EVALUATION OF THE

ASEAN SCHOLARSHIP FOR TROPICAL MEDICINE AND PUBLIC HEALTH PROJECT

SUBMITTED TO AID/ASEAN REGIONAL OFFICE

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A. Summary

The diversity of health needs is growing as ASEAN countries encounter their periods of epidemiological transition with high birth rates and declining mortality, when chronic disease become more significant factors in the morbidity and mortality patterns of some population groups, while communicable diseases remain the more pressing needs of the young and lower-income groups; and the health systems become more complex with overlapping traditional, public, and private health care systems often in conflict. The implicit challenge is to improve the health status of all the region's peoples. The development of human resources through research and training is perhaps the most important catalyst to enable further progress in achieving the goal of better health.

In 1980, critical gaps were evident in the number of academic health personnel to staff the region's training institutions. The situation prompted a request from the Thai Delegation to ASEAN for assistance in a plan to accelerate health manpower development. Funds were made available through USAID to ASEAN to establish a health scholarship project with TROPMEID, a SEAMEO coordinated university consortium. The project was designed to encourage mutual understanding among ASEAN countries through student exchanges and thus broaden the substance of regional cooperation. Furthermore, scholarships support institutional development by bringing into the academe various field experiences in managing similar health problems. Ultimately, the impact of trained personnel should be to benefit the population who will have wider access to health services.

This review, four years after the project approval, was undertaken as a joint TROPMEID and USAID evaluation to assess the project's progress to date. The project plan targeted 500 scholars over the five year life of the project and required that no more than 25% of the scholars attend their home country institution. At the time of evaluation, a total of 417 scholars had received scholarships for both diploma and masters degree programs. It appears likely that the 500 target will be exceeded by 5 to 10%. The other important findings are listed below.

1. The ASEAN Governing Body efficiently carried out their responsibility to oversee the distribution of scholarships. Their commitment to sustain regional cooperation over more narrow national and institutional loyalties played a substantial role in the achievement of the project's goal.

2. The project staff similarly encouraged institutional linkages beyond those of the project scope as part of their commitment to the development of strong regional institutions.
3. The ASEAN scholarships provided cost-effective training to the region's health workers. Comparative estimates for U.S. training indicate that ASEAN training is over 60% less costly.

4. The SEAMEO-TROPMED consortium continues to offer training that is relevant to the region's health research and health delivery systems. As new national efforts are made to change the organization and financing of health services, curricula will require updating. Research into public health and nutrition similarly will find its place in the classroom through TROPMED sponsored faculty exchanges, seminars, and publications.

5. The training seems to be meeting a strong demand with course alumni employed in their country of origin, generally in a higher or more technical position, serving as teachers and administrators.

6. The primary beneficiaries are the scholarship recipients who report higher incomes, more job satisfaction, and generally an appreciation for ASEAN regional cooperation. The intermediate beneficiaries are the training and academic institutions as well as the health service delivery system line units.

7. Important elements are in place to support a Phase 2 of the ASEAN project. Improving health and nutrition status remains a high priority throughout the ASEAN region. The SEAMEO-TROPMED Fourth Five Year Development plan identifies their priority needs in research and training to support the National Centre's role in social welfare development. The AID/ASEAN Regional Program can further assist the National centres to expand their capacities and accelerate technology transfer.

The recommendations of the team are:

1. The investment in regional health/nutrition training and research should continue and increase.

2. The SEAMEO special project status of TROPMED should be retained and supported. If TROPMED were to become an international centre, it is likely that the base of operations would move from the National Centre's to the host country centre, thus undermining the intent of working with existing institutions for regional cooperation.

3. ASEAN and SEAMEO should continue to support institutional linkages within and among ASEAN countries to make efficient use of scarce health resources.
4. A project design team should be contracted to review evaluation findings and develop portions of a Phase 2 project documentation. Optimally, input should be solicited from TROPMEU National Centres and participants. The effort should begin prior PACD, June 30, 1986.

5. Additional consideration should be given in project design to simplifying the approval process for selected scholarship recipients. The Ministries of Foreign Affairs in each country who review and give final approval, generally do not usually have systems in place to expedite review of the scholarship nominees. The delays could be reduced with an abbreviated approval process. Further discussions will determine whether this is acceptable to the organizations involved.

B. Background and Current Status

TROPMED was created as a SEAMEO project in 1967 to promote regional cooperation in the prevention, control and eradication of endemic tropical and communicable diseases. TROPMED is one of seven region-serving projects under the umbrella of the Southeast Asian Ministers of Education Organization (SEAMEO). SEAMEU, established in 1965, promotes cooperation in education, science and culture. Currently, the active member countries are Thailand, Malaysia, Philippines, Singapore and Indonesia. Since 1975, Cambodia, Laos, and Vietnam have become inactive members. SEAMEO maintains a continuing relationship and may be a useful linkage with these non-ASEAN neighbors for future cooperation in Indochina. In addition to the member countries, Australia, France and New Zealand enjoy a special status as SEAMEO associate members.

The United States Government (USG) supported the early organization of SEAMEO and provided substantial assistance in capitalizing all four regional centres. At that time, Indonesia, Thailand, and the Philippines already established Schools of Public Health, but were lacking the resources to adequately provide tropical medicine training. Furthermore, many of the prevalent diseases are common to the countries of Southeast Asia suggesting an opportunity for regional collaboration in the area of public health.

The executive arm of SEAMEO, called Southeast Asian Ministers of Education Secretariat (SEAMES), assembled a task force in 1966 to propose an organizational structure for a regional TROPMED
centre. The team produced a fact-finding report and regional profile of institutional resources. They recommended that no new centres be built in order to avoid the long-term financial obligations and personnel commitments that would be a drain on the participating countries' resources. Instead, they urged SEAMEO to support and expand the capabilities of existing facilities with a Central Coordinating Board, based at the Faculty of Tropical Medicine in Bangkok.

SEAMEO accepted these recommendations and established TROPMED as a consortium of four National Tropical Medicine Centres. In 1982, the National University of Singapore joined the SEAMEO TROPMED project making a total of five participating centers. The organizational chart below diagrams the current SEAMEO-TROPMED project status.

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1 Task Force members: Prof. Chumlong Harinasuta, Representative of Thailand, Dr. Ungku Omar Ahmad, Representative of Malaysia, Dr. Julian Paguyo, Representative of Philippines, Prof. Nguyen Hun, and Dr. Nguyen Van Ai, Representatives of South Vietnam, Dr. John Wellington and Dr. William Tigertt, USAID and Prof. Brian Maegraith, VSA.

The Central Coordinating Board (CCB) identified here is mandated to coordinate the activities of the National Centres, make joint aid applications for bilateral and multilateral assistance, serve as a clearinghouse for publications, assist in faculty and student exchange and organize conferences on topics of regional interest. One representative from each country sits on the Board.

The U.S.G. support to the SEAMEO-TROPMED project began in 1970 with the project's first five year plan. Funds available to SEAMEO permitted construction of new classroom facilities, procurement of laboratory equipment, and transport vehicles to assist in field activities. Under the 1975-80 Second Five Year Plan, USG assistance grants provided SEAMEO with 50% of the Centre's operating costs. In addition, AID funded a 1975 Regional Scholarship Program for degree courses including public health training in Thailand, Malaysia, Indonesia and Philippines.

During this period, there was severe lack of funds available to support training and research fellowships. Consequently, at the April 1979 meeting of the ASEAN Experts on Health and Nutrition Development, the Thailand delegation proposed an ASEAN Scholarship Program to accelerate health manpower development in Southeast Asia. It was approved and sent to the ASEAN Committee on Social Development Meeting in May 1980 for consideration. The Committee recommended that the scholarship fund be administered by a governing body. Finally, the programme was approved by the ASEAN Standing Committee in June 1980 and presented to the USG at the ASEAN-US Dialogue. The project was signed on June 19, 1981, by Frederick Schieck, Acting Asst. Administrator for the Asia Bureau.

Current, TROPMED is in its Third Five Year Plan. The primary challenge is to upgrade TROPMED courses, develop Ph.D. curricula at each National Centre and improve research capabilities through regional cooperation. The USAID to ASEAN project inputs are health and nutrition scholarship grants for masters and diploma level courses. The scholarships are available to qualified health personnel from the five ASEAN countries at TROPMED's National Training Centers. The next section describes more fully the project's implementation arrangements.

C. Project Organization and Achievements

The project documentation provides only a glimpse of the organization used to achieve the project's main aim, namely, distribution of scholarships. Though the history of USG support to SEAMEO-TROPMED is extensive, there appears to be a lack of detailed information about how the nature of that assistance has developed. Therefore, the following description is intended to provide a very specific review of the SEAMEO-TROPMED structure as used for this ASEAN project.
The Government of Thailand administers the scholarship fund on behalf of ASEAN through the TROPMEU office at the Faculty of Tropical Medicine, Mahidol University, Bangkok. The former Dean of the School, who is also the Coordinator of the SEAMEO-TROPMEU Project, is the ASEAN Programme Coordinator. The project is guided by the ASEAN Governing Body. This group functions in a manner similar to TROPMEU’s Governing Board with the mandate to allocate scholarships, to direct the nature of courses offered for ASEAN scholarships and to make determinations of policy on related issues. The Governing Body membership is generally the same people who sit on the SEAMEO-TROPMEU. Thus there is a continuity in leadership between the two policymaking groups, a familiarity with the critical issues, and an opportunity to draw on the staff resources available to the project through both TROPMEU and SEAMEO.

The initial project agreement identified training institutions located in four ASEAN countries. However, this was later amended in 1982 (PIL NO. 1) to include Singapore. The sponsoring institutions and courses offered for regional scholarships are identified in Annex 1.

AID made no stipulations regarding allocation of scholarships among the participating institutions and member countries. The selection criteria remained within the domain of the Governing Body. The sole condition applies to the number of students receiving scholarships in 1980-6 in their home country institution and is not to exceed 25% of the total number of scholarship students. The major purpose of this requirement is to assure that the scholarships facilitate inter-country exchange.

The Governing Board as a body has no implementation responsibilities. The Director of each national centre is responsible for providing the intended training and if the student's performance is acceptable to grant the diploma or degree. Each institution manages the student scholarship budget which must then be approved by the Governing Body.

Each TROPMEU National Centre has a Programme Coordinator to manage administrative functions, advise students on course selection, visa applications, and advocate for the project within the institution. The Coordinators thus are the back-up manager for the Governing Body representatives and often are the ones identifying issues of concern to that body through their representatives.

Scholarship funds are allocated for student living allowance, books, laboratory supplies, tuition fees, health insurance, thesis support (i.e. research expenses) and international travel. The training and support costs are fully covered by the project grant. This is because ASEAN’s juridical status does not allow it to levy financial assessment on its members. For students attending in-country
programs, the allowance, laboratory supplies and tuition fees are generally lower, allowing the member country to subsidize 2 to 4 of their own students for the same cost. The value of the scholarships was updated once as a PP Addendum cited in Manila cable 6351 dated March 11, 1983. At that time, the travel and tuition costs were the primary cost centers escalating over the period to 1986.

The SEAMEO-TROPMED Central Office is mandated to be the administrative backstop for both the Governing Body and the Central Coordinating Board. The 11 SEAMEO-TROPMED staff are directly involved in day to day project management. The staff members are on annual contracts subject to SEAMEO civil service regulations and pay classifications. Their salaries are paid out of the SEAMEO-TROPMED operating budget which is supported by the member country governments.

Achievements

The Project Grant Agreement provides $2,500,000 for scholarships over five academic years, 1981/2 through 1985/6. The project is being evaluated now in its fourth year to review the progress in meeting both quantitative and institutional targets. The joint TROPMED-AID/ASEAN evaluation is also looking prospectively at the future of the health training program, noting desirable changes, and identifying external assistance needs. A full description of the evaluation methodology can be found in Annex 3. The AID Washington Asia Bureau/DP/E office provided substantive guidance to the structuring of the evaluation. The cable appears as Annex 4.

The SEAMEO-TROPMED staff has effectively managed the technical and organizational implementation of the project. A total of 417 scholars accepted scholarships to date with $1,752,404 already reimbursed and $747,596 remaining for the 1985/6 cycle of courses. The project targets 500 scholars during the LOP and it appears likely that 5 to 10% more scholars will be included in the project. It is not likely that a deobligation action at PACO will be necessary.

A recently completed questionnaire survey of graduated students found that most of the students returned to their countries to continue public health work primarily in academic teaching positions and government health programs.

The broader impacts of these statistical achievements are discussed in the following two sections, examined first as a function of project design and implementation followed by an institutional development analysis.
D. Project Implementation and Design Issues

The project design does not specify criteria for selecting scholars, goals for course changes or curriculum accreditation nor targets for training of academic health manpower cadres, though the scholarship project achieved some measure of all three. These decisions were left to the Governing Body and to each TROPMEU/National Centre. The guidelines for implementation were thus highly flexible. The implementation strategy relies on existing institutional incentives to better serve their faculty, student and government clientele. The absence of an explicit policy, determined in advance for the institutional arrangements, allows the project to more fully serve TROPMEU's regional cooperation goal and preference for autonomy. The implementation arrangements that evolved are discussed in detail below. For the sake of clarity, issues are organized by functional areas.

1. Selection of Scholarship Recipients

The selection of scholarship recipients is an iterative, negotiated process. The Governing Body annually establishes a target number of scholarships per course for each participating ASEAN country. The number of scholarships is used as a proxy for the award value. In some cases, a single scholarship can support up to three students if they are attending a home country course so the number of scholarships is not equivalent to the number of scholarship students.

The SEAMEO-TROPMED and ASEAN Governing Body members solicit scholarship applications from their respective faculty, student body, Ministry of Health, Ministry of Education, and National Economic Development Authority (in the case of the Philippines). The applications are first reviewed by the Centre Programme Coordinator and the Governing Body member who rank orders list of potential candidates. The list is submitted to both the Ministry of Foreign Affairs (ASEAN link) and the Ministry of Education (SEAMEO link) for their approval. The ASEAN Secretariat then gives the final review and endorsement. The SEAMEO-TROPMED staff and the Governing Body work collaboratively to assure a timely approval process.

Each country in effect has control over both the individuals they elect to send and what training they consider a national priority. Concerns arise from the receiving institution when students are not qualified or academically incapable. In response, the Governing Body has developed guidelines for language proficiency, minimum educational background, and an age ceiling (age 45). Informally, they urge member countries to
avoid selection of scholars as a political or seniority award, to endorse students who are most likely to return to work in their country, and to consider favorably those applicants who work outside the major metropolitan areas. Through such discussions and debate, changes have occurred in reducing the average age of scholarship recipients, in increasing the representation of students who work in the provinces and in allowing teachers and researchers from private schools to receive training scholarships.

The National Centres have a vested interest in receiving ASEAN scholars. The international students contribute to the institutions' prestige and often are called on to bring their experiences into the classroom. The ASEAN students pay higher tuition and laboratory fees where most of the in-country graduate training is heavily subsidized by the National Government. The scholarships thus directly contribute to operating revenues. The competition for scholarships begins at the National Centres. The final decision making, however, remains with the Governing Body which annually negotiates each centre's level of support.

