

1. The Trans-university Alliance of Institutes Networking for Global Health (TRAIN for GH): Framework and Development

The paper describes the framework and development of the Trans-University Alliance of Institutes Networking for Global Health (TrainGH) whose purpose is to address capacity building of global health professionals in low-resource areas around the world through a university-based global health network. The need for such an alliance was identified in 2007 by leaders in global health within the Global Health Education Consortium, the Fogarty International Center, Child Family Health International and the University of Virginia. The primary aims of TrainGH are: 1) Increase opportunities for global health professionals in low and middle income countries to collaborate in educational and research activities with colleagues in North American Universities; and 2) increase training quality and relevance of North American health professionals wishing to work in the developing world; and 3) through better identification and sharing of information about developing country needs, increase the effectiveness of global health research. **Breyette Lorntz, University of Virginia; CoAuthors: Breyette Lorntz, PhD; Anvar Velji, MD; Richard Guerrant, MD; Tom Hall, MD, DrPH; Richard Deckelbaum, MD*

2. Interviews with Global Health Leaders in the US and Canada on Capacity-building of Global Health Professionals in Low-Middle Income Countries March 2008

Interviewers:

- Breyette Lorntz: Assistant Professor of Medicine, University of Virginia
- Richard Guerrant: Director, Center for Global Health, University of Virginia
- Thomas Hall: Executive Director, GHEC; Lecturer, Department of Epidemiology & Biostatistics, UCSF
- Anvar Velji: Co-Founder Global Health Education Consortium, Clinical Professor University of California Davis

Methods: As a part of ongoing work related to the Trans-Institutional Alliance for Global Health Project, interviewees were selected by GHEC leadership based on their experience and/or relevance of their organization to global health education, especially as it relates to university partnership relationships. Interviews were carried out over a three-month period, mainly by phone but in some cases, by email.

Five open-ended questions were asked and detailed notes taken of the responses. Follow-up contacts were made as necessary to ensure the responses were accurately understood and recorded. For purposes of this symposium, the responses have been analyzed using 5 dominant themes. In the weeks following the symposium, a more complete analysis of the respondents, including individual suggestions for action, will follow.

Interviewees:

- Brownell Anderson - Senior Associate Vice President, Division of Medical Education, AAMC
- Samir Banoob – Recent past chair, International Health Section, APHA
- Andrea Baumann- Associate Director Center of International Health Vice President, McMaster Health Sciences International
- Timothy Brewer - Director Global Health Programs-McGill University.
- Tom Coates - Director, UCLA Program in Global Health, UCLA
- Haile Debas - Executive Director of Global Health Sciences and Chancellor and Dean Emeritus, UCSF
- Richard Dekelbaum - Professor of Nutrition; Director, Institute of Human Nutrition, Columbia, University
- Shafik Dharamsi - Associate Director Center for International Health, University of British Columbia
- Oiver Fein - Professor of Clinical Public Health, Cornell University
- Lori Hanson - Assistant Professor of Medicine University of Saskatchewan
- Cynthia Haq - Director of the Center for Global Health, University of Wisconsin
- King Holmes - Director, University of Washington Center for AIDS and STDs, University of Washington
- James Hughes – Sr. Advisor, Center for Global Safe Water and Sr. Advisor for ID, International Assoc. of National Public Health, Emory University
- Daniel Hunt - Vice President, Division of Medical Education, AAMC
- Pierce Gardner - Professor of Medicine, State Univ. of New York at Stony Brook and Consultant to the Fogarty International Center, NIH
- Richard Guerrant - Director, Center for Global Health, University of Virginia
- Pat Kelley - Director, Board on African Science Academy Development and Director, Board on Global Health, Institute of Medicine

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- Joseph Kolars - Consultant, Bill and Melinda Gates Foundation and Professor of Medicine, Mayo Clinic
- Gerald Keusch - Associate Provost for Global Health, Boston University
- Michael Merson - Director, Duke Global Health Institute, Duke University
- Neal Nathanson - Associate Dean, Global Health Programs, University of Pennsylvania
- Thomas Quinn - Director, Center for Global Health, Johns Hopkins University
- David Stern - Director, Michigan Global REACH and Director, Minority Health and Health Disparities International Research Training Program
- Peter Tugwell - Director, Centre for Global Health, Institute of Population Health, University of Ottawa
- Michael Wilkes - Professor of Medicine and Vice Dean for Education, UC Davis School of Medicine
- David Zakus - Director, Centre for International Health, University of Toronto

Rubric for Analysis | Interviews with Global Health Leaders

	Interview Question	Theme 1	Theme 2	Theme 3	Theme 4	Theme 5
1	What should be the top priorities for US/Canadian universities interested in helping overseas universities to build capacity? How can they be most helpful?	Training future global health leaders from N. America	Training future global health leaders from developing world	Providing supplementary funding to training programs overseas	Assuring that the priorities we work on are those of host institutions	Helping LDC partners develop research capabilities, both basic and practical, attuned to their own needs
2	Describe the major activities, if any, at your institution as they related to capacity building. What more would you like to do if you could?	Providing short-term onsite training and/or opportunities for short-term training in the US/Canada	Offering diverse GH training opportunities to our own students	Providing a portion of an overseas university's degree program through "sandwich" or related programs	Partnerships with universities abroad	Collaborative research with overseas institutions
3	What are the major impediments that limit your institution's effectiveness in its efforts at capacity building?	Funding	Protected faculty time	Institutional support and buy-in	Lack of clarity on global priorities	
4	Are there any collective actions by a network that could increase your program's effectiveness?	Information sharing	Lobbying congress and others for funding / priorities	Complement strengths between universities	Define field of global health	
5	Do you have any other comments or suggestions regarding how to improve institutional capacity in addition to those already mentioned?					

3. Academic Global Health Programs in the US and Canada March 2008

As a part of the Trans-Institutional Alliance for Global Health Project, the Global Health Education Consortium and the Center for Global Health of the University of Virginia carried out a web-based search in late 2007 and early 2008 for university/college – based global health programs in the US and Canada. The principle search engines used were Google and the WHO Collaborating Centres (CCs) Database. Principle search terms used were: "university", "college" "global health", "international health", "center", "centre", "institute", "department", and "program". The resulting list of 192 global health programs will be available on GHEC's new website: www.globalhealthedu.org in latter April.

Data Fields for Web-based Search of Global Health Programs in the US and Canada

- Institutional Name: / Name of GH Program:
- Program Contact Information:
- Website / Post Address
- Email Address / Phone # / Fax #
- Date accessed
- Director's Contact Information
- Name / Email Address / Phone #
- Program(s) Description:
- Mission Statement:
- School Where Based:
- Date Founded (year):
- Major Projects (yes/no): Research, Service, Education, "Diseases"
- Primary funding sources & amounts (if indicated) (private, government, other)
- Curriculum Sponsored (if yes, include schools and disciplines)
- Undergraduate / Graduate / Professional
- Is a degree program(s) offered? (If yes, type, level)
- Students Abroad (if yes, include regional locations):
Groups/Individually
- Capacity Building through International Partnerships
- International Partner(s) – (yes/no) if yes, where / institution
- Type of partner (University; School; other)
- Location(s)
- Reported areas of emphasis/collaboration

4. Abstracts

The Results of the University of Cincinnati, Multi-School Medical Student Survey

Author: Andrew Suchocki

Global health (GH) experience in medical education plays a vital role in the maturation of future physicians, as previous studies have demonstrated the benefits in cultural competency, disparity awareness, and career plans. Over the past ten years, interest and subsequent growth in GH experience and infrastructure have been significant in U.S. allopathic medical schools. However, limited evidence exists reflecting the barriers students face in accessing these opportunities, and such studies were hindered by small sample size and selection bias. In order to guide future GH efforts, an anonymous, online survey was created, containing questions about student demographics, curricular topic preferences, experiences abroad, domestic obstacles, institutional support, and career goals. Over fifteen allopathic medical schools participated, both private and public, and all regions of the country were represented. All students at the participating medical schools were invited to complete the survey, which yielded roughly 2000 responses. Clear national trends emerged in curriculum topic preference, future career plans, and barriers encountered. Results and potential policy applications will be discussed in the presentation.

