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**CHARLES R. DREW POSTGRADUATE MEDICAL SCHOOL
INTERNATIONAL HEALTH AND DEVELOPMENT PROGRAM
ANNUAL PROGRESS REPORT
1979-1980**

U.S.A.I.D. 122(d) Institutional Development Grant

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SUMMARY OF ACHIEVEMENTS

During Fiscal Year 1979-1980, Drew's Program of International Health and Development increased its administrative infrastructure, education and training, research and technical assistance capabilities. The major achievements are summarized below.

Administrative Infrastructure Development

- Recruited and trained 4 staff persons in various aspects of international health programming.
- Documented an internal management system, including office and monthly program and financial reporting procedures.
- Established international policies and procedures for the Drew School.
- Developed a 10 point program marketing plan.
- Developed a resource file of 100 short and long term consultants available for foreign services.
- Established a formal linkage agreement with the National University of Somalia and initiated several additional international and domestic linkages.
- Established a 7 point African country-selection criteria for program involvement.

Education and Training Capability

- Learned self-instructional techniques.
- Participated in the development of 7 instructional units on public health planning and management.
- Co-sponsored with the Fanon Research and Development Center an international conference on "Human Development Models in Action", held in Mogadishu, Somalia. A series of workshops were held on health and development.
- Directed the development of a Symposium on African Healing Systems to be offered in Spring, 1980.

- Sponsored 3 seminars/lectures on health service strategies in developing countries to members of the Drew/MLK community.
- Hosted an African delegation to the Los Angeles area.
- Identified 20 possible course offerings in the area of international health planning and management.
- Established selection criteria for faculty and student exchange opportunities.
- Developed U.S. long and short term training opportunities for 3 African nationals.

Expanded Knowledge and Research

- Developed a specialty resource library in international health planning and management and integrated rural and community development with several hundred books, periodicals, journals and articles.
- Collected, analyzed and drafted a summary investigation of health planning and management issues and practices in Africa.

Expanded Advisory and Assistance Capacity

- Assembled a RFP response team and personnel resources to bid for the Somalia Rural Health Delivery Project sponsored by USAID.

INTRODUCTION

This report summarizes the achievements of Drew's International Health and Development Program in meeting the 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 public review of the program's progress during FY 1979-1980.

In addition to the introduction, the report is divided into 5 major sections. Sections 2-5 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 6 concludes the report with a review of program's problems and future prospects. A brief background of the program and overview of achievements are provided first.

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.

Directorate of International Health was established in 1977.

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 area of maternal and child health, environmental health and family planning and endemic disease control offered by the three other Black Health Science Centers.

Program Overview

During FY 1979-1980, Drew's International Health and Development Program moved significantly closer towards becoming a major resource center in health planning and management and integrated rural and community development for developing countries. The program achieved all the first year objectives of its carefully designed, 5 year resource development program. Moreover, the large demand for a minority based center for international health and development also pushed the program into completing several intermediate and long term objectives of the U.S.A.I.D. 122(d) grant.

The first year's activities focused on the initial project purpose: to strengthen and develop Drew's ability to assist African countries in the area of health planning and management. In so doing, a multifaceted approach was used. The program improved Drew's administrative, education and training, research, and technical assistance capabilities.

The creation of a strong administrative infrastructure captured a large portion of the project's resources. Directorate and staff development, a consultant resource file, standardized administrative protocols, and linkages with Africanists, domestic and foreign, were established. These program features have formed the necessary foundation for a successful and lasting program.

The recent signing of a formal linkage agreement with the National University of Somalia substantially added to the development of an administrative infrastructure. While a linkage agreement was not a first year objective, a mutual interest evolved over several meetings for the long-term sharing and exchange of health resources (e.g. faculty and staff, training and technical assistance) between the respective medical centers. This linkage agreement is intended to test, strengthen, and institutionalize our newly developed administrative structure as the program now becomes more directly involved in international health programming.

Several education and research activities were started to develop and offer African countries appropriate health planning and management strategies. The extensive collection of background information

coupled with faculty and staff participation in seminars and workshops on various aspects of health and development laid the groundwork for future scholastic and programmatic endeavors.

In addition, the program launched several educational ventures that went well beyond the minimum guidelines of the grant proposal. The program acted as catalysts in a number of long and short term U.S. educational exchange opportunities for African nationals. The program also initiated and cosponsored international and local seminars and conferences on health and development strategies for poor, underserved communities. These activities came to fruition largely as a result of an obvious void and critical need for the involvement of U.S. minority institutions in international health and development activities.

Similarly, the program expanded its technical assistance capabilities as a result of the demand for minority involvement in U.S.A.I.D. country contracting. The International Health and Development Program directly participated in the bid for the recent 15 million dollar U.S.A.I.D. sponsored Somalia Rural Health Project. This evolved as a result of Somali officials' requests for Drew to participate, U.S.A.I.D.'s search for minority contractors, and was in line with Mrs. Goler T. Butcher's, A.I.D.'s assistant administrator for the Africa Bureau, mandate to the Black Health Science Centers for 'action now'.²

The Drew School was not successful in receiving the contract, nonetheless, the experience greatly enhanced Drew's technical assistance capabilities. The program staff gained experience in U.S.A.I.D. country contracting processes, in developing RFP response capabilities for State Department technical and management proposals, and in developing a technical assistance program for rural health development using available country background. Finally, Drew faculty, staff, and other resource persons were identified and mobilized for foreign health service. These experiences served well to further advance and promote Drew's technical assistance capabilities.

Indeed, FY 1979-1980 marked a period of far reaching accomplishments, but, also some problems. Serious difficulties emerged which may limit the continued progress of the program. The program could not locate sources of funds needed to implement faculty and student exchange programs. Moreover, postgraduate training for African physicians has been limited by severe U.S. entry requirements. These problems must be solved to ensure the success of the program's linkage agreements with African countries.

