Dr. Kurapati Sudhakar (1955–2022): Mentor and Public Health Advisor in India

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Dr. Kurapati Sudhakar was a thorough gentleman and India’s one of the top public health experts who spent most of his career in New Delhi working for the World Bank, Centers for Disease Control and Prevention, and USAID. His untimely passing away on March 10, 2022, is a loss for public health research and its leadership in the country. He led several key public health-related projects and facilitated fruitful dialogs with the government officials, scientists, and other non-governmental agencies that he represented, for example, see1–4. He was a great mentor in public health research, showed all of us how easy it was to collaborate with a large group of researchers and achieve the project goals. Not only the professional side of our work, but we also owe a lot to him for making us understand the importance of communication, especially with public health professionals, government officials, etc. (Fig. 1)

Dr. Kurapati Sudhakar was born on March 20, 1955, in the city of Kakinada, Andhra Pradesh, India to Kurapati Satyanarayana Murthy (Father) and Vani Sundari (Mother). He was the third child after brother Mr. Suryarao and sister Ms. Snehalata.

Arni S.R. Srinivasa Rao:
I first met Dr. Sudhakar in Singapore in 2002 when we both attended a closed group workshop organized by the World Bank for developing mathematical model-based costs and consequences of the HIV/AIDS situation in India. He was then working as a lead public health advisor at the World Bank, New Delhi Office and I was appointed as a consultant to the World Bank, Washington D.C. office to build mathematical models for HIV/AIDS for the Indian scenario. The group including Dr. K. Sudhakar consisted of 6–8 members which includes clinicians from India (Dr. S.K. Hira, JJ Hospital, Mumbai), Economist in the World Bank (Dr. M.I. Over), and another modeler (Dr. N. Nagelkerke, Leiden, Netherlands). Overall, the team lead for that workshop in Singapore was Dr. P. Haywood, Public Health Specialist at the World Bank, New Delhi. Dr. Sudhakar’s leadership skills, professional knowledge, work ethic, and friendly nature were very attractive to all the members of the team. We both developed a very good friendship during that workshop, and the friendship and collaborations, video meetings continued until he passed away suddenly in 2022.

We have jointly co-authored eight research articles/book chapters/monographs based on our collaborations in HIV/AIDS and COVID-19, see for example,5,6. Apart from our works, he was appreciative of my other academic research, publications, books and always supportive of what a best friend would do (Fig. 2).

The major India level public health projects that we collaborated in which he was the team leader were as follows:

1. Member of Third Round of National AIDS Control Planning Team (2006–2011)
2. Member of Fourth Round of National AIDS Control Planning Team (2012–2017)
3. Team Leader for District Level Modeling of the Spread of HIV/AIDS in Tamil Nadu (2008–2010).

Third and Fourth Rounds of National AIDS Control Policy in India: From 2006 to 2011 and 2012 to 2017, I was asked to develop mathematical models for the spread of HIV/AIDS in the country and study the impact of targeted interventions prescribed by the national AIDS planning team, Ministry of Health, GOI in which Dr. K Sudhakar and Dr. Kurien Thomas (then at CMC, Vellore) were the members. First time when I was invited I was at the Mathematical Institute, University of Oxford. During the fourth round when they have asked me to develop the models for studying the impact of Anti-retroviral therapies I was at the Indian Statistical Institute, Kolkata. I find on both these projects of national importance, Dr. Sudhakar provided much-needed public leadership that was needed in the country. The meetings were always lively and to the point. I had participated in such kinds of meetings with other public health experts across the world, but I saw that Indian HIV/AIDS program-related modeling was going in the right direction due to the deep-rooted knowledge and brilliance that Dr. Sudhakar possessed. I gained knowledge about bridging the gap between ground-level transmissions of HIV in the country and mathematical models. After my move to the USA in 2012, we continued the collaborations and met in India almost every time I visited for various project-related meetings or any other personal gatherings.

