

REPORT

February 2005–January 2006

Incorporating Graduation of the
First Batch of MPH

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Preface

This is the report for the first academic year of the James P. Grant School of Public Health, BRAC University. The report contains a brief history of the School and its founding patrons, BRAC and BRAC University, information on the MPH training program and the faculty, and activities carried out throughout the period February 2005 to February 2006. This also incorporates the first convocation of BRAC University.

The graduation of 25 students on January 28, 2006 was a defining moment for the School as it marked the coming of age of this young institution. It was the result of hard work involving the students and a great number of individuals and organizations in Bangladesh and abroad. The School strived to develop and implement a hands-on training programme rooted in communities and their public health problems, and utilized the resources of institutions in the North and South through a mutually responsive scheme of collaboration. This South-South and North-South collaboration is a model that has the potential for replication in other schools of public health.

The international composition of both the student body and faculty reflects the state of global inter-dependence and inter-relatedness in health and disease, and has added a unique dimension to the need to work together to resolve the World's public health problems. Recent experiences of the SARS epidemic and the impending fear of an influenza pandemic are reminders that this is indeed so true.

The School is very grateful to all individuals and organizations whose contributions made the work reported here possible, and to our students who dared join an experiment that fortunately came to a good end. The School acknowledges with gratitude the financial contributions of the Rockefeller Foundation, the Gates Foundation, the James P. Grant Trust, UNICEF/Bangladesh, BRAC/Afghanistan, DFID/Bangladesh and BRAC/Bangladesh.

We hope you will enjoy reading this report. If you have any questions or comments, feel free to contact the School.

James P. Grant School of Public Health.

Vision of the BRAC School of Public Health

“A world where everyone enjoys the maximum potential of health”

Mission

The mission of the BRAC University James P Grant School of Public Health is to improve health outcomes of populations in disadvantaged areas of the world, particularly the poor and women, through the application of the art and science of public health.

Goal

The goal of BRAC University James P Grant School of Public Health is to provide public health education of international excellence relevant to the particular needs of the developing world. The training will:

- Be community-oriented providing experiential learning centred around the public health problems of Bangladeshi communities;
- Emphasize critical, innovative thinking that is rooted in best practice and rigorous research methods;
- Use a multi-disciplinary, inter-sectoral approach to learning and problem-solving;
- Inculcate the values and ethos of its founding and partner institutions (equity, fairness, and concern for the poor, women and disadvantaged).
- Prepare graduates to become public health practitioners, critical thinkers, researchers and advocates/stewards of public health and policy at community, district, national and international levels.

1 Background

1.1 BRAC

BRAC is one of the largest non-governmental organizations in the developing world. Founded in 1972, it has been working for the poor serving a population of over 80 million in all 64 districts in Bangladesh. BRAC's twin objectives are poverty alleviation and empowerment of the poor, especially women. It places special emphasis on providing health and education services, and collateral free loans for income-generating activities. It works closely with other organizations including the government. BRAC firmly believes and is actively involved in promoting human rights, dignity, gender equity through poor people's social, economic, political and human capacity building. Given that development is a complex process requiring a strong dedication to learning, sharing of knowledge and being responsive to the needs of the poor, BRAC places emphasis on their organisational development, simultaneously engaging itself in the process of capacity building on a national scale to accelerate progress and improvement for the country's disadvantaged.

1.2 BRAC University

In line with BRAC's support to education as a force of change and development, BRAC University was established in 2001 to foster the national development process through the creation of a centre of excellence in higher education that is responsive to society's needs, is able to develop creative leaders and actively contributes to learning and creation of knowledge. BRAC University confers degrees in Computer Science and Engineering, Management and Business Administration, Architecture, Mathematics and Natural Sciences, Law and Public Health. Degrees are granted at the undergraduate, graduate and postgraduate levels. In addition, the University offers Diploma programs on professional courses.

1.3 James P Grant School of Public Health

The opening of the James P Grant School of Public Health in 2004 in BRAC University is a logical outcome of BRAC's work on the health of the poorest and most disadvantaged women and children for the past thirty years and confirmation that better health is essential for sustainable development. In Bangladesh and other developing countries, there is an acute shortage of competent public health professionals to lead the health sector, which is a critical factor for the poor state of health systems in many poor countries.

The BRAC University James P Grant School of Public Health (referred henceforth as BRAC School of Public Health or BSPH) was established to train public health professionals from developing countries. From the outset, the founders took steps to contact, engage in dialogue and partner with the worlds best schools and institutions of Public Health, in order to design a relevant and responsive curriculum to help build national capacity in public health, and to improve the health of the poorest and most disadvantaged.

1.4 Why is the School named after James P Grant?

The late James P. Grant (1922-1995) was the distinguished Executive Director of UNICEF, credited with mobilizing resources to launch the child survival and development revolution that saved the lives of millions of children throughout the developing world. His legacy was in demonstrating the power of applying the *art* and *science* of public health. Jim, as he is popularly known, was a good friend of BRAC and Bangladesh and of the people of the developing world, and highly respected and appreciated by all. BRAC University is proud to name the School after him.

1.5 Activities before the launch of the School

The following were undertaken as part of the preparation for starting the BRAC School of Public Health.

- a) A review of the past thirty years of BRAC's experiences and interventions in health in Bangladesh, which brought out a number of lessons, including that improving health is an integral part of overall development of the lives of the poor, the need to work with the poor in this endeavour and to scale up interventions to reach the maximum number of poor population groups, use of innovative strategies to find affordable solutions to health problems, and development of a culture of critical self analysis and iterative evaluation of programme to make it a learning organization.
- b) A feasibility study for launching the School, including investigation and costing of physical campus and agreement on teaching sites including the first six months of study in a rural community setting at Savar, one hour's drive from Dhaka
- c) Setting up an International Advisory Board made up of prominent public health professionals from around the world (see next page).

- d) Building modalities for a mutually beneficial partnership with the Bangladesh-based centre for Health and Population Research (ICDDR, B) and schools of public health in the North,
- e) Exploring cooperative fund raising arrangements, and
- f) Seeking approval from the University Grants Commission in Bangladesh for the School of Public Health and Master of Public Health degree programme.

The School's first major undertaking was a one year training programme leading to a Master of Public Health (MPH) degree. An International Director was appointed and the Academic Board of BRAC University also appointed the first Dean. Course coordinators were identified from amongst faculty of partner institutions and a programme coordinator recruited.

The mission, vision and objectives of the School were developed and planning for the course structure began. The aim was to achieve innovative learning, which incorporated active participation of students in all of the coursework material. Agreement was reached on the programme outline with the year divided into 3 components: Part I (6 months) to cover basic concepts of public health, Part II (3 months) on public health practices and Part III (10 weeks) an independent study of a public health problem or programme to be undertaken by each student.