²Speech presented by Dr. Tom George on behalf of Mrs. Goler Butcher at U.S.A.I.D.'s debriefing of Black Health Science Centers on October 25, 1979 in Washington, D.C.

ADMINISTRATIVE INFRASTRUCTURE DEVELOPMENT

The development of Drew's administrative infrastructure is an explicit output proposed under the 122(d) grant. The objectives of this output are:

- °1 Improve the fiscal and administrative capability of Drew to respond to requests for assistance in international health program development.
- °2 Enable the Program to obtain maximum benefit from the School's administrative expertise through the closer coordination of resources within the entire Drew/King complex.

The specific tasks performed in meeting each of these objectives are discussed in the following subsections.

°1: Improved Fiscal/Administrative Capabilities

Several factors contributed to the expansion of Drew's administrative and fiscal capabilities for international programming. This included the development of the program's directorate and staff, an internal program and fiscal management system, and international policies and procedures.

A. Directorate/Staff Developed

A major but often assumed achievement of the program pertains to the recruitment, selection, and development of staff resources. As a young and growing Black Health Science Center, Drew lacked the personnel who could execute the grant requirements due to: a) a general shortage of staff, and 2) the absence of staff with previous experience in international grant/contract administration. Directorate and staff development activities focused on alleviating these deficiencies.

1. Program Staffing

A total of 4.5 FTE's currently staff the program. The program positions include the Director, Associate Director for Health Planning and Management, a half-time Manpower Development Specialist, an Administrative Assistant and Senior Secretary.

The program also enjoys the benefit of 2 non salaried, senior program advisors who periodically assist in the development of the program.

- (a) Program Director - The program director, Dr. J. A. Cannon, oversees all program activities, carries chief responsibility for developing domestic and international linkages, and spearheads the integrated rural and community development project. J. Alfred Cannon is a physician and public health specialist who brings to the program over 20 years of experience in initiating and directing health and development programs for the economically disadvantaged. He also brings to the program a sensitivity and exposure to African health problems in various parts of West, East, and Southern Africa.

- (b) Associate Director for Health Planning and Management - Ms. Denise G. Griffin fills the position of Associate Director of Health Planning and Management. Ms. Griffin has received doctoral level training in urban and regional planning from The University of Michigan with special emphasis in systems planning and development. She has a diverse background having worked in planning and management positions for public organizations and private consulting firms. Ms. Griffin's experience includes: the planning and management of community health and manpower development programs; the planning and development of information systems for state and local governments; facility planning; and comprehensive planning for state and local governments.

Ms. Griffin lends technical assistance to all program activities and directs health planning and management services.

- (c) Manpower Development Specialist - Ms. Gretchen Manley occupies the manpower development specialist position and is currently responsible for the development of non-formal education programs in health planning, management, and rural development, library resources, and women in development activities. Ms. Manley brings with her the necessary knowledge (MPH, UCLA, 1975) and practical

experience having worked for over 8 years in health and development in Africa. Her work in health development has been varied, including Peace Corps Volunteer, UNICEF Consultant, and Africa Program Director for a private voluntary agency - Project Concern International.

She has worked and lived in villages as well as planned and negotiated agreements with Ministry of Health Officials. Ms. Manley has worked under A.I.D. grants before and attended the 1976 A.I.D. sponsored Nutrition workshop at MIT.

- (d) Administrative Assistant - Ms. Mary Foster is responsible for the coordination of office and administrative details, oversees the resource files and coordinates women in development activities with Ms. Manley. Ms. Foster is a competent administrative assistant having worked in this capacity and similar management positions for 18 years. She has been involved in health service programs for the last 8 years, including the Drew School and Health Manpower Consortium, Inc. in Los Angeles.
- (e) Senior Program Advisors - M. Alfred Haynes, M.D. and Arthur W. Chung, M.D., assist in the planning and implementation of program requirements. Dr. Haynes is the Dean (President) of the Drew School and former chairman and founder of the School's Department of Community Medicine. Dr. Haynes is involved with the program director in establishing linkages with African medical institutions and provides regular project input. Dr. Haynes offers an extensive background in international planning and management. He formerly held a faculty appointment at John Hopkins University in international health and specializes in international health planning and management.

Dr. Chung, also a former chairman of Drew's Department of Community Medicine, assists in shaping the overall project direction. Dr. Chung is an internationally renowned figure for his major rôle in the evolution of China's national health delivery system during a period of over 25 years.

His background includes the direct experience of participating on a rural mobile health team. Dr. Chung has also been involved in the development of rural health projects in various parts of the world in the capacity of Assistant Director General of the World Health Organization in Geneva, Switzerland.

2. Staff Development

The staff participated in a number of seminars and workshops designed to increase their knowledge of various administrative aspects of international programming.

