IIH Spartan Traveler
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ONE HEALTH: A WORLDWIDE COLLABORATION ADDRESSING A UNIFIED APPROACH TO HEALTH

An Introduction
There is a critical global need for a new “One World-One Medicine-One Health” concept to bridge traditional approaches that fail to recognize the interdependent nature of health issues existing in the spheres of human medicine, veterinary medicine, food security systems and environmental systems, hampering educational programs, communication campaigns, and public health systems.

As part of the worldwide One Health Initiative, Michigan State University is working to bridge these divides. Our aim is knowledge-based advocacy, seeking optimal health for people, animals, and the environment through an integrated approach that will improve upon current health disparities and inequities.

The MSU One Health global strategy provides a roadmap for understanding and administering a practical, hands-on One Health approach as a human clinical health care modality. It captures the fundamentals of One Health by advising human health care practitioners to participate in multidisciplinary collaborations utilizing health expertise in order to provide an enhanced, expeditious, and better quality of life worldwide. In summary, the benefits of such an approach are:

- Improved diagnosis and prevention of infectious diseases transmitted between animals and people
- Comprehensive approach to human development and security issues
- Improved integrative management strategy
- Improved workforce
- Improved environmental health measures and early detection of environmental health hazards
- Comprehensive approach to food safety and security.

New Frontiers at the One Health Global Risk Forum – Davos
The second Global Risk Forum One Health Summit in Davos, Switzerland, which was co-hosted by MSU (IIH and the College of Veterinary Medicine) and four other institutions, was dominated by 15 interdisciplinary MSU Faculty oral presentations, two keynote addresses (Joan Rose and Felicia Wu), and two plenary presentations (Ned Walker and Reza Nassiri). This Summit, held in November 2013, concluded with a full day of...
workshops co-organized by Michigan State University and GRF-Davos and co-moderated by Walter Ammann (GRF-Davos) and Reza Nassiri (MSU-IIH), and two MSU faculty, David Long and Tom Voice. The summit was also attended by a representative of the World Bank (Olga Jonas).

The GRFS-Davos One Health Summit was a great opportunity for MSU cross-college faculty to engage with their European colleagues with various potential partners, funders, and policy makers such as universities, corporations, government entities, and foundations. It was also a unique networking opportunity for MSU faculty members. The Summit discussed ways to foster future One Health partnerships among world class universities. Numerous discussions and presentations were centered on the role of One Health in higher education and the development of a sustainable Global One Health Workforce.

**MSU’s One World One Health Networking Event held July 28**

About 70 people came together at Michigan State University on July 28 to discuss enhancing communication and collaboration among veterinary, environmental and human health partners. The One World One Health networking event, held at the Delia Koo International Center, was hosted by the MSU Institute of International Health and the Canadian Studies Center.

The program brought participants from as far away as Carleton University in Ottawa, Ontario, the University of Saskatchewan and Selçuk University. The event began with opening remarks from meeting chairs Reza Nassiri, associate dean of global health for the College of Osteopathic Medicine, director for the Institute of International Health and lead on MSU One Health initiative; and Ann Marie Schneider, director of the Canadian Studies Center, International Studies and Programs, director of Program Planning and Policy Education for the Institute of Public Policy and Social Research.

Nassiri spoke on the role of MSU in the One Health initiative in stating that, “MSU has been a One Health university for many years.” MSU President Lou Anna Simon thanked participants and speakers for attending and urged them to understand the importance of this event. “It is like the United Nations table,” she said. “Today is for each to come in with expertise and perspective but come out with common language.”

Keynote presenter was Carol Rubin, associate director for Zoonosis and One Health in the National Center for Emerging Zoonotic and Infectious Diseases. She focused on four main staples of the initiative: perspective, challenges, U.S. government and gaps that academia can fill in the continued approach to One Health. “One Health is an approach, not a discipline, to solving health problems that acknowledges the overlap of different sectors,” she said.

The afternoon session featured David Butler-Jones, Canada’s first and immediate past chief public health officer. He shared examples and lessons from the past and present Canadian public health policies and addressed opportunities and challenges that are presented with One Health.

“One Health approach helps to bridge educational/research gaps among human, veterinary and environmental science fields,” he noted.