The competition among scholarship applicants varies in each year and is different in each country. The Programme Coordinators in the Philippines, Indonesia, and Thailand report that many applications are rejected because they do not meet the basic entrance criteria, the sending Ministry does not approve a leave of absence, or the government authorities identify other candidates.

The demand for advanced training in tropical medicine and public health remains high, with most schools experiencing an overall increase in admission applications. Increasingly, the masters degree or diploma beyond MD degree are necessary requirements for responsible teaching and administration positions.

2. Training

The scholarships are offered for 14 diploma and master degree courses at four TRUPMEU institutions and in Singapore. Many of the courses have a long history of SEAMEU support and have developed with an eye to ASEAN regional needs. A brief profile of each country's training follows:

TRUPMEU/Philippines - University of the Philippines
Institute for Public Health, Manila

The Institute for Public Health program for the region specializes in public health and rural medicine. The USAID to ASEAN Scholarship project supports three masters degree programs - the Master of Public Health in Rural Health; the Master of Science in Public Health focusing on research skills; and the Master of Occupational Health focusing on the interaction of physiology and work. With the exception of the Occupational Health course, the majority of students pursuing course degrees are not supported by ASEAN scholarships.
Mahidol University is appropriately identified as a regional resource institution specializing in both general and clinical tropical medicine. Initially, three degree programs were included in the project scholarships, the Diploma in Tropical Medicine and Hygiene, the Master of Science in Tropical Medicine, and the Masters of Public Health in Urban Health. In the 1982/3 academic year, the Master of Science in Clinical Tropical Medicine was added to TROPMEU supported courses, as a means to satisfy the demand for further training beyond the six month UTMH course. Relatively few students in the regional courses are sponsored by ASEAN Scholarships.

The SEAMEO-TROPMEU special project at the Faculty of Medicine focuses on nutrition and Food Science. The Master of Science in Applied Nutrition is offered along with the Diploma in Applied Nutrition. The Diploma course curricula was substantively revised in 1982/3 and extended the course period to ten months. The faculty are drawn in from the University of Indonesia's School of Medicine and School of Public Health to lecture and advise students. All of the students pursuing these courses are supported by ASEAN Scholarships.

Singapore began to participate in the TROPMEU project and thus became eligible for scholarship support in 1982. The National University of Singapore serves the region with courses in occupational medicine, offering Masters of Science degrees in both Occupational Medicine and Public Health. Singapore utilizes the ASEAN Scholarships exclusively for its own courses, and subsidizes primarily non-Singaporean students. Very few students in these courses are supported by the project's scholarships.

The Institute of Medical Research (IMR) provides specialty training in applied parasitology and entomology as well as medical microbiology. IMR is not a degree granting institution and therefore initially offered two Diploma courses in Applied Parasitology and Entomology and Medical Microbiology. Following institutional agreement with the University of Sains, IMR began a Master of Science in Medical Microbiology program in 1984/5.
This project was designed to strengthen the existing program of regional courses. Many of the faculty and some of the administrators were not aware of either ASEAN or USAID support to their courses. However, there was a remarkable consensus that the scholarship support created new opportunities for expanding the course material. The relevancy of the courses can more readily be substantiated by student critique and exchange faculty. The collective opinion now, as in the past, is that the regional courses offer high quality training.

The courses generally provide basic technical training to develop laboratory and management skills. As Indonesia, Thailand, and Philippines promote in-country vaccine development, and pharmaceutical companies look to the Pacific Basin for new trade markets, there will be increasing opportunities to utilize the advanced laboratory and research training. Furthermore, expanding public health efforts in these countries are demanding greater numbers of trained health managers.

Faculty in each institution visited report that curriculum development is a high priority, though little time is devoted to it. Overall, the capability for modifying courses exists, while the need is to redefine and redesign relevant course curricula. SEAMEO-TROPMEU can play a significant support role in this endeavor.

3. Support for Institutional Development

The SEAMEO-TROPMEU central office coordinates the AID to ASEAN scholarships along with other donor resources. The effort in this scholarship project is one of operationalizing regional cooperation and differs markedly from the more heavily directive style of AID bilateral programs. The assistance needs and the willingness of each centre to accept assistance varies considerably in ASEAN countries. The emphasis, therefore, is on meeting country-specific needs while expanding institutional linkages. The scholarship program lends TROPMEU a useful means of pooling resources to the region and supports their larger effort of developing institutional capabilities.

Over the past four years, TROPMEU has substantially contributed to the upgrading of regional courses with a combination of donor resources and newly forged institutional relationships. For example, they worked with the University of the Philippines/Institute of Public Health to negotiate a proposal with the German Development Agency. TROPMEU/Philippines now has 6 field sites in Cavite Province for training students in practical public health work and research. In Kuala Lumpur,
the Institute for Medical Research (IMR) could not meet the demand for advanced medical microbiology training. The IMR is not an accredited degree granting institution in Malaysia. TROPMEU therefore encouraged a linkage with the University of Sains Malaysia and the National University of Malaysia. Consequently, a masters degree course began in 1984/5 with two members of the student body receiving ASEAN scholarships.

The addition of Singapore to the TROPMEU program opened regional opportunities for a well-developed occupational medicine research and training program.

TROPMEU brokered French assistance to the University of Indonesia in advanced vaccine development technology transfer. The project is now supporting the PhD training of a UI faculty member with follow-on support planned. Through TROPMEU, close linkage has been established between the Faculty of Tropical Medicine and French institutions advanced in malaria research.

4. Financial Management

Finally, SEAMEO supports the examiner system common to the TROPMEU Centres. The presence of an external expert is necessary to test graduating students on subject mastery. The system operates as an immediate feedback on the quality of teaching and learning as well as an opportunity for guest lecturer presentations.

The TROPMEU project works through the USAID/ASEAN and SEAMEO systems and provides a direct cash flow mechanism to the four national centres. TROPMEU operating policies and procedures are consistent with USAID rules and regulations. They follow SEAMEO guidelines, using their computerized system for externally funded projects.

USAID to ASEAN funds are released to TROPMEU on a cost reimbursement basis for tuition, allowance, books, laboratory fees/supplies, health insurance, thesis support and international travel. Documentation from the Centre is forwarded to the SEAMEO-TROPMEU Central Office. The Staff prepares the necessary USAID documentation and sends it to the ASEAN Regional Office in Manila for review. Following review and voucher certifications, funds are released from the Regional Disbursement Centre in Bangkok directly to the USAID/ASEAN Scholarship Project SEAMEO-TROPMEU.

TROPMEU allocates the National Centres with some advance funding for the costs of tuition, initial maintenance and thesis support. International Travel is purchased in Bangkok and handled on a cost-reimbursement basis only.
SEAMEO sets the budget for all its ongoing projects, including TROPMED. Project expenditures must be within the limit of the approved budget, regardless of the source of funds. Extra-budgetary funds are not allowable without prior approval. Therefore, project planning must take place well in advance of implementation.

The SEAMEO Secretariat (SEAMES) provides a strong fiscal control on fund disbursements. The new financial management system seems to have improved project monitoring. SEAMES manages the operating and capital budgets of the TROPMED Central Office and the special funds trust account. The Special Funds Budget is designated for use in the following regular programs and activities:

- Training and Research Scholarships such as this USAID-ASEAN project and other external donor assistance.
- Governing Board Meetings - held annually and funded through member country annual contributions.
- Seminars and conferences usually funded with external donor support utilizing staff of the national centres.
- Personnel Exchanges typically used for providing external examiners and lecturers in specialized courses as well as to promote further staff orientation to regional training institutions.

The role of the Secretariat has also been to assist in the event of a funds shortfall as was the case in FY 1981-82 for TROPMED Special Funds activities. Their assistance may again be necessary in FY 1985-86 to cover operating budget deficits with some member country contributions remaining outstanding debt.

5. Evaluation, Monitoring and Reporting

Evaluation, monitoring, and reporting requirements were not included in the project paper document with the implied expectation that the existing TROPMED system of operations could manage the project. The implementation results bear out this confident expectation.

The students and scholarships were monitored in three ways: (1) voucher and reimbursement requests; (2) special requests for extension of support typically to complete thesis requirement, leaves of absence and withdrawals; and (3) request to continue
diploma training in pursuits of the masters degree. Post-graduate follow-up on scholars is not routinely done. However, a recent survey was completed and the results appear in the table below.

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<th>Country</th>
<th>No. of Male</th>
<th>% of Female</th>
<th>Professors with Off Lecturers Personnel</th>
<th>Other (Prix)</th>
<th>Served in the Countries Yes</th>
<th>No</th>
<th>Courses Helped Improve Working Ability Yes</th>
<th>No</th>
<th>Support Strengthen Regional Course Yes</th>
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<td>-</td>
<td>49</td>
<td>-</td>
<td>47</td>
<td>2*</td>
</tr>
</tbody>
</table>

63 41

*The awardee wished to be posted in a department where he could make more full use of the knowledge gained.

**Too early to evaluate since the trainee has just completed the course.

***Left course only due to illness.

****No reason was given.
The Governing Body monitors and reports on institutional problems arising with scholarship students. They discuss and evaluate changing institutional needs as well. Annually, the ASEAN Governing Body and the TRUPMED Governing Board report to SEAMEO on the regional courses sponsored at the National Centres.

E. Impact

The TRUPMED project followed a strong institutional development design, basing its activities within existing organizations and utilizing a flexible management mechanism to deal effectively with the distribution of scholarships.

The impact of the effort can be measured not only against the performance indicators of graduates produced, but more importantly against the resulting changes in institutional capabilities. The previous section described the performance of the project to date. This section provides an overview of capabilities developed over the past four years of the project.

1. Awardees

The scholarship students are too few in number and too recently graduated to have made an impact on a country or region's health program yet. For the most part, the awardees are working for the government in technical and administrative positions as well as in teaching institutions. On follow-up survey questionnaires students reported that the courses were helpful in their work and that the study experience provided a broader understanding of the public health field. The net result was more confidence in their ability to make useful contributions to their people's welfare. Pragmatically, the masters degree was the basis for job promotions and transfers to more technical units, while the diploma upgrades skills for use in their current positions.

The primary beneficiaries are the individual awardees. The impact of the individuals collectively will be the strengthening of working line units helping to increase the regions' human resource capacity. The potential gains from the TRUPMED training is clearly greater for the younger awardees. With longer careers ahead of them, they have a longer time frame to implement their ideas whether in the field, the bureaucracy, the laboratory, or the classroom. Not all the participating countries have taken full advantage of this opportunity to realize the long-run returns on investment in education. Particularly in the early years of the project, the training was more often used as a means to reward the senior people. However, in the past two years of this project, there has been a marked decrease in the ages of the awardees along with an increase in the number of scholars from regional and provincial institutions. Based on such statistics, one could surmise that the scholarships are being utilized as a means to invest in the long-run potential of the people who directly manage the health care system.
2. TROPMED

The current scholarship project presented the ASEAN Programme Governing Body with a responsibility to distribute scholarships. Their resolution to carry this out effectively required close collaboration. Over the past four years, the Governing Body created guidelines on:

- course extensions - determining they are allowable provided that the additional cost is within the five year development plan budgets;
- tuition fees - revised budgets;
- selecting top diploma students to continue for masters degree; and
- eliminating extraneous entrance requirements for eligible scholarship courses.

These resolutions indicate a solution-oriented approach for managing the project. The distribution of scholarships is an effective activity for strengthening the organization and building a capacity to manage other resources. Overall, donor support has increased over the past 4 years with EEC-ASEAN representing the multilateral donors. France, Germany, Japan, Australia and New Zealand the primary bilateral donors; and the Liverpool School of Tropical Medicine, U.K. as a formal institutional resource to Mahidol University. Significantly, it is the ASLAN project that delegates meaningful decision-making to TROPHELD Centers for investing in their human resource training priorities.

In sum, the impact of the scholarship project on TROPHELD can be seen as a function of its operational demonstration of regional cooperation, the opportunity for pooling resources, and the success in attracting other donor support.

3. National Centers

The scholarships provide financial assistance to the training institutions in the form of tuition and laboratory fees. To the extent that the scholarship funds are a primary source of course operating budgets, it is possible that distortion of national priorities may result.

To illustrate, the regional courses in Singapore and Malaysia are amply supported by their governments and many students are able to attend without ASEAN scholarships. The financial assistance
represents only a partial source of their total operating budget. Mahidol has also been very successful in obtaining scholarship funds from other sources and receives a major portion of their revenues from tuition fees and government support. Therefore, the scholarships represent only a partial subsidy. It is likely that regional courses offered at these institutions would continue with or without scholarship funds.

Due to the economic crisis, the University of the Philippines has come to rely substantially on the scholarship fees not only for course support but also for general maintenance of the facilities. While most of the courses would continue to be offered in the absence of scholarship assistance, it is likely that the occupational health program would be withdrawn for a temporary period. The Nutrition courses at the University of Indonesia at this time are supported exclusively by and for the USAID to ASLAN scholarship students. In this case, the absence of additional support or institutional linkages forces the National Centre to rely more on ASEAN and TROPMLD rather than their own constituency in Indonesia. As early as 1981/82 TROPMLD/Indonesia identified the need to locate other sources of operating revenues. However, the course administration over the past four years has been very time consuming.

One issue of concern here is the relative dependence on scholarship funds that may distort national training priorities. It is the national network that will be able to develop and sustain appropriate training, and the regional network will benefit from stronger national programs. The case of Indonesia raises questions about the comparative advantage of its training vis a vis the other high quality nutrition research institutions in the region, and even in Jakarta. It is possible that the training is simply unknown to people who, for example, work with the Ministry of Health Nutrition Program, or it may be a matter of focusing course material on new priorities in research shared with other nutrition training institutions in the country. ASEAN and TROPMLD support is best used to assist UI's program link up with existing Indonesian research and field programs. In successfully attracting a diversified demand for their training offerings the nutrition project will benefit from the support of a national network. The region in turn will have access to a developing resource.

Secondly, there is a need to support the institutional linkages within each country that will prevent unnecessary duplication of training. The region's primary health care initiatives are placing a heavy demand on trained health manpower to supervise and train para-professionals, and volunteer health workers. Funding is not likely to increase significantly and therefore will be in higher demand. Therefore, training institutions will be forced to both become more efficient producers of trained manpower and develop a diversification of financial support.
The major task of the national centers remains to train professional health workers for positions in government and academe. Scholarships are a direct means of strengthening the existing institutions offering the universities with opportunity to further train their own faculty as well as increasing operating revenues.