- (a) U.S.A.I.D. Program Design and Evaluation Seminar - The Program Director attended a 5 day A.I.D. required seminar on program design and evaluation. The seminar improved skills for designing an A.I.D. project through the use of the logical framework.
- (b) Federal Travel Regulations and Procedures Workshops - The program's administrative assistant attended a 5 day workshop on federal travel regulations offered by the Management Science Training Center, Office of Personnel Management. The workshop offered insight into the international travel requirements of the U.S. government. This information was used to develop Drew policy on international travel and transportation and was shared with Drew administrators.
- (c) UCLA Contracts and Grant Management In-Service Training - The associate director attended several seminars on contracts and grant management offered by UCLA's Office of Grants and Contracts. The sessions attended included:
 - "Negotiations and Acceptance of Awards and Project Initiation"
 - "Federal Regulations and Requirements for the Acquisition of Equipment"
 - "The Preparation and Submission of Proposals for Research, Training Public Service Programs"

- (d) UCLA International Grants and Contracts Administration Orientation - Ms. Foster and Griffin received a one day informal training program from UCLA staff persons on the administration and management of international grants and contracts. The UCLA staff involved included faculty and staff of the USAID Danfa Project who resided in the School of Public Health, two principal accountants in the finance office, and the administrative coordinator from the Office of Overseas Programs.
- (e) USAID Debriefing of Black Health Science Centers - On October 25 and 26, the program director and associate director attended an AID debriefing session for the recipients of the 122(d) grants. These sessions provided a forum for reviewing progress, problems, and prospects in implementing the grant specifications. The associate director also visited various AID offices to learn its inner workings and to gather resource material for the program.

B. Standardized Grant/Contract Management Procedures

The Program instituted and documented a comprehensive internal management system to ensure the proper and efficient administration of this and subsequent international health grants and contracts. This system standardized office procedures as well as program and financial accounting procedures.

1. Office Procedures Developed

Standardized office procedures were developed and documented to help control the often heavy flow of information and work which must be handled by a small, multifunctional staff. These procedures outlined a system for handling mail, typing orders, telephone calls, filing, duplication services, supply acquisitions, time cards and payroll, and travel requests.

2. Program Planning and Reporting Procedures Developed

Grant management procedures included regular planning, monitoring and reporting of program activities. Quarterly review and planning sessions attended by the program staff and chief faculty advisors, were

held to guide the execution of project tasks. In addition, weekly staff meetings, daily planning schedules, and written monthly reports, were used to plan and monitor individual staff activities.

3. Fiscal Management Mechanisms Established

Internal financial records were developed to monitor program expenditures. Annual fiscal projections were made and reviewed against actual expenditures. Special care was made to keep an internal account of expenditures which were reviewed against the controller's records.

C. International Policies and Procedures Established

The Program developed an international policies and procedures manual to supplement the school's existing manual. The policy guidelines covered salaries, wages, fringe benefits, allowances, travel and transportation of household effects for Drew personnel involved in international programming. The policies specified in this manual have been reviewed for school-wide adoption by the Dean of Drew and his key administrators, including the fiscal officer, personnel officer and the director of administration. The manual was written to benefit school administrators, department chairpersons, program directors, Drew faculty and staff, outside granting agencies, and foreign host countries who are interested in Drew's position with respect to its international services.

02: Coordination of Resources

The program sought to expand and coordinate health personnel and material resources both within the Drew/MLK complex and throughout the larger domestic and international community. This was advanced through the development of a marketing plan, personnel resource file, various program linkages, and a data center.³

A. Marketing Plan Developed

The Program has embarked on a 5 year comprehensive marketing and development plan. The marketing plan is designed to accomplish the following objectives:

³The establishment of a library overlaps administrative infrastructure resource development and expanded knowledge and research capabilities. This output is described in detail in the latter section on knowledge and research.

- Secure enthusiastic support for Drew's IHD Program from the local community including the Drew/MLK Medical Center and local community leaders.
- Establish Drew as a focal point for activities related to health care planning, management, and rural/community development in LDC's. Emphasize the interrelationship between the management and development aspects of health care in LDC's.
- Develop a network of people interested in and working in LDC health care, management and development. Emphasize institutional linkages between Drew and LDC agencies.
- Develop a reputation for Drew as being the organization in the forefront of LDC health care and development.
- Secure additional grant monies to further work in LDC health care management and development.

These objectives are arranged hierarchically. The marketing program is designed to direct initial efforts toward the first objectives.

The key components of the marketing plan include the development of brochures, a local awareness program, mailing lists, quarterly newsletters, a paper series, and international conferences.

1. Brochure Started

Steps have already been taken to develop a brochure that will introduce Drew's International Health and Development Program. The accomplishments in this area have included:

- design consultant identified;
- overall scope and design of the brochure developed;
- brochure copy completed and reviewed;
- relevant photographs collected;
- mock-up of brochure developed.

A completed brochure is expected during the first quarter of year two of the program.

B. Resource File Development

As part of the Program's institutional infrastructure, a resource file was developed to coordinate faculty and staff expertise for international health programming. The resource file contains a reservoir of people with training and experience in various areas of health planning, management, and community development to serve as consultants to the program (see Appendix A for a list of areas of specialty).

1. Resource Surveys

A records survey of faculty and staff personnel files was conducted to identify key resource persons within the King/Drew Medical Center. In addition, a massive, nation-wide search for international public health and development specialists was conducted with the assistance of OPTION, a San Diego based international health professional referral agency. The results of these recruitment efforts have been the identification of approximately 100 specialists with specific experience and interest in international activities. Appendix A lists the number of identified resource persons currently available by their areas of specialty.

2. Resource Filing System

The Program developed a system for the proper acquisition, maintenance and upkeep of resource materials. Three separate resource files are kept for each resource person. Resource data are summarized in 2 separate card files, one is indexed by area of expertise and the other is an alphabetical listing of consultants; a third file is kept which contains the consultants curriculum vitae, resource data sheet and other background information.

A yearly follow-up system has been implemented for the purpose of up-dating resource information already on file. The program continues to catalogue existing resource information and to search for additional resource persons.

C. Domestic Linkages

The program director and other staff have continuously worked toward developing a number of domestic linkages with significant organizations, institutions and individuals. The intent of these contacts has revolved around establishing supportive or otherwise collaborative working relationships for health programming. Different linkages have been developed and are discussed separately below.

