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CHARLES R. DREW POSTGRADUATE MEDICAL SCHOOL
INTERNATIONAL HEALTH AND DEVELOPMENT PROGRAM
ANNUAL PROGRESS REPORT
FY 1980-1981

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SUMMARY OF ACHIEVEMENTS

The major accomplishments of Drew's International Health and Development Program during fiscal year 1980-1981 are briefly described below.

ADMINISTRATIVE INFRASTRUCTURE DEVELOPMENT

- The size of the IHDP staff increased 200% to a total compliment of 10.5 full-time equivalents.
- A Drew pharmacy and community specialist began a six month consultancy within USAID Division of Health and Nutrition, Africa Bureau, boosting the program's staff resources.
- IHDP initiated a foreign student service program through the services of a part-time Administrative/Training Coordinator. Included in this, is a full program of academic, social, psychological, and transportation support services for foreign students.
- Staff development proceeded through attendance at three UCLA inservice training courses, a USAID Orientation Session, IHDP staff retreat, a Kenya Project Retreat and two major briefing sessions with experts in areas relevant to overseas programming.
- Expansion and updating of our short and long term consultant resource file continued and included a cross-reference indexing system and a survey of public and private agencies in international development work.
- Completed phases 1 and 2 towards the establishment of automated data center. This includes needs assessment, and acquisition of the appropriate hardware and software equipment.
- Brochures describing the IHDP were completed and distributed.
- Additional space was procured to house our growing staff and the necessary office equipment was purchased or leased.
- The IHDP strengthened its linkage with the MOH and the National University Medical School in Somalia, by hosting two major delegations of Somali students and University officials, by co-sponsoring a four-month exchange opportunity for the President of the National University, and by collaborating on the development of two technical assistance proposals.
- Initiated a second linkage agreement with the MOH and Medical School in Zimbabwe.

EXPANDED EDUCATION AND TRAINING CAPABILITY

- IHDP along with Drew's MEDEX Program organized and instituted the Drew African Physician's Assistants Program to train African refugees from the Horn of Africa.
- Early planning has been initiated for training in health planning and management in conjunction with the Kenya Project.
- The Program hosted six African delegations interested in the exchange of ideas and information on various aspects of health development.
- IHDP sponsored an 11-week Traditional Healing System Symposium and two Women in Development workshops.
- Our faculty/staff attended a national conference on the "Role of U.S. Universities in International Rural Development" at Tuskegee Institute, and at the Second Nonformal Education Institute Workshop held at Michigan State University.

EXPANDED KNOWLEDGE AND RESEARCH

- The IHDP's library continues to expand. At present there are over 2,000 publications.
- The Health Planning and Management State of the Art was completed and a draft of a study on Integrated Rural and Community Development was prepared.
- Community Awareness Projects are expanding through public forums and news articles.

EXPANDED ADVISORY AND ASSISTANCE CAPACITY

- An Accelerated Impact Program (AIP) for the postgraduate training of physicians and nurses in planning and management Somalia was prepared and submitted to AID for funding.
- Technical and cost proposals for a Health Planning and Management Project for Zimbabwe was completed and submitted.
- The Kenya Health Planning and Information Project was prepared, and funded at \$1.8 million, and is currently underway.
- A joint feasibility study for a Somalia WID project by IHDP and the Somalia Women's Democratic Organization was prepared and submitted for funding.
- A proposal for an African Women's Communication Project was submitted to USAID for funding.

INTRODUCTION

This is the second annual report of the International Health and Development Program (IHDP) at the Charles R. Drew Postgraduate Medical School. The report summarizes the Program's achievements in meeting the goal and objectives of its U.S. Agency for International Development (A.I.D.) 122(d) institutional development grant. The submission of this document to A.I.D. complies with the agency's annual review requirements. The document is also available for the public review of the program's progress during FY 1980-1981.

In addition to the introduction, the report is divided into 6 major sections. Sections II-V correspond to and describe the four major outputs proposed in the grant: 1) administrative infrastructure development, 2) expanded education and training capabilities, 3) expanded knowledge and research capabilities, and 4) expanded advisory and assistance capacity. Section VI is the summary and conclusion. The final section (VII) is the financial statement for FY 1980-1981.

Background

On February 1, 1979, the Charles R. Drew Postgraduate Medical School received A.I.D. funding to increase its capabilities for health programming in Africa. This 5 year institutional development grant culminated a 3 year effort to establish an international health and development program at Drew. The International Health and Development Program was conceived to enable members of the Drew/Martin Luther King Medical Center to collaborate with Third World countries in organizing relevant health services for the medically underserved.

Drew's International Health and Development Program was formed in close collaboration with other traditionally Black Health Science Centers. Drew's director of International Health worked with faculty members at Howard University, Meharry Medical College, and Tuskegee Institute, in making the 122(d) institutional development grant a reality for minority institutions.¹ In so doing, each institution purposely selected different and complementary areas of expertise to expand and to share within the context of international health programming. Drew's International Health and Development Program, housed in the Department of Community Medicine, emphasizes broad-based community health and development services.

Currently, the Program concentrates on two areas of development assistance. Health planning and management represent the principle program foci; integrated rural and community development is a secondary and related specialty area. The selection of these program areas allows Drew: 1) to draw upon and expand these existing areas of expertise, 2) to link with its own community health and development objectives, and 3) to compliment the development areas of maternal and child health, environmental health, and endemic disease control offered by the three other Black Health Science Centers.

The following sections describe in detail the activities performed during the second year of the institutional development grant.

¹Directorate of International Health was established in 1977.

ADMINISTRATIVE INFRASTRUCTURE DEVELOPMENT

1. ADMINISTRATIVE INFRASTRUCTURE DEVELOPMENT

The administrative infrastructure of the International Health and Development Program refers to its: 1) staffing and staff development activities, 2) resource file, 3) data center, 4) marketing program, 5) physical plant (space), 6) equipment, and 7) program linkages. Each of these resource areas developed in accordance with grant specifications, and in direct relationship to the expanded activities of the IHDP. The sections below highlight the growth achieved in each of the aforementioned areas.

1.1. Staffing and Staff Development

Both the size and the expertise of the IHDP staff grew during FY 1980-1981. The effect has been a greater response capacity for international health and development programming.

1.1.1. Program Staffing

The Program's staff resources increased significantly during its second year of operation as a result of: 1) expanded and redefined project positions, and 2) new project activities. Generally, this year's staff increased to a total of 6.5 F.T.E.s (Full Time Equivalents), with an additional 4 positions being added from new funding sources and activities. This brings the total compliment of IHDP staff to 10.5 F.T.E.s representing a 200% increase in full-time manpower capabilities.

Core Grant Staff are:

- Director
- Associate Director
- Health Manpower Specialist
- Administrative Analyst
- Senior Secretary
- Principle Clerk (1/2-time)
- Receptionist Clerk

Other Project Staff are:

- Chief-of-Party (Kenya Project)
- Health Information Specialist (Kenya Project)
- Administrative/Training Coordinator (Kenya Project)
- Principle Clerk (1/2-time)
- Administrative/Training Coordinator (African Physician's Assistant Training Program) (1/2-time).

Changes and additions in core staff from years one to two were the outcome of a thorough review and analysis of office operational and production requirements. The revised staffing plan was particularly aimed at improving the quality and productive output of the clerical staff. The positions of Administrative Assistant and Intermediate Stenc Secretary were upgraded to Administrative Analyst and Senior Secretary, respectively. The clerical positions of Principle Clerk and Receptionist Clerk were added. Creation of the Senior Secretary position allowed many of the former administrative and stenographic functions to be collapsed into one job description. Since this function is key in the new staffing arrangement, considerable effort was devoted to identifying a highly qualified Senior Secretary.

The revised staffing plan was reviewed and approved by the Personnel Office, and related budget modifications were approved by the Controller. The IHDP also used several innovative methods to expand the technical expertise available to the Program. First, the position of Health Manpower Specialist was used flexibly. A variety of inhouse activities such as proposal writing, development of relationships with other institutions and agencies, state-of-the-art research, materials search, manpower search, etc., were planned as mini-projects, allowing the use of one full-time, or several part-time staff, as appropriate. Under this arrangement, we were fortunate to have the services of a Research Assistant who surveyed current activities in women's communication programming, explored the international resource network, and assisted in developing a project for funding.

The IHDP staff resources also grew as a result of three new project activities. First, arrangements were completed in mid-December to place a Drew pharmacy and community services specialist, Dr. Rosalyn King, within the USAID Division of Health and Nutrition, Africa Bureau, under a six month consultancy agreement. Originally, Dr. King's appointment was pursued as an Intergovernmental Personnel Act (IPA) agreement. Early discussions were held with Dr. Charles DeBose, Senior Health Advisor in the Health & Nutrition Division, Africa Bureau. It was finally determined that IPA funds were not available, and alternative strategies were pursued with Ms. Goler Butcher, former Assistant Administrator for Africa; Ms. Gayleatha Cobb, Special Assistant to Ms. Goler Butcher; W. Haven North, Deputy Assistant Administrator; and Dr. Thomas Georges, former Chief, Health and Nutrition Division. All of these individuals were extremely helpful in working out the details of Dr. King's appointment.