A Survey of US Med Schools Participation in International Health Activities

Co-Authors: Breyette Lorntz, PhD and Suzy Sarfaty, MD

Using Survey Monkey, The Global Health Education Consortium, The Foundation for the Advancement of International Medical Education and Research and the Association of American Medical Colleges distributed a survey to all accredited MD granting US medical schools between 5/25/2005 and 11/16/2007. The survey included 20 questions about international opportunities available to faculty, residents, and students, the geographic locations to which faculty, residents and students travel and the geographic locations from which visiting faculty, residents and students come.

108 (86% of 126) US Medical Schools responded. Sabbaticals (51%) and research (54%) were the most common international opportunities available to faculty. Faculty were most frequently assigned to Central America/Caribbean (60%), followed by Sub-Saharan Africa (53%), South America (51%) and East Asia / Pacific (47%). Research (63%) and medical education (52%) opportunities were shown to be offered to faculty from abroad. Most visiting faculty come from East Asia/Pacific (61%) followed by South America (58%), and Western Europe (53%). Medical residents are most frequently placed in Central America / Caribbean (60%), Sub-Saharan Africa (50%) or South America (50%). 46% of US Medical Schools surveyed do not offer international medical residents any opportunities. International opportunities available to medical students include Clinical Electives (90%), followed by Pre-clinical "spring break" or summer opportunities (63%), and Clinical research opportunities (61%). 17% offered a global health track. 32% offered a pre-travel preparatory course. 36% offered a language / cultural immersion experience for medical students. 46% offered pre-clinical research for medical students. Only 6% of medical school surveyed reported no international opportunities for medical students. Medical students were most commonly placed in South America (76%), Sub-Saharan Africa (71%), East Asia / Pacific (63%) and Western Europe (52%). International medical students tend to come from Western Europe (74%) or East Asia / Pacific (53%). They are least likely to come from the Polar Regions (4%), Central Asia (16%), and North Africa / Middle East (26%)

International opportunities are frequently available to US medical faculty, residents and students. US medical faculty tend to use funding for international health to travel to Central America/Caribbean and Sub-Saharan Africa for work and research; this data seem to suggest that this funding is not in turn used to allow collaborating international faculty/residents/students to travel to the US for work/training. This data points to a need to reexamine the role of US medical institutions in capacity building of global health professionals in developing countries.

5. Capacity Building of Global Health Professionals in Developing Countries through University Partnerships:

A Bibliography for the Trans-Institutional Alliance for Global Health Project

The Global Health Education Consortium and the Center for Global Health of the University of Virginia carried out a bibliographic search in late 2007 and early 2008 for recent publications concerned with university-to-university partnerships directed at improving health across national borders. The principle search engines used were Google, Google Scholar, and PubMed. Principle search terms used were: "university", "global health", "partnerships" and "training". We hope that this short bibliography will be of help to those concerned with developing such relationships in the future.

The Association of International Health Advisors – AiHA is a professional peer organization run by its membership for its membership. Health advisors, health consultants and international health practitioners are engaged across the globe in assisting countries in times of political, social and economic hardship in restoring, maintaining, and advancing fundamental health services. AiHA provides the means for those individuals and organizations engaged in delivering health relief and health development to share information and assist each other in attainment of these international health practice competencies. www.members.health-advisors.org/

Beaglehole R. Global partnerships for health. *The European Journal of Public Health*. 2005 15(2):113-114; doi:10.1093/eurpub/cki133. <http://eurpub.oxfordjournals.org/cgi/content/extract/15/2/113>

Boufford, J. *Leadership Development for Global Health*. www.people2people.org/07/namibiapublichealth/BouffordJ-Leadership-Devel-for-Global-Health-2004.pdf

Buse K and Harmera, A. Seven habits of highly effective global public-private health partnerships: Practice and potential. *Social Science & Medicine*. Volume 64, Issue 2, January 2007, Pages 259-271. – Global public-private health partnerships (GHPs) have become an established mechanism of global health governance. Sufficient evaluations have now been conducted to justify an assessment of their strengths and weaknesses. This paper outlines seven contributions made by GHPs to tackling diseases of poverty. It then identifies seven habits many GHPs practice that result in sub-optimal performance and negative externalities. These are skewing national priorities by imposing external ones; depriving specific stakeholders a voice in decision-making; inadequate governance practices; misguided assumptions of the efficiency of the public and private sectors; insufficient resources to implement partnership activities and pay for alliance costs; wasting resources through inadequate use of recipient country systems and poor harmonisation; and inappropriate incentives for staff engaging in partnerships. The analysis highlights areas where reforms are desirable and concludes by presenting seven actions that would assist GHPs to adopt better habits which, it is hoped, would make them highly effective and bring about better health in the developing world.

Buse K. Global health partnerships: Increasing their impact through improved governance. *2004 DFID Study: Global Health Partnership: Assessing the Impact* www2.ohchr.org/english/issues/development/docs/WHO_5.pdf

Caines K. Global health partnerships and neglected diseases. *2004 DFID Study: Global Health Partnership: Assessing the Impact* www2.ohchr.org/english/issues/development/docs/WHO_4.pdf

Caines K. Key evidence from major studies of selected global health partnerships. www.hlfhealthmdgs.org/Documents/GHPBackgroundPaperFinal.pdf

The Capacity Project. – The Capacity Project works across sectors such as health, education, planning, public service commissions and local government entities in order to address the varied forces that affect the health workforce. The Project also works in multiple priority health areas, including family planning and reproductive health, maternal and child health, HIV/AIDS, tuberculosis, malaria and other infectious diseases. www.capacityproject.org/index.php?option=com_content&task=view&id=32&Itemid=66

Carlson C. Mapping global health partnerships: What they are. What they do and where they operate. *2004 DFID Study: Global Health Partnership: Assessing the Impact* www2.ohchr.org/english/issues/development/docs/WHO_1.pdf

Center for International Health – Over the past 20 years, we have engaged in health education and training services for thousands of physicians, nurses and other health professionals in more than 40 countries. We are established and organized as a consortium of public and private higher education and professional training institutions - including major universities, an academic health center composed of a medical school, teaching hospitals and community-based health and human service agencies. www.centerforinternationalhealth.org/

Chen L, Evans T, Anand, S, Boufford J, Brown H, Chowdhury M, Cueto M, Dare L, Dussault G, Elzinga G. Human resources for health: overcoming the crisis. *The Lancet*, Volume 364, Issue 9449, Pages 1984-1990. – In this analysis of the global workforce, the Joint Learning Initiative-a consortium of more than 100 health leaders-proposes that mobilisation and strengthening of human resources for health, neglected yet critical, is central to combating health crises in some of the world's poorest countries and for building sustainable health systems in all countries. Nearly all countries are challenged by worker shortage, skill mix imbalance, maldistribution, negative work environment, and weak knowledge base. Especially in the poorest countries, the workforce is under assault by HIV/AIDS, out-migration, and inadequate investment. Effective country strategies should be backed by international reinforcement. Ultimately, the crisis in human resources is a shared problem requiring shared responsibility for cooperative action. Alliances for action are recommended to strengthen the performance of all existing actors while expanding space and energy for fresh actors.