1.6 Advisory and Governance

The School is advised by an International Advisory Board (IAB), which meets twice a year. It is governed by the rules and regulations as set by the University Grants Commission of Bangladesh. The members of the IAB are given in the Box below:

Box 1.1 : International Advisory Board

Prof. Allan Rosenfield, Dean, Mailman School of Public Health, Columbia University (Chair)
 Dr. Jon Rohde, former UNICEF Representative for India (Co-Chair)
 Mr. F.H. Abed, Chairperson and Founder of BRAC
 Dr. Richard Cash, Harvard School of Public Health
 Dr. Sadia Chowdhury, World Bank
 Dr. Anwar Islam, CIDA and Carleton University
 Prof. David Sack, Executive Director, ICDDR, B
 Dr. Patrick Vaughan, Professor Emeritus, London School of Hygiene and Tropical Medicine
 Mr. Cole P. Dodge, formerly the head of UNICEF in Bangladesh, is a consultant to the School

1.7 What makes the School unique?

- **Location** in a developing country providing a ‘social laboratory’ for teaching and learning.
- **Placement in a development organisation** – BRAC’s unique strengths are its ethos and values, its total commitment to help the poor and the disadvantaged, its success in blurring the artificial divide between health and development, in scaling up major health interventions and demonstrating impact, and its vast human, material and infrastructure resources.
- **Partnerships** with internationally recognized schools of public health in the developed world providing it with ready access to the rich academic resources of schools that have been engaged in public health education for decades. A list of institutions with formal collaborations is given in Box 1.2



Prof. Allan Rosenfield and Mr. F.H. Abed at the signing of the MOU between Columbia University and the BRAC School in Washington DC, June 2004.



Students attending a laboratory exercise at ICDDR,B, a major partner of the School.

Box 1.2 : Partnerships and Academic Links

- BRAC University, Bangladesh
- BRAC, Bangladesh
- Bloomberg School of Public Health, Johns Hopkins University, USA*
- Centre for Health and Population Research (ICDDR, B), Bangladesh*
- Columbia University Mailman School of Public Health, USA*
- Dhaka University, Bangladesh
- George Washington University, USA*
- Harvard School of Public Health, Harvard University, USA*
- Karolinska Institute, Sweden
- London School of Hygiene and Tropical Medicine (UK)*
- University of Amsterdam, The Netherlands*
- Umea University, Sweden
- Uppsala University, Sweden*

**MOU (Memorandum of Understanding) signed.*

- ***Emphasis on community-based experiential learning*** with the first six months conducted in a rural setting with field exercises illustrating public health in practice. In consultation with BRAC staff and community residents, students apply hands-on learning techniques during the course of their studies in Savar, a rural training centre of BRAC. During the second half of the academic year the students spend time in Dhaka, focusing part of their field activities in urban slum settlements.
- ***Diverse student body*** drawn from experienced health workers, medical doctors and other professionals, both in health and development around the world.

Collaboration with ICDDR,B

The Centre for Health and Population Research (popularly known as ICDDR,B) is one of the best health research institutions in the developing world with its stock of highly trained professional staff numbering over 100, field and laboratory facilities, and a library with over 50,000 journal titles and 15,000 books, which is one of the largest and most modern in South Asia. For over 40 years the Centre has conducted high quality research on the health problems of Bangladesh and published thousands of papers in world-class journals. Its laboratories include virology, bacteriology, parasitology, immunology, HIV/AIDS, sexually transmitted infections (STIs) and nutrition, and are located at the Centre adjacent to BRAC in Mohakhali, Dhaka, providing excellent facilities found in very few schools of public health. The Matlab field research area is unique in the world of public health research through its health and demographic surveillance of a defined population of over 200,000, extending back for over 40 years. Participation of the Centre scientists in faculty positions at BRAC SPH offers an ideal opportunity to realise the goals of both organizations as well as to train professionals in the field of public health.

2 Curriculum & Teaching

2.1 Programme Outline

- The MPH programme is an intensive 12-month programme.
- The programme has three main parts: (i) core courses on fundamentals of public health; (ii) courses on public health practice, both required and electives; and (iii) individual projects involving research (see table).
- The School uses a multidisciplinary problem-based learning approach to attain its stated mission and goals with the primary areas being: Epidemiology, Biostatistics, Social and Behavioural Sciences (including Medical Anthropology), Health Systems Management, Health Economics and Financing, and Environmental Health.
- The curriculum is designed to be innovative and community oriented so as to provide unique opportunities in hands-on field experience in rural and urban settings. Active participatory learning methods in classroom and in the field are used to foster self-learning skills. Evaluations of both students and faculty are continuous to assure flexible and responsive course adaptations.

2.2 First Semester: BRAC Campus Savar

Students spend the entire first semester of nearly six months at the rural facility in Savar, located on 17 acres of land with excellent facilities including, residential dorms, dining, computer labs, library, class rooms, multimedia facilities, telephones and internet access for all students and faculty.



Students working on a group exercise in Savar



Savar campus

2.3 Second Semester: Campus Dhaka

The second semester classes of the MPH programme are based in Dhaka at the Centre for Health and Population Research (commonly known as ICDDR, B). ICDDR, B has state of the art laboratories and library. It also provides Internet access, classrooms, office space for faculty, and cafeteria for MPH students and teaching faculty. Most of the MPH students reside at the BRAC School of Public Health residential flats in Niketan, Dhaka, which includes dormitory style shared rooms and bathrooms, computers, internet access, dining and cooking facilities, a television lounge area and a study room. The accommodation is located within 5 minutes of walking distance from ICDDR, B.

2.4 Evaluation

The School has a system of continuous evaluations of both students and faculty staff for each course. At the end of each course, students complete anonymously an evaluation questionnaire on the course completed and on the faculty involved. This allowed for immediate feedback and improvement of performance in subsequent courses. Peter Cronin, a doctoral student from Columbia University, was a full-time resident evaluator of the School, and Jon Rohde, Co-Chair of the International Advisory Board of the School also carried out a summative evaluation of the programme by talking to students and faculty at the end of 2005-2006.

The Evaluation of the academic year 2005-2006 found that “students were overwhelmingly pleased with the entire course, feeling in almost all cases it lived up to or exceeded their expectations.” However, it identified a number of challenges, which the School has already started to address.



MPH students & faculty 2005-06

2.5 Course Outline Academic Year 2005 –2006

Name of course/module	Credits	Duration (wks)
Block One <ul style="list-style-type: none"> ● Introduction to Public Health 	2	2
PH Concepts <ul style="list-style-type: none"> ● Anthropological Approaches to Public Health and Qualitative Research Methods ● Biostatistics, Epidemiology and Quantitative Research Methods ● Health Systems Management (including Health Economics and Financing) ● Environment and Health 	6 8 6 2	6 8 6 2
Block Two PH Practice <ul style="list-style-type: none"> ● Epidemiology of Infectious Diseases ● Laboratory Aspects of Public Health ● Demography ● Advanced Epidemiology and Biostatistics or Advanced Medical Anthropology ● Health Equity ● Health Communication ● Reproductive and Sexual Health and Rights ● Human Resources for Health ● Maternal and Child Nutrition ● Aging and Health ● Seminar Series in Public Health – Programme Design and Evaluations 	2 1 1 2 1 1 2 1 2 1 1	2 1 1 2 1 1 2 1 2 1 Second semester
Block Three <ul style="list-style-type: none"> ● Independent Field Study of a Public Health Problem/Intervention 	12	10

3 Faculty

3.1 The BSPH Team

Demissie Habte – International Director

Dr. Habte, a paediatrician by training, former Dean of the Faculty of Medicine of Addis Ababa University for many years and former Director of ICDDR, B. More recently he was Lead Health Specialist at the World Bank, Washington. He has published extensively and is on the board of several international organisations.