Dr. King's assignment while at AID, recommending strategies for improving logistical and drug supply services for PHC networks in developing countries, provides the IHDP with an excellent staff and resource development opportunity. The appointment gives IHDP and Dr. King additional insight into the internal operating procedures of USAID. It will also boost the Program's visibility as specialists in the planning of drug supplies and logistics.

While only three months into her assignment, Dr. King is proving to be extremely capable and invaluable to USAID's health development activities. The problem of drug supply and logistics has received only superficial treatment in the past. Subsequently, Dr. Shepherd, Chief of the Health and Nutrition Division, recently informed us of his intent to further pursue an IPA slot to ensure Dr. King's continued development of the area.

A part-time administrative/training coordinator was also hired to develop and implement a foreign student service program for the institution's new African Physician's Assistants Program. (See section 2.1) This position, funded by the Phelps-Stokes African Refugee Training grant, serves to strengthen the Drew School's goal of having the IHDP function as an umbrella office for all internationally-related activities within the institution.

Finally, the IHDP has started work on a major technical assistance project with the Government of Kenya, Ministry of Health (See Section IV.). This project augments core grant staff by 3.5 full-time staff and 540 days of consultancy, to be expended over the next three years. Full-time project staff include a two-member team, based in Nairobi, a home office administrator, and part-time clerical support.

1.1.2. Staff Development

A related program activity encouraged throughout the year is staff development. Continuing education is essential for the staff to increase their knowledge of the administrative aspects of international development work. This was accomplished by staff attendance at conferences, workshops, and in-service training courses as follows:

Inservice Training Courses. Several staff members attended UCLA's in-service training courses, including:

- Contract Negotiation, Acceptance and Initiation
- Federal Regulations and Requirements for the Acquisition of Equipment
- Closing Out Contract and Grant Awards

USAID Orientation Sessions. The Project Director for the Kenya Project, Drew's Director of Finance, and the Program's Administrative Analyst attended an AID Orientation Program conducted by the Training and Development Divisions/Operations Training Branch, October 19-24 in Washington, D.C. The orientation was designed for overseas-bound personnel whether Direct, PASA or Contract-Hire.

The program was divided into two sessions:

- Session 1 - Introduction to AID
- Session 2 - Human Relations and Intercultural Communication

The trip also gave these individuals an opportunity to visit some of AID's offices and other key organizations that have been of assistance to our institution and program.

The Associate Director and Health Manpower Development Specialist also made a week long trip (March 17-21, 1980) to Washington, D.C. The main purpose of the trip was to become familiar with AID and with appropriate outside agencies located in the Washington, D.C. area. A secondary purpose was to learn of available resources and information regarding the woman in development area.

Program Planning Sessions. Several strategic planning sessions were held during the year. The major ones were:

- A one day HMDP staff retreat was held at the beginning of the second grant year. The purpose of the retreat was to develop an implementation plan that would meet the required outputs for the year.
- A three day Kenya Project Retreat held at the Marriott Hotel to discuss budgetary matters and scope of work for the three year host country contract.

Briefing Sessions. Two major briefing sessions by international development specialists were held for the purpose of enhancing contract award opportunities.

- A one day briefing session was conducted by Dr. Alfred Neumann, Co-chairman, Population Family and International Health Division, UCLA's School of Public Health, in preparation for a Nigerian Delegation visit. Dr. Neumann discussed the health service needs in Nigeria. The meeting was informative and helped the staff to become more knowledgeable of the country's health delivery system and to better understand the purpose of the visit of the Nigerian Delegation.
- Staff met with Mr. Ted Brown, special consultant to the State Department on Middle East Affairs, and discussed program development issues.

1.2. Resource File

The purpose of the resource file is to maintain an active cadre of experts in various areas of international health planning, management, and rural and community development. During the year, a variety of activities were undertaken to support this effort.

- An inventory was made of all known public and private agencies involved in international development work.

- A cross-referenced indexing system was refined to allow for easy retrieval of information from the files. The card index includes educational/skills profiles by individual, and another grouping by area of speciality.
- Expansion and updating of file entries continued. Several activities responded to this concern. First, an informal network was used to continue soliciting outside resources. Resumes are routinely requested when any member of the staff encounters an individual with an appropriate background. Also, an attempt is made to stay abreast of any national or international activity in which Drew staff or faculty will participate (which might generate resources). In this regard, Dr. Rosalyn King conducted a mini-recruitment campaign at a recent APHA Conference. This effort produced many new contacts and inquiries.
- Finally, under the Drew School's contract with the Government of Kenya (the Health Planning & Information Project directed by IHDP), it was necessary to go to open advertising to identify candidates with a highly specialized set of skills. The recruitment campaign produced many additional resources for the files.

In general, our resource file has been actively utilized during the year-both for our inhouse needs as well as for the needs of various institutions and private agencies who have become aware of this facility. We have periodically undertaken searches for Nutritionists, Biostatisticians, Epidemiologists, Health Planners, Health Evaluators, Medical Curricula Developers, and M.D./M.P.H.s with international experience. (See Appendix A)

1.3. Automated Data Center

A projected output for Year 2 was the establishment of a data center. We have approached this task as a four-phase activity: Phase 1 - Analysis of Data Needs & Appropriate Equipment Needs and Resources; Phase 2 - Equipment Acquisition & Preparation of Manual Data for Programming; Phase 3 - Programming and Systems Debugging; Phase 4 - Full Implementation. Phases one and two have been completed and the related activities are summarized below.

1.3.1. Analysis of Data Needs

A considerable amount of time was spent on examining current and potential applications for various types of automated equipment. Our major requirements at this time are a storage system for our manpower resource files, a reference materials index, storage of selected documents and references, limited data processing and analysis, and the ability to tie into other data banks.

1.3.2. Equipment Needs & Resources

Our needs assessment was timely in that the Drew School was also conducting an institution-wide survey to determine data processing needs.

The major question to be answered was whether a decentralized or institution-wide system seemed most appropriate at this time. Several meetings were held with Mr. John Slater, Drew's Information Systems Manager, to discuss IHDP's data processing needs. Explorations were also made with Drew's Fanon Research & Development Center to test the feasibility of joint leasing of a digital mini-computer. We also investigated the approaches being taken by organizations with similar needs, and additionally talked with P. Arrington, A. Binnendyke and L. Godiken of AID/Washington regarding the possibilities of having access to the Africa Bureau's socio-economic databank.

For a variety of reasons related to flexibility of applications, availability and costs, our final decision was to purchase a word processing system. This type of equipment will substantially improve our document production capability, and can also accommodate certain data storage and retrieval needs. Concurrent with this decision, the School decided to proceed with installation of a large-capacity central computer system. When in place, the combination of the inhouse word processing capability and the campus' central computer facility should accommodate any foreseeable IHDP data processing needs.

1.3.3. Procurement

A thorough vendor quotation procedure was followed with the assistance of the institution's Administrative Services. The final decision was to purchase/lease a Wang OIS 125 Word Processing System. Consideration was given to this System's capabilities: full-page display, simplicity of operation, flexibility of systems upgrading and expansion, as needed, and cost.

1.3.4. Installation

Throughout the year, preparations have been underway to expand and update both the Resource Files and the Reference Materials inventory and manual indexing. These two basic data components are now ready for conversion to the automated system. The equipment has been delivered and is up. Personnel will be trained in February, 1981, and programming will begin, with the assistance of Mr. J. Slater, Drew Information System Manager, shortly after the operator training courses have been completed.

1.4. Marketing Program

A vital component of the IHDP administrative infrastructure is its capacity for attracting additional resources. The development of a program brochure aided in such an endeavor. A general brochure giving an overview of Drew's International Health and Development Program was completed in May 1980. A copy can be found in Appendix B. Three thousand (3,000) copies were printed. The brochures are being distributed both here and overseas to give interested people basic information about our program.

Everyone in our resource file as well as sister institutions, private voluntary agencies, political figures, health officials (foreign and domestic) and the general public are among the categories of people receiving our brochure.

1.5 Physical Plant (Space)

Because of the expansion of staff and equipment, IHDP secured an additional 580 sq. ft. of office space located on same floor as existing space. This additional space houses the clerical staff, Administrative Analyst, and files.

1.6 Equipment

The following equipment was purchased or leased during the year.

Sony Dictating/Transcription System

Xerox 2600 Copier

TWX Telex Machine (Model 33ASR)

Wang OIS 125 Word Processor

Kodak 850H Slide Projector

35mm Projector and Screen

1.7. Program Linkages

Additional domestic and international linkages were established during FY 1981.