Chokshi D, Rajkumar R. Leveraging university research to advance global health. *JAMA*. 2007;298:1934-1936. – <http://jama.ama-assn.org/cgi/content/full/298/16/1934>

Cohen J. Global Health: Public-private partnerships proliferate. *Science*. 13 January 2006: Vol. 311. no. 5758, p. 167 DOI: 10.1126/science.311.5758.167 – The label "neglected diseases" packs a rhetorical wallop, as it conjures up needy causes that the world callously has ignored. But the phrase is losing some of its punch when it comes to malaria, tuberculosis, Chagas, dengue, visceral leishmaniasis, and African trypanosomiasis. Although profit-minded pharmaceutical companies have long shied away from research and development on drugs against maladies that mainly afflict the poor, 63 drug projects now under way are targeting these very diseases. As Mary Moran wrote in the September 2005 issue of *PLoS Medicine*, "The landscape of neglected-disease drug development has changed dramatically during the past five years."

Crisp N. Global Health Partnerships: The UK Contribution to Health in Developing Countries. www.dfid.gov.uk/pubs/files/ghp.pdf

Delisle H, Roberts J, Munro M, Jones L, Gyorkos T. The role of NGOs in global health research for development. *Health Research Policy and Systems*. 2005, 3:3doi:10.1186/1478-4505-3-3. – Global health research is essential for development. A major issue is the inequitable distribution of research efforts and funds directed towards populations suffering the world's greatest health problems. This imbalance is fostering major attempts at redirecting research to the health problems of low and middle income countries. Following the creation of the Coalition for Global Health Research - Canada (CGHRC) in 2001, the Canadian Society for International Health (CSIH) decided to review the role of non-governmental organizations (NGOs) in global health research. This paper highlights some of the prevalent thinking and is intended to encourage new thinking on how NGOs can further this role.

Erikson S. Envisioning global health affairs: Building capacity, providing leadership. *Paper presented at the annual meeting of the International Studies Association, Hilton Hawaiian Village, Honolulu, Hawaii, Mar 05, 2005*. – This paper argues for a reformulation of global health pedagogy in International Affairs, with an emphasis on moving from the current public health-centric configuration to a more comprehensive International Relations configuration. Health needs to become an everyday-and-not-just-crisis concern of International Affairs, taught as an indispensable aspect of domestic and international security, the global political economy, international development, and human rights. International Affairs professionals need to better understand the state and market forces that make ill or good health more or less likely in any given locale; they need to be intimately familiar with the larger political, economic, and social systems within which public health systems are situated and to the vagaries of which they are vulnerable; and they need to be able to read the gender, age, religious, and historical contingencies of policy and practice that affect health. Schools of International Affairs need to build Global Health Affairs capacity by working to endow their graduates with sophisticated and nuanced understandings of how IR policy, projects, and strategies may result in health gains (or declines). In so doing, they will cultivate a generation of International Affairs experts able to provide global health leadership as an everyday component of International Affairs practice.

Furin J, Farmer P, Wolf M, Levy B, Judd A, Paternek M, Hurtado R, Katz J. A novel training model to address health problems in poor and underserved populations. *Journal of Health Care for the Poor and Underserved*. 17.1 (2006) 17-24 – Health disparities are increasingly common and many U.S. practitioners have informal experience working in

resource-poor settings. There are, however, few graduate medical education programs that focus on health equity. A graduate medical education program in health equity was developed at Brigham and Women's Hospital based on a review of existing literature and on a survey of junior faculty who have had informal health disparities experience. The Howard Hiatt Residency in Global Health Equity and Internal Medicine was developed as a four-year program to provide intensive training in internal medicine and health disparities. Participating residents are matched with a mentor who has clinical and research experience in the field of global health. In addition to a series of didactic teaching sessions and longitudinal seminars that focus on issues of global health equity, residents take graduate level courses in epidemiology, health policy, ethics, and medical anthropology. Residents also carry out an independent research project in a geographic area that suffers from health disparities. Two residents are selected for training per year. Participating faculty are multidisciplinary and come from diverse Harvard-affiliated institutions. Graduate medical education in the United States with a focus on health equity is lacking. It is hoped that the novel training program in health equity for internal medical residents developed at Brigham and Women's Hospital can serve as a model for other teaching hospitals based in the United States.

http://muse.jhu.edu/journals/journal_of_health_care_for_the_poor_and_underserved/v017/17.1furin.html

The Georges Institute – The George Institute for International Health seeks to develop solutions to the growing problems of cardiovascular disease, injury, mental health and neurological diseases through high-quality research, evidence-based policy development and a range of capacity development programs. The Institute is formally associated with the University of Sydney through a memorandum of understanding that designates the Institute as a research department of the University, reporting directly to the Dean of the Faculty of Medicine. Many staff of the Institute have full or conjoint academic appointments at the University of Sydney, and work in close collaboration with colleagues in the School of Public Health and the Central Clinical School. The Institute is also formally associated with the Sydney Institutes of Health and Medical Research, which comprises those health and medical research institutes affiliated with both the University of Sydney and Sydney South West Area Health Service. The George Institute has over 180 staff working on projects in over 40 countries with the collaboration of more than 400 hospitals and universities worldwide. www.thegeorgeinstitute.org/

Good MJ. Local knowledge: research capacity building in international health. *Social Science and Medicine*, 1992 Dec;35(11):1359-67. – Processes of building research capacity in international health projects and their implications for anthropology are addressed using examples from the Applied Diarrheal Disease Research project funded by the USAID. 2 aspects of training are examined: the way interdisciplinary methods, both qualitative and quantitative, are presented to researchers, given the context of international health research culture; and how researchers' local knowledge and concerns in pursuing health research relevant to policy led them to become involved with anthropology. The consequences for the place and product of anthropology in future capacity building efforts in international health research are discussed. <http://www.popline.org/docs/077014>

Grace C. Global health partnership impact on commodity and pricing and security. *2004 DFID Study: Global Health Partnership: Assessing the Impact* www2.ohchr.org/english/issues/development/docs/WHO_3.pdf

Hailey J, James R. Trees Die from the Top: International Perspectives on NGO Leadership Development. *Voluntas*. 15 no. 4: 343--353. – Hailey, cofounder of INTRAC and professor at London City University's Cass Business School, and James, a principal capacity-building specialist at INTRAC, examine research on leadership development in NGO capacity building. They explore the attributes and characteristics of NGO leaders, study the contextual issues NGO leaders confront, and examine "the challenges of developing a new generation of NGO leaders." NGOs, they assert, face management challenges quite distinct from those of government or business, rooted in their social change mission; their role as bridges between donors, beneficiaries, and other constituencies; the limited resources to which they have access; and the often volatile circumstances under which they operate. Though leadership in both the for-profit sector and the public sector have been the subject of much study, leadership for NGOs has not been researched in great depth. The authors call for further research on the roles and responsibilities of NGO leaders as well as on the skills and competencies needed for leadership, and for active campaigns to develop leadership capacity in the NGO world. Averting that leadership in NGOs is typified by high staff turnover that frequently leads to "programmatic dysfunctionality and organizational collapse," they assert that systems must be put in place to keep organizations strong and enable them to sustainably address problems and challenges facing their marginalized constituencies.