Morning and afternoon panels addressed any questions, comments or concerns that participants had regarding the initiative. The morning panelsists included Tom Voice, professor of civil and environmental engineering and director of the MSU Hazardous Substance Research Center; Monica Liss, Ph.D. candidate in the MSU Department of Philosophy; Hugh Townsend, professor of veterinary medicine and program chair for vaccine and infectious disease for the International Vaccine Center at the University of Saskatchewan; John Kaneene, university distinguished professor of epidemiology and director of the MSU Center for Comparative Epidemiology for the College of Veterinary Medicine and Rubin.

The afternoon panels were Mark Forbes, professor of biology and associate vice president for research at Carleton University; Steven Paepke, professor of plant biology and associate vice president for research and graduate studies; Doug Buhler, director of MSU AgBioResearch and senior associate dean for research in the College of Agriculture and Natural Resources.

Collaborations in global health: the 2014 Korea One Health Forum

The Institute of International Health (IIH) continues its efforts to promote MSU’s vision of global health issues with international partners. IIH co-organized the 2014 Korea One Health Forum with Seoul National University and its College of Veterinary Medicine and the Asian Association of Veterinary Schools in Seoul, Republic of Korea.

This conference focused on three themes:

- The current status of the One Health Initiative including collaborative research
- One Health curricula, and
- Joint international educational resources.

The principle aims of this conference were global networking in One Health with particular emphasis on Asian countries and expanding on global strategies of interdisciplinary collaboration and communication in all aspects of the triple health threats (human, animal and environment). The conference was represented by universities and institutions from South Korea, USA, Japan, Switzerland, Indonesia, Malaysia, Laos, Vietnam and Taiwan.

William Strampel, dean of the MSU College of Osteopathic Medicine, was invited by the conference organizing committee to deliver welcoming remarks. Reza Nassiri, MSU/COM associate dean of global health and director of IIH, was a keynote speaker. He also chaired a roundtable discussion with representatives from all country participants to identify common interests in One Health topics and discuss a plan of action through an Asian partnership and networking.

MSU was represented by the Colleges of Osteopathic Medicine (Strampel, Nassiri, and Sung Soo Chung), of Veterinary Medicine (John Kaneene, Puliyr and Sheba Mohanlal), of Engineering (Thomas Voice and Syed Anwar Hashsham), and of Natural Science (David Long). Each MSU faculty member delivered a presentation about his or her international health development projects with emphasis on One Health approaches. The MSU delegation met with several Asian colleagues to establish a One Health research agenda and collaborations. Also, the delegation met with the senior health specialist of the World Bank, Nedim Jaganjac, to discuss One Health development projects.

“This was a meeting to develop a sustainable One Health networking relationship with Asian countries. MSU has all the capabilities to collaborate with Asian countries on One Health research and development projects,” Nassiri said.
At the MSU International Awards Ceremony on March 26, Reza Nassiri, director of the Institute of International Health, received the Charles A. Glezio International Award for Public Diplomacy in recognition of his success in initiating and maintaining important programs that address many global health issues.

As the award citation indicated, “Reza Nassiri has a true passion for working with people to solve complex global problems. His vision is to advance the knowledge of health and medicine in impoverished and developing regions of the world through an active learning experience and development of research projects, thus making a difference in global health standards.”

“Global health challenges, health promotion and inequity, community medicine and public health as well as students’ learning and understanding of sociocultural and socioeconomic determinants of health became my commitment and part of my professional goal in the past two decades,” said Nassiri. “MSU is an ideal institution where collaborative and integrative models for global health solutions can be developed to improve health outcomes, especially in resource-limited regions of the world.”

The world needs us. We are limited to what we can do in one country, but if we can be of service globally, we can make a difference. The poor are hungry and their hunger traps them in poverty.” Hunger is the number one cause of death in the world, killing more than HIV/AIDS, malaria, and tuberculosis combined.

Q: How can community engagement be incorporated into the curriculum?
A: We are extremely fortunate in the United States to have the resources to develop a high level of academic experience and expertise. When we are teaching people from less developed nations how to be resilient and build capacity, we can and should be open to learning from them. I never go to a country and tell them we are going to teach them. Rather, I talk about how we are here to learn and to mutually benefit each other through solving health issues. If there is a need, we can accomplish it together. I bring many foreign doctors and medical professionals involved in HIV medicine training at MSU, a program in partnership with Ingham County Health Department. They learn knowledge and skills, and see how we manage patients in the U.S. We can make a difference, but first we need to understand each other’s cultures. Proficiency in language is important. On an individual level, one person can make a difference.

