

The Vietnam Rehabilitation Project
USAID Grant No. 492-G-00-98-00011-00
Final Report

INTRODUCTION

On July 1, 1998, Health Volunteers Overseas (HVO) commenced a grant agreement with the U. S. Agency for International Development (USAID) Mission in the Philippines. The grant period, of thirty months, was to build on earlier grant activities funded under Grant No. 493-0002-G-00-2374-00 in 1992 and extended through June, 1998. Both grants addressed these three goals for Vietnam:

- 1) To improve the quality of rehabilitation services and care delivered at the provincial level;
- 2) To strengthen the knowledge and skills of faculty members at medical, nursing, and physical therapy schools around the country; and
- 3) To encourage the development of institutional relationships between U.S. medical and nursing schools and their Vietnamese counterparts.

Additional funding was received for the project in 2000, 2003, and 2004 and thirteen modifications were made to the 1998 agreement. These amendments increased the scope and funding of HVO's involvement but the three overall objectives remained unchanged.

This final report serves as a summary of activities accomplished under this grant and an assessment of overall achievement of the program description objectives.

BACKGROUND

Since this grant built on the activities of the earlier grant, it is important to summarize some of those accomplishments. Vietnam in 1992 was a very different place. The US had no diplomatic relations with Vietnam, an embargo was in effect, and relations with the Vietnamese were still rather wary. In order to work in Vietnam, HVO needed to obtain a U.S. government license to "trade with the enemy."

When HVO began work in Vietnam, it was the first American NGO to sign a memorandum of understanding with the Ministry of Health. Other American NGOs had chosen to work with the Ministry of Labor, Invalids, and Social Affairs (MOLISA). Their work focused primarily on the provision of prosthetics.

The HVO assessment team recognized the needs in the field of rehabilitation were vast and felt a multifaceted approach would have the most impact on improving the delivery of care. HVO's strategy required the implementation of a variety of activities including the introduction of updated clinical content, the strengthening of professional identities (particularly for nurses and physical therapists who play a key role in providing appropriate care), curriculum development and teacher training, professional development, and networking opportunities. These activities

were undertaken with a variety of stakeholders – clinicians, faculty and students, and professional associations.

Rehabilitation was not well understood in Vietnam, and appeared to receive less respect than medicine. Many, if not most, of the physicians responsible for the delivery of rehabilitation services in Vietnam were surgeons. They tended, therefore, to focus on the medical-surgical aspects of rehabilitation, not on the broader continuum of care and services that are the hallmark of rehabilitation. While officials at the Ministry of Health and providers at hospitals around the country indicated that better rehabilitation services were needed and were a priority, the reality was that few resources were allocated to this area. There did not appear to be any prestige attached to working in the field of rehabilitation. In fact, there were some indications that on occasion, physicians were assigned to the rehabilitation department because their skills were judged to be poor.

Also of concern to the HVO assessment team was the fact that rehabilitation services were physician-directed. Physicians made all the decisions regarding treatment plans with no input from other health care providers such as nursing staff or physical therapists. There was no concept of a team of providers working together in a collaborative fashion assessing the patient's needs in a comprehensive manner and developing a treatment plan that would meet the patient's functional, psychosocial and medical needs. HVO felt that any approach to rehabilitation would have to address these issues.

The six years of the initial grant focused primarily on skill training. HVO volunteers provided training through a series of workshops on various clinical topics related to rehabilitation. Workshops were also held to develop curricula in physicians' residency training, in rehabilitation nursing, a university level BS degree in nursing, and the first BS degree in physical therapy.

Under the first agreement, university linkages were developed, partnering three US universities with nursing departments at universities in Danang, Ho Chi Minh City, and Thanh Hoa.

Support was provided to national rehabilitation associations for their conferences and key representatives were sent abroad to attend international conferences, an important activity given Vietnam's long isolation from the world. Many textbooks were donated, and a number of rehabilitation supplies were sent to institutes throughout the country.

Shortly before the grant ended in 1998, a national rehabilitation workshop was held, which brought together rehabilitation professionals, ministry officials, NGO representatives, and, most importantly, representatives of the Vietnamese community of people with disabilities. This was the first time they were included in any such conference and they were very eager to voice their thoughts and concerns. The purpose of this workshop was to bring together partners in the rehabilitation field and assess future directions.

The workshop had such an impact that it became the catalyst to develop the Disability Forum, which became a key component of HVO's work under the new grant. While HVO continued its multifaceted approach of improving rehabilitation care, as described above, the scope and focus of its activities expanded to include the clients of rehabilitation services – people with disabilities (PWDs).

This was a time of change in Vietnam – politically, economically and socially. The long period of geopolitical isolation was coming to an end, new trading opportunities were developing, and economical activity was on the upswing. Internally there were changes as well in terms of social and political realities. One change that was noticeable was the increasing number of self-interest groups that were developing outside the established system. The easing of political restrictions impacted on social constraints and, as in any vibrant society, consumers play a role in voicing their needs. HVO was able to build on this opportunity, thanks to the ties that had been developed with institutes and universities, as well as the strong administrative abilities of its management team.

ACCOMPLISHMENTS

The Disability Forum

In 1998, as noted in HVO's proposal, "the field of rehabilitation in Vietnam, at present, therefore, functions as a disparate sum of its components." HVO's aim, was "to facilitate the development of a stronger, more effective, and integrated rehabilitation sector in Vietnam."

Based on the positive response generated from the March 1998 national "Workshop on the Rehabilitation and Reintegration of People with Mobility Impairment and Other Disabilities", working groups were developed and invited to a series of retreats to focus on specific technical issues. A monthly newsletter was developed, as well as an ongoing calendar of events. Most importantly, efforts were initiated to identify existing groups for people with disabilities (PWD) and to facilitate their networking with other groups and with rehabilitation professionals. There was a great deal of interest and enthusiasm among the PWD community, with their desire to discuss a wide range of social issues (education, employment, family life, sports, etc). With national meetings held twice a year, the momentum developed to establish a national organization that could serve as a network and advocate for disability issues.

Vietnamese law, however, did not permit the establishment of associations. Under the NGO Resource Group in Hanoi, there had been a Disability Working Group which had been dormant for several years. It was determined that that group would be reactivated as the Disability Forum. HVO was selected by USAID as the umbrella organization under which it would be mentored and housed.

Creating an independent association in a country which does not have a history of civil society and in which people are encouraged to work only within recognized government-approved

associations presented numerous challenges. HVO was able to do this through a strong management presence on the ground and the ability to develop good working relations with many of the established and nascent self-help groups, as well as the abundance of good will that resulted from the 1998 workshop.

In 2000, the Disability Forum was established. A coordinator was hired, an office was set up, and the organization sponsored a workshop on employment for people with disabilities. Throughout the grant period, HVO and the Disability Forum shared an open office so that HVO could work closely with the Forum and provide an on-going example of organizational structure and management. Additionally, HVO worked closely with the Forum staff to mentor them on leadership and skill development. Staff training was provided and HVO assisted with proposal writing and funding resource development.

The Disability Forum was asked in 2001 to assist MOLISA (Ministry of Labor, Invalids, and Social Affairs) in organizing Campaign 2001, a regional international conference that brought together 1700 delegates. The Disability Forum was to take the lead in involving local PWD groups in the decision-making process. The conference proved quite successful and resulted in the Japanese delegation making a \$1600 contribution to the Disability Forum.

The following year, Campaign 2002 was held in Osaka, Japan and four people with disabilities were sponsored as part of the Vietnamese delegation. Upon their return, they shared their experiences with Forum members. They were particularly impressed by the barrier-free accessibility in Japanese public venues and hoped something similar would be available in Vietnam.

Three-wheeler bike trips from Ho Chi Minh City to Hanoi were organized by some of the PWD groups in 2002 and 2006. These were sponsored in part by the Disability Forum and helped build issue awareness as the travelers biked their way the length of the country, stopping off in villages along the route.

A website and online discussion group were developed in coordination with the United Nations Development Program (UNDP), which helped to disseminate information even further throughout the country.

At the invitation of the Landmine Survivors' Network, the Disability Forum Coordinator and HVO's Project Coordinator participated in the 2003 Ad Hoc Committee meeting at the UN in New York to discuss the convention on disability. Two years later, the Disability Forum's Communications Officer was invited to serve as a delegate to the Young Women's Feminist Advocacy and Leadership Institute in Thailand, where she was one of only a few delegates with disabilities. This international exposure increased the networking possibilities for the Disability Forum, increased staff awareness to the issues facing PWDs around the world, and highlighted Vietnam's role in the PWD movement.

