, where Rudi had secured a professorship, and she started a new position in the business school.

Life was busy. It was good. It was still missing something.

She frequently asked herself if she was selling out. If she was compromising her dreams. If the hourglass was getting a bit too full.

“The fact that her mother died so young,” said Jeremy Varcoe, “it motivated Chesca.”

She was in her 40s when that colleague walked into her office at Iowa and showed her the video of the Ugandan boy, and everything clicked. She thought of her childhood, with its income disparity and vibrant villages. She thought of her mother, and of all the underdogs she left behind. She thought of the promise she made to herself long ago — and every day since — about making a difference in the world.

“I’ve gotta actually do what I said I was going to do with my life,” she told herself.

The most vulnerable kids in the world

Not long after the family moved back to Chapel Hill, where Rudi would become UNC’s senior associate dean for social sciences and global programs, Chesca dove into the life she’d always promised herself. She made calls that led her to parents of a child with clubfoot, Brigit and Roger Berman, who also had been searching for a way to make a difference.

They decided on the MiracleFeet model and named Colloredo-Mansfeld as executive director.

For the first two years, she worried —

“We’re helping the most vulnerable kids in the world. I think Mom would feel that it was very fitting and real and good. She would approve.”

— Chesca Colloredo-Mansfeld, *MiracleFeet*

worried that she would fail, that she would have to tell all her early donors, some of whom were former colleagues who gave because they believed in her, that she couldn’t make it work.

But as she dug in, she found herself channeling the Chesca who came back from a summer internship in apartheid South Africa after her sophomore year at UNC. She had been determined to start a scholarship fund to support blacks in that country, and she had done just that, even successfully lobbying UNC’s Board



Henroy after treatment — three months after Colloredo-Mansfeld found him in Liberia.

MIRACLEFEET

of Trustees to make a donation. She was 21, and she remembered thinking: Who do I think I am? I’m not important enough to do this. And yet, she was. The memory of that long-ago accomplishment fueled MiracleFeet into existence.

UNC’s South African Scholarship Fund still exists, as does the fearlessness that created it. She doesn’t worry about MiracleFeet’s future anymore. “I’m not a religious person, but part of me believes there’s a bigger force working to help these kids.” And she trusts her risk-taking instincts.

Everyone told Colloredo-Mansfeld that MiracleFeet should stay out of Liberia: The people will rip you off, they said. You can’t trust them, they warned. But when she heard about Augustine Chiewolo, a Liberian physician’s assistant who, while visiting family in Philadelphia in 2012, got on a bus and rode all the way into the cornfields of Iowa to learn the Ponseti method, she ignored the warnings. It was a risk to continue funding Liberia’s clinics through an Ebola outbreak in 2014, when patients couldn’t safely enter a public hospital. But she did it anyway. And because she did, the clinics came to the children, Chiewolo’s staff making sure there would be no interruption in the transformation of lives.

Now, Liberia is one of MiracleFeet’s biggest success stories. Always pull for the underdog.

“We’re helping the most vulnerable kids in the world,” said Colloredo-Mansfeld, who noted that Cheshire Homes — her mother’s volunteer spot in Zambia — is now a MiracleFeet funding recipient. “I think Mom would feel that it was very fitting and real and good. She would approve.”

We all have parts that need to be stretched, cast properly, realigned and turned toward the world. Three months after Colloredo-Mansfeld’s visit to Liberia, the sole of Henroy’s left foot no longer faced the sky.

It was on the ground, his foot facing forward, back where it always belonged.

Beth McNichol ’95, a freelance writer based in Raleigh, is a former associate editor for the Review.

Watch videos of Henroy’s encounter with MiracleFeet at bit.ly/henroy.