4. National Health Manpower Development

Few countries in either the developing or developed category have put major resources into health manpower development planning. Figures, if identified, generally represent a desired but financially unattainable goal for employment of health personnel. Rarely is the information available to determine meaningfully the demand for health services at the provincial or state levels. Furthermore, variations in the organization and mix of health service produce widely varying estimations of manpower needs. As such, it is not significant whether the scholarships were utilized in pursuit of planning targets, but rather the degree to which the trained individuals are filling a skill gap. The degree of unmet need for people trained in tropical medicine and publication is projected from the available field information. The evidence from both student interviews and questionnaire survey responses is that the graduates have returned to their home countries and are employed in their areas of their specialization. Many are now in the more rural areas involved in research, teaching, laboratory diagnostics and providing health services in the government system. While this is a less exact definition of the demand for training than the current World Health Organization manpower to population ratios, the resulting estimate is more likely to reflect the level of performance that the country can afford to sustain.

The impact of the regional training can most clearly be observed in filling the need for academic health personnel in high schools and at the university level. Faculty and former scholarship students identified an ongoing, systemic deficiency in training of educators. Many found themselves employed in positions for which they were unprepared. One woman was teaching disease microbiology with only two previous courses in biology to equip her for the task. The opportunity to adequately train personnel is necessary as a first step in developing better educators and for achieving medium to long term improvements in the health system. Assuming that at least 200 educators will complete degrees and diplomas with USAID/ASLAN scholarships over the life of the project and that each educator teaches on average 10 other students per year, the spread effects of the scholarship training are estimated to be, at minimum, 2,000 non-scholarship beneficiaries before the project completion date. Furthermore,
the ASEAN training serves to help institutionalize continuing education for faculty. Continuing education in the areas beyond the countries' major cities remains less than optimal. The past fifteen years have witnessed significant changes in disease epidemiology, research capabilities, and organizing programs for primary health care. Further training for faculty is necessary to assure relevant curricula, even for those with some previous training.

The calculation of training costs is typically easier to value than the benefits of training as discussed above. The tropical medicine and public health training available through regional courses with USAID-ASEAN scholarships is significantly less costly than similar training outside the region. A comparative cost table follows:

<table>
<thead>
<tr>
<th>Average Scholarship Value</th>
<th>Average Participant Training Cost in U.S.</th>
<th>% Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASEAN Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 month diploma course</td>
<td>$4,730</td>
<td>$10,200</td>
</tr>
<tr>
<td>10 month degree course</td>
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</tr>
<tr>
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<td>24 month degree course</td>
<td>16,860</td>
<td>43,044</td>
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<tr>
<td>36 month degree course</td>
<td>25,856</td>
<td>68,180</td>
</tr>
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</table>

International travel costs are not included.

*Source: USAID Notice No. 84-4, 4/27/84 - Budget Planning figures for U.S. Participant Training. (Uses annual inflation factor).
Using these figures, it would cost more than 1.5 times the total project budget to train the same number of people or put another way the project funds applied to training abroad is at least 54% less cost efficient. Thus there are clear fiscal reasons to continue health manpower training within the region utilizing the resources available at the TRUPMED National Centres. Furthermore, the relevancy of training curriculum to national health problems particularly in tropical medicine and parasitology is greater than that available in institutions serving more developed countries.

5. Regional Interests

Scholarships in the USAID portfolio are generally subcomponents of bilateral projects and support a single institution. This project, however, satisfies multiple institutional agendas serving broader goals. The SEAMEO-TRUPMED policymakers in 1980 intended to upgrade courses at each centre and challenged them to develop Ph.D. programs. The scholarships provide a means to contribute to the National Centres operating revenues. In addition, scholarship students bring and exchange international experiences, and provide further incentives to make investments in course curricula. The goals of each require an increase in the supply of trained public health professionals to both improve the quality of health care through research and expand access to care through better management. The training scholarships serve to provide the needed academic training at the diploma and masters level. The resulting benefit ultimately accrues to the communities they serve as public health professionals. AIU/ASEAN Program support to TRUPMED is thus contributing to human resource development, expanding institutional capability in the region and accelerating technology transfer. With these underlying goals and institutional objectives, the TRUPMED project has emerged as a collaborative effort strongly supported by all the participating groups.

The primary function of TRUPMED is to support educational goals through regional cooperation. Over the past four years, TRUPMED has responded to national health planning goals with relevant training opportunities. In the Philippines for example, the Ministry of Health initiated new efforts to combat diarrheal and parasitic diseases. Few field personnel however were trained to prevent, diagnose and treat these diseases. While the University of the Philippines offers masters degree programs, it remains difficult to release the younger personnel from their jobs for a period of 10 to 12 months. The six month diploma courses in Thailand and Malaysia offer a unique opportunity to gain needed technical training in parasitology as well as an introduction to alternative modes of organizing health services delivery. Furthermore, TRUPMED has sponsored short workshops on diarrheal diseases and vector genetics, providing trainers with materials for further development of in-country programs.
One area that remains open for resolution is regional accreditation of the participating schools curricula. At the 21st Governing Board Meeting, Dr. Hunsam Martin asked the new chairman to concentrate on accreditation of TROPMEU degrees and diplomas. The issue appears to be complex. The established authority within the region is the World Health Organization which could take the leadership initiative through their technical advisory group system. However, the TROPMEU National Centers are located in two different WHO regions (Southeast Asia Region, New Delhi and Western Pacific Region, Manila). There seems to be a reluctance to undertake a cross-regional assessment of institutional strengths and weaknesses. So, for the time being, the schools are working informally to improve and standardize their course offerings. Significant gains have been made in improving biostatistics programs, some laboratory training and in obtaining computer support for both faculty and student research. It appears that efforts will continue to try to resolve the issue of how best to accredit regional courses.

F. Recommendations and Directions for Future Activities

In developing the recommendations that follow, two considerations were taken into account. First, investment in the regional health training program should continue and increase. The diversity of health needs is growing as countries undergo periods of epidemiological transition with high birth rates and declining mortality; when chronic diseases become more significant factors in the morbidity and mortality patterns of some sectors of the population, while communicable diseases demand the greater share of the poor health among the young and the low-income groups; and the plurality of traditional, public and private health systems overlap and often conflict. The implicit challenge is to improve the health status of all the region's peoples. The development of human resources through training is the most important catalyst to enable further progress in meeting the demand for better health. The training offered through TROPMEU National Centers both cost-effective and consistently regarded to be of high quality.

Many of the countries in the region are in the midst of formulating new national health policies, attempting to manage health initiatives in the face of rapidly escalating costs. Issues of privatization, organizing for primary health care, and the return of investment in research promise to keep health policies in flux. Thus, complementarity in an expanded curriculum framework should be sought in further developing the region's training and research capabilities.

In conjunction with the Five Year Plan's projected resource requirements, TROPMEU prepared a proposal for continuation of
support from USAID to the ASEAN Scholarship Program. The project would focus on strengthening TRUPMED National Centers research and training capabilities. Specifically, the five year project would continue scholarships to fifteen regional courses at the diploma and masters degree levels in five countries (i.e. Thailand, Philippines, Indonesia, Malaysia and Singapore). There is a continuing need for both academic and basic research to improve the region's health systems. We therefore strongly recommend that the scholarship support continue.

In addition, a target for follow-on support should be curriculum development, to strengthen institutional capabilities in research and training. SEAMEU-TRUPMED can coordinate the effort to organize technical assistance, direct the development of case studies, procure necessary materials and equipment, disseminate resulting reports and educational materials, and guide the organization of conferences/workshops administrators and teachers conferences/workshops. Organizations and individuals from the U.S., such as the Centers for Disease Control, U.S. National Institutes of Health, Asian Institute of Management and others may be called on to provide assistance. New curricula may be developed to include the new skill areas emerging in public health. Examples include training the health worker trainors, principles of community participation and development for health workers, methods of epidemiological surveillance, use of mass media communication in educating the public to tropical disease identification and treatment, managing integrated health, nutrition, and family planning services and cost containment of health services delivery.

The focus on curriculum development will provide TRUPMED with the resources to help the National Centers keep abreast of a rapidly changing health scenario. Furthermore, the effort will provide an incentive to further coordinate with other training and research organizations in the region.

Major portions of a follow-on USAID/ASEAN project with TRUPMED remain to be planned. We recommend that a collaborative planning effort be undertaken prior to the project completion date in 1986 thus avoiding a lengthy lapse in ASEAN program support. The project planning should specify the intended objectives and the feasible outcomes whether they be for institutional progress, behavioral outcomes (vis-a-vis trainors, managers, researchers) or administrative capability. For evaluation purposes, some selected measures of project progress such as the project LOGFRAME is suggested as a useful tool for design purposes. Additional consideration should be given to simplifying the approval process for scholarship awards. The review of scholarship nominees could be limited to participating institutions.
Finally, it may be useful to both institutions and individuals receiving scholarship awards to be aware of other USAID activities in their own countries. The Centers in particular, can draw on the USAID to ASEAN experience for participation in ongoing health projects or future funding of new activities. Therefore, it is suggested that the scholarships be identified as USAID/ASEAN Scholarships in a manner similar to the SEAMEU-TROPMEU Memorandum of Agreement with the Government of Australia.

G. Comments on the Proposed Fourth Five Year Plan of TROPMEU

The Proposed Fourth Five Year Plan of TROPMEU July 1985-June 1990 was prepared and submitted for approval to the TROPMEU Governing Board in 1983. SEAMEO High Officials Meeting in Jakarta, and SEAMEC. The plan generally outlines a continuation of the support activities that appear in TROPMEU's previous plans. The overall goal remains to control epidemic diseases and promote the health of the poor thereby contributing to the improvement of the quality of life in region.

Fifteen regional course including three PhD programs, participating National Centers will continue to be sponsored under the auspices of TROPMEU. A review of the curricula for all the courses is planned mid-cycle as a means to assure the relevance of course material to national health planning targets. This review, presumably coinciding with the 20th anniversary of TROPMEU seems to be the first major effort to consider significant changes in programming and will rely on Member Country inputs to evaluate the demand for various health manpower training. Due to SEAMEU and ASEAN membership arrangements, it is not altogether clear whether the courses at Singapore University will be included on the list of Regional Courses or remain as it is now, a participating USAID/ASEAN Scholarship country with no formal representation on the SEAMEU-TROPMEU Central Coordinating Board.

Notably, the plan delineates specific topics for research development and management. The listing provides a means to monitor progress developing tropical disease research capability in the TROPMEU Centers. More significantly, the areas of highest priority are identified for potential donors who may consider new investments in the region's empirical research and management of health services delivery organizations. TROPMEU clearly has an important role in attracting these new resources. The identification of areas in the five year plan is a responsible means to initiate further work over the period.
The request for contribution of support from USAID through 1990/1991 fits the goals identified in the TROPMED Five-Year Plan over the period. A project design team should be contracted to review the evaluation findings and further specify project inputs. Representatives from the TROPMED National Centres should participate and complete their review before the project assistance completion date in 1986.
Regional Training Courses Eligible for USAID-ASEAN Scholarship

1. Six-month Course leading to Diploma in Tropical Medicine and Hygiene (D.T.M. & H) TROPMED/Thailand, Bangkok. This course is offered to medical graduates from Member Countries and elsewhere.

The programme is oriented towards basic training in tropical medicine and hygiene with particular emphasis on tropical endemic disease problems of Southeast Asia.

The subjects taught include tropical medicine (lectures, hospital ward rounds, clinical conferences, and field visits), protozoology, helminthology, hygiene, medical entomology, tropical aspects of microbiology, immunology, nutrition, pediatrics, dermatology, etc.

Visits to various medical institutions, e.g., provincial hospitals, communicable diseases centres, health centres, V.D. clinics, are part of the course.

2. Six-month Course leading to Diploma in Applied Parasitology and Entomology (D.A.P. & E) TROPMLU/Malaysia, Kuala Lumpur - This course is for medical, veterinary, and science graduates.

The main objective of the course is to give training on problems of parasitic and vector-borne diseases of man and animals with special reference to those occurring in the region so that trainees would be able to acquire in-depth understanding of the causes, mode of transmission, epidemiology, control and prevention of these diseases.

Research and dissertation are compulsory.

3. Twelve-month Course for Master of Public Health (M.P.H.) TROPMLU/Philippines, Manila - This course is open to graduates of approved medical schools, graduates in dentistry, engineering, etc.

The main objective is to train heads of workers for their public health duties in the Southeast Asian region. Emphasis is on general preventive medicine including communicable and parasitic disease control, sanitation, public health administration, epidemiology of tropical diseases, biostatistics, including research methodology and evaluation techniques, physiology, biochemistry, food and nutrition in relation to public health, and methods of educating the public as to the promotion and maintenance of health.

Field studies are included in the curriculum.
4. Six-month Course leading to Diploma in Applied Nutrition (D.A.Nutr.)
TROPMEU/Indonesia, Jakarta - This course is open to graduates in
nutrition, medicine, and agriculture.

The main objective of the course is to provide training in the theory
and practice of nutrition in order to enable course participants to
carry out programmes for the improvement of nutrition.

Emphasis will be on methodologies, various factors involved in
causation of nutritional diseases, nutritional disorders, the effects
of malnutrition, its interaction with health problems and its
implications for national and regional development.

Field trips are included to various institutions relating to public
health, nutrition, agriculture, and economics.

5. Ten-month Course leading to Master of Occupational Health (M. Occ.
Hlth.) TROPMEU/Philippines, Manila - This course is open to
graduates of approved medical schools, and graduates in nursing,
dentistry, and engineering.

The course is designed for trainees to study work physiology,
including physical factors of the work environment, general effects
of work on health, ill-health and productivity, principles of
physiology in relation to work and environment, industrial
psychology, including factors influencing mental health and human
relations, industrial legislation, occupational hygiene, safety,
pollution control, ergonomics, and health education.

Field trips are arranged to industrial plants and factories.

TROPMEU/Malaysia, Kuala Lumpur - This course is open to candidates
who have a B. Sc., or its equivalent, two years working experience in
accredited microbiology laboratory.

The course is designed for trainees in the region to study aetiology,
diagnosis survey, control and prevention of infectious diseases of
public health importance in the region, through lectures, laboratory
exercises and field work.

The main subjects are bacteriology, mycology, virology, immunology,
bio-statistics, and epidemiology. Emphasis is on laboratory
methodologies and new techniques to diagnose the infectious diseases.

7. Ten-month Course for Master of Public Health Majoring Urban Health
(M.P.H. Urb. Hlth.) TROPMEU/Thailand, Bangkok - This course is open
to M.D.U.S., or D.V.M. from accredited universities.
The objective is to provide trainees with a better understanding of urban health problems, and to upgrade their ability to diagnose and solve priority urban health problems in Southeast Asia.

Emphasis is on community aspects of diseases, principles of epidemiology, administrative measures in relation to communicable and infectious diseases, the influence on physical and mental health of environment including housing, occupation, economic circumstances, nutrition and personal hygiene, family planning, and health education.

8. Two-year Course for Master of Science in Public Health (M.S. Pub. Hlth) majoring in Medical Microbiology, Medical Parasitology, or Public Health Nutrition, TRUPMED/Philippines, Manila - This course is open to graduates of approved medical schools or graduates with professional training other than in medicine, with a degree of science.