In 2001, amidst conducting workshops and organizing events for PWD awareness, the Disability Forum hosted a small gathering of PWD representatives to celebrate International Day of Disabled Persons in Hanoi. Five years later, the celebration had become a major annual event, honoring International Day for AIDS Awareness, International Day of PWDs, and UN Volunteer Day, with thousands gathered in a Hanoi Park, speeches by Vietnamese and foreign officials, and TV coverage.

Over the years, workshops were offered on inclusive education, employment, web publishing, formation and management of self-help groups, strategic planning, accessible information and communication technology, training in job seeking (including interviewing and resume writing skills), gender issues, and information on government decrees related to PWDs and the development of associations, as well as the Millennium Development Goals set by the UN. Working groups addressed issues such as accessibility and advocacy.

In mid-2005, the training focus changed somewhat so that the Disability Forum had an in-house training capability and was able to offer trainings to PWD self-help groups and others. This was planned as one avenue toward self-sustainability.

As another aspect of sustainability, the Disability Forum began going after grants on its own. In October 2003, the Good for Business project was approved for funding in the amount of \$5,000 by the American Chamber of Commerce. Through the project, businesses were contacted and encouraged to hire people with disabilities. A videotape was made, demonstrating how pleased both employers and employees were with the results. This project proved successful enough that it received additional funding, in larger increments, each year to the present, where the annual funding is now \$10,000.

Funding was received through the World Bank at its Innovation Day event. The focus in 2003 was on Disability Issues and the Disability Forum was awarded a \$10,000 grant for its project, "Hanoi for All – Barrier-Free Tourism", which was lauded as the best project submission.

HVO and the Disability Forum participated in the inaugural meeting of the Asia Pacific Disability Forum (APDF) in Singapore in 2003, and became charter members. The international regional networking through organizations and conferences has really helped to galvanize the self-help groups as they realize their abilities and strength in numbers.

In June 2004 planning got underway to establish the Disability Forum as a legally-recognized association since the government had released guidelines a few months earlier which allowed such a development.

The Disability Forum encountered a number of roadblocks over the years. Initially, there was concern with the name in Vietnamese, as it seemed to have a political connotation. There was also concern on the part of the Vietnamese government that hosting large groups of people was, again, some sort of political meeting. Over the years, those concerns faded away and the

government seemed to take its lead at times from activities the Forum was planning, although never attributing the ideas.

The process of becoming a legal, local NGO was a long and complicated process which took a full two years. Since “independent” associations could not really exist, there had to be an umbrella organization under which the Disability Forum could function. Many were approached but there were always significant hurdles – bureaucratic, financial, etc. The Disability Forum finally became a legal NGO, known as IDEA (Inclusive DEvelopment Action) under the umbrella of the Vietnam Foundation for Science and Technology (VFST) in late 2006.

Institutional Development

Initial grant plans called for modeling a team-based approach to rehabilitation at two centers in the country – Bach Mai in Hanoi and the Danang Rehabilitation Center. There was some concern about Danang’s participation, since it was run under MOLISA, rather than MOH, but after a year’s worth of discussion, agreement was reached that the two sites would serve as models. Part of the delay was also due to the plan to work with amputees, but the workshop in Hanoi was only involved with orthotics.

Workshops were held in both Hanoi and Danang, and the teams consisted of HVO volunteers, with a physiatrist, a physical therapist, and a nurse modeling the interaction of the disciplines. The workshops were well-received and the technique was used on patient rounds. Follow-up workshops were conducted some months later and Danang was most eager to implement the process in their center. The situation was different in Hanoi, as senior physicians, with the power to implement change, were not willing to participate without a stipend. The residents involved were interested but did not have the power to make the change. The nurses seemed the most empowered from the workshop but it was doubtful that they could effect the change in routine.

HVO also pursued institutional development in the early grant years through the promotion and support of national associations, in nursing and physical therapy. The Vietnam Nurses’ Association (VNA) was in existence but the only physical therapy association was a local one in Ho Chi Minh City, which operated under the umbrella of VINAREHA, the Vietnam Rehabilitation Association, which consisted primarily of physicians. They did not want the physical therapists to form a separate organization, or to expand the local HCMC group into a national association.

HVO supported national conferences for VNA in 1998 and 2000, and for VINAREHA in 1998, 2000, 2001, and 2002. Support was also provided over the years for the publication of the VNA’s nursing journal. There was also an attempt to make contact with ASEAN, the Association of Southeast Asian Nurses on behalf of VNA, but there was a lack of follow-through on the part of VNA.

In late 1998 and again in 2000, national workshops were hosted to develop curricula for nursing and physical therapy degree programs, with the input of HVO volunteers who offered their academic expertise. The following year, a national workshop was sponsored to begin work on a bridging curriculum for nurses and other allied health professionals who wished to upgrade their current degrees to a bachelor level.

It was satisfying to see the nursing and physical therapy degree programs finally implemented and, in 2005, HVO nursing volunteer, Dr. Jill Derstine, began meeting with Vietnamese faculty in HCMC to review their curriculum for a proposed master's degree in nursing. A year later, a workshop was held to present the proposed program to the appropriate ministries for approval. The master's program was scheduled to begin in September, 2007.

Two leaders of VNA were sent to the International Council of Nurses (ICN) conference in London in 1999. An abstract on Vietnam was accepted and the leaders, along with HVO nursing volunteers, participated in a symposium. This was quite an honor and an acknowledgement of VNA's progress as an organization, which was accorded "association in contact" status at the conference. In 2001, two other VNA leaders were sponsored to attend the ICN conference in Denmark, and two HVO nursing volunteers had a poster presentation on Temple University's linkages with Vietnam.

Training was provided to VNA on developing focus groups in nursing so they could get a better understanding of nursing needs in the country, in preparation for a national survey.

The retired Executive Director of the National Student Nurses' Association in the US made two trips to Vietnam to work with the VNA on management and leadership training. While it was hoped that a member of the VNA could do an internship with the American Nurses Association, it was determined that the VNA had not yet developed to the point where it would be worthwhile.

Early 1999 saw the publication of an article, "Nursing the Asian Population: Sharing the Common Culture of Nursing" in the nursing journal Advance for Nurses. It was co-authored by one of the VNA vice-presidents and an HVO volunteer who served as a member of the Technical Advisory Group. Throughout the grant, HVO volunteers worked to collaborate with their Vietnamese colleagues on publications. This gave the Vietnamese exposure to the rigors of scientific publishing, and it allowed them to share their experiences with health care professionals abroad. (An appendix is attached with the publications that resulted from this grant experience).

In June 1999, three physician members of the MOH Rehabilitation Steering Committee spent two weeks on a study tour of Rehabilitation Management at Philadelphia's Thomas Jefferson Hospital. The three also spent time at the Magee Rehabilitation Center, one of the country's regional centers. A positive outcome of the experience was the Vietnamese delegation's increased awareness of the US reliance on trained personnel rather than specialized equipment.

In addition to training and other learning opportunities, the physical infrastructure was upgraded through the donation of communications and computer equipment to the VNA offices in Hanoi and HCMC, the Therapy Department at the MOH, the Physical Therapy Department at the University of Medicine and Pharmacy in HCMC, nine medical universities, three medical secondary schools, as well as PWD groups. A wireless network was installed at the Danang Rehabilitation Center to improve the utilization of the newly computerized patient records.

In 2000, discussions with VIETCOT (Vietnamese Training Centre for Orthopaedic Technologists) resulted in a decision to collaborate on a program of training in orthotics and prosthetics. Fifteen qualified participants were selected from around the country and supported in the one-year course. In the ensuing years, 41 students graduated from the one-year orthotics course and six students graduated from a rigorous three-year prosthetics course. Each student received a technician's tool box upon graduation and was placed for six-month clinical rotations in government-run P&O centers in Vietnam.

University Linkages: In December 2001, the new administration at School #2 in Danang indicated that they were no longer willing to cooperate on the university linkage, so it was terminated. Relations were quite positive at Hue Medical University, so it was decided that a linkage would be formed there with Temple University. The nursing department proved to be a good linkage. Workshops were offered for the faculty and students in various nursing specialties: obstetric, pediatric, surgical, and psychiatric. A visit was coordinated with the Dreyfus Foundation and their concept of "Problem Solving for Better Health (PSBH)" was introduced. The first workshop was conducted in March 2004 and students assessed conditions in a local community and then developed sustainable plans to address the problem. With funds from The Dreyfus Foundation, the projects were implemented. Additionally, The Dreyfus Foundation identified one of the Hue faculty members to travel to Indonesia for further training in the "PSBH" method. After the second "PSBH" workshop, it was determined that the concept was very well-received and should become a regular credit course in Hue's Bachelor of Nursing program.