Hancock, T. People, partnerships and human progress: building community capital. *Health Promotion International*. Vol. 16, No. 3, 275-280, September 2001 Health Initiative (2001) – Public-private partnerships involved in the distribution or coordination of donated, subsidized, or negotiated products: identification of challenges and issues of shared interests. Report of a meeting of managers of donation/distribution of partnerships organized by the Initiative on Public-Private Partnerships for Health

Hanlin R, Chataway J, Smith J. Global health public-private partnerships: IAVI, partnerships and capacity building. *Afr J Med Med Sci*. 2007;36 Suppl:69-75. – New developments in biotechnology and the need to overcome the lack of

incentive for investment in vaccines for diseases affecting Africa have led to the promotion of product development public-private partnerships (PPP). Our work at the ESRC INNOGEN Research Centre assesses the way in which these collaborative mechanisms approach their mission of getting science to work for the poor and what they contribute to broader development objectives, particularly in relation to capacity building. Case study research of the International AIDS Vaccine initiative (IAVI) and their work on the ground in Africa and India has highlighted two legal related issues. First, by working as a PPP the organisation has changed the 'ownership' of science, making the process more flexible and emphasizing a bottom-up dialogue process while advocating a private sector ethos. Second--whether intentionally or not--the partnership's emphasis on advocacy and communications has increased the importance of knowledge generation and management activities within the partnership and its availability to stakeholders. This paper attempts to ascertain the impact of these issues for the building of health research capacity.

Health System Action Network (HSAN). – HSAN's vision is to be a leading global network facilitating the development of equitable, accountable and sustainable health systems for improved health outcomes. HSAN is a global network of committed professionals for strengthening health systems through effective involvement of diverse stakeholders and better management of resources that is guided by evidence. www.hsnet.org/vision.html

Heller R, Chongsuvivatwong V, Hailegeorgios S, Dada J, Torun P, Madhok R, Sandars J on behalf of the People's Open Access Education Initiative. Capacity-building for public health: <http://peoples-uni.org>. *Bulletin of the World Health Organization*. Volume 85, Number 12, December 2007, 901-980 – Help to build Public Health capacity in low-to middle-income countries, using open education resources freely available on the Internet This education will involve partnerships and collaboration across the global and digital divides, and will be both credible and affordable.

Hotez P. Should we establish a North American School of Global Health Sciences? *American Journal of the Medical Sciences*. 328(2):71-77, August 2004. – Since 1997, an unprecedented amount of American philanthropy from both private and federal sources has been directed toward research and control programs for the major tropical infectious diseases of developing countries. The US and Canadian capacity to respond to these new initiatives might prove inadequate, however, as tropical disease research and training infrastructures have deteriorated at most North American academic health centers over the last three decades. Training opportunities in clinical tropical medicine, parasitology laboratory diagnostics, vector control, and public health practice are especially depleted and portend a lost generation of experts in these areas. In addition, unlike some of the European schools of tropical medicine, no North American medical or public health school currently boasts a comprehensive faculty in the global health sciences, with expertise that spans laboratory investigation, clinical and translational research, health policy, and international development. To meet the challenge presented by the new philanthropy targeting the global diseases of poverty, a North American school of global health sciences should be established. The North American school, possibly in association with one of the existing schools of medicine or public health, would provide interdisciplinary training to produce a new generation of global health scientists.

International Health Organization. – A non-government, non-profit, tax exempt, organization for the health and development of the Indian subcontinent (India, Nepal, and Bangladesh). www.ihousa.org/Index.htm.

The International Health Volunteers. – The International Health Volunteers (IHVO) is an independent, not for profit humanitarian medical service organization whose primary goal is to encourage, engage, and assist medical personnel who wish to volunteer their skills with international health care projects. IHVO is a developmental outreach program of the Academy of Medicine which was created by the Duval County Medical Society as a not for profit 501-c-3 corporation in 1959. The Academy has operated since its conception exclusively for charitable, scientific, and educational purposes. www.internationalhealthvolunteers.org/

Keegan R. *Partnerships in global health* (sound recording) <http://cdc.confex.com/cdc/nic2007/techprogram/P13008.HTM>

Kickbusch I, Quick J (1998) Partnerships for health in the 21st century. *World Health Stat Q*. 1998;51(1):68-74. [javascript:PopUpMenu2_Set\(Menu9675811\);](http://www.who.int/bulletin/volumes/51/1/980101.html) – This paper presents the results of a working group on partnerships in preparation for the WHO Health for All Policy for the 21st Century. The working group aimed to clarify the nature of partnerships for health, proposed six categories of partnerships and outlined principles and criteria for partnerships. It concluded that partnership building was a key strategic component of health development and underlined that WHO must increasingly see its role as one of mustering support for health from many players. In order to do so, WHO must change its organizational culture and mode of operation.

Lorenz N. Effectiveness of global health partnerships: will the past repeat itself? *Bulletin of the World Health Organization*. Volume 85, Number 7, July 2007, 501-568 <https://www.who.int/bulletin/volumes/85/7/06-033597/en/>

Maurer L, Kelly M. Lessons learned and global partnerships Stories of sexual and reproductive health from Namibia. *American Journal of Sexuality Education*. Volume: 1 Issue: 1 ISSN: 1554-6128 Pub Date: 12/15/2005 – Through a Global Partnership Project, Planned Parenthood of the Southern Finger Lakes in Ithaca New York and the Namibian Planned Parenthood Association (NAPPA) in Windhoek, Namibia have joined together to share best practices, technical assistance, support and resources. The Global Partners share the common goal of increasing awareness, services and resources to positively impact global sexual and reproductive health. This article details the global partnership, a state-of-the-state report on sexual and reproductive health issues in Namibia, the impact of US policies on Namibia and lessons learned about effective sexual health programming during the authors' exchange visit to Namibia.