Q: What is the greatest benefit of community engagement in public health?
A: The greatest benefit is that we develop new knowledge that leads to the implementation of effective measures specific to that community (evidence-based community approaches). Once measures are taken, we can assess the impact. Once we have an impact, it is a gold standard for us to make policy recommendations and publish for broader review and evaluation and implementation. From start to end, there are processes where we are learning.

Prof. Reza Nassiri: Community engagement and service learning for students and the university

Reza Nassiri, associate dean of global health, MSUCOM, director of the Institute of International Health and clinical professor - program leader of Community Medicine in Tucumán, Mexico (spring break), Brazil Health Exposure Experience in Belo Horizonte (winter break), Pre-Clinical Observation, Culture & Medicine in the Dominican Republic (summer), and Global Health Education: Understanding Turkish Culture and Health Care Delivery System (summer)

Q: What are the greatest benefits of community engagement (CE) and service learning defined?
A: IIH’s study abroad courses for health professions students are located in Brazil, the Dominican Republic, Turkey and Mexico, and focus on community health engagement. In all of those courses, MSU students are actively exposed to the concept of community engagement in local health clinics. Service learning is also an active component: we help supply and, with my wife, Dina Nassiri, coordinate with the students to donate food, clothes, shampoo, soap, toothbrushes, toothpaste, toys and hats. We deliver the items within the community. We usually ask those who speak the language to engage. The primary goal is to educate the poor and underserved on basic principles of health: personal hygiene, avoiding food poisoning and encouraging vaccinations.

IIH has extended engagement and service learning concepts into community health research. We are compiling data about the effectiveness of distributing hygiene items. For example, for three years we have worked with villages in the Dominican Republic to the point where the local people are very much aware and welcoming to MSU. We use simple ideas. Sixty percent of the recipients of the donated items are undocumented Haitians. Through this distribution, one rarely finds cases of scabies, unlike in the past. This also means there is no need to spend scarce resources to buy relevant drugs, distribute them and monitor the patients on the results. Our approach has been simple: prevention and control, and thus reducing and even eliminating the more expensive process of treatment. We encourage them to boil water which they are now doing. We encourage them to use toothbrushes, which they are now doing regularly such that it has become a basic habit. Children even compete with each other to show who is doing the best job of brushing their teeth, for instance. Because of lack of resources to do research we have not measured quantitative results in the past but now we are selecting another village for which we will be applying for grant funding to determine the effectiveness of these simple low-tech techniques. We will bring an epidemiologist with us to guide us, and do analysis.

Q: In the specific study abroad context, how are community engagement (CE) and service learning defined?
A: CE and service learning defined?

Reza Nassiri with MSU President Lou Anna K. Simon and Dean Strampel

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Q: What are the greatest benefits of community engagement?
A: IMPORTANT GLOBAL HEALTH FACTS

1. Life expectancy at birth increased globally by six years since 1990
2. Around 6.6 million children under the age of five die each year
3. Preterm birth is the leading killer of newborn babies worldwide
4. Most HIV/AIDS deaths occur in Africa
5. Every day, about 800 women die due to complications of pregnancy and childbirth
6. Mental health disorders such as depression are among the 20 leading causes of disability worldwide
7. Tobacco kills nearly six million people each year
8. Almost one in 10 adults has diabetes
9. Nearly 3.500 people die from road traffic crashes every day
10. Eighty percent of the world population lives on less than $1 a day
11. The World Food Programme states, “The poor are hungry and their hunger traps them in poverty.” Hunger is the number one cause of death in the world, killing more than HIV/AIDS, malaria, and tuberculosis combined
12. One quarter of all humans live without electricity — approximately 1.6 billion people
13. As of 2011, 19 million children worldwide are not vaccinated

Sources: World Health Organization, Dosomething.org

Topical Health Facts

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Q: What can we do to establish mutually beneficial partnerships? A: We are extremely fortunate in the United States to have the resources to develop a high level of academic experience and expertise. When we are teaching people from less developed nations how to be resilient and build capacity, we can and should be open to learning from them. I never go to a country and tell them we are going to teach them. Rather, I talk about how we are here to learn and to mutually benefit each other through solving health issues. If there is a need, we can accomplish it together. I bring many foreign doctors and medical professionals involved in HIV medicine training at MSU, a program in partnership with Ingham County Health Department. They learn knowledge and skills, and see how we manage patients in the U.S. We can make a difference, but first we need to understand each other’s cultures. Proficiency in language is important. On an individual level, one person can make a difference.