Since the College of New Rochelle had not been able to develop its linkage with the University of Medicine and Pharmacy in HCMC, they decided to approach another larger US university to help with their efforts. A team from the Nursing Department at Texas Tech was approached, as their university has a large Vietnam Center, and a joint visit was arranged to HCMC. Although the visit went well, there were significant differences in style and approach and it was determined that a joint US linkage was not appropriate.

In November, 2006 TAG member Dr. Jill Derstine visited the various nursing sites to assess the impact of the university linkages. She felt all three schools had "definitely benefited and improved." She noted the following improvements: in HCMC's University of Medicine and Pharmacy, "the creation of the baccalaureate program, the many teaching aids and models, and, finally, helping Friendship Bridge with the masters program; in Hue, enhancement of the

Bachelor's program and development of the "PSBHN" workshops; in Thanh Hoa, teaching English, supplying models, and working with faculty and students."

While there were certainly successes with the university linkages, it must be stated that the model has significant limitations and even flaws. The goal of such a model is to create a relationship that will support and promote the exchange of information and resources between the said institutions in a spirit of collaboration. The reality, however, is that a linkage is usually tied to an individual and if that individual leaves the university, chances are that the linkage will not continue. There were many attempts by the HVO volunteers to embed the linkage as an integral part of the US university department, but differing budget and academic priorities invariably meant that the linkage was still tied to the individual who initiated the idea. The HVO volunteers were successful in recruiting colleagues within their faculties to volunteer and everyone involved felt the experience was extremely positive and beneficial. Such dedication on the part of individuals can certainly bring substantive changes to the project, but it does not allow for sustainability without the full commitment and resources of the university as a whole.

Quality Assurance Project: HVO was asked to work as a sub-contractor with the University Research Co. (URC) in 2003 to improve the quality of services at two pilot sites in Vietnam. After lengthy negotiations with the Vietnamese government and discussions with possible sites, it was determined that some sites either did not understand the concept or were not interested and the Danang Rehabilitation Center (DRC) was selected as the sole focus of attention. The first visit from the URC team was in March 2004, at which time it was decided that the effort would focus on two issues – cerebral palsy and stroke (CVA). HVO recruited medical teams with that expertise and the first team visited in August 2004. Subsequent visits focused on the specific conditions, with three for CP and two for CVA. The on-going contact with specialists allowed information to be reinforced (as each team reviewed the other's efforts on each visit) and adjustments to be made when necessary. Since much of the effort involved changing systems and treatment, the staff kept in contact with the specialists through e-mail so questions could be addressed quickly.

Located just behind the DRC is Hospital C, operated by the Ministry of Health. Although the MOH had opted out of participating in the Quality Assurance Project, Hospital C has a very dynamic and progressive physician in charge of their rehabilitation department. Dr. Binh took it upon herself to participate in the workshops on CVA and, indeed, her staff was the first to grasp and, more importantly, implement the treatment methods. During one of the CVA workshops, it was pointed out that smoking can contribute to and exacerbate the risk of stroke. As a result, there are now posters around the facilities advising people against smoking and, indeed, the staff is no longer allowed to smoke in the facility.

During a follow-up meeting with Dr. Binh in May 2007, she expressed her enthusiasm with the training her staff had received on quality assurance and stroke care. They had taken the concepts learned and applied them to other clinical topics. As a result of applying the concept to patient rounds, individual patient time spent with the doctors had been decreased but patient group

therapy treatment time was extended. The patients appreciated the group interaction and attained their treatment goals at a faster rate rather than working alone. This meant patients were able to move through their treatment more quickly and the physicians' time was freed to see more patients and attend to other clinical duties – an improvement for everyone!

The Quality Assurance Project started with a basic problem. The contractor, URC, had met with the staff of the Danang Rehabilitation Center and they decided to address the problems of CP and CVA. However, this was prior to HVO's involvement so these issues were presented as the focus of the project. Unfortunately, had HVO been consulted initially, CP would never have been selected as a target area. CP is an extremely complex problem and physicians in the US are widely divided as to how to provide treatment. Trying to tackle that issue in Vietnam, and particularly with a pediatric focus, was very difficult and frustrating for all involved. That said, the HVO volunteers proceeded with the project as planned and began to tackle a basic problem with the centers – the lack of documentation in medical charts. The very act of each health care provider documenting what treatment, therapy, etc was provided and what should be continued was a big step forward in patient care.

One year after the start of the Quality Assurance Project, URC had depleted their funds and felt the project should close. Having made commitments to our Vietnamese colleagues and feeling the project was just making headway, HVO continued the project on its own. The Quality Assurance methodology had been difficult for the staff at DRC to grasp so, having seen the success of the “Problem Solving for Better Health” process, HVO worked with the Dreyfus Foundation to introduce those concepts at the Danang Rehabilitation Center for 33 staff members. The concepts proved more understandable, partly since individuals identify problems and then work with their colleagues to address them. The discussions resulted in a number of problems (both administrative and clinical) actually being solved.

The Quality Assurance and “Problem Solving for Better Health” methods allowed staff members at the Danang Rehabilitation Center and Hospital C to understand that issues can be addressed by clearly defining a problem, establishing roles in a system, and working toward a solution in small, easily handled increments. It is a process that is applicable to all aspects of life, not just the work environment.

Professional Capacity Development

Professional development of health care workers as well as the upgrading of institutes took numerous forms, through training, equipment donations, attendance at conferences, etc. Highlights are as follows:

Workshops:

- 23 rehabilitation doctors from all regions of Vietnam participated in a workshop on Prosthetics for Rehabilitation Physicians.

- 42 clinical instructors of physical therapy trained in courses offered in Ho Chi Minh City and Hanoi in July, 1999.
- 34 participants, both rehabilitation doctors and physical therapists, jointly participated in a Functional Anatomy workshop in March, 2000. Functional anatomy was not a component in the Vietnamese curriculum, so this was a new concept that was much appreciated.
- Week-long pediatric rehabilitation workshop held at the National Institute of Pediatrics in Hanoi; HVO team of 2 nurses, an OT, and a PT felt the time spent working with the staff – in both clinical and didactic teaching – made a significant impact.
- Team approach workshop, conducted by members of Temple University’s faculty, held for staff at Hue Medical University. The concept was a new one, but the staff worked hard to begin implementing the methods. Nine months later, follow-up workshop held and team saw that the practices taught were, indeed, being implemented in the university.
- Series of update courses provided for 670 community-based rehabilitation volunteers, in conjunction with MOH.
- Hemiplegia update course was sponsored for 66 MOH health professionals in Nha Trang and a course on paraplegia was held in Vinh for 70 participants and in Hue for 55.
- 60 participants received further training in cerebral palsy at the National Institute of Pediatrics, as did 45 in Nha Trang. Courses were also provided on the treatment of amputees and post-surgical care.
- Nurses’ skills in research methodology upgraded through 4 trainings, beginning in 2002, as requested by VNA.
- Workshop held in Nam Dinh to edit nursing textbooks in 2003.
- Supporting the new BS/Physical Therapy degree program, HVO volunteers offered courses in Proprioceptive Neuromuscular Facilitation (over three years), Lifespan Development (over two years), and the Management of Musculoskeletal Dysfunction (over two years).
- 35 participants, including doctors, nurses, and physical therapists, benefited from a workshop on spinal cord care jointly sponsored by the Royal Talbot Spinal Cord Unit (Australia), the HCMC Spinal Cord Unit, VVAF, and HVO. The workshop allowed all

stakeholders in Danang to review the spinal cord care process so each step was better understood and collaboration was improved between the various institutes.

Equipment donations:

- 500 knee braces from Smith and Nephew donated to the Bach Mai Rehabilitation Department.
- Communications and computer equipment installed at Vietnam Nursing Association offices (Hanoi, HCMC), Ministry of Health Therapy Department, and PT Department at the University of Medicine and Pharmacy (HCMC).
- Communications and computer equipment installed at 9 medical universities, 3 medical secondary schools, and the Disability Forum.
- Geriatric and pediatric manikins donated to Hue Medical College and an IV arm was provided for Thanh Hoa University.
- Computer and LCD projector provided to Hue Medical College.