1. Drew/MLK Medical Center

A series of meetings were held with over 15 faculty persons and 7 department or program heads within the Drew/MLK Medical Center. These meetings were held to introduce and discuss various areas of interface within the context of international health programming. The areas considered included: paraprofessional training, nurse midwifery, mental health, human and community development, curriculum development and continuing education, health planning, traditional health practices and ophthalmology. The faculty represented the following departments and programs: Dean's Office, Community Medicine, Fanon Research and Development Center, MEDEX-Physician's Assistant Program, Ophthalmology, Research and Psychiatry. The outcome of the meetings were, in all cases, an expressed interest and willingness to commit resources for providing health services in Africa.

- (a) International Health and Development Conference - One specific area of collaboration involved an international health and development conference co-sponsored with the Fanon Research and Development Center at Drew, Somalia Ministries of Health, Higher Education and Culture, and the National Somalia University. The conference was held in Mogadishu, Somalia June 15-July 1, 1979. (See Education and Training for more details).

2. University of California at Los Angeles (UCLA) -

Additional linkages were made with members of the UCLA community. A number of meetings were held to help facilitate and collaborate on program activities. The organizations involved included the School of Public Health, African Studies Center, and the Center for Afro-American Studies.

(a) School of Public Health

The Program collaborated with the International Health Division in several ways. They were immensely helpful in providing consultation on the development of the administrative infrastructure. They also were a major partner in the conceptualization of the Drew proposal for the Somalia Rural Health Project USAID contract proposal and were represented in the proposal as a major sub-contractor.

(b) African Studies Center

The Program is a co-sponsor with the Center in the planning and presentation of a symposium entitled "African Healing Systems".

The Center and the Program have collaborated closely in relating to and supporting the Somali graduate students (mainly National University faculty seeking a higher degree) presently in residence at the Center.

The Center had an important role in the Somalia Rural Health Project contract proposal and collaborated with the Program as a potential sub-contractor. We had planned, through the contract, to develop jointly a Somali Area Studies Program. The latter program would have been the major cultural-linguistic preparatory vehicle for persons destined to serve in Somalia.

(c) Center for Afro-American Studies

The Director of the Center participated as a staff leader and presenter at the Fanon (Drew) Mogadishu International Health Symposium.

The Center has collaborated with the Program in helping to orient, support Somali students who are on the UCLA campus and who have expressed an interest in relating to the Drew School campus. The Fanon (Drew) Mogadishu conference was so successful, many of the Somalis who come to UCLA are interested in establishing ties with the Drew School.

The Center had a designated role in the Somalia Rural Health Project contract proposal, being responsible for some aspects of evaluation and assessment.

3. Black Health Science Centers

The Program staff has been in constant contact with our fellow international health programs, i.e. Tuskegee Institute, Howard University and Meharry Medical College. The exchanges are primarily cooperative-informational ones. A strong movement exists toward the development of a formal health sciences consortium which will strengthen the individual programs.

4. Project Concern

The program collaborated with Project Concern, a health care development and training organization in San Diego. The organization initially joined in the Drew School's proposal for the Somalia Rural Health Project contract. The cooperative arrangement continues in the form of resource sharing.

D. African Countries Visited

The Program staff laid the groundwork for working with African countries by establishing its country selection criteria and by initiating arrangements for current and future linkages.

1. Country Selection Criteria Established - Seven criteria used in selecting countries with whom to develop linkages were established. Overall, it was felt important to select a country which would yield the program a high probability of success. Appendix B lists the criteria which predetermined selected African country visits.
2. Current African Linkages - An extensive effort went into developing program and institutional linkages with heads of African institutions. The program director and, in some instances, the Dean of Drew met on several occasions with USAID officials, Ministry officials, and University officials, in Somalia, Kenya, and the Sudan. Several formal and informal linkage arrangements have subsequently evolved such as:

(a) Somalia Institutional Linkage Agreement

In January 1980, the Dean of the Drew School and the Program Director signed a formal institutional linkage agreement with the National Somali University (See Appendix C). As a part of the linkage agreement, the Program has developed an Accelerated Impact Program (AIP) proposal. The proposal has identified the need for the training of newly graduated physicians and nurses in rural health planning and management. The need for this training and technical assistance was pointedly expressed by the National University Medical School and the MOH.

In addition, two U.S. based Somali graduate students have been involved in the development of the AIP proposal and a Women in Development project within the program.

(b) Kenya

In Kenya, we have been attempting to arrange, jointly with the UCLA School of Medicine, a sabbatical program for the former Dean of the University of Nairobi School of Medicine. The area of expressed interest is sports medicine. The final arrangements are generally in place.

3. Prospective African Linkages

Currently (January and February 1980) the program director is traveling to various countries in Africa in hopes of developing additional institutional linkages. The prospective countries include Uganda, Zimbabwe and Zambia. In general, the program retains a high degree of interest in relating to Southern Africa, as a region, as well as certain countries therein. This interest follows an international conference held on Southern Africa at the U.S. State Department approximately 2 years ago.

We are involved in a series of discussions with Southern African and Southern Africa experts in an attempt to devise an appropriate and comprehensive involvement strategy.

EXPANDED EDUCATION AND TRAINING CAPABILITY

The proposed objectives of an expanded education and training capability are as follows:

- °1 Develop training curricula that are meaningfully related to the needs of a particular country.
- °2 Develop training methods and materials for implementing the curricula.
- °3 Encourage the collection and exchange of information between training institutions in the host country, and other parts of Africa, as well as those in the United States.
- °4 Foster exchange of faculty, scholars, and selected trainees between host country institutions and Drew.

The program pursued activities in line with meeting each of the aforementioned objectives which included and surpassed first year program requirements. This involved curriculum development, faculty development, faculty and trainee exchange.