Q: Is community engagement a part of the curriculum and course assessment? A: There needs to be highly structured community engagement. Most of the time is in a hospital or community health clinics. We come to understand their culture and diseases better. In the hospital, there are clinical observations and shadowing – not much time to chat with patients. In community clinics, there is more time to understand patients and their families. I always bring gifts to share – the people in the community then talk more freely what is going on in their lives. We need to think about this at the university level. In the outside world, they don’t need medication as much, they need communication and affection. That is the best medicine.
STUDY ABROAD PROGRAMS

The Institute of International Health currently offers four health and medical study programs, providing MSU students with the opportunity to gain a better understanding of health care systems in other countries, different clinical practices and cultural competency. Courses in Mexico and the Dominican Republic are designed for undergraduate students considering a career in the medical field, and programs in Brazil and Turkey are designed for osteopathic and allopathic medical students and graduate nursing students. Through clinical shadowing in our partner hospitals and interacting with the host physicians and local medical staff, students observe clinical procedures like surgery and childbirth, and learning about the patient-physician relationship in other cultures. Learning is reinforced by didactic lectures and cultural excursions in each country.

Global Health Education - Understanding Turkish Culture and Health Care Delivery System

Istanbul and Konya, Turkey

“Turkish Culture and Health Care Delivery System” is a course which enables students to travel to the Middle East and become exposed to cultural sites, including the Blue Mosque, the Grand Bazaar, and the Topkapi Palace. Along with these enriching cultural experiences, students observe at Selcuk University’s teaching hospital in Konya and attend lectures which allow them to become more exposed to the field of medicine from a broad perspective.

MSUCOM students participated in clinical observations and immersive cultural experiences from August 8-18, 2013.

Brazil Health Exposure Experience

Belem and Bragança, Brazil

The “Brazil Health Exposure Experience” course enables MSUCOM students to observe Brazilian health care practices in Eastern Amazon villages and gain experience with various aspects of international health care, including infectious diseases, oncology, pulmonology, community health and OB/GYN.

Community Medicine

Yucatán

Undergraduate students from Michigan State University, visited the Dr. Augustine O’Horan Hospital in Yucatán, Mexico to learn about medical specialties and the Mexican health system via an IIH-sponsored Study Abroad program.

Director General Clinica Yucatan, Jorge Eduardo Mendez, stated that the program included visits to Mérida’s maternity hospital and Progreso Health Clinic. The 26 students and faculty had the opportunity to directly engage, via experiential and on-site learning, in various Yucatan and Mexican health systems. The curriculum included tours of Medical Specialty Units (UNEMES), Ambulatory Surgery, Oncology, dental specialties, and operating rooms.

Students also had the opportunity to explore local culture, visiting Mayan ruins and museums and participating in a festival downtown. They were also able to interact with Mexican medical students during a joint lecture at Universidad Marista.

At an affiliated Mexican university, Dr. Reza Nassiri stated the intention of Michigan and Yucatán medical schools to enable an exchange of medical residencies in which those who come to Michigan only need to provide transportation costs, and living costs would on be provided on behalf of the University.

These efforts will be possible through partnerships with the Administration of the Patrimony of Public Welfare of the State of Yucatán, headed by Miguel Angel Cabrera Palma, whom Dr. Nassiri thanked for their courtesy and hospitality.

IIH at the Study Abroad Fair

IIH reached out to MSU undergraduate students at the Study Abroad fair about our four programs based in the Dominican Republic, Turkey, Brazil, and Mexico.

These programs help students learn about the world and how health issues are addressed in different cultures and societies. Even more importantly, they catalyze students’ current studies and guide their decisions about future careers.