1.7.1. Domestic Linkages

Contacts were pursued with a number of organizations involved in international programming for the purposes of coordinating and/or collaborating on services related to education, training, and technical assistance. Four cooperative relationships developed, though formal programming has not yet evolved. These major linkages are:

- African-American Institute. Joan Brann in the Washington, D.C. office agreed to assist in directing visiting international health faculty members to Drew, as part of our proposed scholars lecture series.
- Overseas Education Fund (OEF). Willie Campbell, President of OEF, discussed the organization's current Women in Development Projects and possible areas of cooperation. Ms. Campbell's husband, John Campbell is a member of the Drew faculty, and this relationship further stimulated a reciprocity in supporting the numerous activities geared toward constituency building.

- Operations Crossroads. Talked and met with Cecil Washington, Director of Africa Program, regarding mutual assistance in offering health and development projects in Africa for medical faculty and staff. Assisted Operation Crossroads in recruiting Drew/MLK faculty and staff for their summer medical and health services projects in Africa.
- Los Angeles Sister City Program. Talked with Charlotte Asberry, Assistant, Director of the Program regarding current international activities and program structure. Worked together on hosting African Dignitaries visiting Drew and the greater Los Angeles area.

1.7.2. International Linkages

In keeping with the goals and objectives of Administrative Infrastructure Development, the IHDP furthered its mission to 1) execute the terms of the linkage agreement with Somalia, and 2) explore and develop additional linkage agreements. The activities performed in each of these areas are elaborated below.

Drew-Somalia Linkage Agreement. Drew's formal linkage agreement with the National University of Somalia and the Ministry of Health, signed in January of 1980, allowed for the continuous process of sharing and exchange with various faculty and students within the Somali community, domestically and abroad. For example, the significance of the linkage agreement was formally celebrated on April 30, 1980. The International Health and Development Program hosted an "Exchanging and Sharing with Somalia" reception and dinner, which introduced and honored 15 Somalians to the King/Drew Medical Center. The signing of the linkage agreement was officially announced to 70 Drew faculty and administrators. The affair was held in the spirit of freindship, mutuality, and respect in anticipation of continued strengthening of both institutions of relevant learning, as well as the people we serve.

In addition, on September, 11, 1980 a delegation from the National University of Somalia visited the King/Drew Medical Center. Members of the delegation were:

- Mohammed Hassan Muddey, President
Somalia National University
- S. Ibrahim Kassim, Director of Planning
- Ali Abdirahman Hersi, Dean, College of Education

The IHDP provided the delegation a tour of the Medical Center, with emphasis on its planning and health service activities. Meetings were arranged with key Drew faculty and hospital administrators. Several meetings were also held with Dr. Muddey regarding the development and implementation of needed technical assistance programs.

The IHDP also assisted in facilitating a 4 month faculty exchange opportunity for Dr. Muddey at UCLA. The Program pursued housing accommodations for the president, and provided financial assistance for housing, food and other support needs. During his stay here, Dr. Muddey met on several occasions with the President of Drew and the Director of the IHDP on project development strategies and program needs of the National University.

Finally, two technical assistance proposals were developed during the year, in accordance with the expressed needs of Somali health officials and in collaboration with the Somalis themselves. Details of these project activities can be found in Section IV. It is important to note here, however, that the services of Somali graduate students at UCLA, many of whom are faculty members at the National University, assisted in the development of the proposals.

Prospective Linkages. Several trips were made to Africa during the year to explore opportunities for establishing additional institutional linkages, which would foster mutual opportunities for education and training, research, and technical assistance. The Program Director made exploratory visits to Uganda, Zambia, and Zimbabwe based upon the Program's 7 point country selection criteria, used to assess the feasibility of program involvement.

In Uganda, the Director met with a number of Makerere University Medical School Faculty, including the Dean, and the Vice Chancellor. A number of contacts were made with health officials of Mulago Hospital, including its Medical Director. Finally, a discussion of USAID's mission strategy was held with its U.S., Charge d' Affaires. Opportunities for institutional linkages did not appear promising at this time.

The MOH and the University Medical School in Zambia were also visited. At the former, the Deputy Director of Medical Services was interviewed in depth. At the University Hospital, meetings with the Dean, former Dean and several faculty were held. During the stay in Zambia a visit was made to the Institute of Tropical Research at Ndola and meetings took place with the Institute's Director and several senior researchers, as well as a tour of the facility. No further follow-up in terms of institutional linkages has been pursued.

Finally, a total of three trips were made to Zimbabwe during the year by the Program Director in what appears to be the most lucrative and mutually responsive prospect for an institutional linkage agreement. The purpose of the first (February, 1980) trip was to explore health programming possibilities and the attitudes regarding institutional linkages between the Drew School and the University Medical School. Among those with whom meetings were held were the Vice Chancellor of the University, the medical school Dean, and a number of junior and senior faculty. Tours of the University Hospital and Medical School were arranged, as well as of the large city hospital Harrare Hospital (also affiliated with the University Medical School). The Director toured the Salisbury Health Department facilities in Greater Salisbury with its Chief and the Medical School Dean. The major host of the visit was a Zimbabwe Professor of Surgery, Dr. Munyaradzi.

In May, 1980, the Deputy Minister of Finance (formerly Professor of Surgery at the University of Zimbabwe School of Medicine) and the Minister of Foreign Affairs invited the IHDP Director to attend the Zimbabwe Independence Ceremony. During the visit negotiations were continued with MOH and University Officials regarding institutional linkages and programmatic opportunities.

A third trip was made by Dr. Cannon, Program Director, in December when he was invited to give a paper at the Primary Care Symposium organized on the occasion of the first major visit to Zimbabwe by the Secretary General of the World Health Organization, Dr. Gustave Mahler. In addition to participating in the Symposium, meetings were held with the Minister of Health, Deputy MOH, and University officials for the purposes of discussing a planning proposal ("Health Development") that the Drew School and the Zimbabwe MOH had recently jointly submitted to USAID for funding (See Section IV.).

Institutional linkages discussions were continued with MOH and University officials with formal invitations to visit the Drew School extended to the Minister of Health and the University Vice Chancellor and Principal.

EXPANDED EDUCATION AND TRAINING CAPABILITY

2. EXPANDED EDUCATION AND TRAINING CAPABILITY

The IHDP responsibility in this program area includes: 1) the development of training programs, 2) the development of faculty and student exchange opportunities, and 3) fostering the international exchange of ideas.

2.1. Development of Training Programs

The establishment of core and selected training programs relevant to the health service needs of African countries fall within this project activity. Accordingly, the IHDP, along with the School's MEDEX program, organized a special program of study for the training of African Physician's Assistants. The Drew African Physician's Assistants Program (DAPA), formed to accommodate the needs of the African Refugee Paramedical Training Program sponsored by the Phelps-Stokes Fund. The course of instruction is a 2 1/2 year (10 consecutive quarters) program leading to the ability to provide basic health services in an African setting. A one year pre-clinical training program has been arranged at an affiliated university, California State University of Dominguez Hills for the provision of basic health science courses. Part of the first year's training is also provided at Drew where a special nurses training program is offered for the DAPA students, in addition to required international health seminars offered by IHDP. The second year of training emphasizes clinical instructions required of all PA students at Drew, though DAPA students must also conduct one international health research paper. Finally, a special training module on specific African health problems has been developed for the students and is offered in the last quarter.

It is intended that the DAPA program will extend beyond the current contract with the Phelps-Stokes Fund, and become a internationally recognized paramedical training program offered on a tuition basis to interested African countries and individuals. In addition, the training program has been designed in modules to allow Drew to "export" parts or all of the training components as selected, in-country training programs.

Two clinical instructors have been hired to implement and further refine the DAPA curriculum. They have special responsibility for conducting the clinical portions of the African disease module. The IHDP is charged with special projects and activities in international health, including lectures, workshops, and research requirements.

Core and selected courses in health planning and management, designated outputs for year 2 of the grant, have not yet been developed. It is intended, according to grant specifications, that these training programs develop with a specific target population in mind, and that they meaningfully relate to the needs of a particular country. These courses will be developed, therefore, in conjunction with the Kenya Health Planning and Information Project which requires both short and long term training in the area of health planning and management. Attempts to assist the MOH and Medical School in Somalia in developing postgraduate training programs in planning and management for physicians and nurses have not yet been successful due to the lack of funds.

2.2. Faculty and Student Exchange

Both faculty and student exchange programs were facilitated during the past year. The Student exchange program represents the major program activity.

2.2.1. Student Exchange

Eleven students are currently on an educational exchange program at the Drew School (See biographical sketches in Appendix C). Nine Ugandan students, and two Ethiopian students, all classified as refugees, were admitted to the MEDEX program in September of 1981. Upon completion of their two and a half year training program, the students are required to return to Africa to provide critically needed health care services.

The Program contributed a great deal of its personnel resources to develop support services for the foreign students. Included among these services were:

- formal reception and welcome;
- arrangement of host families for social and psychological support;
- housing accommodations
- orientation packets and training sessions to meet student adjustment needs; and
- enrollment and other administrative requirements, such as setting up bank accounts, and acquiring appropriate U.S. identification cards.