°1: Develop Training Curricula

Core and selected courses in health planning and management are major outputs proposed in year 2. Some activity, however, was started in the area.

A. Core Courses Identified

A list of 20 'core' courses were identified for consideration as an appropriate curriculum for masters degree training in public health planning in developing countries.

B. Selected Courses Identified

The Program staff identified, with host country directions, the training needs, training participants and curriculum development strategy for Somalis involved in rural health planning and management. The proposed courses in this area will be developed as a part of the linkage agreement with the National Somalia University.

02: Develop Training Methods and Materials

A. Training Methods Identified

Several staff members worked with Drew's curriculum development specialist, Dr. R. Johnson, in individual training and workshop settings, to learn self-instructional training techniques. Self instructional packages offer a key training tool for developing countries as it is competency based, and is an exportable, and transferable training technology.

The use of workshops was also delineated as an appropriate setting for learning and sharing of skills with Somali health professionals in selected course offerings. The use of this training method as well as the self instructional packages, will be further explored with Somalis in the months ahead.

B. Training Materials Developed

Program staff constructed, along with other Community Medicine faculty, self-instructional packages on aspects of public health planning and management.

The self instructional units are:

- 1) International Health - Some Aspects of the Old Dilemma: Health or Development
- 2) Health Delivery Systems - How to Utilize It
- 3) Epidemiologic Principles
- 4) How to Select a Health Education Method
- 5) Practical Environmental Health
- 6) Demand and Utilization of Health Care Services: A Sub-Optimal Approach to Estimation
- 7) An Approach to Information Management

These packages have been made available for Drew/UCLA undergraduates. They can also be adapted for use in a specific African country.

03: Encourage the Exchange of Information: Faculty Development

The Program undertook a number of activities designed to collect and exchange ideas and information among Drew faculty, Africans, Africanists, and other Third World people. The purpose of these activities was to explore alternative health and development strategies focused on faculty development.

A. International Health Seminars Held

The Program sponsored several seminars for the Drew/MLK community that were designed to explore health care strategies in developing countries.

1. Symposium on Health Care in Southern Africa

The Program held a slide presentation and lecture on Health Problems in Mozambique offered by Dr. Jack Kent (Department of Medicine) who has worked as a volunteer physician in parts of Southern Africa.

2. Seminar on Health Care in a Developing Country

The Program sponsored a luncheon forum on Vietnam's strategy for increasing its health manpower. The presentation was given by Dr. Ton That Tung, Director of the University Hospital in Hanoi and professor of surgery on the faculty. Dr. Tung had a major role during Vietnam's reconstruction period in health delivery systems planning and developing.

3. Barefoot Doctors of China Lecture and Film

Dr. Author W. Chung, a key actor in revolutionizing China's health system, presented an insightful lecture of manpower planning and development in China.

B. Traditional Healing System Symposium Developed

The Program sponsored with UCLA's African Studies Center the development of a lecture series on African Healing Systems. The Symposium will be offered to the Drew/UCLA communities during the Spring of 1980.

C. International Conference on Health and Development Held -

The Program cosponsored a conference entitled "Human Development Models in Action" held in Mogadishu, Somalia between June 15th and July 1, 1979. The Program collaborated with Drew's Fanon Research and Development Center, Somalia's Ministry of Health, Ministry of High Education and Culture and National Somalia University. Several sessions and mobile workshops were devoted to health and development issues. The conference included 36 formal presentations by scholars representing 15 countries with in the Third World.

D. African Women Delegation Hosted -

The Program participated in the day long orientation and tour of the Drew/MLK complex for 4 African women leaders from Senegal and Togo. The women's visits were sponsored by the International Division of the National Council of Negro Women who requested a fact finding mission of the Drew/MLK complex for the African women.

E. African Health Professional Delegation Hosted -

The Program staff organized and hosted a day long orientation and tour of the Drew/MLK for 3 African health professionals whose visit to the area was arranged through Operations Crossroads. The visitors were:

- Dr. Benedicto Ababio -- Accra, Ghana (Ministry of Health)
- Dr. El Samani El Fatik -- Khartoum, Sudan (University of Khartoum)
- Dr. Lloyd Kapuka -- Livingston, Zambia (Ministry of Health)

F. Seminars/Conferences Attended -

Aside from sponsoring health programs, the program staff also attended a number of seminars and lecture series to increase their exposure to and awareness of international affairs.

1. Local Workshops

UCLA public lectures and forums were frequented regularly, particularly those sponsored by the African Studies Center and the Center for Afro-American studies. These information exchange sessions offered insight into the cultural, political and economic state of African and other Third World people as viewed by internationally renowned scholars and Africanists. Typical sessions included:

- A 3 day conference on the "Political Economy of the Black World"
- "Food Problems in Africa Lecture Series"
- "Conflict on the Horn of Africa Lecture Series"
- "Cultural and Political Organizations in African Societies"

Other local conferences attended included: "Agriculture in the Third World" sponsored by the U.S. Overseas Private Investment Corporation (OPIC), and International Trade and Barter Conference sponsored by UC Berkeley. These sessions heightened staff awareness of international development efforts.

2. International Symposium

The program director and Dean of Drew were guests of the Somalia Democratic Republic for their International Symposium entitled Somalia and the World. This seven day conference was held in celebration of the Tenth Anniversary of the country's revolution. The major sub-themes of the conference included: 1) Revolutionary Africa, 2) Self-Determination and Conflict on the Horn of Africa, and 3) Towards International Somalia Studies. Though the focus was on "Somalia and the Horn", the perspective was a comparative one including Africa and other Third World countries.

04: Foster the Exchange of Faculty, Scholars and Selected Trainees

The Program assisted several African nationals to obtain long and short term training in the U.S. Also, faculty and student selection criteria for Drew's exchange program were developed.