For Medical Microbiology, emphasis is on public health microbiology, immunology, applied bacteriology, virology, medical mycology, microbial zoonoses, special studies, and research.

For Medical Parasitology, medical protozoology, helminthology, entomology, arthropod metamorphosis, immunology of parasitic infection, research, and thesis.

For Public Health Nutrition, clinical nutrition, dietary survey and analysis, biochemistry nutritional diseases, special studies and research, and thesis.

9. Two-year Course for Master of Science in Tropical Medicine (M. Sc. Trop. Med.) TRUPMED/Thailand, Bangkok - This course is open to M.D., D.V.M., B.G. S., and B.Sc.

The main objective of the course is to provide the trainee with a deeper knowledge in medical parasitology, medical entomology, microbiology and immunology with emphasis in laboratory work and research methods.

Research work is on an approved problem in any branch of tropical medicine, seminars, and preparation of a thesis.

10. Two-year Course for Master of Science in Applied Nutrition (M. Sc. A. Nutr.) TRUPMED/Indonesia, Jakarta - This is an extended course following the diploma in applied nutrition course.

The course will enable the trainee to conduct research in all aspects of nutrition, help gain further knowledge in biochemical techniques, new methodologies, research into nutritional disorders, and the effects of malnutrition, the relationship between nutrition, agriculture and economic development in their own country and in the region.
Research on a special subject and preparation of a thesis are included.


The course aims to provide medical graduates to be efficient in diagnosis, treatment and control of tropical diseases; to be able to give consultation and disseminate their knowledge in the field of clinical tropical medicine, and to be equipped with general knowledge, initiativeness, learning eagerness, responsibility, and willingness to serve the people.

12. Two-Year Course for Master of Science in Medical Microbiology Applied Parasitology and Entomology (M.Sc.) - TRUPMEU/Malaysia, Kuala Lumpur - This course is open to medical, veterinary, science graduates, and candidates who have a B. Sc., or its equivalent, two years working experience in an accredited microbiology laboratory. The course is designed for trainees in the region to an advance study in aetiology, bacteriology, mycology, virology, immunology, biostatistics, epidemiology, and problems of parasitic and vectorborne diseases of man and animals with special reference to those occurring in the region.

13. Nine-month Course leading to a Master of Science in Public Health TROPMEU/Singapore - This course is open to candidates who have had one year of full-time experience in public health.

This course is designed to instruct students on community health, genetic and environmental factors in health and diseases; methods of prevention and control. The students are expected to have good knowledge of health services including the ascertainment of the health needs of the population, development and evaluation of health services, etc.

14. Nine-month Course leading to a Master of Science in Occupational Medicine. - This course is open to candidates who have held a medical qualification for at least three years and have had one year full-time experience in public health and/or occupation medicine.

This course is designed to instruct students on general preventive medicine, nutrition, occupational health including work physiology, general effect of work on health, industrial psychology including factors influencing mental health, occupational medicine including accident prevention, industrial and agricultural toxicology, occupational diseases, rehabilitation, emergency surgery, etc. (NOTE: These 2 new courses were added to the program in academic year 1982/1983.)

Annex 2

Distribution of ASEAN Scholarship to Candidates from Member Countries

<table>
<thead>
<tr>
<th>COURSE</th>
<th>1981/82</th>
<th>1982/83</th>
<th>1983/84</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Total:Overseas:Natl</td>
<td>Total:Overseas:Natl</td>
<td>Total:Overseas:Natl</td>
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<td>7:4:6</td>
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<td>14:11:3</td>
<td>14:10:4</td>
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<td>MPH, Rural Health, Manila</td>
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<td>12:10:2</td>
<td>21:15:6</td>
</tr>
<tr>
<td>M.S. Public Health, Manila</td>
<td>2:0:2(1):2:0:2</td>
<td>5:6:2</td>
<td></td>
</tr>
<tr>
<td>M. Sc. Tropical Medicine, Bangkok</td>
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</tr>
<tr>
<td>M.Sc. of Clin. Trop. Medicine, Bangkok</td>
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<td>5:2:3</td>
<td></td>
</tr>
<tr>
<td>M. Sc. Public Health, Singapore</td>
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<td>5:5:0</td>
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</tr>
<tr>
<td>M.Sc. Occupational Medicine, Singapore</td>
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## TROPMED - MALAYSIA

### COURSES

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<th>Indonesia</th>
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<th>Philippines</th>
<th>Thailand</th>
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<td></td>
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<td>No. of students</td>
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<td><strong>2. D.M.M.</strong></td>
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- **No. of Malaysian Fellowship Students**: 15 (% 17%)
- **Total No. of Fellowship Students**: 90

* D.A.P.E. - Diploma in Applied Parasitology and Entomology

** D.M.M. - Diploma in Medical Microbiology

*** M.Sc.M.M. - Master of Science in Medical Microbiology.
1. D.A.N. (6 mos)*

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<tr>
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2. M.Sc.A.N.*

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No. of Indonesian Fellowship Students: 27 = 36%

No. of Fellowship Students: 74

* D.A.N. - Diploma in Applied Nutrition

**M.Sc.A.N. - Master of Science in Applied Nutrition
### TROPMED - Philippines

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<tr>
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- **No. of Philippine Fellowship Students**: 32 = 36%
- **No. of Fellowship students**: 89

*MPH-RH - Master of Public Health, Majoring Rural Health*

**M.Occp. Hlth - Master of Occupational Health**

***M.Sc.Public Hlth. - Master of Science in Public Health***
### COURSES

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| **M.P.H.-Urban Hlth,** **Bangkok** |           |          |             |          |       |
| May 81-March 82 | 4         | -        | 1           | 4        | 9     |
| May 82-March 83 | 3         | -        | 1           | 1        | 5     |
| May 83-March 84 | 6         | -        | 1           | 6        | 13    |
| May 84-March 85 | 6         | -        | 1           | 3        | 10    |
| TOTAL       | 19        | -        | 4           | 14       | 37    |

| **M.Sc.Trop.Med.,*** **Bangkok (2 yrs)** |           |          |             |          |       |
| April 81-March 82 | 1         | -        | 1           | 5        | 7     |
| June 82-June 83  | 1         | -        | 3           | -        | 4     |
| June 83-June 84  | 2         | -        | 2           | -        | 4     |
| June 84-June 85  | 2         | -        | 3           | -        | 5     |
| TOTAL       | 6         | -        | 9           | 5        | 20    |

| **M. Clin.Trop.Med.,**** **Bangkok** |           |          |             |          |       |
| April 81-March 82 (see above) |           |          |             |          |       |
| April 82-March 83 | 1         | -        | 1           | 2        | 4     |
| April 83-March 84 | -         | 1        | 1           | 3        | 5     |
| April 84-March 85 | 1         | -        | 2           | -        | 3     |
| TOTAL       | 2         | 1        | 4           | 5        | 12    |

| No. of Thai Fellowship students | 38 |
| No. of Fellowship students      | 736|

*U.T.M.H. - Diploma in Tropical Medicine and Hygiene  
**M.P.H.-Urban Hlth - Master of Public Health, Majoring in Urban Health  
***M.Sc. Trop. Med - Master of Science in Tropical Medicine  
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Total no. of Singapore Scholarship
Total no. of Scholarship Students

4 = 18%

*M. Sc. Occ. Med. - Master of Science in Occupational Medicine

**M. Sc. P. H. - Master of Science in Public Health
Project Evaluation Methodology

In March and April 1984, the ASEAN Scholarship for Tropical Medicine and Public Health project was evaluated by Ms. Vimolsri Panichyanon of SEAMEU-TROPME and Ms. Pamela Edison, USAID. The team initially met at the Twentieth SEAMEC Conference held in Manila 7-11 February, 1985. We discussed the plans for the project evaluation with Mr. Bruce Blackman, the ASEAN Liaison Officer, including its intended purpose, the 1985-1990 TROPME proposal to USAID, and the upcoming ASEAN-US Dialogue issues related to development assistance. This evaluation was guided by a series of questions developed by USAID/Washington Asia Bureau/DP/E Office (Annex 4) and the general outline requested by USAID/ALO.

Background information available in the project files was supplemented by detailed information from SEAMEO and TROPMEU staff. Particular note must be made of the minimal documentation input to the Project Paper. There is no evidence that the lack of a logframe or detailed implementation plan constrained project impact. Suspiciously, there seems to be an inverse relationship between the specificity of planning and accomplishment of purpose. The point here is that the effectiveness of the evaluation process is largely dependent on the explicitness of the project design. The evaluation reviews institutional performance and capability, while the project paper discusses scholarship support for health manpower development and organizational arrangements. Vague goals, such as "improving the quality of the rural poor's health and nutrition" are often politically necessary. The attempt here is to realistically compare the potential impact of a scholarship project to the observed impact and make reasonable inferences useful for planning future projects of this type.

The evaluation team reviewed the proceedings of SEAMEC, and Governing Board meetings, and the curriculum guidelines for the Regional courses to familiarize ourselves with the trends in each institution.

Site inspections were conducted at University of the Philippines-Institute for Public Health, TROPMEU/Philippines; Faculty of Tropical Medicine - Mahidol University - TROPMEU/Thailand; and the Faculty of Medicine, University of Indonesia, TROPMEU/Indonesia. The schools were on summer vacation during the evaluation period preventing the team from classroom observation and random student surveys.

Interviews with Scholarship graduates were conducted at Mahidol University and the University of Indonesia. At Mahidol, the faculty conducted an intensive course evaluation with the soon-to-graduate students. The insights, and constructive criticism are included in the body of the report. At the University of Indonesia, previous graduates from ASEAN programs were convened by Dr. Soemilah, the Programme Coordinator of TROPMEU/Indonesia. The students were asked the following questions:
1. Was the course useful to you in your work? How?

2. Beyond the course work, what was your experience of studying abroad?

3. How have you applied the skills and knowledge you learned to your work?

4. What gaps in information are apparent to you now? Suggestions to strengthen the existing courses? New courses and trainings?

5. Would you recommend the course to your colleagues? Why or why not?

6. Do you have continued contact with the University? colleagues? USAID? (All can be useful resources for furthering public health activities in your area).

Further student feedback was available from the recently completed follow-up questionnaire sent to 273 scholarship recipients. The evaluation team reviewed the 124 responses and the conclusions appear in the impact portion of this report. A sample questionnaire is attached.

Finally, faculty, administrators, and USAID staff in Philippines, Thailand, and Indonesia, were interviewed to gather information on project implementation issues and perceived impact. Annex 5 lists the individuals who contributed to this evaluation.
Annex 4

AID/Washington Evaluation Checklist

1. The following scope of work, prepared according to ASIA Bureau guidelines, is based solely on information contained in the project paper and should, therefore, be considered preliminary. Between the ALU's more thorough understanding of this project and any updated information on the project's progress, modifications in the approach and/or focus may be needed. Hopefully, this scope will serve as a good starting point.

2. The Project. The ASEAN Health scholarships Project (498-0258) was authorized in June 1981 for US $2,500,000 in grant funds over a five year period. The purpose of the project has been to improve the quality of the rural poor's health and nutrition by providing training opportunities for health personnel in ASEAN countries. Training was to take place in institutions located in four of the then six ASEAN countries (excluding Singapore). Programmes were to be of relatively short duration with an emphasis on applied skills.

While none of the courses were concerned with the direct training of paramedics, the type of manpower where the largest numbers are needed, it was expected that those receiving training at the post graduate level would play an important role in the total effort to improve the quality of life of the rural poor in the ASEAN region. Course graduates would be prepared to assist with paramedical training at the National level and would fill key posts in the total infrastructure involved in a health delivery system the backup pathological, diagnostic, treatment, and research units which serve and support the paramedics.

3. Purpose and timing of evaluation. To date, there has been no overall evaluation of the ASEAN Health Scholarships project. Since the recipient institution UPMMLU will be conducting an internal assessment/review of the project during the second quarter of FY 85, it seems appropriate and timely to conduct an A.I.D. evaluation during the same time period. The purposes of the agency evaluation are the following:

A. To assess how well the project is progressing towards achieving its purpose and assembling evidence which demonstrates tangible achievements of the project.

B. To assess how well implementation is going;

C. To identify the prevailing strengths and weaknesses which facilitate and/or inhibit the accomplishment of project activities.
D. To identify those project elements that could benefit from fine-tuning; and

E. To make recommendations for improving project effectiveness and for further external assistance can be helpful in evaluating the ASIAI Health Scholarships Project.

The following is a list of those recommendations. Describe what actions have been taken:

A) Institute a review of the regional courses with a view to:

   Eliminating duplication of course offerings between regional courses;

   Phasing out regional courses which duplicate those already available in and offered by member countries.

   Adjust regional courses (in terms of objectives, contents and target groups or training) to the changing demands of member countries.

B) Take steps towards acceptance by member countries of minimum standards for similar or identical national courses to ensure equivalence of standards.

C) Establish a policy for the sponsorship of new regional courses which should satisfy the following criteria:

   - The existence of a regional demand;

   - Availability of teaching staff and facilities including laboratory, field practice areas, etc.;

   - The recognition and support of educational and related institutions of the member countries.

D) Clarify in its announcements for regional courses that the diploma courses are not equivalent to the master’s degree courses.

E) Pursue arrangements for accreditation through appropriate channels:

   - For the granting of academic credits for subjects taken in the diploma courses;

   - For the adoption of mechanism for the monitoring of the regional courses.
Scholarships offerings: It is recommended that the TROPMEU/CCB review its policies and procedures in the award of fellowships which would:

A) Allocate fellowships only on the basis of official estimates of manpower requirements of member governments;

B) Ensure enforcement of already existing fellowship regulations;

C) Minimize the granting of fellowships to nationals who will attend regional courses in their own countries;

D) Adjust stipends as warranted by the changing costs of living in the localities of study;

E) Promote innovative changes in the conduct of regional courses calculated to respond to the socioeconomic demands of member countries.

4) According to the Project Paper, personnel in all institutions in 1976 were qualified, highly trained individuals in their specialities. In addition, most institutions had expatriate staff personnel and were in a position to draw on other host institutions for teaching and seminar assistance. Other host government agencies cooperated in field assignments by organizing field programs and by permitting the use of laboratories as needed. However, the Jakarta institution's facilities needed completion, but progress was apparent and the host government cooperative and sympathetic. Updated reports were not found to confirm the continuance of the Institute's standards and completion of the Jakarta Institute. It was suggested that this be confirmed in a future evaluation of the ASLAN Scholarship project. What progress has been made on this issue?

A. Achievement of project purpose and cost effectiveness

1) The purpose of the project is to quote improve the quality of the rural poor's health and nutrition by providing training opportunities, unquote. When the project paper was prepared, scholarships were to be awarded for individuals enrolling in one of the following courses:

a) six-month course diploma in tropical medicine and hygiene.

b) six-month course diploma in parasitology and entomology.

c) twelve-month course M.P.H.

d) ten-month course diploma in applied nutrition.

f) ten-month course M.P.H. majoring in urban health.

g) two-year course - M.S. in public health majoring in medical microbiology, medical parasitology or PH nutrition.
h) Two-year course - M.S. in Tropical Medicine.

i) Twelve-month course M.S. in Applied Nutrition.

j) Twelve-month course Master of Clinical Tropical Medicine.