Arrangements for institutionalizing foreign student services are currently underway to ease future student (and faculty) exchanges. A part-time training coordinator has been hired to 1) provide on going student support, and 2) develop a foreign student policy and procedures manual.

2.2.2. Faculty Exchange (See Section 1.7.2. - Drew/Somalia Linkage)

2.3. International Exchange of Ideas

In addition to formal training programs, the IHDP is committed to the sharing of ideas and its accumulated knowledge, and that of the Center's, among Drew faculty and staff, Africans, Africanists, and other Third World People. The purpose of these activities is to explore alternative health and development strategies focused on the enhancement of the health professional. A listing of these activities follow:

- Visit of Kenyan Ambassador to U.N.

His excellency John Peter Mbugua, Ambassador to the United Nations and Plenipotentiary of Kenya to the United States, paid a special visit to Los Angeles where he toured the King/Drew Complex.

Ambassador Mbogua was accompanied by Kenya Consul General John Mwangeka. The Ambassador's visit was prompted, in part, by the recent contract initiated by his nation with the Drew School and the International Health and Development Program.

During his visit, Ambassador Mbogua had the opportunity to discuss Drew and its programs with Dean Haynes, Dr. Cannon, Dr. Gus Gill, Chairman of Drew's Department of Otolaryngology and Mr. William Delgado, Hospital Administrator, King Hospital. He also discussed some of Kenya's major goals for implementing effective health care planning and management systems.

- Visit of Dr. J. S. B. Preece, Zimbabwe

The Drew School was also honored to have his excellency Dr. J. S. B. Preece, Permanent Secretary of Zimbabwe's Ministry of Health, visit the King/Drew complex. Dr. Preece discussed the mission and purpose of the Ministry of Health as well as some of the current health related needs of Zimbabwe. This information was used to develop our joint proposal for the USAID health development planning and management project.

- Visit of Six African Leaders

Six distinguished health care officials from the continent of Africa, representing five nations, were guests of the Charles R. Drew Postgraduate Medical School, April 30 - May 2. A special program was coordinated by the International Health and Development Program.

The six were Dr. Abdel Rahman El Tom, Head, Department of Community Medicine at the University of Khartoum in the Sudan; Dr. Abdullahi Hassan Farah, Head, Department of Health's Settlement and Coastal Development Agency in the Ministry of Health, Somalia; Dr. Ikwara Okware, Assistant Director for Medical Services/Public Health at Ministry of Health Headquarters, Uganda; Dr. Adedkunle Oluwu, Chief Health Planning Officer, Oyo State, Ministry of Health, Nigeria; Dr. Joseph Riverson, Director, Community Health Physician, Volta River Authority, Ghana; and Dr. Arabi, Assistant Commissioner of Health for Southern Durrfur Province in the Sudan.

The African officials came to Drew and the United States under the auspices of the African Leaders Program, National Health Delivery Systems, guests of the U.S. International Communication Agency's Directorate of Educational and Cultural Affairs, with the program developed and administered by Operation Crossroads Africa, Inc. They utilized their visit to America to study primary care delivery programs, allied health professions, and health care delivery systems.

Two full days of site visits and meetings were planned. A copy of their itinerary can be found in Appendix D.

- Visit of Nigerian MOH Delegation

A Nigerian delegation comprised of ten senior Ministry of Health officials visited the King/Drew Medical Center on July 29, 1980. A special program hosted by IHDP was held. The purpose of their mission was to look at Drew's health planning programs that could specifically relate to Nigerian health concerns.

Mrs. F.Y. Emmanuel, Permanent Secretary for the Nigerian Ministry of Health, was the leader of the group which included Mr. D.A. Akoh, Director of Food and Drugs; Dr. Gabi Williams, Chief Consultant for Environmental and Occupational Services; Mrs. S.A. Seweje, Deputy Secretary, Institutions and External Organizations; R. Kuteyi, Assistant Director, Medical Services and Training; Mrs. O.A. Adewole, Chief Nursing Officer; Dr. J. A. Laoye, Chief Consultant, Health Education Unit; and Dr. B.A.A. Dada, Chief Consultant, Medical Statistics, all directly represented the Federal Ministry of health.

Dr. Musa, Director, Institute of Health, A.B.U. Zaria and Professor Enwonwa, Director of the National Institute of Medical Research completed the delegation.

Arrangements for their visit to the U.S. and Drew were coordinated through the Office of International Health, HEW.

A full day program was planned for the delegation. A special dinner was given by the Program for the Nigerian Delegation. Famed Nigerian storyteller and singer Jimi Solanke entertained. Permanent Secretary Emmanuel remarked that it was the desire of Nigeria to institute linkages which would provide for exchange between her country and the Drew School of a "lasting and positive nature". (See Appendix E)

● Visit of Dr. Sanoussi Konate, Mali

We were notified by the Los Angeles World Affairs Office that Dr. Sanoussi Konate, Deputy Director General of Public Health in the Ministry of Public Health and Social Affairs, from Mali, would be in the Los Angeles area September 3-4, 1980 and had specifically requested visiting the King/Drew Medical Center. An itinerary and arrangements were made to accommodate Dr. Konate's request. (See Appendix F). Dr. Konate was specifically interested in primary health care models for African and the training of paramedics.

● Traditional Healing System Symposium Sponsored

Drew's IHDP cosponsored a colloquium entitled "African Systems of Health and Healing" with UCLA's African Studies Center. The 11 week symposium (March 31 - June 9, 1980) was well attended during its duration by both UCLA and Drew Faculty and Students. (See Appendix G).

● Women in Development (WID) Workshops Held

Two WID workshops were conducted during the year. The first, held on Drew's campus featured Ms. Petrida Balria of Tanzania and Mrs. Sahra Habbane of Somalia as guest speakers. Both women are students at UCLA and they provided a general overview of the role of women in their countries.

The second WID activity involved a workshop entitled, "Women's Health and Development: A Third World Perspective". The workshop was a part of a larger three day Women's Congress Conference held at California State College at Dominguez Hills.

- Visit of Kenyan Project Participants

A three day visit was made by 3 Kenyans being trained under the Health Planning and Information Contract at Johns Hopkins. The visitors met with IHOP staff in order that we might learn more about their training experience at Hopkins and to gain insight into ways that we might improve future training activities related to the Kenya Project.

- Faculty/Staff Conference Participation

Two major conferences were attended during the year for the purpose of expanding our knowledge of the state of art in various aspects of international development.

The Associate Director and Administrative Analyst attended a 4 day national conference at Tuskegee Institute on the "Role of U.S. Universitites in International Rural Development". The conference was jointly sponsored by the Center for Rural Development, the Health Research and Demonstration Center, and the Center for Food and Nutrition Studies. The conference helped to identify past, present and future directions in overseas development work.

Ms. Ruth Webb, Acting Director of the MEDEX Program, attended the second Non-Formal Education Institute Workshop, held at Michigan State University, East Lansing, Michigan, June 2-20, 1980. The workshop identified and familiarized trainees with the status of non-formal education in various parts of the world and also to identify its problems and potentials.

EXPANDED KNOWLEDGE AND RESEARCH CAPABILITY

3. EXPANDED KNOWLEDGE AND RESEARCH CAPABILITY

Three projects moved the IHDP along toward an expanded knowledge and research capability: 1) the expansion of the Program's library, 2) the development of state-of-the-art surveys, and 3) community awareness projects.

3.1. Resource Library

The International Health and Development library has gone through an intensive growth period. We currently have approximately 2,000 publications cataloged, shelved and ready for use by staff. The inventory emphasized both general and country-specific information on health planning and management and integrated rural and community development programs. The Program's objective is to obtain the most current publications available as well as basic texts in the field. Special effort went into expanding references on integrated rural and community development to keep in line with our second year requirements. The library has already been of great help not only to our IHDP staff but also to others within the Drew-King complex. (See Appendix H for a listing of publications.)

3.2. State-of-the-Art Studies

State-of-the-Art Studies in the Program's two areas of specialty are in various stages of completion. The Health Planning and Management study is near completion and will be submitted under separate cover for dissemination and review. The research represents a thorough review of the literature as it specifically pertains to health planning and management in Africa. Current practices are given a historical context, and the various techniques are analyzed against intended and actual objectives. Planning and management strategies used in specific African countries offer additional insight into the state of the art. Validation of the research findings with health officials, in conjunction with an in-depth case study of Kenya will be made the beginning of year three to complete the research.

A special off-shoot of the health planning and management study was a paper entitled: "The Role of the Health Infrastructure in the Development of Primary Health Care". This paper was presented by the Program Director at a Primary Health Care Conference held in Zimbabwe in December, 1980.

A draft of a study on integrated rural and community development has been completed. This research represents a cursory review of the literature. This document will be completed in year three after more in-depth study.

3.3. Community Awareness Projects

A number of special projects geared toward expanding the knowledge of the Drew and local community about relevant international health and development issues were developed. The dissemination of information through public forums and news articles has begun.