National Advisory Committee on SARS and Public Health. October 2003. Building Capacity and Coordination: National Infectious Disease Surveillance, Outbreak Management, and Emergency Response. *Learning from SARS - Renewal of Public Health* in Canada Chapter 5

Nishtar S. Public – private 'partnerships' in health – a global call to action. *Health Research Policy and Systems*. 2004. 2:5doi:10.1186/1478-4505-2-5

Ogilvie L, Allen M, Layrea J, Opare, M. Building capacity through a collaborative international nursing project. *Journal of Nursing Scholarship*. 2003; 35:2113-118
www.blackwell-synergy.com/doi/pdf/10.1111/j.1547-5069.2003.00113.x?cookieSet=1

Pearson, M. Economic and financial aspects of global health partnerships. *2004 DFID Study: Global Health Partnership: Assessing the Impact*. www2.ohchr.org/english/issues/development/docs/WHO_2.pdf

Planet Care/Global Health Access Program – Non-profit organization working to improve the well-being of communities in crisis, both locally and internationally, through the provision of health and public health services, capacity building, and resource enhancement. www.ghap.org/

Ritchie J, Nathan S, Mehaffey A. *Capacity building for international health gains*.
www.health.nsw.gov.au/public-health/phb/phbmar00.pdf

Ross J, McCallo B. *Building successful alliances for global health* – Have you ever needed to quickly mobilize in-country networks for program scale-up? Have you ever wished for a reliable way to disseminate tools and strategies to community stakeholders? Have you ever looked for ways to strengthen nongovernmental organization (NGO) country collaboration for greater impact? Alliances such as the CORE Group and the White Ribbon Alliance for Safe Motherhood (WRA) help donors and partners meet these challenges and reach more women and children in need. They do this by offering one-stop access to established networks whose Website describes lessons learned from building these alliances. www.magweb.org/techbriefs/tb24alliance.shtml

Santa Ana J (ed). *Sustainability and Globalization* – Poses questions about globalization, offering perspectives from business leaders, economists, scientists, theologians, and ethicists. ISBN: 2-8254-1265-1

Schaferhoff M, Ulbert, C. *The Effectiveness of Knowledge Transfer and Capacity Building through Global Health Partnerships Paper presented at the annual meeting of the ISA's 49th Annual Convention, Bridging Multiple Divides*. – Over the course of the last decade, the number of transnational public-private partnerships has risen significantly. Their emergence is an expression of the contemporary reconfiguration of authority in world politics, which entails questions about the effectiveness as well as the legitimacy of governance beyond the nation-state. This trend is most visible in international health politics, where the rise of global health partnerships led to a much more fragmented global health sector, and where authority is exerted by a multitude of state and non-state actors today. In this paper, we will cast light on the conditions under which global health partnerships are effective governance tools. In particular, we will point to the importance of knowledge transfers and capacity building measures as crucial determinants for sustainable development. We argue that the challenge for global health partnerships is to build up the capacity of health systems in developing countries in a way that they can sustain the actual achievements of single health initiatives. Investments in health systems and on-going knowledge transfers are therefore critical prerequisites for an effective long-term provision of public health goods in developing countries. At the same time, there are severe structural implications of the recent proliferation of global health partnerships: The ever more fragmented global health system contributes to insufficient coordination and duplication among health initiatives. There is the risk that the sheer number of programs overwhelms the scarce capacity of low-income countries, as global health partnerships often require setting up new national institutions and procedures.
www.allacademic.com/meta/p251705_index.html

Schulz-Baldes A, Vayena E, Biller-Andorno, N. Sharing benefits in international health research. Research-capacity building as an example of an indirect collective benefit. *EMBO reports* 8, 1, 8–13 (2007)doi:10.1038/sj.embor.7400886. www.nature.com/embor/journal/v8/n1/full/7400886.html

Silverman H. Enhancing research ethics capacity: Implications for protection of research subjects, avoiding exploitation and achieving global health. *Middle East Fertility Society Journal*. Vol. 10, No. 2, 2005, pp. 105-109 – Research sponsored by developed countries is increasingly being conducted in developing countries. While many celebrate the enhanced funding of foreign sponsors, others are concerned with the ethics of such research. Ethical issues usually center on the protection of the rights and welfare of human subjects involved in research. Another important issue involves avoiding exploitation by ensuring that developing countries receive a fair share of the benefits of foreign-sponsored research. A fair exchange of benefits between resource-rich and resource-scarce countries can help achieve global health. To ensure that research conducted in developing countries undergo proper ethical oversight and is responsive to the local context, measures to enhance research ethics capacity needs to be instituted in the developing world.

Tomita, M. Building capacity of the public health education workforce through partnerships: The Global Health Disparities CD-ROM Project. *Californian Journal of Health Promotion*. 2003, Volume 1, Issue 1 49-59
www.csuchico.edu/cjhp/1/1/49-59-tomita.pdf

Tugwell P, Fletcher R, Fletcher S, Goldsmith C, Rahbar M, Robinson V, Runyan D, Sadowski L. International Clinical Epidemiology Network: An opportunity for SGIM international cooperation. *Journal of General Internal Medicine*. Volume 21, Number 7, July 2006, pp. 792-795(4) – The Canadian/American regional group of the International Clinical Epidemiology Network (INCLIN) invites SGIM members to join in an international network dedicated to improving health in low and middle-income countries and reducing health disparities in North America—not only because many goals and activities of the 2 organizations are compatible such as evidence-based medicine, mentoring, and training; but because collaboration between SGIM and INCLIN could strengthen both groups. With increasing brain drain from the developing world to the North, there is an ever-increasing need for academic contributions from the North to swing the balance toward brain gain for the South. SGIM members have the academic expertise to make an important contribution to global health. Participation and contribution from SGIM members is welcomed at the individual or organizational level. We invite you to explore possible partnership and collaboration.
www.ingentaconnect.com/content/bsc/jqi/2006/00000021/00000007/art00030

Vian T, Richards S, McCoy K, Connelly P, Feeley F. Public-private partnerships to build human capacity in low income countries: findings from the Pfizer program. *Human Resources for Health*. 2007, 5:8doi:10.1186/1478-4491-5-8. – The ability of health organizations in developing countries to expand access to quality services depends in large part on organizational and human capacity. Capacity building includes professional development of staff, as well as efforts to create working environments conducive to high levels of performance. The current study evaluated an approach to public-private partnership where corporate volunteers give technical assistance to improve organizational and staff performance. From 2003 to 2005, the Pfizer Global Health Fellows program sent 72 employees to work with organizations in 19 countries. This evaluation was designed to assess program impact.

Whitty C, Doull L, Nadjm B. Global health partnerships. *BMJ*. 2007;334:595-596 (24 March), doi:10.1136/bmj.39147.396285.BE – The Global Health Partnerships report by Lord Crisp,¹ commissioned by the prime minister, aims to find ways to strengthen the United Kingdom's contribution to health care in developing countries. The report acknowledges the UK's "remarkable intellectual and practical leadership in international development" and recommends that the UK facilitate and support the "very valuable work already being done by so many UK organisations and individuals." The report goes on to describe the potential benefits of such activities both to developing countries and to the individuals involved. All people who have experience of the research, teaching, emergency support, and many other activities that UK health workers undertake in support of developing countries would concur.

Wright S, Cloonan P, Leonhardy K, Wright G. An international programme in nursing and midwifery: building capacity for the new millennium. *Int Nurs Rev*. 2005 Mar;52(1):18-23. – The global economy is changing rapidly and frequently affects the ability of the health sector to respond to a variety of needs. Nurses and midwives are reaching across national boundaries to strengthen their ability to improve the health of populations. This article describes an innovative programme of collaboration among different nations to strengthen the capacity of nurses and midwives. Over the course of 4 years, nurses and midwives from several countries in East Central Europe, Central America, and the Caribbean came together in the United States and in Europe to learn about opportunities for growth and collaboration to improve professional development, leadership capacity, educational and curricular development, and knowledge about international health. Programme participants reported increased capacity to perform their professional roles as a result of their having participated in this programme. More capacity building activities are needed to further enable nursing professionals to meet the demands for health care around the world.