A. Faculty/Student Selection Criteria Developed

During a major program development retreat, the staff and senior program advisors identified criteria which will be used in selecting exchange persons. The selected persons would represent and be acceptable to the medical school and the Ministry of Health to achieve maximum cooperation to effect change back in the host country. Other criteria included being young, receptive to new ideas and having clout or potential clout within the host government.

B. Long-Term Training Opportunities

The Program was called upon to assist several African physicians and students to obtain U.S. postgraduate and graduate training opportunities. The tightened control over foreign physician training and limited graduate training funds restricted the Program's ability to assist in this area. Nonetheless, the Program helped to facilitate graduate training for one Somali student, and a Kenyan physician in UCLA's graduate programs.

C. Short-Term Training Opportunities

Mrs. Margaret Ndegane, a psychiatric nurse from South Africa received a three week training in mental health program and systems planning. Ms. Ndegane's internship was sponsored by Operations Crossroads and orchestrated by our Program. The program arranged housing accommodations for the visitor and set up a rotating training program for her at Drew and Central City Community Mental Health Center.

EXPANDED KNOWLEDGE AND RESEARCH CAPABILITY

Drew's knowledge and research capability is intended to increase by: 1) developing a resource library, and 2) conducting research in the specified program areas. The first year achievements in these areas are described below.

A. Library Established

In accord with the specific purposes of Drew's 122(d) grant, namely to assume the role of a major institutional source of educational training, advisory and consultative expertise in international health, a library has been started in the International Health and Development Department at Drew.

Two specific areas of international health:

- 1) health planning and management,
- 2) integrated rural and community development programs

are being emphasized in our collection of available resources. It is partially through this library that Drew's faculty and staff's knowledge and understanding of the major health care problems in the lesser developed countries, especially within Africa, can be improved.

During this past year, as we have selected resource material for our library, we have emphasized source material relevant to our gaining knowledge and information of previous approaches to solving health care problems and evaluation of these approaches identifying key elements in their success or failure. Other areas of special emphasis include health education, nonformal education, health training aids and manuals, evaluation, health manpower, development and training, and women in development. To date we have several hundred books, pamphlets and other resources in the library or on order.

Since this is a rather unique library, the initial plan for establishment of it was developed after consulting with appropriate staff at the Pacific Southwest Regional Medical Library Service located within the UCLA Biomedical Library complex and the librarian at the Martin Luther King Hospital Library, and researching library resource material.

Currently, we are involved in categorizing the material as it arrives and making subject and author cards for our card catalogue before shelving the material in the library. Appendix D is our initial alphabetized list of general categories being used. Several of the categories have been subdivided and all may be subdivided if needed. Each book or article is filed according to subject area and then alphabetized according to the author's last name. There is a separate area for periodicals received. Periodicals are alphabetically filed according to journal title. Appendix ' E is the list of periodicals currently being received.

Although it is only in its early states of development, we are finding our library a valuable source for help in all aspects of our jobs.

B. State of Art Survey Started

A research document on the state of the art in health planning and management has been completed. The document reviewed relevant background material on the subject and provided the analytical framework and study approach to be pursued during the second year of the grant.

1) Initial Materials Collected, Analyzed -

An extensive literature review of national health planning and administration and different health project planning and management strategies used in Africa has been conducted. Each article and book collected and reviewed has been abstracted on index cards. This helped to provide the basis for developing an appropriate research design. The research method involved uses a comparative case study approach of health planning and management strategies based on different political economic structures of African countries.

EXPANDED ADVISORY AND TECHNICAL ASSISTANCE CAPACITY

No specific outputs were proposed in the area of expanded advisory and assistance capacity. As mentioned earlier, however, the Program did engage in direct assistance programming.

A. Direct Assistance Programming

Drew's International Health and Development Program collaborated with SECON, Inc. (a Drew associated small business firm with an AID indefinite quality contract) in bidding for the USAID/MOH Somalia Rural Health Project. The bid for this \$15 million training and technical assistance program came at the request and encouragement of several Somali officials and AID mission representatives.

The Program staff put in extensive and laborious time and effort in developing the technical and management proposals for the project. This included synthesizing country background material, defining the scope of work and work plan, and gathering resource persons to serve as long and short term consultants for the project. The tasks were monumental especially given that time served as a major constraint.

PROGRAM PROSPECTS AND PROBLEMS

Prospects

By all accounts, Drew's International Health and Development Program enjoyed a challenging and productive year. The Program started all activities related to its principle objective of increasing Drew's international health planning and management capabilities, including its administrative, education, research and technical assistance services.

Next year the program will further expand and solidify these first year outputs. In addition, the program will focus on its second project purpose. This relates to the expansion of Drew's integrated rural and community development component. A summary of the major activities projected for next year follows.

A. Administrative Infrastructure Development

1. Data Center Established

The Program plans to augment Drew's data center by not only storing vital health and African country background data but also by computerizing the Program's resource, library and internal management systems.

2. Linkages Established

The Program plans to execute the terms of its linkage agreement with Somalia pending the availability of funds. Moreover, the development of another linkage agreement is expected, hopefully, within Southern Africa.

3. Resource File Expanded

Additional resource persons will be sought, especially with expertise in the area of integrated rural and community development. Resource material will be computerized.

4. Marketing Plan Continued

A brochure which introduces Drew's International Health Program will be completed. Also, a paper series will be initiated and available to interested organizations and individuals.

B. Expanded Education and Training Capabilities

1. Curriculum Development

At least two core courses in health planning and management will be developed and several selected courses will be developed and implemented in collaboration with Somali faculty and MOH officials. The latter objective depends upon the availability of funds.