Book donations:

- 600 sets of the Physical Therapy Update Course and the Clinical Rehabilitation Resource Collection distributed to clinics, hospitals, and schools around the country.
- Nursing textbooks, donated by the local chapter of the International Honor Society of Nursing (Sigma Theta Tau) at NY's Mount Saint Mary's College, were delivered to School #3 in Ho Chi Minh City. Another 5,000 nursing texts were donated by the Sabre Foundation and shipped to the University of Medicine and Pharmacy.
- More than 70 physical therapy textbooks were procured to help develop the library in the Physical Therapy Department at the University of Medicine and Pharmacy.

Networking opportunities:

- HVO hosted a meeting in Washington DC to bring together nurses from various NGOs working in Vietnam, to strive for better coordination.
- Nursing communication internet site developed by HVO volunteer, while working with a team of volunteer nurses from Columbia University's Teachers' College, became operational in May, 1999. The site provides interactive assistance in addressing basic nursing issues, and was developed based on a site visit to Thanh Hoa University.

Conferences:

- Nursing Science Research conference, supported by HVO in December 2000, in conjunction with the 40th anniversary celebration of Nam Dinh Medical School. Dr. Patricia Jones, a professor from Loma Linda University School of Nursing and an HVO volunteer, reported that the conference was very much of an interdisciplinary one. “Doctors and nurses were each presenting their clinical empirical investigations to an interdisciplinary audience. There was excitement about their studies, their findings, and the opportunity to showcase what they had done and its relevance to impact clinical practice.”
- Two rehabilitation doctors (from Hue Medical University and Bach Mai) sent to Amsterdam to participate in the International Society of Physical and Rehabilitation Medicine conference in July, 2001.
- Nursing staff member of HCMC’s University of Medicine and Pharmacy sponsored to attend the Global Society for Nursing and Health conference on palliative care held at NY’s Mount Sinai Hospital. Ms. Nguyen Thi Ngoc Suong was invited to give a presentation at the conference and, upon her return, she reported on the conference to her university colleagues.
- Head of the Rehabilitation Department at the University of Medicine and Pharmacy, and President of the PT Association of HCMC, Ms. Nguyen Thi Huong, was a participant at the 2003 World Congress of Physical Therapists in Barcelona, Spain. Having just completed a year of graduate work in Edinburgh, she felt the experience built on the knowledge she’d gained during the year and was eager to return to HCMC and apply such knowledge.
- PWD leader from HCMC, Mr. Tran Ba Thien, was invited to present on a panel in July 2003, addressing Community Health and People with Disabilities, as part of a Community Development Society conference held at Cornell University. The panel focused on building social awareness of people with disabilities.
- Assistant Head of the Nursing Department at the University of Medicine and Pharmacy, Ms. Nguyen Thi Suong, attended a regional nursing conference, “Windows on the World: Regional Conference on Collaboration in Cross-Cultural Nursing in Asia-Pacific” held at the Nagano College of Nursing in Japan in 2003. The conference was well-received and the participants found the information sharing across cultures quite helpful.
- Two HVO physiatrists made two week-long visits to work with eight Vietnamese physicians at the Spinal Cord Center to address issues such as medical examinations for

patients with spinal cord injuries and pressure sores. Both physicians also presented at the Asian Spinal Cord Network conference held in Vietnam in November, 2005. HVO also sponsored the conference attendance of 4 participants from Danang.

- Deputy Head of the Physical Therapy Department at the University of Medicine and Pharmacy, Ms. Nguyen Anh Chi, attended the 2005 World Congress of Physical Therapists in Seoul, Korea.

Publications:

- Participants received course manuals in Vietnamese for nearly all HVO workshops, so that material could be reviewed and shared with colleagues.
- The June 1999 issue of “Orthopaedic Physical Therapy Clinics of North America: Physical Therapist Interventions for the Underserved” contained three inter-related articles written by HVO volunteers about their experiences in Vietnam, which received the Michigan Physical Therapy Association’s Margaret Holton Award for the most valuable paper contributing to clinical practice. (See attached appendix for publications).

CHALLENGES ENCOUNTERED

Two issues continually posed problems. Salaries at the government-run facilities were quite low so staff members often looked for other means of income. In many cases, that meant working in the private sector in the afternoons, which meant that staff members at the centers were just not available, despite patients waiting there for them. One way the government tried to compensate for the low salaries was through travel perquisites. Staff members often viewed trainings not as a way to increase their knowledge and improve their skills but as a means to pocket per diem. HVO learned very early not to provide per diem for trainings but to pay hotels directly or to reimburse participants based on receipts submitted afterwards.

Since trainings were considered a perquisite of the job, it was often difficult to identify appropriate workshop participants. Based on HVO volunteers’ experience working in various facilities, they may have identified skilled health care workers who could benefit from further training. Often, though, those people were denied the training since “it was not their turn” to receive such a benefit. Occasionally, inappropriate people were sent to trainings, only to be sent home by HVO, since they didn’t have the requisite skills to attend in the first place. Obviously, this problem was most problematic with regards to international training. On several occasions, training participants requested by HVO were not allowed to attend. In those cases, much negotiation took place to ensure an appropriate person attended, or the invitation was withdrawn. In some cases, when facilities proved so intractable, they were dropped from any further travel considerations.

PROJECT SUSTAINABILITY

Effecting behavioral change in a different culture is never easy. Harder still is changing attitudes. It is particularly difficult to effect long-term change through short-term funding cycles. HVO's success in Vietnam is due in large part to the dedication and commitment of its volunteers, a group of health care professionals with strong clinical and academic skills. Special mention goes to the members of HVO's Technical Advisory Group who served the project well with their excellent advice and guidance, as well as their dedication and enthusiasm. This group, several of whom served since the project's conception, consisted of two nurses, a physical therapist, a physiatrist, and an orthotist. Each of them volunteered on multiple occasions and helped maintain a sense of continuity and progression through their advisory role in the US and in Vietnam. Their excellent credentials provided the imprimatur to work closely with ministry officials and to develop degree programs that are now in place.

The orthotic trainings at VIETCOT have received international-standard Category 2 qualification from ISPO (International Society for Prosthetics and Orthotics) and the employment rate of program graduates has been very high.

The development of curricula for resident physicians, as well as BS degree programs in nursing and physical therapy are very tangible results of the work HVO has done in Vietnam. The university linkages have resulted in many curriculum changes. In focus groups conducted in Hanoi, Danang, and HCMC, faculty reported that the assistance provided has helped in the development of teaching materials and content. Indeed, content and materials provided through the workshops have formed the basis of approximately 70% of their class information. They also reported that "the media assistance, computers, and anatomical models have been vital in improvement of the quality of teaching and promotion of active learning methods."¹

Through the "Problem Solving for Better Health – Nursing" workshops at Hue Medical College, the students were directed to go out into the community and develop their projects based on the local needs and resources. As part of the process, students kept written records of the progress seen in these activities. Each student or group of students also provided a final report which measured the change in behavior.

One project example was that a nursing student noted the reluctance of many parents to immunize their children, having seen side effects of the inoculation and not understanding that the side effects were minor occurrences but that the immunization would have far reaching consequences. Having recognized this problem, the student set up an educational program, utilizing posters and a PA address system. Some six months later, during follow-up on the project, the student tested the parents and found that they were educated about the side effects and understood the importance of having their children immunized.

¹ Dunleavy, Kim: Notes from focus group conducted in Ho Chi Minh City, March 2006.

The success that has been evidenced through this “Problem Solving” process, as well as the enthusiasm and dedication that the students have exhibited, led the medical college to include this course as a required part of their nursing curriculum.

Other results are more subtle. Much of HVO’s work involves changing attitudes and behavior. Small changes in technique or care can provide significant improvements in a patient’s well-being. One such change was a discussion with nurses about turning patients to avoid bedsores, which was a severe problem at one of the hospitals. On a follow-up visit, HVO volunteers were thanked by nurses at the hospital, with tears in their eyes, who said such a change had alleviated the bedsore problem! By working with students and faculty at medical institutes, HVO is developing the knowledge base of these professionals by meeting them where they are, and taking them to the next level of understanding. The connections that have been developed are a crucial element, because the faculty will continue to raise questions and concerns with their US colleagues through e-mail. Through these collaborations, knowledge through understanding is developed.

Over the fourteen years, many teachers have been trained and, with their training, attitudes and behaviors have changed which will be transmitted to future generations of students. In all workshops, HVO tried to model the concept of working as a rehabilitation team. While there is still much room for improvement, HVO volunteers have noticed more respect shown for both nurses and physical therapists, who had previously been viewed as assistants who were just carrying out the doctors’ orders. There is now a better understanding that each profession has its own set of skills and each is important in contributing to the patient’s care.