EXPANDED ADVISORY AND ASSISTANCE CAPACITY

4. EXPANDED ADVISORY AND ASSISTANCE CAPACITY

A substantial amount of time and effort went into expanding the Program's advisory and assistance capacity. In fact, it represents the IHDP major area of involvement in Year 2. Program staff identified, reviewed, and responded to two request for proposals offered by USAID. Three unsolicited proposals were also generated based upon needs assessments made by specific host countries and/or the IHDP. The majority of the projects involved health planning and management contracts in Africa. Two (2) Women in Development projects were pursued as well, as the Program moved to formally establish a Women in Development Center.

Currently, these proposals are in different stages of review. The Program claims success, however, in the acquisition of a three year host country contract from the Government of Kenya. A status review of the Program's efforts in contract acquisition follows.

- Reviewed the Sudan RFP for development planning and designed a proposal response schedule. Due to severe time constraints, the project was not considered.
- Accelerated Impact Program (AIP) Somalia - the goal of this project is to assist the National University of Somalia Medical School develop and implement a postgraduate curriculum for doctors and nurses in health planning and management. This project is still under consideration for funding.
- The technical and cost proposals for a three month planning grant to organize a health development planning and management proposal was completed and submitted to AID/W in collaboration with the MOH in Zimbabwe. The grant will assist the MOH in devising a program of training, research and technical assistance which will increase and institutionalize the capacity of Zimbabweans to plan, manage and evaluate health programs and policies. The overall goal is to improve the efficient and equitable allocation and use of limited health resources. The results should greatly improve the development and assessment of rational and relevant Zimbabwean - U.S. collaborative health projects. The proposal is currently under review.
- On October 1, 1980, the International Health and Development Program began work on a \$1.8 million contract to provide technical assistance to the Government of Kenya, Ministry of Health. This three-year project is designed to increase MOH capacity to plan, implement and evaluate health programs and policies. Drew will provide the MOH with a variety of resources needed for this major infrastructural development effort.

A two-member, long-term technical assistance team will direct the project in Kenya. As Chief-of-Party, Dr. Reginald Gipson will be responsible for the health planning component of this project. Candidates are now being interviewed to fill the position of Health Information Specialist. Jointly, the team will be responsible for assisting the MOH in establishing a Department of Health Management, Planning, and Rural Health Services. Other technical and physical project inputs include short-term consultants, U.S. training of Kenyan health professionals, planning and information workshops, observational tours, library materials, and vehicles.

The field staff is supported by a home office team which includes the institutional administrative and fiscal system; the general direction of IHDP Director, Dr. Cannon; a Project Administrator, Mildred Pollard; and a Secretary.

- WID Project in Somalia

The Program of International Health & Development, in collaboration with the Somalia Women's Democratic Organization (SWDO), requested from USAID three-months financial assistance to conduct a joint feasibility study of potential projects for women in development. These projects fall into two general categories: 1) community development, 2) management training for officers and staff of the SWDO and community development staff. Both of these potential project areas will directly or indirectly improve the health and status of women. The feasibility study will culminate in recommendations for proposed project implementation. The project has not yet been formally reviewed.

- Proposal for an African Women's Communication Project

This proposal was submitted to AID requesting funds to conduct a training workshop on the use of communication strategies for addressing the problems of African women in development. The project's overall objective is to increase the health and development of African people through an emphasis on the role of women in that process and through improved communication strategies. The proposal has not been formally reviewed as of the end of this fiscal year.

SUMMARY/CONCLUSIONS

SUMMARY AND CONCLUSIONS

The International Health and Development Program made substantial strides toward meeting the overall goal and many of the specific objectives of the USAID 122(d) institutional development grant. The Program evidenced tremendous growth in terms of staffing, the influx of additional resources, and program activities. The effect has been to further the institution's involvement and credibility in international health programming. A summary analysis of the gains and future development needs in each program area follows.

Administrative Infrastructure Development

The specific outputs in the area included a brochure, expanded resource file, and the acquisition of a Wang OIS 125 word processor for the establishment of a computerized data center. In addition, administrative protocols for overseas operations were refined and expanded due to the implementation of an overseas health contract. Modest gains were made in implementing the linkage agreement with Somalia, with some faculty exchange activities and proposal development occurring. The third year of the project requires the establishment of a second linkage agreement, and the start up of in-country planning and management projects for Somalia. The latter task is dependent upon the availability of additional funds. Finally, development work is needed in computerizing our resource information for the data center.

Education and Training

While the IHDP was instrumental in getting a major paramedical training program for Africans started at the Drew's MEDEX program, very little work went into developing core and selected courses in health planning and management as required. This was due to the absence of a specific student population and the need to make the courses relevant to the needs of a particular country. These courses will be developed in FY1981, in conjunction with the education and training activities of the Kenya Health Planning and Information Contract. Numerous other training activities took place, however, including a structured 11 week African Healing System Symposium, 2 WID workshops, and informal information sharing sessions with 6 delegations of African health professionals.

Knowledge and Research

Two state-of-art studies were conducted during the year. The health planning and management study is near completion and will be submitted under separate cover. A draft of the integrated rural and community development study was completed and will be further refined next fiscal year. The continuation of community forums and new articles as information dissemination tools for the Drew and local community are expected to continue throughout the year.

Expanded Advisory and Assistance

Five (5) proposals were developed this year. Three health planning and management proposals were submitted for the countries of Kenya, Zimbabwe, and Somalia. Thus far, the program has been successful in acquiring the Kenya Health Planning and Information Contract. Two Women in Development Proposals were also submitted. The first was for a feasibility study for a project with the Somalia Women Democratic Organization (SWDO). The second called for the development of an African Women Communication Project, specializing in development communication training forums for African women.

Needless to say, the IHDP looks forward to the funding of the 4 remaining proposals and will pursue additional project activities in the next year.. Considerable effort will go into expanding the IHDP Women in Development Center.

FINANCIAL REPORT



CHARLES R.
DREW
POSTGRADUATE MEDICAL SCHOOL

1621 East 120th Street
Los Angeles, California 90059
Telephone (213) 603-3111

Office of Finance

April 7, 1981

AGENCY FOR INTERNATIONAL DEVELOPMENT
CONTRACT NO. AID/AFR-G-1502
(Account No. 1032-1011-1012-1013-1014)

ANNUAL FISCAL REPORT

This report represents costs incurred from February 1, 1980 through January 31, 1981:

Director Labor	\$148,201
Fringe Benefits	13,918
Consultant Services	5,010
Supplies and Services	24,483
Equipment	3,421
Travel	27,370
Space	19,703
Miscellaneous	<u>10,217</u>
Total Direct Cost	252,323
Indirect Cost	<u>37,839</u>
TOTAL COST	<u>\$290,162</u>

The undersigned hereby certifies that the information is correct and such detailed supporting information as AID may require will be furnished by the grantee upon request.



Leonard C. Patterson
Director of Finance

LCP/edc

APPENDIX

APPENDIX A

Number of Resource Persons by Area of Specialty

AREAS OF SPECIALTY

<u>11</u> Agriculture	<u>7</u> Logistics
<u>21</u> Anthropology	<u>2</u> Management
<u>3</u> Architecture and Design	<u>17</u> Manpower Analysis
<u>7</u> Budget Analysis	<u>28</u> Maternal and Child Health
<u>39</u> Curriculum Design	<u>13</u> Media Specialist
<u>11</u> Demography	<u>5</u> National Resources (Specify)
<u>7</u> Economics	_____
<u>1</u> Engineering	<u>25</u> Nutrition
<u>17</u> Environmental Health	<u>18</u> Operation Research
<u>24</u> Epidemiology	<u>4</u> Pharmacy
<u>41</u> Evaluation	<u>25</u> Social Work
<u>46</u> Family Planning	<u>20</u> Sociology
<u>6</u> Geography	<u>15</u> Statistics
<u>2</u> Graphic Arts	<u>26</u> Survey Research
<u>12</u> Health Economics	<u>7</u> Transportation Analysis
<u>51</u> Health Education	<u>13</u> Urban and Regional Planning (Specify)
<u>47</u> Health Planning	_____
<u>36</u> Health Services Administration	_____ Veterinary Medicine
<u>16</u> Information and Data Systems	_____ Other (Specify)
<u>3</u> International Law	_____

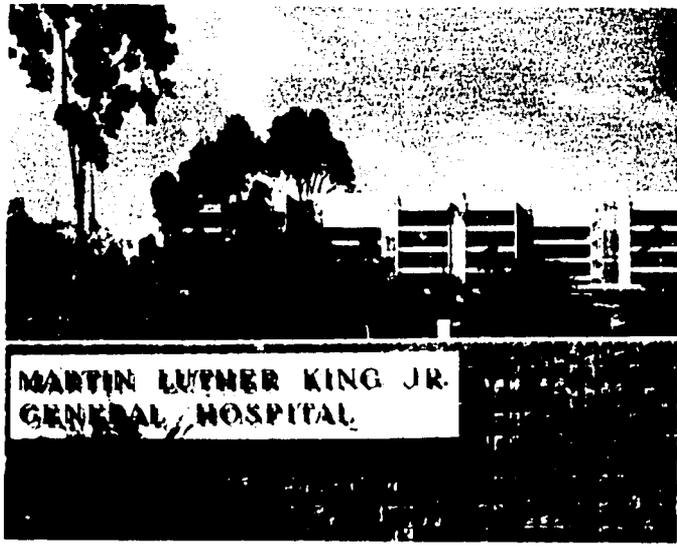
APPENDIX B
INTERNATIONAL HEALTH AND DEVELOPMENT BROCHURE



DREW/MLK MEDICAL CENTER

The Charles R. Drew Postgraduate Medical School is a private, non-profit institution. The school opened its doors in August 1966, in response to the 1965 civil disturbances in Los Angeles, California. Today, the Drew School augments the Martin Luther King, Jr. General Hospital (a public teaching hospital) in serving the needs of an estimated 750,000 persons of predominately low income status, the majority of whom are Black or Spanish surnamed.