2. Faculty/Trainee Exchanged

It is hoped that Somali faculty and students will be exchanged in order to assist in the program's research and education development activities in health planning and management and rural and community development. This will help to identify appropriate country-specific strategies in these areas.

C. Expanded Knowledge and Research Capability

1. Library Expanded

Additional resource materials will be collected and catalogued to supplement existing health planning and management references. Emphasis will be given to adding rural development materials. Library references will be computerized.

2. State of Art Surveys

The Health Planning and Management Survey will be completed and available for publication. The state of the art on integrated rural and community development will be started and the specific areas of concentration identified.

D. Expanded Advisory and Assistance Capacity

The Program intends to seek additional sources of funds for implementing its education and technical assistance services.

Problems

Drew's International Health and Development Program encountered several problems this past year which may impact upon its future prospects. Briefly, there emerged administrative and financial barriers that have hampered current and projected activities.

Financially, the program received institutional development funds but cannot implement any education, training or other aspects of a linkage agreement without implementation monies. After an AID meeting in Washington which addressed this concern of the Black Health Science Centers, the institutions were still without proper recourse. All available implementation funds are rooted in a long AID development process which is inadequate for instituting an effective linkage contract. The future success of the Program's 122(d) grant rests with the resolution of this matter.

Administrative constraints also emerged. It seems virtually impossible for African physicians to receive specialty training in the U.S. Congressional mandates imposed several severe entry requirements which, in effect, is designed to limit the number of foreign physicians who can enter the country. Since one of the most sought after items in a linkage agreement with African countries is the U.S. training of physicians in specific areas of specialty not currently available to them, the program is limited in implementing a major requirement of its 122(d) grant.

In general, minority medical institutions face many obstacles for implementing some of its current grant specifications -- particularly faculty/trainee exchange program, and its long term objective of providing direct assistance to African countries. These concerns were discussed with members of the Africa's Bureau Regional Office, AID's administrator, Mr. Douglas Bennet, and the Assistant Administrator - Africa Bureau, Mrs. Goler Butcher, in a meeting with 122(d) program directors and presidents of the respective Black Health Science Centers. As a result, steps were proposed by AID's administrators to increase the institutions chances for assisting them in their development efforts. Letters of introduction to AID missions were sent which described the Black Health Science Centers areas of specialty and availability for technical assistance. In addition, a meeting to discuss the problem of African physician training was proposed.

The advantages of including minority medical institutions in AID programming are as great as the obstacles that must be overcome. Continued program success depends upon breaking down the bureaucratic maze of AID to allow the flow of funds and information to reach Drew and the other Black Health Science Centers. This will enhance a steadily growing and mutually beneficial relationship.

APPENDIX A

Number of Resource Persons Identified by Areas of Specialty*

AREAS OF SPECIALTY

<u> </u> Agriculture	<u> </u> Logistics
<u> 2 </u> Anthropology	<u> 1 </u> Management
<u> 1 </u> Architecture and Design	<u> 1 </u> Manpower Analysis
<u> </u> Budget Analysis	<u> 1 </u> Maternal and Child Health
<u> 10 </u> Curriculum Design	<u> 2 </u> Media Specialist
<u> </u> Demography	<u> </u> Natural Resources (Specify)
<u> </u> Engineering	<u> 7 </u> Water Resource Development Spec.
<u> </u> Environmental Health	<u> 8 </u> Nurse Midwifery
<u> 6 </u> Epidemiology	<u> 3 </u> Nutrition
<u> 8 </u> Evaluation	<u> 1 </u> Operation Research
<u> </u> Family Planning	<u> 2 </u> Pharmacy
<u> </u> Geography	<u> 2 </u> Social Work
<u> 2 </u> Graphic Arts	<u> 2 </u> Sociology
<u> 2 </u> Health Economics	<u> 2 </u> Statistics
<u> 15 </u> Health Education	<u> 2 </u> Survey Research
<u> 7 </u> Health Planning	<u> </u> Transportation Analysis
<u> 7 </u> Health Services Administration	<u> 1 </u> Urban and Regional Planning
<u> 1 </u> Information and Data Systems	<u> 1 </u> Veterinary Medicine
<u> </u> International Law	<u> </u> Other (Specify)
	<u> 2 </u> Sanitaricians

* Several resource persons maintain more than one area of specialty and may be counted more than once.

APPENDIX B
COUNTRY SELECTION CRITERIA

The following lists Drew's IHDP's criteria for selecting African countries with whom to develop linkages:

- Expressed and real need for sharing health care resources;
- Consent from the Ministry of Health and the educational institution;
- Political stability;
- The predominant use of the English language;
- Low levels of involvement from other U.S. and non-U.S. agencies and organizations;
- High strategic interest in the country by the U.S.;
- Presence of a health infrastructure;
- Cooperation with other institutions in the consortia.

INSTITUTIONAL LINKAGE AGREEMENT.

ARTICLE I.

This agreement is entered into by the Charles R. Drew Postgraduate Medical School the National University of Somalia on 20 January 1980.
DATE

The Charles R. Drew Postgraduate Medical School, herein after, Drew School, has recently held a series of discussions with the National University of Somalia, the Ministry of Higher Education and Culture and the Ministry of Health pertaining to an institutional linkage relationship between itself and the National University.

This agreement is designed to jointly strengthen the capacity and capabilities of the Drew School, in cooperation with the National University of Somalia, in the areas of Postgraduate and para-professional training. This agreement will provide for training of African health personnel, an exchange of health programming deemed appropriate and beneficial to the parties of agreement. The development of these activities will be mutually advantageous to both Universities in the promotion and furtherance of health and development programming. This agreement will be formalized through the following agreement and/or any amendments thereto for an initial period of 2 years.