Outside research, we shared very warm discussions on Telugu and Hindi movies, comedy punch dialogs in movies, and enjoyed several fun moments, which I miss a lot. In 2018 I got an opportunity to travel on the road with Dr. Sudhakar and his wife Mrs. Subha Rajyalakshmi from Chennai to Pondicherry to present our NACPIII collaborations at a symposium. I cherish such a fun-filled trip that was and we both recollected those on several occasions. Several lunch/dinner meetings at his home in Delhi or at restaurants/hotels, for example, Hotel Asoka in Delhi were truly memorable and I miss them very much. I am still not realizing he is not physically with us as I keep remembering the beautiful conversations that we had over the past 20 years.

The last time I met Dr. Sudhakar in person was in Atlanta when his family was visiting his sister (Ms. Lata) and brother-in-law (Dr. Prasad) during the 2019 summer. That was a memorable time I and my family had lunch meeting with theirs. He was the same warm and fun-loving gentleman whom I had met the first time in 2002.

His wife Ms. Kurapati Subha, daughter Dr. Sravya and son-in-law Dr. Varun who live in the USA, and son Mr. Kurapati Siddharth who lives with the couple in New Delhi always provided great family support and bonding to him. He had a lovely family life. My warm regards, thanks, and best wishes to all.

Dr. Sudhakar garu, you will be always remembered for the work that we have done, and for the professional conduct that I learned from you.

Bimal Charles:

My first interaction with Dr. Sudhakar was in 1995 in an interview panel. I was being interviewed for a position for a USAID-funded project in Tamil Nadu. He was the project officer with USAID then, developing HIV prevention initiatives for the nation. Over some years he became a good friend, a mentor, and a brother to me. Beyond professional excellence as a manager of complex projects, he was an excellent architect of huge public health projects for the country. He helped The Bank to incorporate HIV in its design and helped design National AIDS Control Program for India. His ability to bring in consensus and garner the support of diverse stakeholders helped the country to contain the HIV epidemic in time.

Sudhakar was very good at including great minds in public health programs to improve the quality of technical interventions. I recall working with Indian Statistical Institute and Dr. Arni Rao to evolve a mathematical modeling formula
to calculate HIV infections averted using data available at the district level in Tamil Nadu. Later we worked with the same expert to model the no of units of blood required at the population level using modeling methods. He was very good at introducing innovations to the field programs and refining public health interventions and scaling them at opportune times.

Besides being a professional he was a humble human, sensitive to others’ concerns and needs, and was generous in his motivation of younger people. He was my reporting officer for the USAID project, a colleague at CDC India, and an advisor and life coach all through. However, he was a consistent friend and mentor since our first meeting.

Sudhakar was God-fearing spiritual, respected every religion, and would pray at temples when possible. A few years ago Sudhakar led a CDC India group of friends to offer prayers to a Buddhist temple for Dr. Dick Keenlyside, a CDC Atlanta staff and a friend of many who passed away.

The last meeting with him was in his home in Delhi last October and he was recovering from Covid, as cheerful as ever and full of life and the usual jokes and hospitality. I never dreamt that I would be attending his last journey in Hyderabad so soon. It’s devastating.

I have lost a personal friend, a great human being, and an extremely good soul who thrived in helping others succeed. May he rest in eternal peace (Fig. 3).

**Ramesh Bhat:**

On the afternoon of 10 March 2022, I received a shocking call from Dr. Thomas Kurien about the untimely demise of Dr. Sudhakar. It was unbelievable, and I felt devastated. I still have not come to the terms that Dr. Sudhakar is not with us. His signing off from life came very sudden and so unexpected.

He was a dear friend, mentor, and like an elder brother to me.

I met Dr. Sudhakar during the preparation phase of the NACP III plan when I was deputed from IIM Ahmedabad to work on the financial plan and budget for NACP III Project. Our association grew deeper and stronger after that. It became a lifelong friendship that continued after completing our NACP III project. We developed a strong bonding at the professional level, and our families celebrated our life events together. Along
with Dr. Kurien, we spend a lot of time together working on our professional assignments.