The Drew School offers educational programs and rotating clerkships for resident physicians in all major specialties, with particular emphasis in primary health care. Drew, in collaboration with the University of California at Los Angeles (UCLA), will soon offer an undergraduate medical education program.



**INTERNATIONAL HEALTH
AND DEVELOPMENT
PROGRAM**



INTERNATIONAL HEALTH AND DEVELOPMENT PROGRAM

On February 1, 1979, Drew officially started a program of International Health and Development. The program goal is to: Increase the health and development of under-served populations throughout the developing world, particularly among populations of African descent.

The International Health and Development Program affords the opportunity to communicate skills and knowledge gained domestically and abroad from our close association with community groups in Los Angeles and other parts of the world.

We offer a program that: 1) meaningfully relates to the health and development needs and resources of Africa and other developing countries, and 2) links with the schools own health and development objectives and available resources.

WHAT DO WE OFFER

Our program specializes in:

- health planning and management, and
- integrated rural and community development

We train others in appropriate principles and techniques to plan and manage national health systems, health manpower, health facilities, information systems, and logistical support systems.

We also assist in planning integrated health and development strategies. We focus on the broad aspects of health and community development including: water supplies, sanitation, nutrition, communication, energy, and other health support systems.



- education and training programs
- overseas consultation and technical assistance
- faculty and student exchange programs
- a library and information resource center
- a computerized data bank on international health activities and resources.

These services are available to assist health and development specialists who are devoted to serving the underserved domestically and abroad.

WHAT MAKES US SPECIAL

Planning, developing, and managing suitable health services for the medically underserved are areas in which the DREW/MLK Medical Center is most experienced and sensitive. The Center's accomplishments include over a decade of service in areas of: 1) health promotion and education, 2) manpower planning and development, 3) information systems planning and development, 4) health systems planning, and 5) community development.

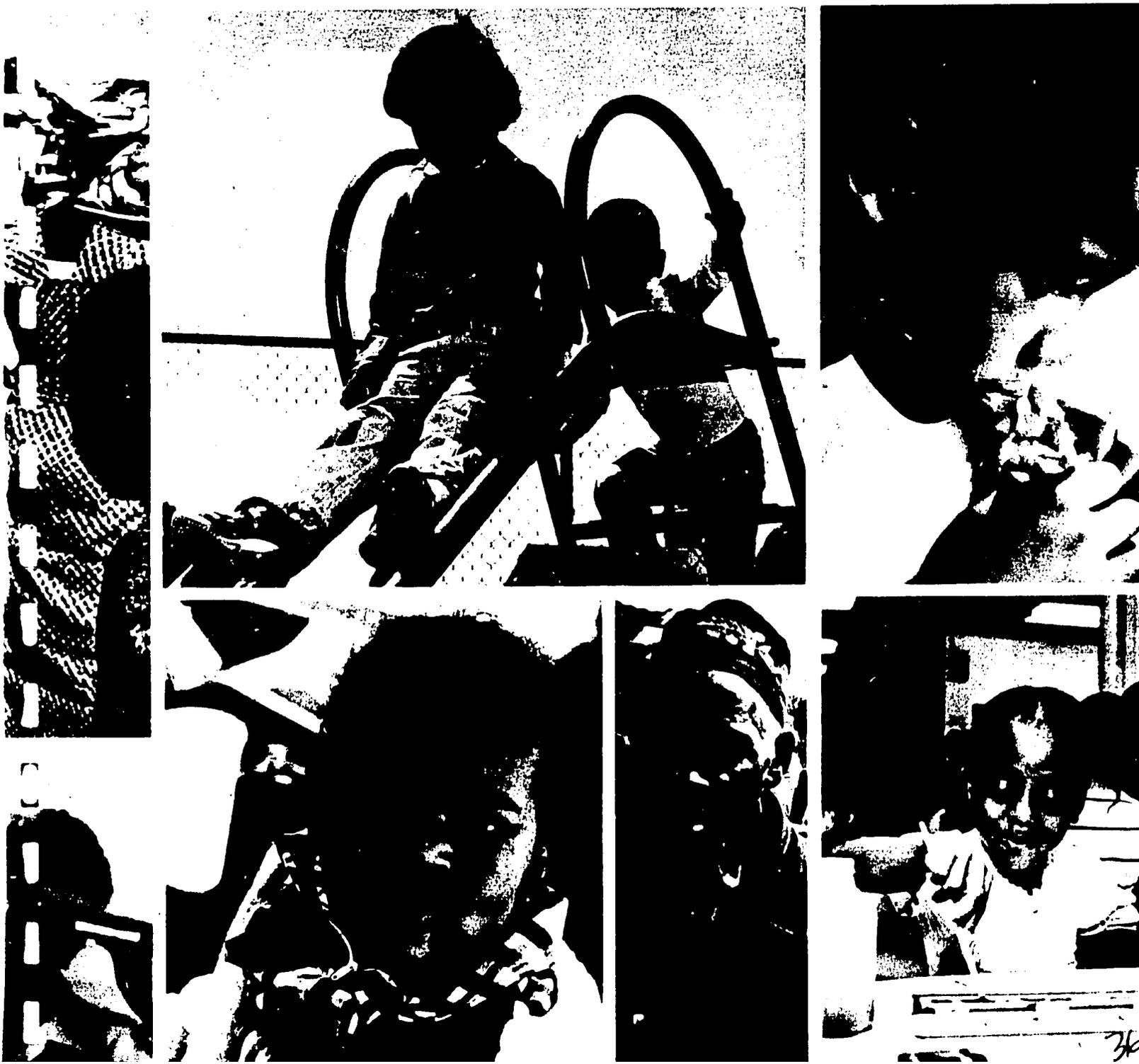


HEALTH PROMOTION EDUCATION

Health promotion and education programs rank high among the Medical Center's support services. Health screening programs, group counseling, and health workshops are routinely offered to the community. A variety of educational materials and media services are used to reach children, adolescents, parents, and community groups. In all cases, Drew works to overcome consumer fear of medical practices, and to improve illness prevention awareness.

MANPOWER PLANNING AND DEVELOPMENT

Drew is increasingly innovative in training cadres of new health professionals to meet the health needs of the community. This includes physician assistants, as well as interns and residents. Eighty (80) percent of 550 health professionals trained here between 1973 and 1977 now work in medically underserved areas.



INFORMATION SYSTEMS PLANNING AND DEVELOPMENT

Drew utilizes a variety of data processing, statistical, and data analysis in the planning and provision of its health services. For example, the division of Biostatistics and Data Processing initiated and installed a Community Health Information System (CHIS) to support the information needs of the region. The division also consults, upon request, numerous programs, departments, organizations and individuals in areas of research design, data collection methods, data management, data evaluation, and computer processing. Educational programs in biostatistics and data processing are also offered.

HEALTH SYSTEMS

Drew conducts research and consults on ways to improve the development, administration, and evaluation of health care delivery systems. Comprehensive evaluations on the efficiency and effectiveness of Health Care Projects has been, and continues to be, our target. The Hubert H. Humphrey Comprehensive Health Center, an innovative primary care center in California, is a credit to our faculty and staff's capabilities in health systems design. The health services delivery concept of the center incorporates a multidisciplinary team approach in meeting the multifaceted challenges of family health.



COMMUNITY DEVELOPMENT

Drew also focuses on approaches toward overall community development, as it relates to improved delivery of health services. Community Medicine's Regionalization Project included research on socio-cultural, transportation, and environmental problems and needs in the Los Angeles Southeast Health Services Region. These in-depth reports are used in other planning and development efforts.

WHO WE ARE

Health professionals within the DREW/KING Medical Center represent a multi-racial, multi-ethnic, internationally recruited faculty and staff, who provide patient care, education, and research services. Drew retains highly qualified health professionals who have experience in health care services in Africa, Asia, Latin America, and the Middle East. Our faculty and staff are special in their commitment to quality health care for the medically underserved throughout the world.