The inclusive aspect of the project was a key strength. In workshops, all three regions of the country were included. In a country that had been divided for so long, this was not always easy. There was resentment at times, and there were definitely different skill levels, based on the medical exposure available in the regions. However, this lessened over time and there seemed to be a better awareness that issues should be addressed as a nation. Likewise, at the workshops, the HVO volunteers worked in a multi-disciplinary manner, modeling how patient evaluation and treatment are determined through the input of different disciplines. The communication among team members set an example of mutual professional respect and consideration of the broader lifestyle issues involved in rehabilitation.

The legalization of the Disability Forum as a local NGO was a major accomplishment. Its role in the region, through international conferences and affiliations such as the Asia-Pacific Center on Disabilities (APCD), has given it recognition as a national network for PWD issues among embassies, the government, NGOs, and among PWDs themselves. The staff has received training in management skills and they have made significant strides over the years in seeking funding, from the United Nations Development Program, the New Zealand Embassy, the American Chamber of Commerce, the British Embassy, and the World Bank. They are exploring other avenues of funding, such as membership dues, and their plan to offer training courses is a viable one. Whether or not they are able to obtain funding from Vietnamese donors remains to

be seen. If they can maintain the organization based on expatriate donor funding, and build their reputation over the next few years as a skilled training organization, there is a strong likelihood that IDEA can remain a vital player in the disability network throughout the region.

Perhaps the biggest impact the project has had is the empowerment of people with disabilities. Through the workshops and the team approach, which involves input from the patients, awareness was raised that the patient will be faced with disability-related issues for his entire life so it was crucial to prepare him for such. The Disability Forum took the issue further by working with groups of people with disabilities and empowering them. As the grant comes to a close, Vietnam is one of the early signatories to the new UN Treaty on the Rights of People with Disabilities. This is truly a long journey from the situation fifteen years ago, when the grant agreement commenced.

SUMMARY

Through two consecutive grant agreements over nearly 15 years, Health Volunteers Overseas (HVO) has addressed the following three goals:

- Improve the quality of rehabilitation services and care delivered at the provincial level;
- Strengthen the knowledge and skills of faculty members at medical, nursing, and physical therapy schools around the country; and
- Encourage the development of institutional relationships between U.S. medical and nursing schools and their Vietnamese counterparts

The first goal was addressed through workshops, in-service trainings, support for students at the VIETCOT center, the Quality Assurance Project, and the introduction of the “Problem Solving for Better Health” methodology.

Faculty knowledge and skills were strengthened through workshops at universities and institutes, improved curricula, and by attendance at national and international conferences. Facilities at schools were improved through the provision of computers and internet connections, as well as teaching materials and equipment (textbooks, manikins, orthopaedic tools, etc).

Institutional relations were developed at the university level primarily in the nursing field. Initial contact with physicians in the south was more limited and those in the north did not seem interested in pursuing university linkages. However, a great deal of support was provided to the Vietnamese rehabilitation structure, through support for the Vietnamese Rehabilitation Association, the Vietnam Nurses’ Association, curricula development at the university level, and the development of the Disability Forum.

The Disability Forum, with its empowerment of people with disabilities through public awareness, advocacy, and training may have the largest impact. PWDs now feel more confident to express their opinions and stand up for their rights. That may be the most powerful motivating force in reshaping rehabilitation in Vietnam in the coming years.

ACRONYMS:

APCD:	Asia-Pacific Development Center on Disabilities
AmCham:	American Chamber of Commerce
CP:	Cerebral Palsy
CVA:	Cerebral Vascular Accident
DF:	Disability Forum
DRC:	Danang Rehabilitation Center
IDEA:	Inclusive Development Action
ISPO:	International Society for Prosthetics & Orthotics
MOH:	Ministry of Health
MOLISA:	Ministry of Labor, Invalids, and Social Affairs
NCCD:	National Coordinating Committee for Disabilities
OT:	Occupational Therapy
PSBH:	Problem Solving for Better Hospitals
PSBN:	Problem Solving for Better Nursing
PT:	Physical Therapy
PWD:	People with Disabilities
QAP:	Quality Assurance Project
TAG:	HVO's Technical Advisory Group
UNIFEM:	United Nations Development Fund for Women
URC:	University Research Co.
VFST:	Vietnam Foundation for Science and Technology
VIETCOT:	Vietnamese Training Centre for Orthopaedic Technologists
VINAREHA:	Vietnam Rehabilitation Association
VNA:	Vietnam Nurses' Association

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Appendix 1

Volunteers Who Served in Vietnam

<u>Name</u>	<u>Dates</u>	<u>Specialty</u>
Caroline Camuñas, EdD, EdM, RN	August, 1998 August, 1999	rehabilitation nurse
Li-Ling Hsu, RN	August, 1998*	rehabilitation nurse
Mary Bantell	August, 1998*	
Elizabeth Kay, PT, PhD (TAG member)	December, 1998 March, 2000 November, 2000 June, 2001 * December, 2001 March, 2004 September, 2004 March, 2005 December, 2005 November, 2006 *	physical therapist

* Funding for this travel was provided by a source other than USAID.

Marie O'Toole, Ed.D, RN, CRRN (TAG member)	December, 1998 August, 1999 June, 2000 October, 2000 December, 2001	rehabilitation nurse
Patricia A. Bailey, EdD, RN, CS	March, 1999	nurse educator
Kathryn W. Skinner, PhD, MSW	March, 1999	social worker
Shirley M. Wilson, MSN, RN, CS	March, 1999	nurse educator
Todd Kuiken, MD, PhD	June, 1999	physiatrist
Mary Beth Walsh, PT, MA.Ed	July, 1999	physical therapist
Alice Salzman, PT, EdD	July, 1999	physical therapist
Jill Derstine, EdD, RN, FAAN (TAG member)	August, 1999 March, 2000 November, 2000 March, 2001 December, 2001 June, 2002 March, 2003 March, 2004 May, 2005 June, 2005 July, 2005 March, 2006 November, 2006	rehabilitation nurse

Hurdis Griffith, PhD, RN, FAAN	November, 1999	nurse educator
Robert Piemonte, EdD, RN, CAE, FAAN	November, 1999 October, 2000	nurse educator/ association director
Steven Hinderer, MD, MS, PT (TAG member)	March, 2000	physiatrist
Kim Dunleavy, MS, MOMT, PT, OCS	March, 2000 February, 2005 March, 2006	physical therapist
Celia Pechak, PT, MPH	March, 2000 August, 2004 (QAP) December, 2004 (QAP)	physical therapist
Gayle Pearson, RN, DrPH	June, 2000 *	nurse educator
John Allegrante, PhD	October, 2000	public health specialist
Heidi Klingbeil, MD	November, 2000	physiatrist
Patricia Jones, RN, PhD, FAAN	November, 2000	rehabilitation nurse
Nancy Gell, PT, MPH	January, 2001	physical therapist
Margaret Shepard, PhD, RN	March, 2001	rehabilitation nurse
Moya Kinnealey, PhD, OTR/L	March, 2001	occupational therapist

Kim Nixon-Cave, PT, PhD, PCS	March, 2001	physical therapist
Seth Gopin, PhD	August, 2001 *	university administrator
Rhonda Willms, MD	June, 2002 March, 2003	physiatrist
James Stephens, PT, PhD	June, 2002 March, 2003	physical therapist
Ann Yamane, CO (TAG member)	December, 2001 June, 2002 March, 2003	orthotist
Marlene Morgan, EdD, MOT, OTR/	June, 2002 March, 2003	occupational therapist
Judy Derstine, RN, MS	June, 2002	psychological nurse
Connie Vance, RN, MSN, EdD, FAAN	January, 2003	rehabilitation nurse
Alexia Green, RN, PhD, FAAN	January, 2003	rehabilitation nurse
Darla Scarrow, RN, MSN, FNP	January, 2003	rehabilitation nurse
Lynne Hudson, MPH, RN-C	January, 2003 *	rehabilitation nurse
Pamela Hoyt, RN	March, 2003 * November, 2006 *	nurse educator

Kathleen Black, RNC, DNSc	March, 2003 March, 2004 May, 2005 March, 2006	rehabilitation nurse
Roger Rich, MS, PT, NCS	February, 2004 January, 2005 January, 2006	physical therapist
Patrick Regan, PT	February, 2004 January, 2005 January, 2006	physical therapist
Patricia Johnson, PT, MOT, PCS	February, 2004	physical & occupational therapist
Sharon DeMuth, DPT, MS, PT	August, 2004 (QAP) November, 2004 (QAP) June, 2005 (QAP) April, 2006 (QAP)	physical therapist
Hugh Watts, MD	August, 2004 (QAP) November, 2004 (QAP) June, 2005 (QAP) April, 2006 (QAP)	orthopedic surgeon
Barry Goldstein, MD, PhD	December, 2004 (QAP)	physiatrist
Michael Priebe, MD	February, 2005 November, 2005	physiatrist physiatrist