Mushtaque Chowdhury – Dean

Dr. Chowdhury holds a Masters from the London School of Economics and a PhD from the London School of Hygiene and Tropical Medicine, UK. He is the founding head of the Research and Evaluation Division at BRAC. A Macarthur Fellow at Harvard University in 1992-93, he is presently a Professor of Population and Family Health at Columbia University and Deputy Executive Director of BRAC. He has published extensively nationally and internationally in the areas of health, education, poverty alleviation, NGO studies and environment. He serves on many international committees in health and related areas.

Alejandro Cravioto – Associate Dean

Dr. Cravioto, Deputy Executive Director of ICDDR, B was made Associate Dean of BSPH in recognition of the growing link with ICDDR, B and the prominent role played by the staff and the Centre. Prior to joining ICDDR, B, Dr. Cravioto was Dean of the Faculty of Medicine, National Autonomous University of Mexico. A paediatrician by training, Dr. Cravioto is widely known for his work on the effect of infections on the growth and development of children.

Shahaduz Zaman – Associate Professor and MPH Coordinator

Dr. Zaman is a medical doctor, with a Masters in Public Health, and has a PhD in Medical Anthropology from the University of Amsterdam. He has worked as a public health physician for several years in community health projects in BRAC. He is involved in research and teaching and has published books and articles in national and international journals.

Sabina Faiz Rashid – Assistant Professor

Dr. Rashid has a Masters in Social Anthropology and a PhD in Medical Anthropology from The Australian National University, Australia. She worked for several years as a senior researcher

at BRAC, focusing on health, reproductive health and gender issues, and more recently on urban poverty. She is currently involved in both research teaching, and has co-authored a book and published articles in several international journals.

Donald Bapi Das, Department Coordination Officer

Mr. Das completed his Masters in Business Administration with a focus on Management from Adventist International Institute of Advanced Studies, Philippines. He comes with more than five years of rich experience working with International non-governmental organizations in administration.

Sabiha Chowdhuri, Research Associate

Ms. Chowdhuri completed her Bachelor's of Science in Biology from the State University of New York at Stony Brook. She was involved in a research project on 'Vitamin A' at the Johns Hopkins School of Public Health (July 2003-January 2004). Before joining BSPH she was teaching science in Dhaka at a private School and university. At present she is involved in the Research Partnership Consortium and working on Reproductive and Sexual Health issues.

Rumana Akter, Research Associate

Rumana Akter is a nutritionist and has completed Masters in Public Health Nutrition from the University of Southampton in UK. At present she is involved with projects in Health Equity, Safe Motherhood and Promotion and Strengthening.

Rumana Hashem, Research Associate

Ms. Rumana Hashem is working for the RPC project - 'Realizing rights: Improving reproductive and sexual health for poor and vulnerable population' which is a DFID funded project. Ms Hashem is also teaching in the department of Masters of Development Studies at BRAC University. She is doing her PhD in Sociology in the University of Newcastle-upon-Tyne in the UK.

3.2 Faculty for MPH - 2005-2006

Introduction to Public Health

- Richard Cash, MD, MPH, Harvard University (Course coordinator)
- Alayne Adams, PhD, Columbia University
- Mushtaque Chowdhury, PhD, BRAC and Columbia University

Anthropological Approaches to Public Health and Qualitative Research Methods

- Sjaak van der Geest, PhD, University of Amsterdam (Course coordinator)
- Diana Gibson, PhD, University of Amsterdam
- Sabina Faiz Rashid, PhD, BRAC School of Public Health
- Shahaduz Zaman, MBBS, MPH, PhD, BRAC School of Public Health

Biostatistics, Epidemiology and Quantitative Research Methods

- Ian Lapp, PhD, Columbia University (Course coordinator)
- Shams El Arifeen, MPH, DrPH, ICDDR, B
- Abbas Bhuiya, PhD, ICDDR, B
- Mushtaque Chowdhury, PhD, BRAC and Columbia University
- Elizabeth Kelvin, MPH, Columbia University (teaching assistant)
- Todd Ogden, PhD, Columbia University
- Diana Romero, PhD, Columbia University
- Lydia Zablotska, PhD, Columbia University

Health Systems Management and Health Economics and Financing

- Anwar Islam, PhD, CIDA and Carleton University (Course coordinator)
- Abdullahel Hadi, DrPH, BRAC
- Kent Ranson, PhD, London School of Hygiene and Tropical Medicine
- Golam Samdani Fakir, PhD, BRAC
- Damian Walker, PhD, London School of Hygiene and Tropical Medicine

Epidemiology of Infectious Diseases

- Richard Cash, MD, MPH, Harvard University (Course coordinator)
- Md. Shah Alam, MBBS, ICDDR, B
- Md. Taslim Ali, ICDDR, B
- Tasnim Azim, MBBS, PhD, ICDDR, B
- Akramul Islam, PhD, BRAC
- Md. Sirajul Islam, PhD, ICDDR, B
- Aliya Naheed, MBBS, MPH, ICDDR, B
- Mahbubur Rahman, MBBS, MS, PhD, ICDDR, B
- David A Sack, MD, ICDDR, B
- Md. Abdus Salam, MBBS, ICDDR, B

Environment and Health

- Bilqis Hoque, PhD, Environment & Population Research Centre (Course coordinator)
- Joseph Graziano, PhD, Columbia University

Laboratory Aspects of Public Health

- G.B. Nair, PhD, PNA, ICDDR, B (Course coordinator)
- Md. Sirajul Islam, PhD, ICDDR, B
- Mahbubur Rahman, FRCP, PhD, ICDDR, B
- David Sack, MD, ICDDR, B

Demography

- Abdullahel Hadi, DrPH, BRAC (Course coordinator)
- Ahmed Al Sabir, PhD, NIPORT
- Abbas Bhuiya, PhD, ICDDR, B
- Mazharul Islam, PhD, Dhaka University
- AKM Nurunnabi, PhD, Dhaka University
- Ubaidur Rob, PhD, Population Council

Advanced Epidemiology and Biostatistics

- Lennarth Nystrom, PhD, Umea University (Course coordinator)
- Abbas Bhuiya, PhD, ICDDR, B

Advanced Medical Anthropology

- Shahaduz Zaman, MBBS, MPH, PhD, BRAC School of Public Health (Course coordinator)
- Sabina Faiz Rashid, PhD, BRAC School of Public Health

Health Equity

- Alayne Adams, PhD, Columbia University (Course coordinator)
- Abbas Bhuiya, PhD, ICDDR, B

Health Communications

- Muhiuddin Haider, PhD, George Washington University (Course coordinator)
- M Bari Chowdhury, MA, MDM, BRAC

Reproductive and Sexual Health and Rights

- Deborah Maine, PhD, Boston University (Course coordinator)
- Kaosar Afsana, MBBS, MPH, PhD, BRAC
- Sabina Faiz Rashid, PhD, BRAC School of Public Health

Human Resources for Health

- Gilles Dussault, PhD, World Bank, (Course coordinator)
- Demissie Habte, MD, BRAC School of Public Health

Maternal and Child Nutrition

- Lars Ake Persson, MD, PhD, Uppsala University (Course coordinator)
- Tahmeed Ahmed, MBBS, PhD, ICDDR, B
- Lotta Ekstrom, PhD, Uppsala University

Aging and Health

- Zarina Kabir, PhD, Karolinska Institute (Course coordinator)
- Syed Masud Ahmed, MBBS, (PhD Candidate), BRAC
- Ake Wahlin, PhD, Karolinska Institute

4 Activities 2005-2006

4.1 MPH Students 2005-2006

After a rigorous selection process, twenty-five students enrolled in the MPH programme, from nine different countries, including 15 from Bangladesh, 2 each from Uganda and India and one each from Afghanistan, Kenya, Nepal, Pakistan, Philippines and the United States of America. The group consisted of thirteen females. There were fifteen medical doctors, and the rest were professionals from different disciplines including dentistry, social sciences, nutrition, management and business administration (see profile in Annex 10.1).