To understand progress made towards achieving the project purpose and identify which courses contribute the most toward this achievement, the following questions should be answered for each course offered:

a) To what degree does the course offer knowledge and an opportunity to develop skills in working to prevent and treat health problems most prevalent among the rural poor? Course content should be compared to health problems and the types of health services planned for delivery to the rural poor in the ASEAN countries by reviewing country health plans and a description of the course content. Also, a sample of course graduates should be interviewed and asked about the relevance of course to working with the rural poor, the adequacy of their practicum experience during the course and the degree to which they feel more prepared as a result of the course to either supervise or train paramedics. To create consistency during the interviews and aid in the analysis of the data, a simple rating scale for each issue could be developed and administered during these interviews. The interviewees should also be asked for their ideas in improving the course to achieve the ends of the project purpose.

b) What percentage of course graduates are either participating in the training of paramedics or filling key posts in the part of their country's health delivery system which serves and supports the paramedics?

The data collected for answering a) and b) could then be compared to the cost of each course. Comparisons could be made among all courses offered to determine those that are most cost effective and most likely to contribute to the achievement of the project purpose. Costs associated with comparable courses in the United States could also be compared with those in this project. Without being able to evaluate and compare the benefits of U.S. comparable training, only preliminary statements can be made as to which would be more cost effective.

c) To what degree are graduates participating in various child survival activity (family planning, oral, immunization, and nutrition growth monitoring) in their countries? Do they work directly for the Government?

d) To what degree are graduates assisting with the administration and management of AID "assisted activities in their countries"? What is their role? Has it been improved by their educational experience?
B. Institution building - what institutional changes have resulted from this project for those ASEAN countries sending graduates for training? Are the rural health delivery systems becoming better staffed by qualified individuals coming from this project? In what ways will they contribute to a self-sustaining development process?

5. Team Composition. This evaluation will be conducted by one outside contractor or a DH from the region with experience in evaluating health training projects.

6. Methodology. Analysis of this project will be based on data gathered from the following sources:
   - Review of all relevant document (e.g. project paper, Seameo/Tropmed evaluation, any other evaluations or progress reports, etc).
   - Review of data collected from Mahidol University and any existing analyses of these data.
   - Interviews with ALO, Dean of Faculty of Tropical Medicine and others closely associated with the project.
   - Interview a sample of course graduates.

7. Reporting requirements. The evaluation team will produce a report tentatively entitled: "Evaluation of the ASEAN Health Scholarships Project". The organization of the report should conform to the following outline:
   - Executive Summary (According to the Asia Bureau format)
   - Project Identification Data Sheet (sample contained in Asia Bureau guidelines).
   - Major conclusions and recommendations.
The Project Context

1) Background and purpose of the present project (including goals, activities and existing health issues which project proposed to address), and

2) Purpose and methodology of the evaluation.
   - Body of the Report.
   - Appendices as needed.

Prior to the evaluation Team's departure from Manila, a copy of the draft report will be submitted to the ALO. After incorporating ALO's comments into the report, copies of the report will be circulated in AIU/W for review.
PROPOSED FOURTH FIVE YEAR PLAN OF TROPMED

JULY 1985 - JUNE 1990
FOURTH FIVE-YEAR PLAN OF SEAMEO-TROPMED
JULY 1985 - JUNE 1990

The SEAMEO Tropical Medicine and Public Health Project (SEAMEO-TROPMED) is a regional cooperative project established in 1967 for education, training and research in Tropical Medicine and Public Health in Southeast Asia under the auspices of the Southeast Asian Ministers of Education Organisation (SEAMEO)**.

I. OBJECTIVES:

SEAMEO-TROPMED's main objectives is to improve the health and standard of living of the people in Southeast Asia by

(1) Teaching and training the health and medical personnel on tropical medicine and public health at post-graduate level, to meet man-power needs in these areas in Southeast Asia.

* Approved by TROPMED Governing Board at 23rd TROPMED Governing Board Meeting, 27th-30th August 1984, Manila, Philippines.

** The Southeast Asian Ministers of Education Organisation (SEAMEO) is a chartered inter-governmental Organization, established in November 1965, consisting of eight Member States, namely, Negara Brunei Darussalam, Indonesia, Democratic Kampuchea, Laos People's Democratic Republic, Malaysia, Philippines, Singapore and Thailand. In addition, SEAMEO has three Associate Members, namely, Australia, France and New Zealand, and one Affiliate Member, the Association of Canadian Community Colleges (ACCC).
(2) Research on tropical endemic diseases of public health importance in order to control or eradicate them.

(3) Organising seminars, conferences, technical meetings, etc. for exchanging, upgrading and disseminating the knowledge and experience in tropical diseases among clinicians, scientists and health workers in the Region.

(4) Exchanging of personnel among those in the TROP MED National Centres including medical professors and scientists, lecturers, research scientists and workers, public health officers, etc.

(5) Providing consultation services from academic institutions in developed countries to the TROP MED National Centres especially in teaching and research in tropical medicine and public health.

(6) Exchanging and disseminating information on tropical medicine and public health through its information service activities, seminars, personnel exchanges, a medical scientific journal and other periodic publications.

(7) Pooling the national resources of the participating countries in a cooperative endeavour to promote and upgrade their research and training capabilities and capacities based on the existing facilities in those countries.

II. HISTORY AND CURRENT ACTIVITIES

The Southeast Asian Ministers of Education Organisation (SEAMEO) and its Secretariat (SEAMES) was created as the result of a meeting in 1965 between the Ministers of Education of Laos, Malaysia, Philippines, Singapore, Vietnam and Thailand and Mr. Eugene R. Black, Special Advisor to the President of the United States on Asian Development Programme. The SEAMES Office was announced to be temporarily located at the Thai Ministry of Education on 30th November 1965, acting as a central agency serving all the Member Countries. Indonesia and Khmer Republic joined SEAMEO in November 1966 and January 1971 respectively.
At the initial meeting, there was a general consensus of opinion that steps should be taken towards establishing some form of regional cooperation in education. Concrete suggestions were also made, which have since served as a basis for the formulation of various project proposals.

Since nations of Southeast Asia are hampered in many degrees in their social and economic development by indigenous tropical diseases, it was suggested among Malaysia, Philippines, Vietnam and Thailand that developing a Regional Centre for the purpose of teaching, training and research in tropical medicine in this area should be considered as an urgent need. Subsequently, a SEAMES Task Force Committee for Tropical Medicine was set up in September 1966 to look further into the matter. The Task Force was assigned the duty of making surveys in the member countries to obtain additional information and data concerning existing facilities in each country before making recommendations relative to the establishment of the Regional Centre.

* At present SEAMEO has 5 Regional Centres and 2 Regional Projects:
(1) SEAMEO Regional Centre for Tropical Biology (BIOTROP) in Bogor, Indonesia, (2) SEAMEC Regional Centre for Educational Innovation and Technology (INNOTECH) in Quezon City, Philippines, (3) SEAMEO Regional Centre for Education in Science and Mathematics (RECSAM) in Penang, Malaysia, (4) SEAMEO Regional Language Centre (RELC) in Singapore, (5) SEAMEO Regional Centre for Graduate Study and Research in Agriculture (SEARCA) in Los Banos, Philippines, (6) SEAMEO Regional Project in Archaeology and Fine Arts (SPAFA), Coordinating Unit located in Bangkok, Thailand, and (7) SEAMEO Regional Tropical Medicine and Public Health Project (TROPMED), Central Coordinating Board Office located in Bangkok, Thailand.
After the surveys, however, it was recommended that the Southeast Asian Regional Tropical Medicine Centre should be established on a cooperative basis, with a Central Coordinating Board and National Tropical Medicine Centres, one in each of the participating countries. It was considered that this arrangement would stimulate the development of teaching and research at the Institutes for Tropical Medicine in those countries, particularly in the next five years. However, since Thailand has already developed a teaching and research institute of tropical medicine over the last 7 years and in view of the proximity to the interim SEAMES Office, the Faculty of Tropical Medicine, University of Medical Sciences, (now Mahidol University), Bangkok, therefore, was considered as the most appropriate place for the Central Office of the Coordinating Board (Governing Board) in its initial stage.

SEAMES submitted this recommendation to the Second Conference of the Southeast Asian Ministers of Education Council (SEAMEC) held in Manila in November 1966. On that occasion, Indonesia also participated and put forward a proposal to have its National Centre based at the Faculty of Medicine, University of Indonesia in Jakarta, thus increasing the number of National Centres to be five (Indonesia, Malaysia, Philippines, Vietnam and Thailand).

The Ministers of Education Council endorsed the recommendation of the Task Force that the Office of the Central Coordinating Board (Governing Board) be set up in Bangkok. Professor Chamlong Harinasuta, Dean of the Faculty of Tropical Medicine, was officially elected as Secretary-General of the Central Coordinating Board.

Consequently the Faculty of Tropical Medicine and SEAMES organized the first meeting of the Governing Board on 15th-17th March 1967 in Bangkok to consider definite plans of operation at regional and national levels for the improvement of teaching and research in tropical medicine in Southeast Asia.
At the 5th Governing Board Meeting in Tokyo on 24th November 1968, the redefinition of the Project was approved as "SEAMEO Regional Tropical Medicine and Public Health Project (SEAMEO-TROPMED)"


The 5-Year Development Plan of the Project was drawn and adopted, and the First 5-Year Permanent Phase of TROPMED was carried out during July 1970 - June 1975. Its finance consisted of (1) Operational Cost for the TROPMED Central Office, (2) Special Funds for the regional activities of TROPMED including (a) fellowships for students from SEAMEO member countries attending regional teaching courses in various National Centres, (b) research grants for research projects in the National Centres, (c) seminars, conferences, technical meetings, etc. (d) personnel exchange programme among member countries, and (e) Governing Board meetings, and (3) Funds for development of the National Centres.
The Second 5-Year Plan of TROPMED commenced in July 1975. However, due to the political changes of the Governments of Indochina Countries (Vietnam, Laos and Khmer Republic) since April 1975, and the change of the policy of Singapore, at present the active member countries of TROPMED are Indonesia, Malaysia, Philippines and Thailand, where 15 regional teaching courses, various research on tropical medicine and public health, seminars, conferences and technical meetings, and other TROPMED activities are being conducted, as shown in the following chart:

### SEAMEO-TROPMED

<table>
<thead>
<tr>
<th>GOVERNING BOARD (CCB) (TROPMED Central Office)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching &amp; Training</td>
</tr>
<tr>
<td>Research</td>
</tr>
<tr>
<td>Seminars, Conferences</td>
</tr>
<tr>
<td>Personnel Exchanges</td>
</tr>
<tr>
<td>Consultants Technical Services</td>
</tr>
<tr>
<td>Publications &amp; Information Services</td>
</tr>
</tbody>
</table>

### TROPMED NATIONAL CENTRES

<table>
<thead>
<tr>
<th>Indonesia</th>
<th>Malaysia</th>
<th>Philippines</th>
<th>Thailand</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty of Medicine, University of Indonesia, Jakarta</td>
<td>Institute for Medical Research, Kuala Lumpur</td>
<td>Institute of Public Health, University of the Philippines, Manila</td>
<td>Faculty of Tropical Medicine, Mahidol University, Bangkok</td>
</tr>
</tbody>
</table>

### SPECIALIZATION FOR REGIONAL WORK

<table>
<thead>
<tr>
<th>Nutrition and Food Science</th>
<th>Applied Parasitology and Entomology, Medical Microbiology</th>
<th>Public Health Rural Medicine</th>
<th>General and Clinical Tropical Medicine and Tropical Pediatrics</th>
</tr>
</thead>
</table>

### REGIONAL TEACHING COURSES
The Third 5-Year Plan of TROPMED is being carried out during July 1980 - June 1985 with the main objectives:

"To control and/or eliminate tropical endemic diseases and promote the standard of health in the Southeast Asian Region, thereby contributing to improvement of the quality of life of the poorer segments of national populations, found mostly in the rural areas and the urban slums in the Southeast Asian countries".

At present TROPMED is concentrating on training activities and research projects for the development of the health in rural communities as well as in urban areas. The 15 regional post-graduate teaching courses in the 4 TROPMED National Centres produce about 150 new well-trained teachers and scientists a year. On return to their respective countries, they contribute their services in medical schools and universities, academic institutions as well as in health centres in rural areas. The results of pilot projects for control of tropical endemic diseases carried out by the TROPMED research teams in rural areas will provide new knowledge and experience in prevention and control of such diseases in particular areas and will be used as models for future implementation in other areas in Southeast Asia. The personnel exchange programme for observational visits, lecturing at other National Centres, in-service training and temporary use of local expertise within the Region, serve as a means to promote broader acquaintance and understanding among the professionals in the Region. About 25 - 30 lecturers and scientists in Southeast Asia are awarded Personnel Exchange grants of TROPMED each year.

Up to June 1984, 26 seminars and conferences and 12 seminar-workshops and scientific technical meetings have been held in Southeast Asia and East Asia. These meetings have brought together more than 4,500 professionals of which about 80% are from the Southeast Asian countries and 20% from the countries outside the Region, providing
rich experience of sharing and exchanging ideas and information, and stimulating new thinking regarding tropical medicine and public health problems of the Region, and at the same time acquainting a large audience with the purposes and programmes of the TROPMED Project.

III. FACILITIES AND RESOURCES OF TROPMD

TROPMD Project organization structure consists of TROPMD Central Office of the Governing Board, i.e. the Central Coordinating Board (CCB) located in Bangkok and a network of TROPMD National Centres in respective member countries. The Governing Board Member is composed of a representative from each of the Member Countries and are nominated by their respective Ministers of Education. The Coordinator of the Project is appointed by SEAMEC. Policy making, programme approval and overall review of the project budgets are made by the GB while the executory part lies with TROPMD Central Office.

The TROPMD Central Office headed by the Coordinator and his staff performs administrative, technical and coordination functions for the Project, i.e. process scholarship and research grants, organise seminars, publications, information services, personnel exchanges, and technical services.

The TROPMD National Centres are actually the existing Governmental Institutions cooperating with SEAMEO-TROPMD Project, currently being (1) the TROPMD National Centre of Indonesia: Faculty of Medicine, University of Indonesia, Jakarta, Indonesia, (2) the TROPMD National Centre of Malaysia: Institute for Medical Research, Kuala Lumpur, Malaysia, (3) the TROPMD National Centre of the Philippines: Institute of Public Health, University of the Philippines, Manila, Philippines, and (4) the TROPMD National Centre of Thailand: Faculty of Tropical Medicine, Mahidol University, Bangkok, Thailand.
The technical and educational facilities to accommodate those post-graduate candidates and the research activities of these 4 TROPMED National Centres are summarized as follows:

1. **TROPMED National Centre of Indonesia**:

   The Faculty of Medicine, University of Indonesia provides facilities i.e. lecture rooms, laboratories and library services. Three new buildings have been built for the TROPMED Nutrition Centre, with lecture and seminar rooms, laboratory to accommodate 40 students, facilities for animal experimentation, library with audiovisual facilities and a museum for tropical medicine and nutrition. Education facilities are available at various Departments of the Faculty of Medicine, University of Indonesia for implementation of research studies on nutritional diseases and nutritional disorders in connection with parasitology, biochemistry, microbiology, ophthalmology, dermatology, pediatrics and public health.