Lisa-Ann Wuermsler, MD	February, 2005 November, 2005	physiatrist
Dolores Zygmunt, MSN, PhD	May, 2005	surgical nurse
Ann Linguiti Pron, MSN, PNP	May, 2005	pediatric nurse
Pamela Bender, MSN, CRNP	May, 2005	psychiatric nurse
Cuong Ngoc Pho, DPT, OCS, SCS, CHT, ATC	August, 2005 March, 2006	physical therapist
Alexander Papilaya, MD	July, 2005 September, 2005	PSBH regional coordinator
Ayesha Maulina	September, 2005	PSBH assistant
Nancy Cutter, MD, PT	November, 2005 (QAP)	physiatrist
Juli Jendzel, MA, CCC-SLP	November, 2005 (QAP)	speech therapist

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Appendix II

**Articles & Presentations related to the Grant,
(in chronological order)**

Publications:

Leavitt R, Kay ED: *PTs seek coordination of overseas volunteer work.* **PT Bulletin**, June 16, 1993.

Kay ED: *Physiotherapy in Vietnam.* **Newsletter of the World Confederation for Physical Therapy** 1993 (invited article), October; reprinted in **Physiotherapy** 80(4):231, 1994.

Kay ED, Kilonzo C, Harris MJ: *Improving Rehabilitation Services in Developing Nations: The proposed role of physiotherapists.* **Physiotherapy** 80(2):77-82, 1994. (peer reviewed)

Kay ED, Salzman A.S.: *Volunteer PTs in Developing Nations.* **PT Magazine** 2(10):52-56, 1994. (peer reviewed)

O'Toole, M.T., Moore, M., Derstine, J. & Melli, S.: *Vietnam and Clinical Issues in Nursing Education.* **International Nursing Conference University of Ulster**, Coleraine, Ireland. August, 1994.

O'Toole, M., & Renshaw, S.: *Test writing tips.* **Faculty Focus** 2(1), 3. 1994.

Derstine, J., O'Toole, M. Melli, S. & Moore, M.: "Rehabilitation Nursing in Vietnam". *Proceedings of the Second International and Interdisciplinary Health Research Symposium.* **Health Care and Culture.** Morgantown, West Virginia, 289-294. 1995.

O'Toole, M., Melli, S., Moore, M. And Derstine, J.: *Global gladiators: A model for international nursing education.* **Nurse Educator** 21(1), 38-41, 1996.

Kay ED, Dunleavy K: *Community-based Rehabilitation: An international model.* **Pediatric Physical Therapy** 8(3): 117-121. (peer reviewed) 1996.

O'Toole, Marie T.: *Developing standards of education for Vietnam.* **Dieu duong.** (supplement). 1997.

Derstine, J.B.: *Creating a global society: The Neumann-Danang connection.* **Journal of Allied Health** 27, Winter 1998.

Derstine, J. B.: *Evaluation of an educational initiative in Southeast Asia: A retrospective look at a three year endeavor.* **Proceedings of the European-American University Forum and 9th International Conference.** American Association of University Administrators, October, 1998.

O'Toole, M.T., Melli, S., Camuñas, C., Loan, T.T.: *Improving Nursing Education in Vietnam: A Demonstration Project.* **Sigma Theta Tau 10th International Nursing Research Congress**, July 13-14, 1998. Utrecht, The Netherlands.

Trinh, L.T., Pham, D.M., Hoa, N., Jones, P.S. & O'Toole, M.T. : *Empowerment of Nursing as a Socially Significant Profession for the Twenty-First Century in Vietnam.* **The Ninth International Congress on Women's Health Issues.** Alexandria, Egypt. 1998.

Kay ED, Dunleavy K, Fisher R: *Management of Orthopedic Problems in Developing Countries: Issues that affect treatment.* **Orthopaedic Physical Therapy Clinics of North America**; 8(2):257-270. (peer reviewed) 1999.

Fisher R, Dunleavy K, Kay ED: *Management of Orthopedic Problems in Developing Countries: Fracture care.* **Orthopaedic Physical Therapy Clinics of North America**; 8(2):271-297. (peer reviewed) 1999.

Dunleavy K, Fisher R, Kay ED: *Management of Orthopedic Problems in Developing Countries: Complications after fractures.* **Orthopaedic Physical Therapy Clinics of North America**; 8(2):299-321. (peer reviewed) 1999.

O'Toole, M., Jones, P.S., & Gray, G.: *The Vietnam Nursing Partnership Model- Empowering Nurses to Claim the Future.* **ICN Centennial Celebrations- Concurrent Session & Symposium Programe.** p. 113, Royal College of Nursing. 1999.

Kay ED, Huong NT, Chau NTM: *A Project to Upgrade Physical Therapy in Vietnam.* **Cross-Cultural Health Care: An International Perspective for Rehabilitation Professionals**; R Leavitt (ed). Harcourt Brace & Co.: London. 1999.

O'Toole, M., Loan T.T.: *Nursing the Asian Population: Sharing the Common Culture of Nursing.* **Advance for Nurses.** April 12, 1999.

Jones, P., O'Toole, M., Muc, P. & Tuan, C.: *Empowerment of nursing as a socially significant profession in Vietnam.* **The Journal of Nursing Scholarship.** 32(3): 317-321. 2000.

Fisher, R: *Orthopaedic Surgery in the Developing World: Selected Conditions Common in the Developing World.* In **Instructional Course Lectures Vol. 49:** pp 585-591, AAOS, Rosemont, IL. 2000.

Coyne, Clair.: *The Rewards of Service: PTs Who Volunteer,* **PT Magazine of Physical Therapy,** pp 28 – 34. 2002.

Vance, Connie : *Two Worlds, One Profession: An American Nurse Encounters Nursing in Vietnam*. **Nursing Spectrum**. April 7, 2003.

Miller, M., Canfield, J.: *Enhancing Quality in PT Education Internationally Through a Model of Accreditation*, **World Confederation for Physical Therapy, 14th International Congress Proceedings**. 2003.

Derstine, J. B., Shepard, M. P., Nixon-Cave, K., & Kinneally, M.: *An interdisciplinary pediatric rehabilitation project in Vietnam: The Temple team experience*. **Rehabilitation Nursing 28**. May-June, 2003. 92-95.

Dobson M, Fisher R, editors: *Surgical Care at the District Hospital*. **World Health Organization**, Geneva, 2003

Pron, A.L., Zygmunt, D., Bender, P., & Black, K. : *Educating the Educators at Hue Medical College, Hue, Viet Nam*. **International Nursing Review**. (Accepted April 2007)

Kay E, Deutsch A, Wuermsler L: *The prediction of walking at discharge from inpatient rehabilitation after a traumatic spinal cord injury*. **Archives of Physical Medicine and Rehabilitation**, in press, 2007. (peer reviewed)

Nguyen Thi Thanh Binh, Pechak, C., Thompson, M.: *Characteristics and Functional Recovery of Patients with Stroke in Vietnam* (Submitted for review, 2007)

Poster presentations:

O'Toole, M.T.: *The Southeast Asian Frontier in Rehabilitation*. Presented at the Association of Rehabilitation Nursing Conference in Charleston, North Carolina. (peer reviewed) 1994.

Moore, M., O'Toole, M., Melli, S. & Derstine, J.: *Rehabilitation Nursing in Vietnam*. Second Annual International Nursing Conference, Kansas City, Mo. (peer reviewed) 1996.

Derstine, J.: *The Vietnam Connection: A Global Celebration of Learning* (poster session), National League for Nursing Biennial Convention, Portland, OR. June 9-11, 1997.

Camuñas, C., O'Toole, M.T., & Melli, S.: *Development of a Code of Ethics in Viet Nam*. Tenth International Nursing Research Congress, Sigma Theta Tau International, Utrecht, The Netherlands (July 13 - 14, 1998).

O'Toole, M.T., Melli, S., Camuñas, C., Loan, T.T.: *Improving Nursing Education in Vietnam: A Demonstration Project*. Sigma Theta Tau 10th International Nursing Research Congress, July 13-14. Utrecht, The Netherlands. (peer reviewed) 1998.

Camuñas, C., O'Toole, M.T., & Melli, S.: *Development of a Code of Ethics in Viet Nam*. Global Institute for Nursing and Health Conference, Fordham University, New

York, NY (Sept 25, 1998).