4.2 Official Launching of the School

The Founder and Chairperson of BRAC, Fazle Hasan Abed, inaugurated the James P. Grant School of Public Health on February 11, 2005 at a dinner at BRAC Centre welcoming the first batch of students and some of the international and local faculty of the new school.



Mr. F.H. Abed speaks at launch



Mr. F.H. Abed with three key promoters of the BSPH : Dr. Richard Cash, Dr. David Sack and Dr. Demissie Habte, at the launch.

4.3 Student Fieldwork Activities 2005

Fieldwork activities were a critical component of the MPH degree. The students spent considerable time visiting a number of sites in both Savar and Dhaka City during their coursework periods. Students were able to apply their coursework as well link their own experiences during visits to field sites.

Kakabo village in Savar was one of the most important sites where students spent the first six months visiting households, learning public health in practice and employing qualitative and quantitative methods from the medical anthropology and epidemiology and biostatistics course to improve their own understanding of various health problems affecting the village population.



Village Fieldwork



City Fieldwork

Manikganj Upazila and Bogra town were selected as sites for visits during the Introduction to Public Health and Health Systems Management courses. Students accompanied by faculty also visited numerous BRAC programmes, including micro-credit, health and education to understand the structure and management activities of BRAC interventions.



Leaving for a health facility; discussing project ideas with faculty; visiting a government clinic; reviewing records. [clockwise]

During the rest of the course, numerous sites were visited in the first and second semesters including urban slums, health facilities, hospital wards, pharmacies, health communication sites and various arsenic intervention sites, including:

- Dhaka city urban slums – Korail and Khilkheta
- Water and Sewerage Authority (WASA) in Dhaka
- Sonargaon – Arsenic sites
- BRAC Health Centres in Bogra
- National Nutrition Programme in Bogra
- Upazila Health Complex in Kaliakor
- Upazila Health Complex in Savar
- Enam Private Clinic in Savar
- Pharmacies in Savar
- Centre for Rehabilitation of the Paralysed (CRP), Savar
- GonoShasthaya Kendra (GK) in Savar
- Ad-din private hospital in Dhaka
- ICDDR, B in Dhaka
- ICDDR, B in Matlab in Chandpur

4.4 Seminar Series

The School organized seminars for students, and invited a series of distinguished speakers working in the area of public health – covering topics such as HIV/AIDS, child health, immunization, evaluation of programmes and the health sector in Bangladesh to share experiences with students and faculty throughout the year (see Annex B). It was focused on Programme Design and Evaluation.



Dr. Naila Khan after presenting at the Seminar Series

Students also presented a series of seminars on global and national public health issues in the first semester (See Annex C). The topics were selected from all 17 chapters of the book “Saving Million Lives” (Publisher: Centre for Global Development, Washington DC, 2004).

On 24th of November, the School had two distinguished visitors who gave inspiring presentations to the MPH students. The speakers were: Dr. Kul Gautam, Deputy Executive Director of UNICEF who spoke on ‘Jim Grant’s vision for public health and schools of public health,’ and Dr. Timothy G Evans, Assistant Director General, World Health Organisation, Geneva who spoke on ‘Responding to the global challenges in human resources for health: a critical mission for schools of public health.’ Participants from outside the School were also invited.



Dr. Kul Gautam, Deputy Executive Director of UNICEF as a distinguished lecturer



Dr. Timothy G Evans, Assistant Director General, World Health Organisation, another distinguished lecturer

4.5 Curriculum Development Meeting

There was an international meeting of course coordinators of the James P Grant School of Public Health on April 9-12, 2005 at Training and Resource Centre (TARC), Savar, Bangladesh. There were 29 participants (key course coordinators) from Bangladesh, North America and Western Europe attending (see list in Annex D).



Dr. Jon Rohde and Professor Jamilur Reza Choudhury at the initial planning meeting for the School in 2004

The objectives of the meeting were to:

1. Draw lessons from experiences of the School since its inception and completion of the first two core modules
2. Reinforce the significance of the School's practical approach to teaching with a focus on learner centred methods

3. Face to face meeting of management and faculty members to develop course outlines, structure and map out a plan for the year
4. To critically review and provide feedback on detailed course outlines for semester two and
5. Nurture a shared sense of vision, mission and purpose in building the School's future.

The emphasis during the meeting was to ensure that the teaching / learning plans introduce students to concepts in public health using an active learning approach with group work and several field based activities. This framework in the course structure would ensure students could directly relate theoretical aspects in course readings to practical public health problems by spending time visiting and learning from communities in both villages and urban slums. Students spent the entire first semester of nearly six months at the resident rural facility in Savar. The course instructors (visiting and local faculty) reinforced the importance of group work; active learning methods and underscored the need for greater utilization of students' experiences within the teaching process. To ensure standards were maintained, the courses were reviewed and assessed every few months. An assessment and evaluation form was given to the students for feedback on both the courses and teaching faculty.

Curriculum development meetings led to a shared working knowledge of content and methods for each course to ensure there were links and no unnecessary repetition. Revision of course objectives and field activities led to a mutual reinforcement of key public health concepts and experiences in the Masters programme. All courses planned for the 2nd semester presented their course learning objectives and plans for teaching, fieldwork and assessment. Expectations of each course were laid out in order to create connections with other course and what was the best sequence. This allowed for synergy, avoided overlap and removed repetition in teaching throughout the year.

4.6 Teaching Methodology Workshop

Dr. Ian Lapp of Columbia University, organized a pedagogic workshop for all course coordinators and participants on April 9, 2005 at Savar. The focus of the workshop was on designing and implementing courses, different learning styles of the students and how to adapt teaching for the students and exposure to different learning tools (e.g., SPSS, advanced power point presentations). Teachers discussed innovative teaching styles and methods and with encouragement to move away from didactic teaching methods and towards activity based participatory learning. Active learning in both classrooms and in the field was promoted to foster self-learning skills.

4.7 Conferences and Workshops

Launching of Human Development in South Asia 2004 Report

The School of Public Health hosted the launching of the Human Development in South Asia 2004 Report on June 29, 2005. The chief guest was Dr. Kamal Siddique, Principal Secretary to the Prime Minister of Bangladesh and special guests were: Mr. Sarwar Kamal, Health Secretary, Government of Bangladesh, Ms. Khadija Haq, President of the Mahbub Ul Haq Human Development Centre in Islamabad and Dr. Qasem Chowdhury, Vice Chancellor of Gono Bishwabidyalaya. Ms. Haq summarized the report and underlined how human development and building social capital are now accepted as essential triggers for economic development and sustainable livelihood. The launch was chaired by Mr. Abdul-Muyeed Chowdhury, Executive Director, BRAC.