ARTICLE II.

The Drew school, subject to the availability of funds shall:
(1) Establish a University faculty exchange for appropriate collaboration in teaching, research and service.

- (2) Provide such office space, office equipment, clerical services and expendable supplies for Somali exchange faculty members as the Drew School determines necessary for the program.
- (3) Provide direct round-trip economy class air fare between Somalia and Los Angeles, California, USA for National University of Somalia faculty members participating in the exchange and for selected Somali health staff and/or student personnel.
- (4) Provide long term or short term education and training to Somali faculty, students or staff in locations or sites agreed upon parties to this agreement.

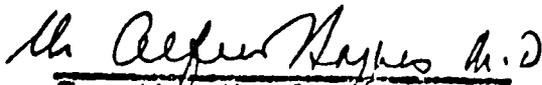
ARTICLE III.

The National University of Somalia, subject to the availability of funds, shall:

- (1) Provide a liaison person to handle contacts between the two cooperating institutions and handle custom clearances and transportation logistics for Drew School exchange faculty.
- (2) Provide facilities such as office, space, office equipment, expendable supplies and clerical services for Drew school exchange faculty.
- (3) Secure entry and exit permits, working or residence permits, identification cards and all other documents for National University of Somalia exchange faculty.
- (4) Provide housing accommodations and in-country transportation to work sites for Drew School exchange faculty.
- (5) Identify Somali National University faculty, staff or students who will be participating in mutually agreed programming. The National University shall provide such selectees with visas, passports and all other necessary travel documents.

(6) The National University of Somalia shall identify student health personnel for participation in this program but the Drew School will retain the final decision with regard to admission requirements, final selection of participants and credit.

Signatures


For the Charles R. Drew
Postgraduate Medical School


For the National University of
Somalia.

APPENDIX D
LIBRARY SUBJECT HEADINGS

Agriculture

Anthropology

Audio-Visual

Communication

Country Profiles

Africa

Central

Cameroon

Central African Republic

Chad

Congo

Gabon

Zaire

Eastern

Burundi

Ethiopia

Kenya

Rwanda

Somalia

Sudan

Tanzania

Uganda

Northern

Algeria

Egypt

Libya

Morocco

Tunisia

Southern

Angola

Botswana

Lesotho

Malawi

Mozambique

Namibia

Zimbabwe

South Africa

Swaziland

Zambia

Western

Dahomey

Gambia

Ghana

Guina

Ivory Coast

- Liberia
- Mali
- Mauritania
- Niger
- Nigeria
- Senegal
- Sierra Leone
- Togo
- Upper Volta
- Malagasy Republic
- America
 - Central America
 - North America
 - South America
- Asia
- Carribean
- Europe
- Pacific

Demography

Development

- Community
- Health
- Industrial
- National
- Programs and Projects
- Theory

Disaster/Relief Work

Diseases

- Animal
- Bacterial and Fungal
- Cardiovascular
- Chronic
- Communicable
 - Tuberculosis
- Digestive System
- Endocrine
- Eye
- Female Genital and Pregnancy Complications
- Hemic and Lymphatic
- Immunologic
- Injury, Occupational, Poisoning
- Mouth and Tooth
- Musuloskeletal
- Neonatal and Abnormalties
- Neoplasms
- Nervous System
- Nutrition and Metabolic
 - Surveillance Methodology

- Otorhinolaryngologic
- Parasitic
 - Malaria
 - Onchoceriasis
 - Schistosomiasis
- Respiratory Tract
- Screening
- Skin
- Symptoms and General Pathology
- Urologic and Male Genital
- Viral

Drugs and Supplies

Economics

Education

- Health
- Health Training Manuals
- Nonformal

Environmental Health

- Pest Control
- Sanitation
- Water

Epidemiology

Evaluation

- Family Planning

Family Health

- Child Health
- Maternal Health

Family Planning

- Guides and Handbooks

Grants and Contracts

Health Administration

Health Facilities

Health Manpower

- Development and Training

Health Planning

- Africa
- Europe

Health Resources

Health Services

Adolescents

Rural

Africa

Urban

History

Africa

Humanities

Art

Literature

Music

Performing Arts

Immunizations

Information and Data Systems

Law

Mental Health

Management

Systems

Organizations

Academic Institution

Consumer

Foundations

Government Agencies

International Non-Government

Philosophy

Africa

Health

Politics

Psychiatry and Psychology

Behavioral and Mental Health

Adults

Children

Services, Tests, Therapy

Public Health

History

Veterinary

Rehabilitati

Research

Sociology

Social Sciences

Statistics

Family Planning

Survey

Technology

Appropriate

Traditional Medicine

Transportation

Urbanization

Women in Development

(Separate Section)

Periodicals - see separate list

Reference

Bibliographies

Biographies

Disease Classification

School Directories

APPENDIX E
PERIODICALS

Africa

African Business

African Civilization, Journal of

African Mirror

African Wildlife Leadership Foundation News

Agenda - AID

American Journal of Public Health

Black Scholar

Business Week

Center for Afro-American Studies Newsletter

Comparative Health Systems Newsletter

CONTACT

Courier - Africa-Caribbean-Pacific-European Community

Dairy Council Digest

Drew Medical Society Bulletin

Family Planning, Studies in

Front Lines - AID

IPPF News

Medical Education, Journal of

National Geographic

National Medical Association, Journal of

Nation's Health

Natural History, Journal of

New African

People

Perspectives, Family Planning

Population Reports

Psychiatric Annals

Resident and Staff Physician

Resources Report, AID

Science

Scientific American

Southern Africa

Transafrica News Report

UNICEF News

World Development Letter

World Education Reports

Zimbabwe Review