For further information about this program, please write to:

**International Health and Development Program
Charles R. Drew Postgraduate Medical School
1621 East 120th Street,
Los Angeles, California 90059 U.S.A.**

APPENDIX C

DAPA STUDENTS

Walter Ocala was born in the northern part of Uganda on November 26, 1957. He had his early education in Sorot and secondary education in Lira, where he sat for the Advanced Level Certificate of Education in 1977. From January 1978 to April 1980 he stayed in Kenya as a refugee. Walter's main interest is in photography and boxing. He would like to be a doctor in the future.

Susan Wagabaza was born on December 21, 1959. In 1964 she went to New York and began school in P.S. 116, Manhattan (Grades 1-3). She returned to Uganda and completed P. School at Nabasero P.S. She then attended SI-IV at King's College Budo, did an "A" Level at Nanasagali College and lastly, attended Universal C. College pursuing professional course in accounting. She stopped accounting to join the paramedic program, and is hoping to be an Environmental Health Officer in future.

Bisrat Yirgou was born in Addis Ababa on September 22, 1956. He completed his primary school education and high school education in Addis Ababa, and joined the University in Addis Ababa as a freshmen student. In 1975 he went into exile and stayed in Nairobi, Kenya for 5 years. He fulfilled a longtime ambition, when he took a medical laboratory technology course at the Kenya Polytechnic in Nairobi which he completed in July 1980 (taking the certificate examination).

He was accepted by the Phelps-Stokes Fund African Paramedical Training Program. He plans to be a physician assistant and go back to Africa and help his people.

Fred Mumia was born in 1957 in Eastern Uganda. He took his primary education up to standard seven in a nearby school. Then he joined a secondary school for four years where he obtained his "O" Level Certificate. In 1975, he entered medical school for a diploma course in medicine, but he was unable to finish because of political stability. Now he hopes that given a chance, he can continue with his course so as to help his country.

Dawit Mekonnen was born in 1958 in Addis Ababa, Ethiopia. He finished his elementary as well as his high school education in Addis Ababa. He was a bright student in class and was awarded a gold watch from the Late Emperor of Ethiopia, Haile Selassie the First. After successfully finishing high school, he was not able to continue with his education at the University level because of the political turmoil in his country. As a result, he left his homeland for Kenya. After staying there for some time, he was fortunate enough to get the scholarship granted by the Phelps-Stokes Fund.

Patrick Mubi was born in 1958 in the western part of Uganda. He took his early education in his home district. Later his family moved to the capital (Kampala). After primary six and seven, he went to Kololo S.S.S. where he completed his "O" levels. In 1976, as a result of the political upheaval he lost his father, and left the country. He was given asylum in Kenya and the UNHCR sponsored him for a course in Computer Programming and he qualified as a junior programmer in COBOL and RRG Languages. He was unable to get a job, but after having been exposed to the suffering of his countrymen due to the shortage of doctors and health personnel, feels fortunate now that he will be able to help at home.

Faith Openy was born in Uganda on the 14th of May 1955 in a town called Gulu. She spent her early life in Uganda where she went to school and completed her secondary education. After her secondary school education she joined the school of Medical Laboratory Technology in Mulago Hospital where she trained up to a certificate level. Unfortunately, before she could proceed to do Advance Med. Lab. Technology, she was forced to go into exile in Kenya with her parents. She stayed in exile for two years, until President Idi Amin was overthrown, and then returned to Uganda. Then she tried the interview conducted by the Phelps-Stokes Fund and was accepted.

Joseph Oryekot was born in 1958 in Uganda. He started his primary education in 1970 and joined a secondary school in 1977. However, he could not complete his education due to political squabbles that swept the country. He fled to Kenya where he was offered political asylum. Later he was given a scholarship by UNHCR. He was good in Science and Art, completed his course, and was awarded an East African Certificate of Education in 1979. He accepted voluntary repatriation to Uganda by UNHCR so that he could offer to work in the re-construction of his country. His ambition was to join the medical profession and assist the people of his continent in the medical field. His hobbies are: basketball, volleyball, medical journal reading, pen pals, movies.

Benon Mukasa was born the 21st of March 1960, in the city of Kampala, Uganda. He attended primary school and part of secondary school in that city. Due to circumstances at the time, he then moved to Kenya, where he finished his secondary school education. In Kenya, he joined the Phelps-Stokes program to train in a medical field in order to go home after two years to serve his people. He would very much like to serve them as a Laboratory Technician.

Michael Rwamunah was born and grew up in Southern Uganda at a place known as The sweetest land of Uganda because of its climate and mountains. He attended primary school at Mbarara Junior School for seven years. In 1973 he was admitted to St. Henry College, Kitovu where he took a general studies curriculum for 4 years. In 1978 he was admitted to the best college in Uganda known as King's College, Budo. His academic major was medicine. His other interests are swimming, volleyball, pool, travelling and drama, but above all Michael prefer learning new things from foreign lands.

Sarah Kirya just recently joined the DAPA Program in January. Sarah was born in Uganda on February 26, 1961. She studied through High School which she finished in 1979. After graduating, she joined the APT Program and she hopes to be a PA which will be of great help back home.



INTERNATIONAL VISITORS PROGRAM

Department of Community Medicine
Program of International Health & Development

I T I N E R A R Y

APRIL 30, 1980

International Health and Development Program:
"Exchanging and Sharing with the Country of
Somalia"

6:00 - 7:00 p.m. Reception

7:00 - 10:00 p.m. Dinner

MAY 1, 1980

9:00 - 9:30 a.m. M.A. Haynes, M.D.
"Bldg. A" Dean/President of Charles Drew Postgraduate Medical
School

9:30 - 9:45 a.m. J.A. Cannon, M.D., Director
"Bldg. B" International Health & Development Program

9:45 - 10:00 a.m. Johnie Scott, Public Relations Officer
(Coffee Break) Office of Development

10:00 - 10:15 a.m. Hollis Moore, Ph.D., Planning Officer
Dean's Office

10:15 - 10:30 a.m. John C. Fullmore, Fiscal Officer
Dean's Office

10:30 - 10:55 a.m. Wilbert C. Jordan, M.D., Chairman
Department of Community Medicine

11:00 - 11:45 a.m. Raymond Kivel, M.D., Director
Ruth Webb, Clinical Coordinator,
MEDEX-Physician's Assistants Program

12:15 - 2:00 p.m. Cliff Davis, M.D., Medical Director
(Lunch & Site Visit) Larry Roberts, Project Administrator
Hubert Humphrey Community Health Center

2:15 - 4:00 p.m. Leonard Tureaud, M.D., Associate Dean for Hospital Programs
(Site Visit) Martin Luther King Hospital
William Delgado, Hospital Administration
Martin Luther King Hospital
Room 1059 B Conference Room

4:10 - 4:30 p.m. Wrap Up Session
"Conference Rm.B"

APPENDIX D

INTERNATIONAL VISITORS PROGRAM
ITINERARY
PAGE: 2

MAY 2, 1980

8:30 - 9:30 a.m. "Bldg. B" (Site Visit/Coffee)	Larry Alfred, Ph.D., Director Sickle Cell Program
9:30 - 11:00 a.m. (Site Visits)	Betti Jo Warren, M.D., Vice Chairperson Department of Pediatrics Vivian Weinstein, Associate Director Division of Child Development Mary Valley, Project Director Tillmon Child Care Center
11:30 - 1:00 p.m. (Lunch & Site Visit)	Frank Hayes, M.D., Chairman Department of Psychiatry Barbara Butler, Director JAMAA Drug Treatment Program Charles Makins, Project Director Place of Family Alcoholism Program
1:30 - 2:30 p.m. (Imperial Towers, Suite 524)	Thurma McCann, M.D. Department of Obstetrics and Gynecology James Gore, Administrator Perinatal Regionalization Project Carol Smith, R.N., C.N.M., Director Family Life Education Service
2:30 - 3:00 p.m.	Lewis M. King, Ph.D., Director Fanon Research and Development Center
3:00 - 4:00 p.m.	J.A. Cannon, M.D., Director International Health and Development Program
5:15 p.m.	Dinner at the home of Mrs. Neysa Washington



CHARLES R.
DREW
 POSTGRADUATE MEDICAL SCHOOL

1621 East 120th Street
 Los Angeles, California 90059
 Telephone: (213) 603-3041

*Department of Community Medicine
 Program of International Health & Development*

A G E N D A

NIGERIAN DELEGATION -
Tuesday, July 29, 1980

10:00 - 10:30 a.m.	WELCOME	CONF. RM. B
	Dr. M. Alfred Haynes Dean, Drew School	
	Dr. Leroy Weekes, Chairman Board of Directors, Drew School	
10:30 - 11:00 a.m.	Mr. James Tarter, Director Office of Development	CONF. RM. B
	Mr. William A. Delgado Hospital Administrator Martin Luther King, Jr. General Hospital	
11:00 - 12:00 p.m.	GROUP TOUR/ DREW-KING	
12:00 - 1:30 p.m.	LUNCHEON	ROOM 1053- A & B MLK Cafeteria
2:00 - 3:00 p.m.	INDIVIDUAL MEETINGS	
<u>EVENING</u>		
7:00 - 7:30 p.m.	RECEPTION - I/R Bldg.	LOUNGE
7:30 - 10:00 p.m.	DINNER	



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DREW
POSTGRADUATE MEDICAL SCHOOL

1621 East 120th Street
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Department of Community Medicine
Program of International Health & Development

INDIVIDUAL MEETINGS

NIGERIAN DELEGATION

2:00- 3:00 p.m.