GHEC TRAIN PROJECT
Data Fields for Web-based Search of Global Health Programs
March 2008

	Institution	Name of Global Health Program	Website for Global Health Program
1.	American University	International Development Program at the School of International Service	http://www.american.edu/sis/academics/fieldofstudy/id.htm
2.	Arizona State University	Graduate Certificate - International Health for Health Professionals	http://nursing.asu.edu/programs/graduate/certificate/international/index.htm
3.	Baylor University	International Health Track	http://www.bcm.edu/medschool/tracks/international/index.htm
4.	BC Children's Hospital	Centre for International Child Health	http://www.bcchildrens.ca/Professionals/CtrInternationalChildHealth/default.htm
5.	Boston College	Center for Human Rights and International Justice	http://www.bc.edu/centers/humanrights/
6.	Boston College	School of Nursing Global Health Initiative	http://www.bc.edu/schools/son/programs/undergrad/onlineresources/nicaragua.html
7.	Boston University	Naimey International Development Program	http://www.bu.edu/abroad/programs/niger/niamey/niamey_lla/
8.	Boston University	Global Health Initiative at Boston University	https://www.bu.edu/ghi/
9.	Brandeis University	Programs in Sustainable International Development	http://heller.brandeis.edu/sid/
10.	Brigham and Women's Hospital	Division of International Health and Humanitarian Programs	http://www.brighamandwomens.org/DIHHP/
11.	Brown University	International Health Institute	http://bms.brown.edu/ih/
12.	Brown University	Concentration in Global Health	http://bms.brown.edu/students/curriculum/concentrations/global_health
13.	Canadian College of Naturopathic Medicine	The Centre for International Health & Human Rights Studies	http://www.ccnm.edu/?q=centre_international_health_human_rights_studies
14.	Case Western Reserve University	The Center for Global Health and Diseases	http://www.case.edu/orgs/cghd/Home.htm
15.	Case Western Reserve University	WHO Collaborating Center in Home Care Nursing	http://fpb.case.edu/WHOCC/
16.	Cedars-Sinai Medical Center	Center for International Health and Telemedicine	http://www.csmc.edu/970.html
17.	Charles R. Drew University of Medicine and Science	International Health Institute	http://www.cdrewu.edu/ih/
18.	Clarke University	International Development, Community and Development	http://www.clarku.edu/departments/idce/
19.	College of Saint Catherine	Center for Women and Health	http://minerva.stkate.edu/womenhealth.nsf/pages/international/
20.	Columbia University	Center for Global Health and Economic Development	http://www.cghed.columbia.edu/
21.	Cornell University	Global Health Program	http://www.human.cornell.edu/che/DNS/globalhealth/
22.	Cornell University	Polson Institute for Global Development	http://polson.cals.cornell.edu/
23.	Creighton University	Institute for Latin American Concern	http://www2.creighton.edu/ministry/ilac/index.php
24.	Daemen College	Interdisciplinary Consortium for Global Health	http://blogger.daemen.edu/globalhealth/
25.	Dalhousie University	WHO Collaborating Centre for Mental Health Training and Policy	WHO Collaborating Centre for Mental Health Training and Policy
26.	Dalhousie University	International Health Office	http://iho.medicine.dal.ca/
27.	Dartmouth College	Dartmouth Global Health Initiative	http://dickey.dartmouth.edu/content/view/3/35/
28.	Dartmouth College	International Health Group	http://dms.dartmouth.edu/dihg/resources/
29.	Des Moines University	Global Health Program	http://www.dmu.edu/com/globalhealth/
30.	Duke University	Global Health Institute	http://globalhealth.duke.edu/
31.	Duke University	DUSON's Office of Global & Community Health Initiatives (OGACHI)	http://www.nursing.duke.edu/modules/son_global/index.php?id=12
32.	Duquesne University	Center for International Nursing Scholarship and Education,	http://www.nursing.duq.edu/ctrCIN.html

33.	Emory University	The Lilian Carter Center for International Nursing	http://www.nursing.emory.edu/lccin/gcno-net/events_2004_GNP.shtml
34.	Emory University	Hubert Department of Global Health	http://www.sph.emory.edu/gh/index.php
35.	Emory University	Emory Global Health Institute	http://www.globalhealth.emory.edu/
36.	Emory University	Center for Health, Culture and Society	http://www.emory.edu/CHCS/index.html
37.	Farleigh Dickenson University	Office of Global Learning	http://view.fdu.edu/default.aspx?id=255
38.	George Mason University	Center for Global Education	http://gloaled.gmu.edu/index.html
39.	George Washington University	Department of Global Health	http://www.gwumc.edu/sphhs/departments/global/
40.	Georgetown University	The Linda and Timothy O'Neill Institute for National and Global Health Law	http://www.law.georgetown.edu/oneillinstitute/
41.	Georgetown University	Bachelor of Science in International Health	http://nhs.georgetown.edu/academics/BSIH.html
42.	Graceland University	The International Health Center	http://www.graceland.edu/ihc/index.html
43.	Harvard University	Harvard Initiative for Global Health	http://www.globalhealth.harvard.edu/
44.	Harvard University	Harvard Humanitarian Initiative	http://hhi.harvard.edu/
45.	Harvard University	Center for Health and the Global Environment	http://chge.med.harvard.edu/
46.	Harvard University	The François-Xavier Bagnoud Center for Health and Human Rights	http://www.hsph.harvard.edu/xfbcenter/
47.	Harvard University	Center for International Development	http://www.cid.harvard.edu/sustsci/overview.html
48.	Indiana University	The Center for Community and International Affairs	http://nursing.iupui.edu/international/
49.	Indiana University	WHO Collaborating Centre for Continuing Health Professional Education in Diabetes	http://cme.medicine.iu.edu/2/Scripts/default.asp
50.	Johns Hopkins University	The Center for Refugee and Disaster Response	http://www.jhsph.edu/Refugee/
51.	Johns Hopkins University	Department of International Health	http://www.jhsph.edu/dept/IH/History/index.html
52.	Johns Hopkins University	Global Health Promotion Research Program	http://www.son.jhmi.edu/research/global/ghpr_areas.htm
53.	Johns Hopkins University	Johns Hopkins Center for Clinical Global Health Education	http://www.ccghe.jhmi.edu/ccg/index.asp
54.	Johns Hopkins University	Center for Global Health	http://www.hopkinglobalhealth.org/
55.	Le Moyne College	Consortium for Culture and Medicine	http://www.upstate.edu/ccm/about.php
56.	Loma Linda University	Department of Global Health	http://www.llu.edu/llu/sph/glbh/index.html
57.	Massachusetts Institute of Technology	Massachusetts International Development Institute	http://web.mit.edu/idi/
58.	McGill University	Global Health Programs	http://www.mcgill.ca/globalhealth/
59.	McGill University	Trauma and Global Health Program	http://www.mcgill.ca/trauma-globalhealth/
60.	McMaster University	Faculty of Health Sciences International Health	http://fhs.mcmaster.ca/mhsi/
61.	Michigan State University	Center for Advanced Study of International Development	http://www.casid.msu.edu/
62.	Michigan State University	Office of International Development	http://www.oid.msu.edu/PublicHealth.htm
63.	Mount Sinai Hospital	Peter A. Silverman Centre for International Health	http://www.mtsinai.on.ca/PASCIH/default.htm
64.	Mount Sinai Medical Center	Mount Sinai / Queens College International Training Program in Environmental and Occupational	http://www.mssm.edu/cpm/education/eoh/
65.	Mount Sinai Medical Center	International Center for Mental Health	http://www.mssm.edu/psychiatry/icmh/
66.	National Opinion Research Center	TASCthree Global Health	http://www.norc.uchicago.edu/projects/ByDivision/International/TASCthree+Global+Health+Initiative.htm
67.	New Jersey Medical College	New Jersey Medical School Global Tuberculosis Institute	http://www.umdnj.edu/globaltb/aboutus.htm
68.	New York Medical College	Center for Disaster Medicine	http://www.nymc.edu/CDM/index.htm
69.	New York State Office of Mental Health	WHO Collaborating Centre for Training & Research in Mental Health and the Prevention of Substance Abuse	http://www.rfmh.org/nki/programs/who.cfm
70.	New York University	Institute for Urban and Global Health	http://www.med.nyu.edu/iugh/
71.	New York University	Center for Global Health	http://globalhealth.med.nyu.edu/