Dr. Sudhakar, Dr. Kurien, and I share Pisces’s birth sign. Our families celebrated our friendship every year in the month of March. I had no notion in my life ever that I would be visiting his home on 20th March 2022, his birthday, in Hyderabad to pay my last respects to him and meet his family members in such tragic circumstances. I sat there, remembered our association, and prayed for his noble soul to rest in peace. Our lifetime friendship came to an end with his signing off on life.

Given his vast experience in public health, he constantly guided us on various aspects of public health policy and financing. His guidance and support continuously helped me in my work on the health budgets of various programs. His technical insights and his constant focus on prevention were the critical yardsticks that guided the NACP III framework and financial plan. He ensured that a significant part of the total budget was earmarked for prevention activities. The result was that the project, when finalized, had a 67 percent prevention component.

Our association continued after the NACP III plan preparation. For us, the final plan became a reference book, and he used to refer to it as the Blue Book. His profound insights into public health and his contribution to HIV/AIDS will be remembered.

He was a brilliant mind mapper, and, through the approaches of brainstorming and mind mapping exercise, we spent a lot of time crafting the mission of NACP III. Given the task and preparation of the plan, he came up with a brilliant and crisp mission statement to “halt and reverse the HIV epidemic in India.” In a much shorter period, this goal had percolated to state-level implementing agencies. During one of our visits to one of the States AIDS Control Society, we found everyone recalling this mission statement with ease. I discovered the power of creating a brilliant mission statement for a program from Dr. Sudhakar.

At the writing stage of our report, he will always pose challenging questions that used to force us to think very critically, particularly from a policy perspective. Given his illustrious career at the World Bank and CDC India, his insights into policymaking were vital and added a lot of value to our writing the plans.

Throughout the implementation of NACP in India, Dr. Sudhakar remained committed to developing options and policy frameworks for reducing HIV mortality, prevalence, and new infections. By the end of NACP III, India had made significant progress toward achieving this goal. The goal statement developed by Dr. Sudhakar, “halt and reverse” the HIV epidemic in India, was influential in guiding and mobilizing efforts at all levels. Dr. Sudhakar played a pivotal role in bringing together civil society organizations, strengthening community involvement, and developing strategies for reaching out to highrisk and vulnerable populations. The interventions developed benefited the program immensely.

Our ministry work and meetings with the ministry officials were full of surprises and shocks. Many times, whatever work we had completed will take a sudden turn of not meeting the ministry’s requirements. We were forced to go to the drawing board and develop our narratives fresh. He was a gentleman and never lost his cool. With patience, he constantly supported the revisions, reworkings. He provided the side of logic that convinced us about the ministry view and why we needed to rework the report and create fresh narratives. We experienced many difficult moments, but to this day, I am amazed by his power of building the logic that would powerfully convince the stakeholders. He had this incredible skill.

On the personal front, Dr. Sudhakar and his wife Shuba became good friends with my family and my wife, Indu. We together took a ten-day break and visited Kerala, and we shared a number of our life stories. After that, whenever we met, we used to remember the days we spent together fondly. We celebrated the marriages in each other families and had a wonderful time celebrating the events in our families.

After I pulled the picture in Fig. 4 from my album, I felt his hand on my shoulder, a hand that was always there to guide me and help me navigate the complex environment of the policy-making world.

We are going to miss Dr. Sudhakar dearly.

J.V.R. Prasada Rao:

Sudhakar, the man I knew and admired.

When I joined the national AIDS control organization as Director in 1997, I realized that I will be interacting with a large international community of donors and UN agencies who were concerned about India’s spiraling HIV epidemic. In one of those interactions, I met a young and tall public health professional from USAID who later came and introduced himself as K. Sudhakar, working on HIV/AIDS programs of the agency. That became the starting point of a long
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A period of friendship spanning more than two decades.

But, only after he moved to World Bank as team lead for WB health projects that we came into closer contact. His approach was always to help the program technically and not just to drill holes into how we were implementing the program. His affable nature has endeared him to my technical colleagues also and very soon we found him representing various committees providing support to the national programs. His understanding of the epidemiology of HIV was not in a narrow technical sense but in a much larger framework providing alternatives to the government on where interventions will produce maximum impact. The social contracting of NGOs for focused interventions with key populations was a unique feature where Sudhakar’s inputs were extremely useful. Even now this remains a unique feature of the national AIDS control strategy in India.