Launching of Human Development in South Asia Report

BRAC School of Public Health Stall in Mumbai Forum, India

The School of Public Health had a stall at the Global Health Forum in September 2005 to promote the new School and share its vision, mission and goals.

Savar Workshop on Strengthening Public Health Capacity Through the Training of Public Health Practitioners

The BRAC School, with support from DFID Bangladesh, held this two-day workshop on

November 2005 at the BRAC TARC in Savar. The participants included Upazila Health Family Planning Officers (UHFPOs) and representatives from the Ministry of Health and Family Welfare (MOHFW) & Director General of Health Services, BRAC School of Public Health, NGOs involved in the health sector, including BRAC, National Institute of Population Research and Training (NIPORT), ICDDR, B, Gonoshasthya Kendra, Population Council, and development partners, including DFID, the World Bank, UNICEF, and UNFPA.

Priorities were identified for training in order to strengthen public health capacity. The immediate priorities identified include personnel management and finances and accounting, followed by programme management, communications, information technologies, and health information systems. Professor Patrick Vaughan, Emeritus Professor, London School of Hygiene and Tropical Medicine moderated the discussions (see Annex E).

International Conference on Mainstreaming Aging in Health Systems and Rural Development

The conference was hosted by PHILL (Primary Health Care in Later Life: Improving Services in Bangladesh and Vietnam). The aim was to present papers on primary health-care (PHC) for elderly persons (60 years and older) in rural communities. Partners include BRAC, Bangladesh; Health Strategy and Policy Institute (HSPI); Vietnam; Karolinska Institute (coordinating institution), Sweden; and Overseas Development Group (ODG), UK. A coordinating member of this conference, Dr. Zarina Kabir is a visiting faculty member at the School and taught the Aging and Health course.



Dr. Khondaker Mosharraf Hossain, Minister for Health and Family Planning, addresses the International conference on Mainstreaming Aging in Health Systems and Rural Development

Workshop on Reproductive and Sexual Health

The School of Public health and BRAC hosted a National Stakeholders Consultation Workshop on December 3, 2005 on Realizing Rights: Improving Sexual and Reproductive Health for Poor and Vulnerable Populations in Bangladesh. There were 57 participants from NGOs, government and private sector attending the meeting. Priority issues in research, policy and interventions surrounding reproductive and sexual health and rights were highlighted and discussed and list of recommendations made. The workshop was organized by Dr. Sabina Faiz Rashid, Ms Sabiha Chowdhuri and Ms Rumana Hashem of BRAC School of Public Health and Dr. Kaosar Afsana and Dr. Morseda Chowdhury of BRAC.



Dr. Mushtaque Chowdhury provides background to the workshop agenda. Also present are Dr. Abu Jamil Faisal, Country Director, Engender Health and Dr. Kaosar Afsana, Programme Manager, BRAC Health Programme.

4.8 Recruitment of Students 2006

For the selection of students in Bangladesh, a rigorous process was followed, whereby they sat for a written examination, group interviews and finally individual interviews. In the final process, a committee of staff from ICDDR,B and the University (Professor Demissie Habte, Professor Mushtaque Chowdhury; Professor Alejandro Cravioto; Professor Ferdous Azim, Dr. Shahaduz Zaman and Dr. Sabina Faiz Rashid) interviewed the short-listed candidates. Of the 273 who applied, 14 were finally accepted into the programme. In the international arena, the MPH Coordinator visited Myanmar and Nepal and interviewed candidates. Faculty and academics with links to the School, interviewed applicants in other countries and selected

students following the School's rigorous guidelines. Altogether 26 students were selected, 14 from Bangladesh and 12 from various countries in four continents: Afghanistan (2), Bolivia, Canada, India, Kenya, Myanmar, Nepal, Pakistan, Uganda, and United States of America (2).

4.9 MISCELLANEOUS

Swedish Students join School of Public Health Students

A group of 15 students from Uppsala University in Sweden – one of the oldest universities in the world – joined a two-week course on Mother and Child Nutrition at the School of Public Health. The Swedish students attended the course jointly with the 25 MPH Students of BSPH and attended lectures and visited field nutrition programmes of BRAC and ICDDR, B and the Government of Bangladesh. Dr. Lotta Ekstrom of Uppsala taught in this course.



Four Swedish students at a social at BRAC SPH

Harvard Students Visit the School of Public Health

A group of 13 Master of Public Health and doctoral students from Harvard University visited the School of Public Health, BRAC University, and BRAC and ICDDR, B. The idea of the trip was to learn and experience public health by meeting MPH students in Bangladesh, and spending considerable amount of time in villages and urban slums, visiting particular intervention sites run by BRAC and ICDDR, B. The students were accompanied by Assistant Professor, Dr. Ajay Mahal. In the earlier part of their visit, they spent a day meeting MPH

students at Independent University Bangladesh, organised by the Director, Dr. Omar Rahman. The trip was organised and coordinated by Dr. Sabina Faiz Rashid and Mr. Donald Bapi Das at the James P Grant School of Public Health, BRAC University.



Harvard students learning about the School and BRAC programmes

Visiting Interns/Mentoring Students at the School

- Sharon Tsui, an MPH student of Yale University School of Public Health worked as an intern in BRAC School of Public Health, under the supervision of Dr. Shahaduz Zaman during the period of May-August 2005. She did a research study titled - *Sustainable health financing: finding consensus on health equity and cost-recovery*.
- Jessica Polka, undergraduate student from University of California, Berkeley and Saadia Syeda Ameer (Masters student, Dhaka University) were supervised by Dr. Sabina Faiz Rashid during the period of May-July, 2005. She did a research study titled - *Abortion: Reproductive Decision-making and Rights (research site in a Mirpur Clinic), Dhaka*.
- Alia Chisty, (Stony Brook Medical school, New York) currently research intern at Research and Evaluation Division, BRAC was supervised Dr. Sabina Faiz Rashid during the period of July-August, 2005. She did a research study titled *Urbanization, Migration and Reproductive experiences of garment workers*.

5 Research

The goal of the School is also to act as a *centre of excellence* in knowledge creation through research that connects with practice. Therefore, research and the advancement of the science of public health are seen as key functions. It conducts multidisciplinary studies on various development issues of national and global importance. These include poverty alleviation, socio-economic development, agriculture, nutrition, health population, health equity, education, environment, gender and related fields. Partnerships with institutions in the North and the South, including those in Bangladesh, help ensure that the most relevant and pressing issues are the subjects of research, with a unique pro-poor and pro-equity perspective. The School is greatly aided in this pursuit by its close link with the ICDDR, B and Research and Evaluation Division (RED) of BRAC. RED has been an inextricable part of BRAC's mission, providing support to BRAC programmes.

5.1 SPH and RED Collaborations

- Reproductive health – sex workers, condom use and HIV/AIDS. The qualitative study explored the lives of sex workers in Madaripur and evaluates BRAC interventions.
- Garment workers and their reproductive health and well-being – This exploratory study explored the links between occupation and health and how garment workers cope in these difficult conditions
- Well-being of labourers working in tea plantations – This qualitative study investigated the well-being of labourers in tea plantations in rural areas of Bangladesh.
- Slums and informal governance – This study explored the lives of urban slum dwellers and the informal governance structures and State policies that impact on their lives.