72.	New York University	WHO Collaborating Centre in Gerontological Nursing Education	http://www.nyu.edu/nursing/centers/international.html
73.	Northwestern University	Global Health Programs	http://www.feinberg.northwestern.edu/education/global-health/
74.	Northwestern University	Global Health Minor	http://www.wcas.northwestern.edu/globalhealth/index.html
75.	Oregon Health and Science University	Global Health Alliance	http://www.ohsu.edu/gha/
76.	Pennsylvania State University	Center for Global Health	http://www.aeseda.psu.edu/centers/
77.	Philadelphia University	Disaster Medicine and Management	http://www.philau.edu/disastermed/
78.	Princeton University	Center for Health and Wellbeing	http://weblamp.princeton.edu/chw/
79.	Queens University	Global Health Elective Award	http://meds.queensu.ca/undergrad/electives/international_activity/global_health_elective_award
80.	Research America	Paul G. Rogers Society for Global Health Research	http://www.researchamerica.org/pgr_society
81.	Seneca College of Applied Arts & Technology	International Health Service D218	http://www.senecac.on.ca/fulltime/IHP.html
82.	Simon Fraser University	Global Health Program	http://www.fhs.sfu.ca/graduate-programs/test/global-health-program
83.	Stanford University	Stanford University International Health Homepage.	http://ihealth.stanford.edu/
84.	SUNY Upstate Medical University	Consortium for Culture and Medicine	http://www.upstate.edu/ccm/about.php
85.	Syracuse University	Moynihan Institute of Global Affairs	http://www.maxwell.syr.edu/moynihan/
86.	Syracuse University	Consortium for Culture and Medicine	http://www.upstate.edu/ccm/about.php
87.	The College on Problems of Drug Dependence	WHO Collaborating Centre for Research and Training in Drug Dependence	http://www.cpdd.vcu.edu/
88.	The University of Texas Medical Branch	WHO Collaborating Centre for Training in International Health	http://ctih.utmb.edu/about/about_the_center.aspx
89.	Thomas Jefferson University	WHO Collaborating Center: Jefferson Ultrasound Research and Education Institute	http://www.jefferson.edu/jurei/
90.	Tufts University	Global Health and the Environment	http://global.tufts.edu/1187273218670/IER-Page-IER_Highlight_1190121767971.html
91.	Tulane University	Center for Evidenced-Based Global Health	http://www.sph.tulane.edu/CEBGH/
92.	Tulane University	International Health and Development	http://www.sph.tulane.edu/IHD
93.	Tulane University	Payson Center for International Development and Technology Transfer	http://payson.tulane.edu/index.htm
94.	University of Alabama at Birmingham	Sparkman Center for Global Health	http://www.soph.uab.edu/sparkman/
95.	University of Alabama at Birmingham	The Gorgas Courses in Clinical Tropical Medicine	http://gorgas.dom.uab.edu/
96.	University of Alberta	University of Alberta Global Health Initiative	http://www.ih.ualberta.ca/
97.	University of Alberta	International Nursing Office	http://www.uofaweb.ualberta.ca/nursing/international.cfm
98.	University of Arizona	Global Health - University of Arizona	http://www.globalhealth.arizona.edu/Default.htm
99.	University of British Columbia	Global Health at the Liu Institute for Global Issues	http://www.cgh.ligi.ubc.ca/#gh
100.	University of British Columbia	UBC Centre for International Health	http://www.cih.ubc.ca/
101.	University of British Columbia	Division of International Health	http://www.familymed.ubc.ca/intl/
102.	University of Calgary	International Health Program	http://ihp.myweb.med.ucalgary.ca/
103.	University of California at Berkley	Center for Entrepreneurship in International Health and Development (CEIHD)	http://ceihd.berkeley.edu/
104.	University of California at Davis	Center for International Health	http://phs.ucdavis.edu/Intl/International.php
105.	University of California at Los Angeles	Art Global Health Center	http://artglobalhealth.arts.ucla.edu/
106.	University of California at Los Angeles	International Institute	http://www.international.ucla.edu/
107.	University of California at Los Angeles	UCLA Global Health Training Program	http://www.ph.ucla.edu/chs/globalhealth/guide_to_courses.php
108.	University of California at Los Angeles	UCLA Global Center For Children and Families	http://www.gccf.ucla.edu/index.html
109.	University of California at San Diego	International Health and Cross Cultural Medicine	http://ihccm.ucsd.edu/