O'Toole, M.T., Melli, S., Camuñas, C., Loan, T.T.: *Improving Nursing Education in Vietnam: A Demonstration Project*. Global Institute for Nursing and Health Conference, Fordham University, New York, NY (Sept 25, 1998).

Camuñas, C.: *Development of a Code of Ethics in Viet Nam*. Fourth International Tsukuba Bioethics Roundtable, University of Tsukuba, Ibaraki, Japan (October 31, 1998).

Camuñas, C.: *Development of a Code of Ethics in Viet Nam*. American Society of Bioethics and Humanities Conference, Houston, TX (November 19- 20, 1998).

Camuñas, C., O'Toole, M.T., & Melli, S.: *Development of a Code of Ethics in Viet Nam*. Global Society for Nursing & Health, Mälardalen University, Eskilstuna, Sweden (October 29, 2000).

Derstine, J.: *Philadelphia to Danang: Enhancing our Mission*. Poster session. International Council of Nurses. Copenhagen, Denmark. (peer reviewed) June, 2001.

Derstine, J.: *Three Rehabilitation Nurses in Hanoi: An Analysis of Their Role*, Poster session, Association of Rehabilitation Nurses Annual Conference, Philadelphia, PA. (peer reviewed) October, 2001.

Derstine, J.: *Circles Have No Corners: Fostering Rehab Teamwork in a Vietnamese Hospital*. Poster presentation, 2nd Annual RCN Rehabilitation Conference. Dublin, Ireland. (peer reviewed) November 14 – 16, 2003.

Derstine, J.: *Moving Nursing to the Forefront: An Interdisciplinary Team Experience in Vietnam*. Poster. Presented at International Council of Nurses, 23rd Quadrennial Congress. Taipei, Taiwan. (peer reviewed) May 24, 2005.

Pron, A.: *Cross-cultural Project: Teaching Pediatric Nursing in Vietnam*. Poster presentation, National Association of Pediatric Nurse Practitioners' annual conference, Washington, D.C. March, 2006.

Pron, A.: *Teaching Pediatric Nursing in Vietnam*. Poster presentation at Primary Care Conference for the Underserved, Philadelphia, PA. May, 2006.

Pron, A.: *Teaching Project for the Department of Nursing at Hue Medical College, Hue, Vietnam*. Poster presentation, Global Conference, Temple University, Philadelphia, PA. November, 2006.

Dunleavy K.: *Factors influencing choice of Physical Therapy Provision Model in Developing Countries*. World Conference of Physical Therapy. Vancouver, CA. Poster presentation. June, 2007.

Nguyen Thi Thanh Binh, Celia Pechak, Mary Thompson: *Use of Functional Independence Measure™ with Patients With Strokes in Vietnam*. Department of Rehabilitation Medicine, Hospital C, Danang, Vietnam, Texas Woman's University, Dallas, USA. World Conference of Physical Therapy. June, 2007.

Podium presentations:

Kay E, Salzman A.: *Overseas Volunteer Work: A discussion of some professional issues*. A 90-minute presentation at the Joint Congress of the Canadian Physiotherapy and American Physical Therapy Associations; Toronto, Canada. (peer reviewed) June, 1994.

O'Toole, M.T.: *Vietnam- Interdisciplinary education in the Third World*. Paper presented at Rehabilitation '94 in Philadelphia, Pennsylvania. May, 1994.

O'Toole, M.T.: *Nursing Education in Vietnam*. Paper presented at Nursing Education '94 in Arlington, Virginia. June, 1994.

O'Toole, M.T., Moore, M., Derstine, J. & Melli, S.: *Vietnam and Clinical Issues in Nursing Education*. Paper presented at the International Nursing Conference, University of Ulster, Coleraine, Ireland. (peer reviewed) August, 1994.

Dunleavy K.: *International physical therapy - a personal perspective from Vietnam*. Arkansas Physical Therapy Association Central district meeting. November, 1994.

Kay, E: *Physical Therapy in Developing Countries*. Presented at the Michigan Physical Therapy Student Conclave, University of Michigan - Flint; (invited). March, 1995.

Kay E.: *Community-based Rehabilitation*. Session organizer and moderator for the 1995 World Confederation for Physical Therapy Congress. June, 1995.

Derstine, Jill : *Rehabilitation Nursing in Vietnam, The Second Interdisciplinary and International Health Research Symposium*. University of West Virginia, Morgantown, W. Virginia. June 16, 1995.

Dunleavy K.: *Health Volunteers Overseas: Short-term volunteer opportunities for Physical Therapists*. Eastern District of Michigan Chapter of the APTA meeting. November 15, 1995.

Dunleavy K.: *Physical Therapy for amputees*. United States Agency for International Development War Victims Fund. Grant Evaluator training workshop. Washington D.C. January, 1996.

Derstine, Jill: *Neumann in Danang-A Global Connection*, 2nd World Congress on Allied Health, University of Wolverhampton, Telford, England. July 22, 1997.

Derstine, Jill: *Creating a Global Society: The Neumann- Danang Connection*, The European-American University Forum and The Eighth Annual International Conference of the American Association of University Administrators, Lugano, Switzerland. October 29, 1997.

Trinh, L.T., Pham, D.M., Hoa, N., Jones, P.S. & O'Toole, M.T.: *Empowerment of Nursing as a Socially Significant Profession for the Twenty-First Century in Vietnam*. The Ninth International Congress on Women's Health Issues. Alexandria, Egypt. (peer reviewed) June, 1998.

Camuñas, C., O'Toole, M.T., Melli, S., Loan, T.T.: *Development of a Code of Ethics in Vietnam*. Sigma Theta Tau 10th International Nursing Research Congress, July 13-14, 1998. Utrecht, The Netherlands. (peer reviewed)

O'Toole, M.T.: *Overview of World Programs-Vietnam*. Global Institute for Nursing and Health Inaugural Conference. New York, New York. (peer reviewed) September, 1998.

Derstine, Jill: *Synopsis of a School of Nursing Agreement with Danang*, (Invited presentation), Concurrent Session, Program for Neumann College Alumnae, Crozer-Chester Medical Center, Chester, PA. October 1, 1998.

Derstine, Jill: *Evaluation of an Educational Initiative in Southeast Asia: A Retrospective Look at a Three-Year Endeavor*, The European-American University Forum and the Eighth Annual International Conference of the American Association of University Administrators, Prague, Czech Republic. October 14, 1998.

Camuñas, Caroline: *Development of a Code of Ethics in Viet Nam*. Fourth World Congress of Bioethics, (International Association of Bioethics), Nihon University, Ichigaya, Tokyo, Japan. November 6, 1998.

Derstine, Jill: *Working with the Underserved: A Challenge at Home and Abroad*, (Keynote speaker) Sixteenth Induction Ceremony, Eta Beta Chapter, Sigma Theta Tau International, Widener University, Upland, PA. November 8, 1998.

Derstine, Jill: *Transcultural Health Care*, (invited presentation), The Globalization of Health Care, Lecture Series on Human Values, Villanova University College of Nursing. December 9, 1998.

Camuñas, Caroline: *Ethical Issues in Transcultural Health Care*. School of Nursing, Graduate Program, Rutgers University, Camden, NJ. December, 1998.

Camuñas, C., Melli, S., O’Toole, M., & Sagar, P.: *Improving Nursing Education in Developing Countries: Examples from Vietnam.*, 36th Annual Isabel Maitland Stewart Conference on Research in Nursing. Teachers College, NY, NY. (peer reviewed) April 23, 1999.

Derstine, Jill: *Nursing in Vietnam.* Luncheon Speaker, Philadelphia Area Chapter of Sigma Theta Tau Seventh Annual Research Day, Neumann College. April 30, 1999.

O’Toole, M.T.: Keynote Address- Rutgers, The State University of New Jersey- for the Project “Roofs for the Children” Award Ceremony. May, 1999.

Camuñas, C., Melli, S., O’Toole, M., Sagar, P.: *Improving Nursing Education in Developing Countries- Examples from Vietnam.* Panel Presentation at Nurses’ Week Celebration. Mount Saint Mary College, Newburgh, New York. May 3, 1999.

Camuñas, C.: *Codes of Ethics and the Professionalization of Nurses.*
Symposium: “Improving Nursing Education in Developing Countries.” Sigma Theta Tau, Mu Epsilon Chapter, Mount Saint Mary College, Newburgh, NY. May 4, 1999.

Derstine, Jill: *The Faculty Role.* Invited speaker, National League for Nursing 24th Biennial Convention, Miami Florida. June 7, 1999.