5.2 BSPH and Research Partnership projects

Global Health Research Programme [Funded by the Canadian Institute of Health Research] - *The Women's Domestic Violence Health Project* involves researchers from Bangladesh, Canada, Australia, Afghanistan, and Thailand. The aim is to examine how domestic violence policy is developed and used in countries; and to aid in the rapid identification of factors that affect domestic violence policies at international, national, and local levels.

Research Partnership Consortium [Funded by DFID for 5 years, 2005-2010] – *Realising Rights: improving sexual and reproductive health for poor and vulnerable populations*. Partners include: African Population and Health Research Centre, Kenya; BRAC School of Public Health, Bangladesh; Engender Health, USA; INDEPTH Network; Institute of Development Studies, Sussex and London School of Hygiene and Tropical Medicine, UK.

Primary Health-Care in Later Life - Improving services in Bangladesh and Vietnam. The aim is to identify low-cost, preventive and health promotion interventions, to improve primary health-care (PHC) for elderly persons (60 years and older) in rural communities. Partners include BRAC, Bangladesh; Health Strategy and Policy Institute (HSPI); Vietnam; Karolinska Institute (coordinating institution), Sweden; and Overseas Development Group (ODG), UK.

Special Programme of Research Development and Research Training in Human Reproduction, World Health Organisation, Geneva, [Funded WHO, 2005-2006] - *Adolescent Women's Reproductive Health needs in an urban slum in Dhaka City.*

BRAC - ICDDR, B Monitoring Equity Project [Funded by SIDA, World Bank and Netherlands Government] - *Monitoring Equity in public health system in Bangladesh with ICDDR, B and Government of Bangladesh*

Population Council- [Funded by CIDA], this research project is from December 2005-July 2006, is on *Health Systems, Maternal, Neonatal and Child Health: Review of Selected Service Delivery Models*, to be undertaken in several countries of Asia and Africa.

5.3 Students Research Projects

As part of the MPH course, the students were required to carry out an independent research study for 9-10 weeks at the end of the year, carrying out primary research on a public health topic of their choice. The purpose of the Independent Study (12 credits) is for the students to demonstrate ability to synthesize and integrate the full range of MPH knowledge and skills at the end of the coursework period through a study or research of a public health problem or programme. Each student is expected to carry out research using both qualitative and quantitative skills.



Student discussing research findings after fieldwork



Some students at a field site

Table : List of Students Research Projects

Name of Student	Research Title
Ahmed, A.H Mostaque	Factors affecting the performance of BRAC health Centres (Shushastho): an exploratory study
Alam, Khurshid	Costing and financial cost recovery of BRAC health centre (Shushastho)
Ali, Nabeel Ashraf	On the meanings and effectiveness of volunteerism: Community Resource Persons (CRPs) delivering obstetric and neonatal care package in the Clinic Care Arm (CC) of a community trial- an ethnographic cross sectional study
Asifuzzaman, Mohammad	Sexually transmitted diseases (STI) management targeting commercial sex workers - an evaluation of an ongoing program of a national NGO in Bangladesh
Bhatta, Netra Prasad	Effect of IMCI on knowledge attitude and practice of caregivers/ mother on diarrhoea in Matlab, Bangladesh
Chava, Lakshmi Durga	Enrolment and renewal decisions of ultra poor and non poor for BRAC micro health insurance scheme: a demand side study
Chowdhury, Taskeen	Nutritional status of children three months after graduation from National Nutrition Program
Haque, Anupoma (Pinky)	Taking oral health care to the community: can the community health volunteers of BRAC efficiently conduct measurement and oral health education in the community after 3 days of training?
Homaira, Nusrat	Assessing the quality of clinical care of emergency obstetric care.
Khan, Abdus Salam	Economic and non-economic contribution of the elderly to the households: exploring the effects of PHILL programme
Khan, Rumana J	Estimating out of pocket expenditure for hospitalization of pneumonia in Dhaka city
Maroof, Zabihullah	Effects of IMCI on knowledge, attitude and practices of mothers/ care givers towards pneumonia (ARI) in children
Matin, Humaira	A qualitative study on awareness among hotel based sex workers on HIV/AIDS through peer education

Table : List of Students Research Projects (Contd.)

Name of Student	Research Title
Nubudere, Harriet	Impact of integrated management of childhood illness on prevalence of under nutrition in under fives
Oro, Emilita Monville	Assessing participation of community based organizations (CBOs) in selected health programs in Bangladesh
Paracha, Najia Rafiq	Inside the mind of a volunteer: aftermath of the earthquake in Pakistan
Rahman, Sohely	A qualitative exploration of the existing 'Knowledge, Attitude and Practice (KAP)', related to condom use among 'Hotel based sex workers (HBSWs)' in Dhaka city
Rashid, Muhammad Mizanur (Shuvra)	Evidence of arsenic in breast milk of mothers drinking arsenic contaminated water and factors that modify it
Reza, Md Salim	Life stories of young drug users in Bangladesh: a qualitative research to explore HIV related risk behaviour among young of high socio economic status
Sania, Ayesha	Assessment and management of birth asphyxia by nurses in delivery room
Singh, Manjula	Exploring the perceptions of ultra poor for low utilization of micro health insurance schemes, BRAC: A Qualitative study
Victoria, Nankabirwa	Determinants of delivery care in Dhaka, Bangladesh: a nested case control study
Wagner, Rowan	An issue of sustainability, identifying positive practices in NSDPNGO managed health facilities that contribute to staff retention that may lead to low staff turnover in NGO run health facilities in Bangladesh
Yugi, Philemon Odiwuor	Knowledge, attitude and practice of young people on sexual & reproductive health in a private university in Bangladesh
Zabeen, Ahmed Parvez	An explanatory model for perception of breast lump among women and provider in a breast clinic, Dhaka

6 Faculty News

6.1 Awarded PhD

Dr. Sabina Faiz Rashid was awarded her PhD in Medical Anthropology and Public Health from The Australian National University on September 14, 2005. She is a member of the faculty at the School.

6.2 Awarded Research Grant

Dr. Sabina Faiz Rashid was awarded a Research Grant from 'Special Programme of Research Development and Research Training in Human Reproduction' World Health Organization, Geneva. The Research Grant is available till the end of 2006.

6.3 Visiting Fulbright Fellow

Dr. M. Shahidullah (at the University of Illinois, Springfield) a Fulbright Fellow is a visiting faculty member at the School of Public Health till June 2006. During his time at BSPH, he will be involved in a number of activities, including developing an on-line course and teaching Biostatistics.

6.4 Dr. Mushtaque Chowdhury made a Professor at Columbia University

Dr. Mushtaque Chowdhury Dean of the School of Public Health and Deputy Executive Director of BRAC, was appointed as Professor at Population and Family Health at the Mailman School of Public Health, Columbia University in 2005.

6.5 Professional Activities of Academic Staff

Dr. Demissie Habte, International Director

- April 2005 – Meeting of the INCLEN Board in New Delhi, India
- September 2005 – Participated in the Global Health Research Forum in Mumbai, India
- November 2005 – Meeting of the Board of Directors of the African Population Health and Research Centre, in Nairobi Kenya.