Tuesday, July 29, 1980

1. MRS. F.Y. EMMANUEL - Permanent Secretary, Federal Ministry of Health, (Leader of Delegation), and
MRS. S.A. SEWEJE - Deputy Secretary, Institutions and External Organizations, Federal Ministry of Health

Dr. M. Alfred Haynes, Dean, Drew School

Dr. J. Alfred Cannon, Director, International Health and Development Program

(Building A - Dean's Office)

2. MR. D.A. OKOH, Director, Food and Drug, Federal Ministry of Health

Dr. A. Newton Woodard, Associate Director
Family Practice Center II

Ms. Regina Allen, Dietician,
Family Practice Center I

Dr. Mal Fobi, Department of Surgery,
Obesity

Ms. Barbara Butler, Director, JAMAA

Mr. Damu Vusha, Alcoholism Program

Dr. J. Sydney Logan, Department of Pharmacy

(Building B - Conf. Rm. B)

3. DR. B.A.A DADA, Chief Consultant, Medical Statistics, Federal Ministry of Health

Girma Wolde-Tsadik, Ph.D., Director
Biostatistics/Data Processing

Mr. John Slater, Data Processing Systems Manager

(Building D)

APPENDIX E

NIGERIAN DELEGATION - INDIVIDUAL MEETINGS (Cont'd)

4. DR. GABI WILLIAMS, Chief Consultant, Environmental and Occupational Services, Federal Ministry of Health

Dr. Wilbert Jordan, Chairman, Community Medicine
Dr. William Keith, Head, Industrial Occupations
Community Medicine
Barbara Bosustow, Community Medicine
(Building B)

5. DR. J.A. LAOYE, Chief Consultant, Health Education Unit,
Federal Ministry of Health

Ms. Mary Ashley, M.P.H., Community Medicine
Mr. Robert Hanson, M.P.H., Internal Medicine
Ms. Yolanda Williams, M.P.H., Hubert Humphrey

(Building B)

6. DR. E.O.K. KUTEYI - Assistant Director, Medical Services and
Training, Federal Ministry of Health

Dr. Daniel J. Wooten, Associate Dean for
Medical Education
Dr. R. Kivel, Director, MEDEX
Dr. Betti Jo Warren, Assistant Dean for
Student Affairs

(Rm. 5021 - M.L.K.)

7. MRS. O.A. ADEWOLE - Chief Nursing Officer, Federal Ministry
of Health

Ms. Agnes Coleman, Assistant Nursing Director,
M.L.K.

(Rm. 1056 - M.L.K.)

8. DR. MUSA, Director, Institute of Health, A.B.U. Zaria

Dr. Leonard Tureaud, Associate Dean for
Hospital Programs

(Rm. 1060 - M.L.K.)

APPENDIX E

NIGERIAN DELEGATION - INDIVIDUAL MEETINGS (Cont'd)

9. PROFESSOR ENWONWU, Director, National Institute of Medical
Research, Federal Ministry of Health

Dr. John Campbell, Associate Dean for Research
Larry Alfred, Ph.D., Director, Sickle Cell Program
Lewis King, Ph.D., Director, FANON

(Rm. 1E 21 - M.L.K.)

ra



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*Department of Community Medicine
 Program of International Health & Development*

A G E N D A

Visit of Dr. Sanoussi Konate
September 3, 1980

9:00 - 9:30 a.m.	WELCOME Dr. M. Alfred Haynes Dr. James G. Haughton	Dr. Haynes Office Bldg. A
9:30 - 10:15 a.m.	Ruth Webb, Acting Associate Director, MEDEX	Bldg. D
10:15 - 11:00 a.m.	Dr. Ludlow Creary, Acting Chairman, Family Medicine	I/R Bldg. 3-209
11:00 - 12:30 p.m.	KING/DREW TOUR	
12:30 - 2:00 p.m.	LUNCHEON	Room 1053B MLK Hospital



THE AFRICAN-AMERICAN INSTITUTE

1320 19th Street, N.W., Ground Floor, Washington, D.C. 20036 / TEL: (202) 872-0521

BACKGROUND INFORMATION ON:

Dr. Sanoussi KONATE
Deputy Director-General of Public Health
Ministry of Public Health and Social
Affairs
Bamako, Mali

Participant in the International Visitor Program of the International Communication Agency (FY80-256).

VISITING THE UNITED STATES:

August 9, - September 10, 1980

COORDINATOR

Ms. Ann B. Kuhn

ASSISTANT COORDINATOR

Mrs. Patricia O. Ferguson

U.S. DEPARTMENT OF STATE CONTRACT ESCORT INTERPRETER

Mr. Steve Sachs

PRESENT POSITION:

Deputy Director-General of Public Health
Ministry of Public Health and Social
Affairs

PREVIOUS POSITION:

1971-75 - Physician in Kita.

ACADEMIC TRAINING:

Lycee, Bamako, 1957-63.

University of Bucharest, Institute of Medicine
and Pharmacology; 1964-70. (Doctor of
Medicine, 1970)

School of Public Health, Rennes, France;
1975-76. (Certificate of Hygiene &
Preventive Medicine, 1976)

Technical Institute of Alimentation, Paris;
1977. (Certificate in Nutrition, 1979)

ADDRESS:

Directeur General Adjoint De La Sante Publique
Ministère De La Santé Publique et des Affaires
Sociales
Koulouba, Bamako, Mali

KNOWLEDGE OF ENGLISH:

Limited

LANGUAGES:

Romanian, French, Bambara

NATIONALITY:

Malian

DATE AND PLACE OF BIRTH:

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APPENDIX F

Dr. Sanoussi KONATE

Background information (continued)

DIETARY RESTRICTIONS:

None

TRAVELS:

Romania, Spain, France, Austria, Canada,
China, Egypt, Mozambique

AVOCATIONAL INTERESTS:

APPENDIX F



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August 26, 1980

Dr. J. Alfred Cannon
Director of the International Health and Development Program
Charles Drew Post-Graduate Medical School
1621 East 120th Street
Los Angeles, California 90059

Dear Dr. Cannon:

On behalf of the World Affairs Council, I would like to thank you for your assistance with our visitor, Dr. Sanoussi Konate of Mali. Dr. Konate will be visiting the Los Angeles area from September 2 through September 4, and has requested an appointment with you and/or members of your staff. I am hoping to set such an appointment up for Wednesday, September 3 or Thursday, September 4 (in the morning) if your schedule permits it.

I am enclosing a copy of Dr. Konate's biographical data sheet for your reference. Should you have any questions, please do not hesitate to call me.

Once again, Dr. Cannon, thank you for your time and consideration toward our visitor. Your assistance is greatly appreciated.

Very Cordially,

Toni Ferrara

Toni Ferrara
Program Officer

Enclosure: Bio data

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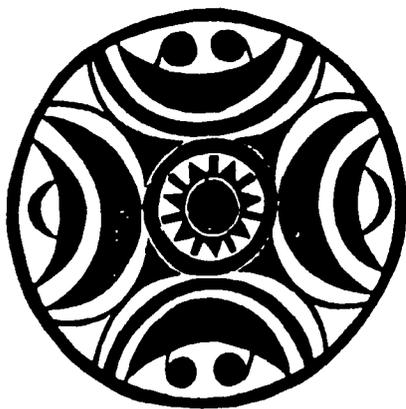
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D. Michael Warren, Dept. of Sociology & Anthropol., Iowa State University
- APRIL 21 A SYSTEMIC APPROACH TO NGBANDI MEDICINE
Gilles Bibeau, Ecole des Sciences Infirmieres, Universite Laval, Quebec
- APRIL 28 PATIENT/HEALER INTERACTION IN SUKUMU MEDICINE
Marlene Reid, School of Nursing, University of Maryland
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Anthony Thomas, Department of Anthropology, University of North Carolina
- MAY 12 AMHARIC MEDICINE: A SYSTEMIC ANALYSIS
Allan Young, Department of Anthropology, Case Western Reserve University
- MAY 19 THE IMPROVEMENT OF HEALTH CARE IN GHANA
Patrick Twumasi, University of Ghana and School of Hygiene & Public Health,
Johns Hopkins University
- JUNE 2 THE COMPARATIVE STUDY OF MEDICAL SYSTEMS IN AFRICA
Horacio Fabrega, Jr., Western Psychiatric Institute & Clinic, Univ. of Pitts.
- JUNE 9 ETHNOMEDICAL SYSTEMS AND HEALTH CARE PROGRAMS
Alfred K. Neumann, School of Public Health, UCLA

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APPENDIX H

INTERNATIONAL HEALTH AND DEVELOPMENT PROGRAM
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