2. **TROPMED National Centre of Malaysia**:

   The Institute for Medical Research, Kuala Lumpur, has old and new buildings, housing 18 Divisions of research and services (acarology, bacteriology, biochemistry, cytology, filariasis research, hematology, laboratory animal resources, malaria research, medical ecology, nutrition, stomatology, pathology, parasitology, rural health research, serology and immunology, vaccine production and virus research), 4 schools (Schools for D. A. P. &E; D. Med. Microb; Med. & Health Lab. Technology and Junior Lab. Assistants), 2 foreign research units, a biomedical museum, library and an administration office. A hostel to accommodate 50 students has been constructed. Research facilities are available for studies on filariasis, malaria, medical entomology, medical ecology, acarology, virology, scrub typhus, rural health development nutrition, hematology, etc.
3. **TROPME D National Centre of the Philippines**:

The Institute of Public Health, University of the Philippines, in the recently constructed new annex all lecture rooms and laboratories are located. The Institute has 7 Departments (Epidemiology and Biostatistics, Medical Microbiology, Parasitology, Nutrition, Public Health Administration, Community Health and Environmental and Occupational Health), library and Documentation Centre. Accommodation for students is available near the campus. Research facilities are available for studies on schistosomiasis, paragonimiasis, leptospirosis, ascariasis, and other soil-transmitted helminthiasis, microbial diseases, nutrition, rural health, etc. The TROPME D National Centre of the Philippines also serves as Reference Centre for Statistical Analysis of research data.

4. **TROPME D National Centre of Thailand**:

The Faculty of Tropical Medicine, Mahidol University, Bangkok. The Faculty buildings now consist of one 5-storey administrative building, one 9-storey building for the Bangkok School of Tropical Medicine, and teaching and research laboratories, and one 150-bed hospital building. The Faculty has 10 Departments (Tropical Medicine, Protozoology, Helminthology, Medical Entomology, Tropical Hygiene, Tropical Nutrition and Food Science, Microbiology and Immunology, Tropical Radiisotopes, Tropical Pediatrics, Clinical Tropical Medicine and Hospital for Tropical Diseases) with research laboratories, the Bangkok School of Tropical Medicine, Insectaries, Animal Houses, Museum and Reference Centre with audiovisual facilities and Library. Accommodation is provided for nurses and resident doctors. Facilities are available for research on malaria, filariasis, schistosomiasis, paragonimiasis, soil-transmitted helminthiasis, tropical pediatrics, and other tropical diseases of public health importance.
IV. TROPMED PROGRAMMES AND ACTIVITIES

The following subjects are included in the programme activities of SEAMEO-TROPMED:

1. Regional Teaching and Training

(1) Postgraduate Course for Diploma in Tropical Medicine and Hygiene (D. T. M. & H., Bangkok), 6 months.

(2) Postgraduate Course for Diploma in Applied Parasitology & Entomology (D. A. P. & E., Kuala Lumpur), 6 months.

(3) Postgraduate Course for Master of Public Health (M. P. H., Rural Health, Manila), 12 months.

(4) Postgraduate Course for Diploma in Applied Nutrition (D. A. Nutr., Jakarta), 6 months.

(5) Postgraduate Course for Master of Occupational Health (M. Occ. Hlth., Manila), 10 months.


(8) Postgraduate Course for Master of Science in Public Health (M. S. Pub. Hlth., Manila) majoring Medical Microbiology, Medical Parasitology or Public Health Nutrition, 2 years.

(10) Postgraduate Course for Master of Science in Applied Nutrition (M. Sc. A. Nutr. Jakarta) 2 years.
(12) Postgraduate Course for Master of Science in Parasitology or Entomology (M. Sc. Parasit. or Entomology Kuala Lumpur), 2 years.
(13) Postgraduate Course for Doctor of Public Health (Dr. P.H. Manila) 3 years from M. P.H. or M. Sc. Courses.

So far 1,433 trainees have graduated from these postgraduate teaching courses more than 90% of whom were from the Southeast Asian Countries. At present about 140-150 scholars from ASEAN countries are attending these 15 regional courses each year.

2. Research and Development

Each TROPMED National Centre is performing research projects on tropical endemic diseases of public health importance especially in the subjects as assigned for regional specialization. Research in Indonesia is concentrated on Nutrition and Food Science, Malaysia on Applied Parasitology and Entomology and Microbiology, Philippines on Public Health Rural Health and Thailand on Clinical Tropical Medicine and Tropical Pediatrics. Financial support is sought from appropriate donors for the institutional type research projects. Specific grants for "institutional strengthening" have been obtained from the UNDP/World Bank/WHO Special Programme for Research and Training in

ASEAN = Association of Southeast Asian Nations consisting of i.e. Brunei, Indonesia, Malaysia Philippines, Singapore and Thailand.
Tropical Diseases which help in simulating the acquisition of new skills and encouraging interest in research activities of the young staff in the TROPMED National Centres.

3. Regional Seminars, Conferences, Workshop, Technical Meetings

At least one regional seminar and one technical meeting on major tropical medicine and public health topics are held each year to serve as a forum for closer contact among scientists and research workers from within and outside the Region.

So far 26 seminars and conferences and 12 Seminar-workshops and scientific technical meetings were held in the Southeast Asian countries, Japan, Korea and Taiwan, and about 4,500 doctors and scientists from the countries in Southeast Asia and those outside the Region attended the Meetings.

4. Personnel Exchanges

Under TROPMED Personnel Exchange Grants, professors, doctors, and scientists in the TROPMED National Centres have opportunities in giving lectures to TROPMED regional teaching courses, providing consultation observational visits and in-service training in other National Centres. Thus, TROPMED utilizes its own professional expertise available in the Region.

Up to June 1984, 565 professors, doctors, scientists, health officials, medical technicians and some administrative officers and laboratorians were awarded TROPMED Personnel Exchange Grants.

5. Consultant Technical Services

TROPMED arranges and provides technical services of consultants and experts from developed countries outside the Region (e.g. from Australia, France, West Germany, U.K., U.S.A, etc.) to the National Centres for overall research, reviewing teaching programmes, special studies, development tasks, etc.
About 8-15 consultants and experts from academic institutions in Europe and U.S.A. and from WHO were recruited each year to visit the 4 TROPMED National Centres of Indonesia, Malaysia, Philippines and Thailand.

6. Publications and Information and Dissemination Services

- Publishes: Proceedings of TROPMED Regional Seminars, Conferences, Technical Meetings, etc.
- Information Services through the "Central Bureau for TROPMED Information".

7. Cooperation with other Institutions and Organisations

As a regional organization, TROPMED will continue to work in cooperation and coordination with other private, regional and institutional institutions and organizations including the Roche Far East Research Foundation, Southeast Asian Medical Information Centre (SEAMIC), Rockefeller Foundation (U.S.A.), Wellcome Trust (U.K.), Pasteur Institut (France), Schools of Tropical Medicine in European countries, WHO Southeast Asian Regional Office (SEARO), WHO Western Pacific Office (WPRO), UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR Programme), etc.
V. PLAN OF TROPMED DURING FOURTH FIVE-YEAR PHASE

It is proposed to establish the main plan of SEAMEO-TROPMED in the Fourth Five-Year Phase as "to control and/or eliminate tropical endemic diseases and promote the health and standard of living of the rural poor communities and the low income metropolitan sector people, thereby contributing to the improvement of the quality of life of the people in the SEAMEO Region".

A. Objectives

Aiming at this goal, the specific objectives of the TROPMED Fourth Five-Year Plan are as follows:

1. To continue to perform the 15 postgraduate regional teaching courses in the 4 TROPMED National Centres of Indonesia, Malaysia, Philippines and Thailand, with modified both theoretical and applied components to focus on health problems of the rural poor communities as well as the urban low income people.

2. Through extensive research development and management in the TROPMED National Centres to find new and improved tools to control and/or eliminate tropical endemic diseases of public health importance focusing on those in the poor rural communities and the low income urban people.

3. To utilize and upgrade other TROPMED programmes and activities as being operated for regional cooperation and coordination including regional seminars and technical meetings, exchange of personnel, local expertise consultation services and Governing Board Meetings.

4. To provide external consultants from other resources in developed countries to the TROPMED National Centres for overall TROPMED activities and development tasks of the Institutions.
5. To continue the process of "institution strengthening for research and training capabilities on specific medical subjects" required by the TROPMED National Centres as parts of the development of the Centres in the Fourth Five-Year Plan of TROPMED.

6. To strengthen and expand the TROPMED information and clearing house activities, and to furtherly support publication of the Southeast Asian Journal of Tropical Medicine and Public Health and other TROPMED documents, the Bureau for TROPMED Information and the Museum and Reference Centres of the TROPMED National Centres.

B. TROPMED Programme and Activities

(1) Regional Teaching Courses

The current 15 regional post-graduate courses conducted in the 4 TROPMED National Centres will be carried on in the TROPMED Fourth Five-Year Plan. Some of the contents in each course may be revised and adjusted according to the TROPMED Plan, but its operation in connection with the basic organization and the enrollment level is still the same as before. The 15 teaching courses are listed as follows:

**Indonesia**

(i) Postgraduate Course for Diploma in Applied Nutrition, i.e. D.A.Nutr., Jakarta, 6 month course.

(ii) Postgraduate Course for Master of Science in Applied Nutrition, i.e. M.Sc.A.Nutr., Jakarta, 2 year course.

(iii) Postgraduate Course for Doctor of Philosophy in Applied Nutrition i.e. Ph.D. A.Nutr., Jakarta, 3 year course.
Malaysia

(iv) Postgraduate Course for Diploma in Applied Parasitology and Entomology, i.e. D.A.P. &E., Kuala Lumpur, 6 month course.

(v) Postgraduate Course for Diploma in Medical Microbiology, i.e. D. Med. Microb., Kuala Lumpur, 6 month course.

(vi) Postgraduate Course for Master of Science in Parasitology or Entomology, and in Medical Microbiology, i.e. M.Sc. Parasit. or Entomology or Med. Microb. Kuala Lumpur, 2 year course.

Philippines

(vii) Postgraduate Course for Master of Public Health majoring Rural Health, i.e. M.P.H. Rural Health, Manila, 12 month course.

(viii) Postgraduate Course for Master of Occupational Health, i.e. M.Occ. Hlth., Manila, 10 month course.

(ix) Postgraduate Course for Master of Science in Public Health majoring Medical Microbiology, Medical Parasitology or Public Health Nutrition, i.e. M.S. Pub. Hlth., Manila, 2 year course.

(x) Postgraduate Course for Doctor of Public Health, i.e. Dr. P.H., Manila, 3 year course.
Thailand

(xi) Postgraduate Course for Diploma in Tropical Medicine and Hygiene, i.e. D. T. M. & H. Bangkok, 6 month course.


(xiii) Postgraduate Course for Master of Public Health majoring Urban Health, i.e. M. P. H. Urban Health, Bangkok, 10 month course.

(xiv) Postgraduate Course for Master of Science in Tropical Medicine, i.e. M. Sc. Trep. Med., Bangkok, 2 year course.

(xv) Postgraduate Course for Doctor of Philosophy in Tropical Medicine, i.e. Ph. D. Trep. Med., Bangkok, 3 year course.

Provision will be made to organise a mid-term review of the curricula, seminars and workshops in order to ensure that the activities of TROPMED are relevant to and meet the demands and needs of the Member Countries.

In addition to these regular teaching courses, TROPMED may organise some Ad-hoc short-term training courses on special and specified subjects in Tropical Medicine and Public Health, depending upon the need and demand from the TROPMED National Centres.

(2) Research Development and Management

TROPMED will develop and manage the following 9 topics of the research during the Fourth Five-Year Plan:
(i) Epidemiology of tropical diseases of public health importance in Southeast Asia with special reference to malaria, filariasis, schistosomiasis and other soil-transmitted helminthiasis, and leprosy.

(ii) Immunology of parasitic infections, leading to sero-epidemiological study and diagnosis and aiming at production of vaccines for prevention and control of tropical diseases of public health importance.

(iii) Mosquito genetics, leading to the control of mosquito-borne diseases including malaria, dengue hemorrhagic fever, Japanese encephalitis and filariasis.

(iv) Applied malacology for the study and investigation leading to the control of the important snail-transmitted helminthiasis, including schistosomiasis, liver fluke infections, lung fluke and intestinal fluke infections, and angiostrongyliasis causing eosinophilic meningoencephalitis.

(v) Social and economic research and training in some important tropical diseases including malaria, filariasis, schistosomiasis and leprosy.

(vi) Malnutrition and nutritional diseases, aiming at solving these problems and promotion of better nutrition of mothers and children.

(vii) Important malignant neoplasms causing hazards in general to the Southeast Asian people, with special reference to epidemiology, preventive measures and management of cases.

(viii) Promotion of family health and primary health care practice at village level for better standard of living of rural communities and poor urban sectors in Southeast Asia.
(ix) Studies on the ecological and environmental changes occurring during and after construction of dams for hydro-electricity and for irrigation system in order to increase agricultural products possibly causing increase in tropical endemic diseases, and also studies on the prevention and control of these diseases by environmental management, vector control environmental sanitation improvement, chemotherapy and health education.

(x) Development of vaccine trials to evaluate the reactogenicity, immunogenicity and protective efficacy of newly developed vaccines before introducing for use in Southeast Asia Region and elsewhere. It is anticipated that Anti-diarrhoea vaccine and cholera vaccine would be the first group of vaccines to be tested. The work will be closely supervised by World Health Organization and the Ministries of Health concerned.

It is anticipated that this research development and management will be the vital and dynamic component of the TROPMED activities during the Fourth Five-Year Plan of TROPMED.

(3) Seminars and Technical Meetings

The regional TROPMED Seminars and Conferences etc. serve as forums for closer contact among scientific and research workers within and outside the Region. A wide range of topics in the field of tropical medicine and public health have been presented at these seminars contributing to the knowledge and the study in depth the understanding of specially selected situations of problems affecting the communities and the Region. The conclusions reports and recommendations emerging from these seminars are disseminated to agencies and institutions throughout and outside the Region and also to international organizations foundations and donors.
The topics for the seminars during the Fourth Five-Year Plan of TROPMED are:

1. Seminar on infectious and parasitic diseases of the hepat-biliary system in Asian Region.
2. Seminar on social and economic research in tropical diseases in Southeast Asia (Malaysia)
3. Seminar on tropical diseases occurring during and after construction of dams for hydro-electricity and for irrigation system to increase in agricultural products, and the disease prevention and control (Philippines).
4. Seminar on malnutrition and nutritional diseases in rural and urban communities in Southeast Asia (Indonesia) and
5. Seminar on primary health care practice for better standard of living of rural communities and poor urban sectors in Southeast Asia (Thailand).