Dr. Mushtaque Chowdhury, Dean

- May 2005 - Participated in the periodic review of the Information sciences Division of ICDDR, led by Dr. Terry Hull of The Australian National University

- July 2005 - Meeting on the proposed Ellison Institute for World Health of Harvard University, Phuket, Thailand
- September 2005 - Launch of the Partnership on Maternal, Newborn and Child Health, a side event of the UN Summit. New York.
- October 2005 - Meeting on knowledge translation and management. WHO, Geneva, Switzerland
- December 2005 - Meeting on "Countdown to 2015: Child Survival monitoring", London, UK

Membership of Boards

Dr. Mushtaque Chowdhury joined Boards of the following:

- Editorial Board of "Global Public Health" published from USA.
- Editorial Board of "PLoS Medicine" published from USA.
- Interim Steering Committee of the Partnership on Maternal Newborn and Child Health
- Board member of Important Gifts Inc, New York

Dr. Shahaduz Zaman, MPH Coordinator

- April, 2005 - Worked as a board member for the project 'Building Young Researcher Capacity on Governance', an initiative by Power and Participation of Research Centre (PPRC), Bangladesh
- May, 2005 - Visited Karolinska Institute, Stockholm, Sweden to attend workshop on post-intervention evaluation of Primary Health Care in Later Life (PHILL) project, which is a joint project of BRAC, Bangladesh, Kerolinska Institute, Sweden, Overseas Development Group, UK and Ministry of Health, Vietnam.
- September 2005 - Visiting faculty for Department of Development Studies and Department of Architecture in BRAC University.
- December 2005 - Visited Myanmar and Nepal to recruit students for BRAC School of Public Health.

Dr. Sabina Faiz Rashid, Assistant Professor

- April 2005 – RPC Meeting – First planning meeting of the Realising Rights: improving sexual and reproductive health for poor and vulnerable populations, at IDS, University of Sussex, UK
- May 2005 - Workshop on Addressing Violence Against Women in the Health Sector in Bangladesh, Organized by the Directorate of Health and UNICEF, on May 29-30, Dhaka.

- September 2005 – Workshop on Sexuality and Rights at IDS University of Sussex, UK. Presented paper on ‘Understanding Reproductive health and sexual rights for married adolescent women living in urban slums in Bangladesh.
- December 2005 – RPC Meeting – planning meeting of phase 2 of Realising Rights: improving sexual and reproductive health for poor and vulnerable populations, at IDS, University of Sussex, UK

6.6 Faculty Publications 2005

Chowdhury Mushtaque, A new school of public health in Bangladesh. In: Stephen Matlins (ed.): Global Forum Update on Research for Health (Vol. 2), Geneva, 2005.

Freedman LP, Waldman RJ, dePinho H, Wirth ME, Chowdhury Mushtaque and Rosenfield A. Transforming health systems to improve the lives of women and children. *Lancet* 365:997-1000 (2005).

Freedman LP, Waldman RJ, dePinho H, Wirth ME, Chowdhury Mushtaque and Rosenfield A. Who’s got the power? Transforming health systems to improve the lives of women and children. New York, The Millennium Project ((2005)

Pitchforth E et al. Getting women to hospital is not enough: a qualitative study of access to emergency obstetric care in Bangladesh. *Quality and Safety in Health Care* (in press)

Rashid SF, ‘Women, Gender and Sexualities: Practices in South Asia’, in Encyclopaedia of Women and Islamic Cultures, Volume III, [general ed] Suad Joseph and senior acquisitions editor Olaf Kondgen. Brill Academic Publishers, The Netherlands (2005)

Rashid SF and Hossain Y. Constraints to providing service delivery to urban slum dwellers in Dhaka Bangladesh, World Bank report (DC) (2005).

Zaman, Shahaduz, *Broken limbs, broken lives: Ethnography of a hospital ward in Bangladesh*. Het Spinhuis, Amsterdam, The Netherlands (2005)

7 Graduation 2006

7.1 Graduates Forum

The School organised a Graduates' Forum on January 27 at the Sasakawa Auditorium, ICDDR, B to celebrate the impending graduation of their first batch of MPH students. The 25 students took this opportunity to share their experiences at the School and also present their research findings to invited guests. Professor Demissie Habte chaired the forum; and Dr. Mushtaque Chowdhury gave the welcome address. The keynote address was given by Dr. Jon Rohde Co-chair of International Advisory Board of the School of Public Health, Dr. David Sack, Executive Director, ICDDR, B also spoke on the occasion.



Dr. Mushtaque Choudhury, Dean of James P Grant School of Public Health welcomed all in the Graduates' Forum



Poster Presentation during Graduates Forum 2006



Forum keynote speaker Dr. Jon E Rohde

Excerpt from Jon Rohde's speech at Graduates' Forum

Together with your teachers, some 35 different faculty drawn from over 8 Universities and Schools of Public Health you have helped us to initiate a unique educational experience designed to prepare you to be catalytic actors on the world stage of public health. Together we have given substance to the old Chinese adage: "Go to the people, live with them, learn from them" – for we fervently believe that Experience is the Best Teacher. No other school in the world offers public health education situated in the midst of needy rural and urban communities. None provides a daily contact with the very problems which public health must address. And, none offers the exposure to modern scientific technology applied directly to solving the most pressing health problems in a wide range of applied public health research. Indeed, such an organization as WHO has observed that this experience at James P Grant School of Public Health would be a most valued one for their entire staff!! As you graduate today, you are uniquely prepared to make an important contribution to those who need your skills." "You may well ask at this point of graduation, Where lies the road ahead? Gandhi said "The best way to find yourself is to lose yourself in the service of others." He advised us to "Be the change you want to see in the world." But Jonathan Kozol also warns "Pick battles big enough to matter, small enough to win." By so doing, you will be making Grants dream a reality."

Three awards were given: two F.H. Abed Awards for best overall performance to Manjula Singh from India and Md Mizanur Rashid Shuvra, Bangladesh and one W.B. Greenough III Award for best dissertation to Ayesha Sania, from Bangladesh. There was an oral presentation of selected dissertation reports and all students organised poster presentations of their research work, which was shared with the invited guests on the rooftop of the auditorium. The poster presentations elicited considerable interest from invited guests and potential employers.



A section of guests at the Graduates' Forum



Dr. David Sack, Director ICDDR,B presenting the W.B. Greenough III award to Dr. Ayesha Sania



Mr. F.H. Abed with the winners of F.H. Abed awards for best overall performance Ms. Manjula Singh and Dr. Md. Mizanur Rashid Shuvra

7.2 BRAC University Convocation

The first BRAC University Convocation took place on January 28, 2006 at the Bangladesh China Friendship Conference Centre. The Honourable President and Chancellor of BRAC University Dr. Iajuddin Ahmed formally opened the ceremony. In his speech he said this first convocation was a milestone for BRAC University as it reflected the achievements of the students, teachers and the founders of the university. The Education Minister Osman Farruk addressed the students and faculty and praised the success and achievements of BRAC University and wished the graduating students success. The President of the Governing Board, Mr. F.H. Abed spoke on this occasion and shared the University's pride on this momentous occasion and asked the graduating class to continue to "make BRAC University proud" as they go forward to meet the challenges and opportunities awaiting them. President Jimmy Carter sent a video message. The convocation speaker was Professor Allan Rosenfield, Dean, Mailman School of Public Health & Professor of Population and Family Health, Columbia University (see below for excerpts of the speeches of President Carter and Professor Rosenfield)



President Jimmy Carter of USA sent a video message congratulating the graduates of the University. Excerpts from the video message is given below.