These interdisciplinary programs provide exposure to various facets of medicine and the health sciences, allowing curious students opportunities to broaden expertise and skill sets. These experiences also prepare students to impact various problems in today’s diverse societies and nations.

More than 150 students, including many freshmen, visited our booth and signed up for our mailing list to learn about future program and study opportunities.
CLINICAL AND EDUCATIONAL EXCHANGES

Global/Advanced Osteopathic Manipulative Medicine Training Program

IIH hosted the first group of 16 doctors from Korean Society of Chuna Manual Medicine (Chuna) from July 27 to August 10, 2013, in cooperation with the Department of Osteopathic Manipulative Medicine (OMM) at MSU. Chuna was established by Joonshik Shin, chairman and founder of Jaseng Hospital in the Republic of Korea, approximately 20 years ago. Chuna practitioners have studied OMM, and are combining knowledge between OMM and Korean manual medicine fields. Lisa DeStefano and other faculty taught practical American OMM models and knowledge during the program. In addition, Chuna looks forward to collaborations between American osteopathic medicine and Korean medicine. Both of these branches have the same philosophy to approach human illness and disease with a holistic perspective.

IIH’s Second Healthcare Professional Shadowing Program

From October 24 to November 14, 2013, IIH conducted its second Health Care Professional Shadowing Program with 14 students from Daedong University of Busan, South Korea. The three-week program allowed participants to observe the American health care system and to advance their global health knowledge within the context of osteopathic medicine. MSU faculty who contributed to the success of the program included Ed Rosick, Peter Gulick, Lisa DeStefano, Teresa Wehrwein, Bill Cunningham, and IIH Director Reza Nassiri. Daedong University is well known in Korea for its prestigious nursing program, which originated in 1967. The Daedong students who traveled to MSU to participate in this course expressed a deep appreciation for MSUCOM, its knowledge and teaching of osteopathic medicine, and its philosophy, including OMM.

STUDENT Research and Reflections

Prevalence of HPV and risk factors for infection and cervical cancer

Cindy Tran

Research Mentors: Reza Nassiri (IIH), Hellen Fuzii (UFPA Institute of Tropical Medicine)

I am interested in the reproductive system, oncology, infectious disease, and molecular biology. It is difficult to find research where these subjects overlap so I am very fortunate to be involved in a research project that I am interested in. Without scholarship support I would not have been able to conduct research in Brazil for four months. It was an unparalleled opportunity to collaborate with scientists from diverse backgrounds and work together to contribute to science that will benefit all humanity. I learned many laboratory techniques and how to carry out research. The support I received enabled me to write a manuscript that I hope will be published in a scientific journal. Furthermore, by immersing myself in another culture, I was a part of a scientific team with life experiences different from my own. Uncoupled by my society’s norms or values, I’ve acquired new perspectives. I believe exposure to different religions and cultures produces innovative scientists and culturally competent leaders in medicine. Additionally, it is amazing the way that researchers advance science and help people on a large-scale. This research experience encouraged me to pursue research as a career.

To view Cindy’s full article please visit www.msu.edu/~iih/cindytran

Learning from joy in Kenya

Amy Luke

The opportunity to visit Tenwek Hospital in Kenya was a highlight of my medical education. After always being interested in medical mission work, experiencing it for four weeks in the pediatric ward and neonatal nursery in a Kenyan hospital was invaluable. The cultural differences, resource limitations, global disease, and differing priorities in standards of care provided me with a perspective that will impact how I practice medicine. My favorite part, hands down, was the people I met there. The friendships and work ethic of the Kenyan interns, the dedication of the Kenyan families to their sick relatives, and the physicians who have raised their families there made me feel so welcome and taught me so much.

The picture here is of a young girl we treated for cryptococcal meningitis. Her joy penetrated the entire ward—and my heart. As I pursue a career in pediatrics, wherever that may be, I’ll take Kenya with me.
As population diversity continues to grow in our country, cultural competency has become a top priority. As such, it seems imperative, now more than ever, to pursue activities that will allow students to develop the skills necessary to learn about other cultures and break stereotypes. Thanks to the help of the IIH, we were able to embark on a trip to the Dominican Republic to learn about the barriers patients experience to access health care as it relates to HIV care. What engaged our interest in the project was the great need there is in the area to improve the care of the HIV population and the interest the university had in achieving this goal. The Boca Chica area of the Dominican Republic has a high HIV prevalence due to its extreme poverty and high rates of sexual tourism. We hoped that with this project we would be able to shed light on the real difficulties the population faces.