The subjects for TROPMED Technical Meetings include:

1. Dengue Haemorrhagic Fever in Southeast Asia.
2. Vaccines for tropical diseases of public health importance in Southeast Asia (including those for cholera, DHF, Japanese encephalitis, malaria, etc.) (Thailand)
3. Anopheles population genetics in their role as malaria vectors in Southeast Asia (Malaysia)
4. Japanese encephalitis causing public health problems in Southeast Asia. (Japan or Thailand)
5. Advanced knowledge in malaria in Southeast Asia (Thailand)

These seminars and technical meetings will be held in joint organization with other regional institutions including the Reche Far East Research Foundation, the Southeast Asian Medical Information Centre (SEAMIC) of the International Medical Foundation of Japan (IMFJ), the Japan Association for Tropical Medicine, the Korean Medical Association, the Malaysian Society of Parasitology and Tropical Medicine, the Parasitology and Tropical Medicine Association of Thailand, WHO SEARO, WHO WPRO, UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases, etc.
(4) **Personnel Exchange Programme**

TROPMED will provide personnel exchange grants annually to lecturers, scientists and technicians from member countries to help in the teaching courses of TROPMED National Centres, to observe teaching and research activities at various institutions in the member countries, or to undertake the inservice training on special research techniques, etc.

TROPMED Central Office through its Personnel Exchange Programme provides 50% of the grants for technical services to the TROPMED National Centres in terms of visiting lecturers and technical consultants on research work, both in the fields and in the laboratories in order to utilise professional expertise within the Region or Asians helping other Asians. This activity results in increased feeling of brotherhood and solidarity among the professionals in Southeast Asia working in the medical and public health sectors.

About 30 TROPMED teachers and scientists will be awarded such personnel exchange grants annually.

(5) **Consultant Services from Other Sources.**

Through SEAMES, TROPMED will provide external consultants and experts on special and specified subjects in tropical medicine and public health to the TROPMED National Centres, especially for development tasks of the Institutions. Such consultants will be obtained through the technical assistance and cooperation from developed countries including Japan, Australia, France, West Germany, Canada, Netherlands, U.K, U.S.A., etc. About 8-15 consultants and experts from these developed countries will be invited each year for such services.
(6) **Publication of the Southeast Asian Journal of Tropical Medicine and Public Health.**

This quarterly medical Journal commenced its publication in 1970 serves as a document for publication and dissemination of the technical information and knowledge regarding activities in Tropical Medicine and Public Health research and training in the Southeast Asian Region, encouraging doctors and scientists to reveal their scientific work to the World. The Journal publishes original articles in the specialised fields of Tropical Medicine and Public Health regardless of the place of study and origin of the author, but priority is given to work done in the Region. The scientists in this Region feel that through this Journal they find solidarity as members of the same family. Thus, TROPMED regards the Southeast Asian Journal of Tropical Medicine and Public Health as an important tool to make professional groups and medical and scientific circles within and outside this Region know and be aware of the existence of SEAMEO-TROPMED in this part of the world.

The Journal has 4 issues per a volume in a year, now having 15 volumes of 60 issues.

(7) **Library, Information Services and Clearing House**

Each TROPMED National Centres in their own respective countries has library resources and facilities for their staff and trainees. The libraries provide reference and bibliographic loan and inter-library loan services within their own country and exchange of publications with the National Centres through TROPMED Central Office.
TROPMED Central Office will publish a quarterly newsletter for distribution in the Region to be called "TROPMED News".

Through the cooperation and assistance from IDRC of Canada, the Museum and Reference Centre with emphasis on mosquito borne diseases will be developed to serve the Southeast Asian and other Regions. The objectives of the Project are:

- Collect information and specimen of mosquito borne diseases in the Region;
- Disseminate information to scientists and researchers of common interest;
- Serve as museum and reference centre for scientists in the Region.

For distribution of information to the Region, a quarterly bulletin on Mosquito Borne Diseases is published by the TROPMED Museum and Reference Centre.
The Bureau for TROPMED Information was established in 1971 in the TROPMED National Centre of Thailand to serve as a central unit for Museum and Reference Centres located in TROPMED National Centres. The Museum and Reference Centres in the National Centres collect and catalogue specimens and materials in their area of specialisation and serve as information centres for dissemination of TROPMED information - to request from the Region as well as from all over the world.

(8) TROPMED Governing Board Meeting

The TROPMED Governing Board will continue to function as policy making, programme approval and overall review of the Project budget. The meeting of the Governing Board will be held annually in rotation in the TROPMED Member Countries (or elsewhere if relevant) throughout the Fourth Five-Year Plan. Extraordinary meeting of the Board may be called if necessary.

Epilogue

To learn together, to solve problems together, to share and to gain experience and knowledge from each other are what medical workers and scientists in Southeast Asia benefit from the SEAMEO-TROPMED Training, Research, Seminars and Personnel Exchange Programme. Their strength will be joined in a cooperative endeavour to improve the health and standard of living of the people in Southeast Asia.
ESTIMATED COSTS

The SEAMEO-TROPMED Project costs in the Fourth Five-Year Permanent Phase consisting of 4 major components:

I. TROPMED Central Office Operational Costs.

II. Costs for TROPMED regional programmes and activities financed from "SEAMEO Special Funds".

III. Costs for Research Projects in the TROPMED National Centres.

IV. Costs for the TROPMED National Centres Development.
I. TROPAMED Central Office Operational Costs (including publications)

(Table showing projection of these costs for 5 years)

<table>
<thead>
<tr>
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<tbody>
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<td>Salaries and Wages</td>
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</table>
Note: 1. The budgets are prepared based on the annual increase of 10% from the previous year. However, the TROP MED Governing Board will consider to approve the Operational budget each year based on the increase of 10% from the actual expenditure of previous year.

2. Detail of TROP MED staff members is in Annex I attached.

3. Cost for Clearing House and Professional Publications represents the publication costs for Southeast Asian Journal of Tropical Medicine and Public Health and other TROP MED Scientific Paper Series. Additional funds will be sought from other donors to meet additional printing costs.

4. Professional Services represent annual financial audit fees.

5. The Operational Costs of various TROP MED National Centres provided by respective host governments are as follows:

- TROP MED/Indonesia US$ 120,000
- TROP MED/Malaysia US$3,716,069
- TROP MED/Philippines US$ 291,478
- TROP MED/Thailand US$1,245,189

From SEAMEO Centres Support Profile, F.Y. 1981/1982
II. SPECIAL FUNDS

Cost of TROPMED Special Funds for Fourth Five-Year Phase

<table>
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<tr>
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<tbody>
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<td>Training and Research</td>
<td>783,609</td>
<td>841,089</td>
<td>849,685</td>
<td>849,685</td>
<td>849,685</td>
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<tr>
<td>Scholarship</td>
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<td></td>
</tr>
<tr>
<td>Seminar and Conferences</td>
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<td>39,000</td>
<td>39,000</td>
<td>39,000</td>
<td>39,000</td>
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<tr>
<td>Personnel Exchanges</td>
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<td>30,000</td>
<td>30,000</td>
<td>30,000</td>
</tr>
<tr>
<td>Governing Board Meetings</td>
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<td>9,000</td>
<td>9,000</td>
<td>9,000</td>
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<tr>
<td>Total</td>
<td>861,609</td>
<td>919,089</td>
<td>927,685</td>
<td>927,685</td>
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</tr>
</tbody>
</table>

Note: 1. Fifteen postgraduate teaching courses at 4 TROPMED National Centres of Indonesia (3), Malaysia (3), Philippines (4), and Thailand (5), including 3 diploma, 9 master degree and 3 doctoral degree courses.

2. Each training course lasts from 6 months to 3 years (4 six-month; 2 ten-month; 2 twelve-month; 4 two-year; and 3 three-year courses)

3. At least 121 scholarships for 155 trainees are available annually to doctors, scientists and medical technicians of SEAMEO-TROPMED member countries.

4. The distribution of scholarships to member countries will be considered by TROPMED Governing Board at the annual meetings of the Board.
5. The cost per scholarship ranges from US$4,477 (6 month course in Kuala Lumpur) to US$8,186 (3-year course in Manila).

6. One regional seminar (about 200 participants) and one technical meeting (about 20-30 participants) will be organised each year at any of the TROPMED National Centres.

7. About 30 professors, scientists and research workers are awarded grants from TROPMED Personnel Exchanges Programme as visiting consultants for research and regional training courses, in-service training on special research techniques, etc. Estimated travel and per diem expenses for one grant is US$1,000. Period of grants awarded range from 7 days or less to 30 days.

8. One TROPMED Governing Board Meeting will be organised annually in rotation among the TROPMED member countries or elsewhere as relevant.

9. The details of Special Funds are in Annex II and Annex III attached.
III. Costs for Research Projects in the TROPMED National Centres

It is expected that there will be a considerable number of research projects of public health importance in tropical medicine and public health to be carried out in the TROPMED National Centres of Indonesia, Malaysia, Philippines and Thailand. The financial support is usually obtained from the individual Governments of the respective TROPMED Countries. However, additional fund support will be sought from various appropriate donors (one of which is the UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases) by individual TROPMED National Centres, by TROPMED Central Office or by SEAMES (if being requested for the institutional-typed research projects). The costs for each research project range from US$10,000 to US$50,000.

IV. Costs for the TROPMED National Centres Development

It is anticipated that there will be continuing development of the TROPMED National Centres of Indonesia, Malaysia, Philippines and Thailand during the Fourth Five-Year Plan of SEAMEO-TROPMED. The main topics in the development of the Centres include:

(1) Man-power development

There will be assignment of new young staff in the institutions and the staff development programme will be taken place by sending them abroad for further study in the universities of the developed countries including Japan, France, Australia, New Zealand, Netherlands, West Germany, U.K., U.S.A., etc.
(2) **Consultant Services from Other Sources**

Through SEAMES, TROPMED can provide external consultants to the TROPMED National Centres for overall TROPMED activities and development tasks of the institutions. Such consultants are obtained through technical assistance and cooperation from Japan, Australia, France, New Zealand, West Germany, Netherlands, U.K., U.S.A., etc. (to be provided to the SEAMEO Centres/Projects).

(3) **Equipment**

The visual-aid teaching equipments are necessary for better teaching and training programmes in the TROPMED regional teaching courses, and also other necessary equipments are needed for the field work, laboratory work and office work including data processing in order to do research with satisfactory results. Each TROPMED National Centre has to find these equipments continuously in order to fulfil its commitment for regional teaching and research in tropical diseases and public health. Appropriate donors will be approached for this equipment requirement.

(4) **Library Development**

(5) **Funds to support the research in the field as well as in the laboratories**
The costs for these developments are usually obtained from the host governments of the respective TROPMED Countries through the regular and special budgets of the TROPMED National Centres. However, the costs are supplemented by external aids (especially those from WHO) on a case by case basis.

It is understood that the operational funds for each TROPMED National Centre are under the responsibility of the respective TROPMED country government. Additional assistance from appropriate donors in the forms of consultants and experts, scholarship of staff, further training in developed countries, necessary equipments and supplies for strengthening research and training capabilities, and libraries development and funds to support research works in the field as well as in the laboratories will be sought by individual TROPMED National Centres with the assistance of TROPMED Central Office through SEAMES.
PROPOSED RESOLUTION

The Council approves programmes and activities of TROPMED in the Fourth Five-Year Permanent Phase and approves its funding scheme covering the period from July 1985 to June 1990 as proposed by TROPMED.
ANNEX I

Supporting Details for TROPMD Central Office Operational Costs


<table>
<thead>
<tr>
<th>Year</th>
<th>Budget US$</th>
<th>Actual Expenditure US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>F. Y. 1970/1971</td>
<td>46,000</td>
<td>45,266</td>
</tr>
<tr>
<td>F. Y. 1971/1972</td>
<td>46,000</td>
<td>46,387</td>
</tr>
<tr>
<td>F. Y. 1972/1973</td>
<td>56,000</td>
<td>54,893</td>
</tr>
<tr>
<td>F. Y. 1973/1974</td>
<td>56,000</td>
<td>56,196</td>
</tr>
<tr>
<td>F. Y. 1974/1975</td>
<td>56,000</td>
<td>53,735</td>
</tr>
</tbody>
</table>

Note:
1. U.S. Government contributed 50% of the total budget annually.
2. TROPMD Member Countries, i.e. Indonesia, Malaysia, Philippines, Singapore, Thailand and Vietnam shared the other 50% of the total budget.


<table>
<thead>
<tr>
<th>Year</th>
<th>Budget US$</th>
<th>Actual Expenditure US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>F. Y. 1975/1976</td>
<td>56,000</td>
<td>51,265</td>
</tr>
<tr>
<td>F. Y. 1976/1977</td>
<td>56,000</td>
<td>54,403</td>
</tr>
<tr>
<td>F. Y. 1977/1978</td>
<td>56,000</td>
<td>55,174</td>
</tr>
<tr>
<td>F. Y. 1978/1979</td>
<td>56,000</td>
<td>56,000</td>
</tr>
<tr>
<td>F. Y. 1979/1980</td>
<td>56,000</td>
<td>56,000</td>
</tr>
</tbody>
</table>

Note:
1. TROPMD Member Countries shared expenses, i.e. Indonesia, Malaysia, Philippines, Singapore, Thailand, Vietnam, each paid US$9,000 annually; Cambodia and Laos paid the token contribution of US$1,500 and US$500 respectively.
2. In 1975, Vietnam, Cambodia and Laos became inactive members and stopped paying their annual contributions. The deficit of US$11,000 was provided by SEAMES in form of a loan.

3. Singapore terminated her participation in TROPMED activities beginning F.Y. 1976/1977. Thus, the Operational Budgets of TROPMED were shared by the 4 remaining active members, i.e. Indonesia, Malaysia, Philippines and Thailand.


<table>
<thead>
<tr>
<th>Year</th>
<th>Budget</th>
<th>Actual Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>F.Y. 1980/81</td>
<td>83,000</td>
<td>78,978</td>
</tr>
<tr>
<td>F.Y. 1981/82</td>
<td>83,000</td>
<td>71,272</td>
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<tr>
<td>F.Y. 1982/83</td>
<td>93,276</td>
<td>91,376</td>
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<tr>
<td>F.Y. 1983/84</td>
<td>95,600</td>
<td>95,600</td>
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<tr>
<td>F.Y. 1984/85</td>
<td>95,600</td>
<td>95,600</td>
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</table>

Note: The 4 active TROPMED Member Countries equally shared the annual Operational Budgets of TROPMED.