110.	University of California at San Francisco	Institute for Global Health	http://globalhealthsciences.ucsf.edu/igh/
111.	University of California at San Francisco	Center on Social Disparities in Health	http://www.ucsf.edu/csdlh/
112.	University of California at San Francisco	Global Health Sciences	http://globalhealthsciences.ucsf.edu/
113.	University of California at San Francisco	Women's Global Health Imperative	http://www.wghi.org/
114.	University of California at San Francisco	Office of International Programs	http://medschool.ucsf.edu/intlprograms/
115.	University of California at San Francisco	Center for Health and Community	http://chc.medschool.ucsf.edu/index.htm
116.	University of California at San Francisco	WHO Collaborating Centre for Research & Clinical Training in Nursing	http://nurseweb.ucsf.edu/index.shtml
117.	University of Colorado	Center for Global Health	http://thunder1.cudenver.edu/ctrglobalhealth/index.htm
118.	University of Connecticut	Center for International Community Health Studies	http://www.commed.uchc.edu/cichs/default.htm
119.	University of Denver	Global Health Affairs Program	http://www.du.edu/gsis/health/overview/welcome.html
120.	University of Florida	International Health Care Curriculum	http://medinfo.ufl.edu/other/international/
121.	University of Florida	International Global Health	http://families.health.ufl.edu/IGH%20front%20page.htm
122.	University of Georgia	Center for Tropical and Emerging Global Diseases	http://www.ctegd.uga.edu/
123.	University of Illinois at Chicago	Global Health Leadership Initiatives	http://www.uic.edu/nursing/ghlo/who/index.shtml
124.	University of Illinois at Chicago	WHO Collaborating Centre for Medical Education Development	http://cores33webs.mede.uic.edu/dme/warp/#
125.	University of Illinois at Chicago	Global Health Initiatives	http://www.uic.edu/sph/global/events.shtml
126.	University of Illinois at Chicago	International Center for Health Leadership Development	http://www.uic.edu/sph/healthleaders/mainleadership_2000.htm
127.	University of Iowa	Center for International Rural and Environmental Health	http://www.public-health.uiowa.edu/Cireh/
128.	University of Iowa	Global Health Studies Program	http://international.uiowa.edu/centers/global-health/default.asp
129.	University of Iowa	Global Health Home	http://www.pharmacy.uiowa.edu/globalhealth/index.htm
130.	University of Kansas	International Programs	http://www.kumc.edu/international/
131.	University of Louisville	International Service Learning	http://louisville.edu/student/islp/programhistory.htm
132.	University of Manitoba	International Dentist Degree Program	http://umanitoba.ca/faculties/dentistry/iddp/
133.	University of Maryland	Division of International Health	http://medschool.umaryland.edu/epidemiology/div_international.asp
134.	University of Maryland	Office of International Activities	http://nursing.umaryland.edu/offices/intl.htm
135.	University of Maryland	Global Health Resource Center	http://medschool.umaryland.edu/ghrc/dental.asp
136.	University of Medicine and Dentistry of New Jersey	Global Health	http://rwjms.umdnj.edu/student_affairs/international/
137.	University of Miami	International Health Center	http://ihc.med.miami.edu/
138.	University of Miami	International Health Center	http://www.med.miami.edu/imi/x8.xml
139.	University of Michigan	Certificate in Global Health	http://www.sph.umich.edu/global/certificate.html
140.	University of Michigan	Global Health Research and Training	http://ghrt.psc.isr.umich.edu/news/
141.	University of Michigan	WHO Collaborating Centre for Research and Clinical Training in Health Promotion Nursing	http://www.nursing.umich.edu/oia/
142.	University of Minnesota	Tropical & Travel Medicine Seminar Series	http://www.tropical.umn.edu/
143.	University of Minnesota	Global Health Interdisciplinary Concentration	http://www.sph.umn.edu/education/inter/gh.html
144.	University of Minnesota	International Health Education Alliance	http://www.womenshealth.umn.edu/print/wmhlth/intern/community/current/ihea.html
145.	University of Minnesota	Global Health Pathway and Global Health Course	http://www.globalhealth.umn.edu/globalhlth/home.html
146.	University of Minnesota	Global Health Institute	http://www.nursing.umn.edu/GlobalHealthInstitute/home.html
147.	University of Minnesota	WHO Collaborating Centre for Research & Training in Cardiovascular Diseases	http://www.epi.umn.edu/
148.	University of Montreal	International Health Unit	http://www.usi.umontreal.ca/usi_en/
149.	University of New Mexico	Global Health Programs	http://hsc.unm.edu/som/programs/globalhealth/index.shtml

150.	University of New Mexico	Center for Telehealth and Cybermedicine Research: International Projects	http://hsc.unm.edu/som/telehealth/projects_international.shtml
151.	University of North Carolina at Chapel Hill	Office of Global Health	http://www.sph.unc.edu/ogh/
152.	University of North Carolina at Chapel Hill	Center for Global Health Initiatives	http://gi.unc.edu/index.html
153.	University of Northern Iowa	Global Health Corps	http://www.globalhealthcorps.org/home.asp
154.	University of Ottawa	Centre for Global Health	http://www.intermed.med.uottawa.ca/research/globalhealth/index.html
155.	University of Ottawa	The Globalization and Health Equity Research Unit	http://www.globalhealthequity.ca/welcome/index.shtml
156.	University of Pennsylvania	Global Health Programs	http://www.med.upenn.edu/globalhealth/
157.	University of Pennsylvania	Global Health Initiatives	http://www.nursing.upenn.edu/global_initiatives/
158.	University of Pennsylvania	Global Nursing and Health Care Minor	http://www.nursing.upenn.edu/academic_programs/grad/masters/program_detail.asp?prid=41
159.	University of Pennsylvania	WHO Collaborating Centre for Oral Infectious Diseases: Education, Research and Access to Care	http://www.dental.upenn.edu/international/index.html
160.	University of Pittsburg	Global Health Certificate Program	http://www.publichealth.pitt.edu/interior.php?pageID=239
161.	University of Pittsburg	Certificate in Global Health	http://www.publichealth.pitt.edu/interior.php?pageID=82#4
162.	University of San Diego	Office for International Nursing Programs	http://www.sandiego.edu/academics/nursing/ip.php
163.	University of Sherbrooke	WHO Collaborating Centre on Health Science Education and Practice	http://www.Usherbrooke.ca
164.	University of South Carolina	International Programs	http://www.cosw.sc.edu/intl/intresearch/choi.html
165.	University of South Dakota	Disaster Mental Health Institute	http://www.usd.edu/dmhi/
166.	University of South Florida	Program in Global Health	http://health.usf.edu/publichealth/globalhealth.html
167.	University of South Florida	Department of Global Health	http://health.usf.edu/publichealth/gh/index.htm
168.	University of Southern California	Office for Global Health	http://www.usc.edu/schools/medicine/school/offices/educational_affairs/global_health/news.html
169.	University of Texas	H.I.G.H.E.R	http://www.sph.uth.tmc.edu/higher/
170.	University of Texas Health Science Center at San Antonio	South Texas Environmental Education and Research	http://steer.uthscsa.edu/
171.	University of Toronto	Center for International Health	http://intlhealth.med.utoronto.ca/
172.	University of Toronto	Centre for International Health	http://intlhealth.med.utoronto.ca/
173.	University of Toronto	McLaughlin-Rotman Centre for Global Health	http://www.infectiousdiseases.utoronto.ca/faculty/McLaughlin-Rotman_Centre_for_Global_Health.htm
174.	University of Toronto	International Office	http://www.nursing.utoronto.ca/international.htm
175.	University of Toronto	WHO Collaborating Centre in Health Promotion	http://www.utoronto.ca/chp/IHPU.htm
176.	University of Virginia	Center for Global Health	http://www.healthsystem.virginia.edu/internet/cgh/
177.	University of Washington	International Health Group	http://depts.washington.edu/ihg/funding.htm
178.	University of Washington	Department of Global Health	http://sphcm.washington.edu/globalhealth/
179.	University of Washington	International Programs	http://www.son.washington.edu/international/
180.	University of Western Ontario	The Global Health Task Force	http://www.fmd.uwo.ca/GLOBALHEALTH/
181.	University of Wisconsin at Madison	Center for Global Health	http://www.pophealth.wisc.edu/gh/
182.	University of Wisconsin at Milwaukee	Center for Cultural Diversity and Global Health	http://www4.uwm.edu/nursing/students/cultural_diversity.cfm
183.	Vanderbilt University	Institute for Global Health	http://www.mc.vanderbilt.edu/medschool/globalhealth/
184.	Washington State University	International Programs	http://nursing.wsu.edu/academics/international/links.html
185.	West Virginia University	International Health Program	http://www.hsc.wvu.edu/som/tropmed/tmcAboutTheProgram.asp
186.	Women's College Hospital	Globalization, Gender and Health project	http://www.womensresearch.ca/programs/globalization.php
187.	Wright State University	Center for Global Health Systems, Management, and Policy	http://www.med.wright.edu/hsm/aboutus.html
188.	Yale University	Global Health Division	http://www.med.yale.edu/eph/ghd/index.html
189.	Yale University	Center for International Nursing Scholarship and Education,	http://nursing.yale.edu/Centers/International/about.html
190.	Yale University	Program on International Child & Adolescent Mental Health	http://www.med.yale.edu/childstdy/icmh/
191.	Yeshiva University	Global Health at AECOM	http://www.aecom.yu.edu/global/page.aspx