As a result of this, it is the hope of the researchers and IIH that the project contributes to a change in health care policy, better serving the needs of the impoverished population. Our main role was to interact with patients, health care providers, and social workers in their native language and get from them vital public health information about their difficulty in accessing and providing care. It is our strong belief that the experience provided us with a holistic and humanistic view of the HIV epidemic as it relates to underserved communities. We know that this experience will shape the way we approach underserved Hispanic HIV positive patients as osteopathic physicians for the better. None of this would be possible without the constant support of the Institute of International Health and the College of Osteopathic Medicine. Thanks to their guidance and financial support, this project was possible and valuable data was collected in the hopes that it can help change the way patients in the area receive health care. Thank you for allowing us the honor of executing this project and serving the international community.
The Institute of International Health at Michigan State University advances the expansion and coordination of global health education, research, health students' global exposure, training and service, reflecting the university's commitment to improve health services and outcomes in resource-limited regions of the world. - Reza Nassiri

IIH ON THE MOVE

Health screening fair at Islamic Center of East Lansing
On January 12, first- and second-year medical students from the Michigan State University College of Osteopathic Medicine conducted a health screening fair at the local mosque, the Islamic Center of East Lansing. This was a collaborative event held by the Islamic Medical Student Association (IMSA) and MSUCOM’s Community Integrated Medicine (CIM).
About 80 people, including adults and children, were seen. The event was supervised by two MSUCOM faculty members, Craig Gudakunst and Jane Gudakunst.
The aim of this event was to provide the MSUCOM students an opportunity to work with a subset of the Muslim population of Lansing, with the hope of raising awareness about the cultural competency that would benefit them all as future physicians. Services provided included blood glucose, cholesterol, BMI, blood pressure, and hemoglobin tests. This event was also an opportunity to reach out to the members of the local community who may not have frequent access to medical facilities.

Divers Alert Network
In October 2013, Divers Alert Network (DAN) embarked on their 74th Diving and Hyperbaric Medicine Course in Grotto Bay, Bermuda.
DAN education fulfills a key element of the DAN mission by educating the diving public and the medical profession on the appropriate care for divers injured in dive accidents. This education takes on many forms, including disseminating information on topics related to dive safety through articles, reports, seminars, lectures and training programs.
To learn more about the Divers Alert Network, visit http://www.diversalertnetwork.org/

Second Higher Education Conference – MSU Dubai
From January 19-20, IIH faculty and staff gathered at the MSU Higher Learning Conference on MSU’s campus in Dubai. Educators, students, academic managers, and researchers from many different disciplines met at the Conference Center in Dubai’s Knowledge Village. This was an opportunity for IIH to showcase its innovative approach to global health education through student-focused programs, direct community experiences, as well as learn more about dynamic educational approaches worldwide. Reza Nassiri of IIH delivered the keynote speech. The conference included a broad range of presentations, allowing attendees to connect on the shared aspects of higher education. It provided emerging leaders in academia with an opportunity to present their research as well as publication avenues.

MSU students send supplies to typhoon victims
In a joint effort, the MSU student group Generate Help 2 Heal Generations and the university’s Institute of International Health gathered medical supplies valued at more than $100,000 for victims of Typhoon Hayan in November 2013. Five pallets of boxes filled with items such as surgical equipment, gowns, syringes and medication were sent to hospitals and community clinics in the Philippines to help care for those in need.

“The consequences of this storm have been utterly devastating,” said Reza Nassiri, director of the Institute of International Health and associate dean for global health at MSU. “We hope this donation coordinated through the dedication of GH2HG will help make a difference in the lives of those who desperately need it.”

Both organizations respond to international events such as natural disasters. With IIH’s ability to connect and leverage MSU’s medical and health resources and GH2HG’s work to obtain donations of unused medications and medical supplies from hospitals, clinics, and pharmaceutical companies, both share a goal to promote global health initiatives for developing communities across the world.