<table>
<thead>
<tr>
<th>Year</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>F.Y. 1985/86</td>
<td>US$104,000</td>
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<tr>
<td>F.Y. 1986/87</td>
<td>US$114,400</td>
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<tr>
<td>F.Y. 1987/88</td>
<td>US$125,840</td>
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<tr>
<td>F.Y. 1988/89</td>
<td>US$138,344</td>
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<tr>
<td>F.Y. 1989/90</td>
<td>US$141,444</td>
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</tbody>
</table>
Note:

1. Annual Contributions from each of the 4 active TROPMED Member Countries, i.e. Indonesia, Malaysia, Philippines, and Thailand are:

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<tr>
<th>Financial Year</th>
<th>Contributions</th>
</tr>
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<tr>
<td>FY 1985/1986</td>
<td>US$26,000</td>
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<td>FY 1986/1987</td>
<td>US$28,600</td>
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<td>FY 1987/1988</td>
<td>US$31,460</td>
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<tr>
<td>FY 1988/1989</td>
<td>US$34,560</td>
</tr>
</tbody>
</table>

2. The TROPMED Governing Board will consider to approve the Operational Budget each year based on the actual expenditure of the previous fiscal year.

Supporting Details of Budgets for TROPMED Operational Costs

Personnel Strength

<table>
<thead>
<tr>
<th>Position</th>
<th>Present Salaries</th>
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<tbody>
<tr>
<td>Coordinator (Professional staff)</td>
<td>US$17,289</td>
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<tr>
<td>Administrative Assistant (GS)</td>
<td>US$12,597</td>
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<tr>
<td>Tech. Assistant (Journal and Publications) (GS)</td>
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<td>Secretary (GS)</td>
<td>US$6,715</td>
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<tr>
<td>Account I (GS)</td>
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<tr>
<td>Account II (GS)</td>
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<tr>
<td>Account III (GS)</td>
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<tr>
<td>Typist (GS)</td>
<td>US$3,742</td>
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<tr>
<td>Clerk (GS)</td>
<td>US$3,571</td>
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<tr>
<td>Clerk (GS)</td>
<td>US$2,584</td>
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<tr>
<td>Janitor (GS)</td>
<td>US$2,711</td>
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<tr>
<td>Supplement</td>
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<tr>
<td>Assistant Coordinator</td>
<td>US$2,096</td>
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<tr>
<td>Messenger</td>
<td>US$1,467</td>
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</tbody>
</table>

Note: The Salary Scale of TROPMED staff will be based on the salary scale of SPAFA Coordinating Unit which is also located in Bangkok.
## Index II

Supporting Details of Projects for THRO/The Training and Research Scholarships

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<td>-----------</td>
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</tr>
<tr>
<td>1. D.T.I., 6 E., Bangkok 6 months Course</td>
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<td>130,004</td>
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<td>2. D.A.P., 6 E., Course, Kuala Lumpur 6 months Course</td>
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<td>3. M.P.H., Manila 12 months Course</td>
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<td>(11 x 8,543)</td>
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<tr>
<td>4. D.A. Nutrition, Jakarta 6 months Course</td>
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<td>(17 x 5,280)</td>
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<td>5. M.P.H. Urban Health, Bangkok 10 months Course</td>
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<td>(9 x 7,486)</td>
<td>(9 x 7,486)</td>
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<tr>
<td>9. M.S. Rural Health, Manila 12 months (2-year Course)</td>
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<td>10. M.Sc. A.M.T., Jakarta 12 months (2-year Course)</td>
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<td>June, 1905</td>
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<td>June, 1908</td>
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</tr>
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<td>(4 x 7,406)</td>
<td>(4 x 7,406)</td>
<td>(4 x 7,406)</td>
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<tr>
<td>13. Dr.P.A. Mantle</td>
<td>32,744</td>
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<td>33,144</td>
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</tr>
<tr>
<td></td>
<td>(12 months (3-Year Course))</td>
<td>(4 x 8,203)</td>
<td>(4 x 8,203)</td>
<td>(4 x 8,203)</td>
<td>(4 x 8,203)</td>
<td>(4 x 8,203)</td>
</tr>
<tr>
<td></td>
<td>(12 months (3-Year Course))</td>
<td>(4 x 8,166)</td>
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<td>(4 x 8,203)</td>
<td>(4 x 8,203)</td>
<td>(4 x 8,203)</td>
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<tr>
<td>15. M.Sc. Course in Kuala Lumpur</td>
<td>43,932</td>
<td>44,002</td>
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<tr>
<td>TOTAL</td>
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<td>849,605</td>
<td>849,685</td>
<td>849,685</td>
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</tr>
</tbody>
</table>
### ANNEX III

**Supporting Details of Budgets for TBORMED Seminars and Conferences**

During the Third Five-Year Permanent Phase (July 1985 - June 1990)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Regional Seminar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>29,000</td>
<td>29,000</td>
<td>29,000</td>
<td>29,000</td>
<td>29,000</td>
<td>29,000</td>
</tr>
</tbody>
</table>

**Budget Breakdown:**

- **Air fare for 20 participants** US$11,320
- **Per diem 72 x 7 x 20** US$10,080
- **Proceeding of the Seminar** US$ 4,000
- **Secretarial/Secretarial Service, Production of abstract of Scientific papers audio visual aids, local transportation act** US$ 3,600
  
  **Sub-Total** US$29,000

2. Technical Meeting

|------------------|------------|------------|------------|------------|------------|------------|
| **Air fare for 10 participants** US$ 5,500
  | **Per diem 10 x 72 x 5** US$ 3,600
  | **Proceeding of the Meeting** US$ 900
  | **Sub-Total** US$10,000

**Total of Seminar and Conferences** 39,000 39,000 39,000 39,000 39,000 39,000
<table>
<thead>
<tr>
<th>Date Range</th>
<th>Seminar</th>
<th>Technical Meeting</th>
</tr>
</thead>
</table>
ASEAN SCHOLARSHIP PROGRAMME FOR APPLIED TROPICAL MEDICINE AND PUBLIC HEALTH (ASP-ATMPH)

Proposal for continuation of support from USAID

BACKGROUND

The ASEAN Scholarship Programme for Applied Tropical Medicine and Public Health (ASP-ATMPH) was established with the approval of the ASEAN Standing Committee at the Meeting in Kuala Lumpur on 24th June 1980. It is a Programme of ASEAN Expert Group on Health and Nutrition under the ASEAN Committee on Social Development.

The ASP-ATMPH is one of the efforts of the ASEAN member states to improve the quality of life of the rural poor and to bring them more into the mainstream of national development.

The main function of ASP-ATMPH is to train health and medical workers so that they would apply knowledge and skills in their respective home countries. At present, the training courses are conducted in 5 ASEAN member countries namely Indonesia at the Faculty of Medicine, University of Indonesia; Malaysia at the Institute for Medical Research; Philippines at the Institute of Public Health, University of the Philippines; Singapore at the Department of Social Medicine and Public Health, National University of Singapore; and Thailand at the Faculty of Tropical Medicine and Faculty of Public Health, Mahidol University.

The ASP-ATMPH is operated under the direction of the Governing Body comprises representatives or responsible persons from all participating institutions of ASEAN member countries. The functions of the Governing Body include
the allocation of scholarships; direction and nature of the courses and other
related items. The Programme Coordinator is the chief executive and legal
representative of the Governing Body and operates any account of the Programme.

The regular training courses under ASP-ATMPH are as follows:

Courses at the Faculty of Medicine, University of Indonesia, Jakarta


Courses at the Institute for Medical Research, Kuala Lumpur

1. Diploma in Applied Parasitology and Entomology (D. A. P. &E.),
   6-month course.
2. Diploma in Medical Microbiology (D. M. M.) 6-month course.
3. Master of Science in Applied Parasitology or Entomology,
   2-year course conducted with the cooperation of Universiti Sains Malaysia,
   Penang.
4. Master of Science in Medical Microbiology, 2-year course,
   conducted with the cooperation of Universiti Kebangsaan Malaysia
   Kuala Lumpur.

Courses at the Institute of Public Health, University of the Philippines,
Manila

3. Master of Science in Public Health (M. S. P. H.) 2-year course.
Courses at the Department of Social Medicine and Public Health, National University of Singapore, Singapore

1. **Master of Science in Public Health (M. Sc. Pub. Hlth.)** 9-month course

Courses at the Faculty of Tropical Medicine, Mahidol University, Bangkok

3. **Master of Science in Clinical Tropical Medicine (M. Sc. C. T. M.)** 12-month course.
4. **Master of Public Health (M. P. H. Urban Health).** 10-month course.

The ASP-ATMPH started to allocate scholarship funds in academic year 1981/1982. From academic year 1981/1982 to 1984/1985, 382 trainees from ASEAN Member Countries were awarded ASP-ATMPH scholarships to attend the training courses. 34 more trainees will be awarded the scholarships by May 1985. Funds disbursed and obligated from academic year 1981/1982 to 1984/1985 is US$1,876,954 and average of US$4,511 per trainee per year.
Evaluation of the Programme

There are periodical reviews of the curricula of the ASP-ATMPH training courses by the participating institutions, by recommendations of visiting lecturers and experts and through the meetings among the Course Directors or meetings between the institutions and the ministries of health, to ensure that the training courses are relevant to national health policies as well as to meet the needs of the Region. In addition, questionnaires were sent to 274 graduates of the training courses to find out whether the training has been useful to their work. The responses were positive. The trainees expressed their views to support the regional training courses, that the courses should be continued and strengthened as much as possible. Many were grateful that without the ASP-ATMPH scholarships support, they would not have had the chances to further their studies and to be of better services to the communities. By studying the courses in the ASEAN countries, many appreciated that they were exposed to the health problems of other countries and learned how the problems were solved. This way of study has broaden the views of the trainees and enhanced the regional cooperation and understanding.

Financial Status

Funds to support the scholarships under ASP-ATMPH have been from the USAID from academic year 1981/1982 until academic year 1985/1986. The allocation of funds have been on reimbursement basis, i.e. funds are reimbursed to ASP-ATMPH bi-monthly by USAID.
The breakdown of expenditure by academic year is as follows:

<table>
<thead>
<tr>
<th>Academic year</th>
<th>Expenditure (US$)</th>
<th>Trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1981/1982</td>
<td>324,988.08</td>
<td>88</td>
</tr>
<tr>
<td>1982/1983</td>
<td>389,953.08</td>
<td>100</td>
</tr>
<tr>
<td>1983/1984</td>
<td>580,245.14</td>
<td>118</td>
</tr>
<tr>
<td>1984/1985</td>
<td>581,768.23</td>
<td>110</td>
</tr>
</tbody>
</table>

* Including funds obligated for 3 courses to start in April and May 1985.

In academic year 1985/1986, the expenditures are expected to be about US$623,046 for 117 trainees.

Request for Continuation of Support from USAID

It is proposed that USAID continues to support the ASEAN Scholarship Programme for Applied Tropical Medicine and Public Health from academic year 1986/1987 to academic year 1990/1991.

The assistance from USAID will also be in the form of further support to regional cooperation through the strengthening of institutional capabilities in research and training. The joint TROPMED-USAID evaluation of the project will identify further the priority activities. The projected budget is less than US$5,000,000.
People Interviewed

USAID/ASEAN
1. Bruce Blackman, ASEAN Regional Development Officer
2. Angle Obmasca, Program Assistant

USAID/ Bangkok
1. Terrence Tiffany, Chief, Office of Population, Health & Nutrition
2. Willie Baum, Office of Population, Health and Nutrition
3. Ed Ploch, Program Officer
4. Bob Halligan, Mission Director

USAID/Jakarta
1. Dr. Voulgaropoulos, Chief, Office of Population, Health, and Nutrition

TROPMED-SEAMEO
1. Vimolsri Panichyanon, ASP-ATMPH, Program Assistant, Administrative Assistant, SEAMEO-TROPMEU

2. Dr. Chamlong Harinasuta, ASP-ATMPH Programme Coordinator, Coordinator, SEAMEU-TROPMEU Project

3. Mrs. Tuptin Potha, Finance Officer, ASP-ATMPH, SEAMEO-TROPMEU

4. Dr. Denise C. Reynold, Technical Assistant, SEAMEU-TROPMEU

SEAMEU
1. Dr. Adul Wichiencharoen, Director, SEAMES
2. Prapaporn Akamanona, Asst, Director for Finance
3. Suchitra Vunusatira, SPAFA

MAHIDOL UNIV., Faculty of Tropical Medicine
1. Dr. Savanat Tharavanij, Dept. of Microbiology and Immunology
2. Dr. Cherdilarp Vasvat, Dept. of Tropical Hygiene
3. Dr. Svasti Daengsvang, Prof. Emeritus
4. Dr. Santasiri Surmanit, Dean
5. Mr. Prayong Radomyos, Coordinator, U.T.M.&H., M. Sc. Tropical Medicine
6. Dr. Panata Miasena, Dept. of Trop. Nutrition and Food Science
7. ASEAN-TROPMEU students of on-going courses

SCHOOL OF PUBLIC HEALTH
1. Dr. Debhanom Muangman, Dean
2. Dr. Porpan Boonyarataves, Coordinator, M.P.H. Urban Health
3. ASEAN-TROPMEU students of on-going courses
UP-INST. OF PUBLIC HEALTH

1. Dr. Benjamin D. Cabrera, Governing Body representative and Project Coordinator

2. Dr. Yabes, Secretary, IPH
3. Dr. Dora Tiglao, Acting Dean

ASEAN

1. Tetti Latupapua, Foreign Ministry, ASEAN Secretariat
   Jakarta, Indonesia
2. Dr. Hariyati Soebadio, Fine Arts, Ministry of Education,
   Jakarta, Indonesia
3. Dr. Abdul Rahman, Dept. of Community Health, Ministry of Health,
   Jakarta, Indonesia
4. R.M. Girindo Pringgodigdo, Education & Cultural Attache
   Embassy of Indonesia, Bangkok

UI - FACULTY OF MEDICINE

1. Dr. Asri Rasad, Dean - Medical School
2. Dr. W.A.F.J. , Tumbelaka, Vice Rector, Univ. of Indonesia
3. Dr. Sjahrlar Rasad, Former Governing Board, SEAMEU TROPMEU
   ASP-ATMPH, Head, Dept. of Radiology
4. Dr. Sri Demijati, Dept. of Parasitology and Gen. Pathology
5. Dr. Sunoto, Dept. of Child Health
6. Dr. Soemflah, Proj. Coordinator, Nutrition/ASEAN Scholarships
7. ASEAN-TROPMEU scholarships awardees

UI - FACULTY OF PUBLIC HEALTH

1. Dr. Mary Wongsarahardja
2. Dr. Ratna Ujwita Hatma
Resources Used


2. Report of the 19th Meeting of SEAMEO-TROPMEU Governing Board of Tropical Medicine and Public Health Project of SEAMEO 23-26 September 1980, Manila


5. Report of the 22nd Meeting of SEAMEO-TROPMEU Governing Board of Tropical Medicine and Public Health Project of SEAMEO 29 August-2 September 1983


7. Resource Book on SEAMEO 1984


10. Follow-up Survey Questionnaire to graduated scholarship students