After I moved out of NACO in 2002, we started planning for the third phase of the National AIDS Control Programme (NACP III) and Sudhakar played a major role in getting the Project Implementation Plan (PIP) ready in record time. After I moved out of government on retirement in 2004, I joined UNAIDS regional team in Bangkok, but we were in constant touch. My successors in NACO continued with his intimate association not just as a WB professional reviewing the implementation but as a technical resource who understood the country’s problems.

I returned to Delhi after completing my assignment with UNAIDS and started living in Gurgaon, a Delhi suburb. I was appointed as the Special Envoy of the UN Secretary-General on AIDS and continued my association with the global program. My interactions with Sudhakar became more informal and personal and with each of them, my admiration for him both as a public health professional and as a warm and friendly individual grew more and more. By that time, he had moved to the India country office of CDC Atlanta. Contrary to many such associations with professionals of foreign agencies, Sudhakar’s friendship took a more personal turn as we started discovering many common traits and tastes. We became family friends and my wife who normally never liked much of socializing was feeling at home in the company of Subha, Sudhakar’s wife who was a genial hostess. Coming from Andhra Pradesh we shared many common likes and dislikes. He used to regale us with jokes about his interest in movies and reality shows on film music. People from Andhra Pradesh are fond of spicy food and love some very special dishes like Gongura which both of us shared. A couple of rounds of whiskey were always non-negotiable in his company (Fig. 5).

After I moved to Bangalore, we continued our association and a visit to his house was a must on every visit to Delhi. We used to share our frustration at the slowing down of the AIDS response in India and the slow progress of NACP IV. But his credibility and acceptability to the higher echelons of management in NACO were never in question. He was a trusted friend to many of them for his wise counsel.

In 2018 Sudhakar celebrated his daughter’s marriage and many of us, his friends, and well-wishers from different parts of the country converged in Gurgaon and enjoyed the function and his warm hospitality. We were all treated like Baraatis even though we represented the bride’s side!

It was on one of those evenings at his house that Sudhakar brought up the matter of me writing a book on my long experience in AIDS programs. In the beginning, I didn’t take it seriously as I never had the orientation of a book writer. I used to write short Op-eds in newspapers and journals but never thought of writing a book. But Sudhakar persisted with his advice. He felt that the institutional memory of the past two decades and what succeeded in earlier years was very much essential to be put on record. He promised to get me past documentation and talked to his friends, Dr. Kurian and Dr. Ramesh Bhat. Each of these discussions gave me confidence that I can write my memoirs of the past two decades on AIDS response in India and the Asia Pacific region. I used to constantly keep in touch with him and send draft chapters for his reading and review. Finally, I published the book “Celebrating Small Victories” in November 2020 amid another
raging epidemic, the Covid 19. Because of Covid we could not do a physical launch and opted for a webinar for the release. Sudhakar was one of the principal participants and spoke passionately about my contributions. I was very much moved by his words of appreciation.

Covid19 has kept us physically apart with me getting stuck in Bangalore with no travel to any national or international destinations. But we were in regular contact by phone and email. I was disturbed when I heard about his illness due to Covid. He recovered well and was his usual self. Therefore, when I heard the news of his collapse from a massive cardiac arrest, I was totally shaken. This was beyond any expectation. Sujatha Rao, my former colleague in the Health Ministry sent a message from Hyderabad about the whole tragedy.

Sudhakar is one of those persons who believed that the work must speak for the person and not vice versa. Despite his professional competence and achievements, he always remained a humble person who preferred to stay in the background and shunned publicity. The public health community suffered an enormous loss with his departure. And I lost a true friend and confidant. I am sure he must be keeping great company ‘Up There’ regaling people with his jokes and quick repartee.

Rest in Peace, Sudhakar garu! We love you for what you were and what you stood for.

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