Derstine, Jill: *Nursing in Vietnam: Links to Nightingale.* Symposium presenter, International Council of Nurses, London, England. June 30, 1999.

Camuñas, C.: *Codes of Ethics and the Professionalization of Nurses.*
Symposium: “The Vietnam Nursing Partnership Model - A Nursing Education Project.” International Council of Nurses, London, United Kingdom. June 30, 1999.

O’Toole, M.T., Jones, P., & Gray, G.: *Symposium on Nursing Leadership in Vietnam,* International Council of Nurses, London, England. (peer reviewed) 1999.

Camuñas, C.: *Nursing Education at TC: Beyond Midcentury.* Symposium. Nursing Education Centennial Celebration, Teachers College, Columbia University, New York, NY. October 8, 1999.

Derstine, Jill: *Caring Scholars Across the Miles: A Rehabilitation Nursing Project in Vietnam,* presentation. “The Nurse as a Caring Scholar: The New Wave”, Beijing, China. November 21, 1999.

Camuñas, C.: *Human Diversity and Social Issues in Community Health: Ethical Issues.* School of Nursing, Graduate Program, Rutgers University, Camden, NJ. November 30, 1999.

Dunleavy K, Kay E, Fisher R.: *Management of clients with multiple trauma in developing countries.* Invited 3 hour presentation. American Physical Therapy

Association Combined Sections meeting; New Orleans LA. (peer reviewed) February 3, 2000.

Derstine, Jill: *The Vietnam Connection: Lessons in Cultural Competence*, speaker, Pennsylvania League for Nursing, Area II, Spring Meeting, Allentown, PA (invited). May 24, 2000.

Derstine, Jill: *The Vietnam Connection: Lessons in Cultural Competence*, presentation, World Congress of Allied Health. San Juan, Puerto Rico. (peer reviewed) April, 2001.

Canfield, J.: *Physical Therapy Volunteerism in Developing Countries*. Combined Section Meeting, American Physical Therapy Association, San Antonio, TX. 2001.

Derstine, Jill: *Rehabilitation Nursing Goes Global*, Presentation in plenary session, First Annual Rehabilitation Nursing Conference, Royal College of Nursing, Edinburgh, Scotland.(peer reviewed) November, 2001.

Kay E, Ouellette S, Cabrera D, Fang S, Popovich J: *Case studies of multidisciplinary rehabilitation for persons born in other countries*; hour long roundtable, CIRRIE International Conference funded by NIDRR, Washington, DC. (peer reviewed) May 7 – 8, 2002.

Dunleavy K, Kay E: *The effects of international volunteer work on provision of culturally competent physical therapy services*; Platform session, CIRRE International Conference on Providing Culturally Competent Disability Services to Persons Born in Other Countries, funded by NIDRR, Washington, DC, May 7-8, 2002. (peer reviewed)

Derstine, Jill: *Rehabilitation Nursing in Vietnam*, Presentation, Association of Rehabilitation Nurses, Lehigh Valley Chapter, Kutztown, PA. (Invited) September 17, 2002.

Derstine, Jill: *Twelve Journeys: Reflections on a Nursing Endeavor in Southeast Asia*. Presented as part of the “*Conversations*” series sponsored by the Independence Foundation. Philadelphia, PA. (invited) October 25, 2002.

Dunleavy K.: *Rehabilitation Education in developing countries: Factors influencing choice of provision model and education in Cambodia*. Del Harder Research Day Rehabilitation Institute of Michigan. April, 2003.

Salzman, A.J., and Walsh, M.B.: *Enhancing Clinical Education in Developing Countries through Clinical Instructor Training*. Abstract. CD ROM Abstracts, 14th International WCPT Congress, World Congress of Physical Therapists. 2003.

Derstine, Jill: *Developing a Rehab Team in Vietnam*. Presentation. Association of Rehabilitation Nurses Annual Conference. New Orleans, LA. (peer reviewed) October 18, 2003.

Derstine, Jill: *Hello Hanoi: Rehab Nurses Connecting Through Cyberspace*. Presentation. 2nd Annual RCN Rehabilitation Conference. Dublin Ireland. (peer reviewed) November 15, 2003.

Canfield, J.: *Preparing for Volunteer Work in Developing Countries*. Combined Sections Meeting, American Physical Therapy Association, Nashville, TN. 2004.

Dunleavy, K.: *Teaching, Rehabilitation in Developing countries, Management of Spinal Cord Injuries - Rehabilitation*. (3 ½ hours of a 15 hour course) “Teach – Travel – Learn. Volunteering with Orthopaedics Overseas”. Health Volunteers Overseas/ American Academy of Orthopaedic Surgery Rosemont, Illinois. April, 2004.

Derstine, Jill B.: *Using the Masters Essentials in the Curriculum*. Panelist. AACN Masters conference. San Diego California. (invited) February 17, 2005.

Dunleavy K.: *International Volunteer Opportunities*. Oakland Physical Therapy Program Student Association. March, 2005.

Derstine, Jill: *Ten Years in Indochina: Reflections on a Nursing Endeavor in Southeast Asia*. Presentation. Sigma Theta Tau. Old Dominion University. Norfolk, VA. (invited) March 21, 2005.

Derstine, Jill: *An Interdisciplinary Team Experience in a Vietnamese Hospital*, Presentation. 28th Annual Pennsylvania Occupational Therapy Association Conference, Valley Forge, PA. (invited) October 8, 2005.

Derstine, Jill: *Evaluation of a Ten-Year Rehabilitation Project in Vietnam*. Third Annual RCN Rehabilitation and Intermediate Care Nursing Forum, Warwickshire, England. November 26, 2005.

Kay E, Deutsch A, Wuermsler L: *The prediction of walking at discharge from inpatient rehabilitation after a traumatic spinal cord injury*. Presented at Asian Spinal Cord Network (ASCON), Ho Chi Minh City. December, 2005.

Dunleavy K, Kelly N, Gell N, Pho, C: *Developing Cultural Competence through International Volunteer Experiences*. Combined Sections Meeting APTA. San Diego, CA. February, 2006.

Dunleavy K.: *The use of a clinic team in rehabilitation requiring orthotic management in developing countries*. International consensus conference on the use of orthotics in developing countries. USAID, ISPO, WHO. Hanoi, Vietnam (Invited participant) April, 2006.

Dunleavy, K.: *Teaching, Rehabilitation in Developing Countries- Rehabilitation*. Health Volunteers Overseas/ American Academy of Orthopaedic Surgery “Teach – Travel – Learn. Volunteering with Orthopaedics Overseas.” Rosemont, Illinois. May, 2006.

Derstine, Jill: *Enhancing Nursing Education Across Borders: A Collaborative Project in Vietnam*, 6th Asia Pacific Nurses Convention. (with Pamela Hoyt) July, 13, 2006.

Derstine, J., Bender, P., Black, K., & Pron, A.L.: *The Vietnam Project: Improving Health Through Teaching and Collaboration*. Podium presentation, Global Conference, Temple University, Philadelphia, PA. November 17, 2006.

Dunleavy, Kim: *Teaching skills for Global Volunteers*. Pre-conference course. American Academy of Dermatology. 65th Annual meeting. Washington D.C. February 1, 2007.

Derstine, Jill: *Collaboration Across Cultures: You, too, can be a Global Nurse*. (Keynote speaker), 27th Annual Induction Ceremony, Delta Rho Chapter, Sigma Theta Tau, Thomas Jefferson University, Philadelphia PA. (with Kathleen Black, Ann Pron, Moya Kinneally, Kim NixonCave) May 9, 2007.

Canfield, J.: *Adaptable Curriculum Templates for International PT and Rehab Education*. International Society of Educators in Physiotherapy, Vancouver, Canada. 2007.

Black, K., Derstine, J., Hoyt, P.: *Collaborating to Improve Health in the Remote Villages of Central Vietnam*. Sigma Theta Tau 18th Annual International Nursing Research Congress Focusing on Evidenced-Based Practice (Vienna, Austria). July 11, 2007.

Honors:

Michigan Physical Therapy Association's Margaret Holton Award (1999) for most valuable paper contributing to clinical practice. Given for three paper series on Management of Orthopedic Problems in Developing Countries (including Vietnam), *Orthopaedic Physical Therapy Clinics of North America* authored by: Kim Dunleavy, MS, MOMT, P.T., OCS, Richard C. Fisher, MD, and Elizabeth D. Kay, P.T., PhD.

Note: We have indicated, to the best of our ability, where publications have been peer reviewed. We apologize for any oversight that may have occurred.