It is with great pleasure that I both visualize a future that you will create and congratulate you on such important moment in your lives. The world has been waiting for you. It's a world battered by disease reminding us daily that if you are poor you may not get the same benefits from science, education, knowledge and governments that you would get if you would get if you are rich.

It's a world groaning under the burden of injustice and crying out for people who are willing to dedicate their lives to correcting these inequities. It's a world waiting for people who are willing to make the science available to everyone, willing to understand the needs of the poor and willing to learn from the poor in order to help rather than to impose. At this very moment you appear on the scene. You declared your interest by preparing to work in public health. You will carry the legacy of James P Grant, one of my personal heroes, into the hard fatiguing yet exhilarating world to share health knowledge.

I feel a direct connection as nation to you because I nominated Jim Grant for his position as head of UNICEF. I had the opportunity to immunize children with Jim Grant in poor parts of the world. He became the champion of the poor and specially poor children. He harnessed an entire global agency to improve immunizations, oral rehydration, a technique that was brought to the world's attention by Bangladesh, growth monitoring and breast feeding rates. He made micro nutrient malnutrition a priority in the world and he mastered the art of getting politicians interested in health.

You also carry the legacy of Fazle Abed, another hero of mine and BRAC which has demonstrated the importance of grassroots mobilization. You are now part of this movement, showing the world the power of motivated people to find their own solutions to the problems of the poor countries.

As part of the BRAC movement, you may have seen it and made it possible to make immunizations, oral rehydration and family planning available to everyone. This is a proud moment for you, the 1st class to graduate from the James P Grant School of Public Health. I was deeply impressed to learn that you 25 pioneering students came from 10 different countries, that your faculty involves Bangladesh, Europe and the United States and that your curriculum has allowed you to live in both rural and urban areas for practical experience as you hone your skills.

It's a model that other schools would want to emulate. You not only represent the world, but you also provide hope. In a 100 years people will still be talking about the odds that they have overcome to start this school and the impacts you graduates had in changing the world.

Thank you for allowing me to share this moment.

Thank you for what you have done and Thank you for what you will do in the future.



Convocation speaker Professor Allan Rosenfield

Excerpt from the Convocation Speech of Prof. Allan Rosenfield

I am delighted to serve as commencement speaker for the BRAC University graduation. From the very beginning, one of the hallmarks of BRAC's work has been education and in particular girls' education. The organization's commitment to women's rights and overall dedication to education as a human right are vital. The formation of BRAC University in 2001 marked an exciting expansion into higher education. The James P. Grant School of Public Health, launched in 2004, holds a special place in my heart. It builds on BRAC's remarkable track record of improving health outcomes for the people of Bangladesh, in particular the poor and women. I have followed closely all of their initiatives and have the greatest admiration for BRAC's impact.

BRAC is one of the world's most successful non-governmental organizations and its founder, Fazle Hasan Abed, is the quintessential leader. Over the last three decades, Mr. Abed's approach for rapidly scaling up effective programs has created a can-do culture in BRAC. In addition, what makes their works so unique is the creativity and passion to identify solutions that empower people and communities to engage in transformative work. This work has dramatically improved the well being of Bangladeshis and the region. The University's inaugural graduating class, over 120 strong, is another shining example of BRAC's extraordinary accomplishments. I applaud the hard work of students, parents, faculty, and the BRAC University leadership for making this day a reality. In particular, I want to acknowledge my esteemed colleague and friend Mushtaque Chowdhury, founding dean of the BRAC School of Public Health. As graduates of BRAC University, I encourage you to continue to embody in your personal and professional lives the vision and accomplishments that represent BRAC.

There were 115 graduating students from a number of departments. Twenty-five MPH students had their Master of Public Health degrees conferred by the Chancellor of the University. Dr. Victoria Nakabirwa received the Chancellor's gold medal for achieving highest CGPA amongst all the postgraduate students at the Convocation. She also received the Vice-Chancellor's gold medal for obtaining the highest CGPA in the School of Public Health.



Dr. Victoria Nakabirwa receives the Chancellor's Gold Medal from Prof. Iajuddin Ahmed, the Honourable President of Bangladesh and Chancellor of BRAC University



Prof. Jamilur Reza Choudhury VC of BRAC University congratulating Mr. Rowan Wagner on his receiving the MPH degree during convocation ceremony

8 Future plans of the School (2006-7)

Building and strengthening teaching capacity of core faculty

This will be achieved through the following: recruiting qualified Bangladeshis with expertise in the core competencies of public health, recruiting recent graduates to join the School who after a period of apprenticeship will be sent to one of our partner schools of public health for doctoral and post-doctoral training and attracting Bangladeshi public health teachers in the North to join the School.

Strengthening Public Health Capacity in Bangladesh

Training of Upazila Health & Family Planning Officers: The Health Nutrition and Population Sector Programme of the Government Bangladesh is critically dependent on the performance of Upazila Health & Family Planning functionaries who oversee health services in the 464 Upazilas (sub-districts) of Bangladesh. The BSPH plans to develop a training programme to prepare these officers for their important task. The School (as well as other training institutions) will then offer a short course (6 months) leading to a diploma in public health.

Continuous Professional Development: The School will offer short training courses lasting one to two weeks to health professionals engaged in public health practice. The School will also examine the feasibility of this training being offered as distance learning courses.

Establishing a Centre for Health Systems Research & Development

Health systems research contributes to generating knowledge to inform health policies and programmes. The BSPH intends to establish a Centre for Health Systems Research and Development that will focus on policy research and analysis, programme design and evaluation, and human resource development and training. The overall goal is to contribute to the strengthening of the health system in Bangladesh and other developing countries.

BRAC SPH to host the Health Watch

In Bangladesh Civil Society has played an important role in setting agendas and monitoring the nation's progress. In health sector civil society has done critical policy advocacy in the 1980s (Essential Drug Policy), and 1990s (Health and Population Sector Strategy 1996 and Health and Population Sector Programme 1998). Community level health watch groups exist in several regions of the country. Various networks (Bangladesh Health Equity Watch, Consumer Council, etc.) have been established at the national level. Building on these past

experiences a number of individuals representing various sections of civil society met several times over the past few months, to explore the possibility of initiating a monitoring system for health in Bangladesh and decided to launch the Bangladesh Health Watch.

In order to monitor Bangladesh's progress towards achievement of the goal of good health for all citizens including the Millennium Development Goals (MDGs), this civil society initiative will publish on a yearly basis a state of health status report in Bangladesh. Based on secondary/primary data, as the situation may necessitate, each year's report will deal with different issues related to citizen's health. The Watch group will also use other advocacy measures such as conferences, meetings, press briefings to engage the policy makers and programme implementers in the public, private and NGO sectors and other actors such as academia, media and donors with the ultimate goal of achieving good health for all. The BRAC School of Public Health has been chosen as the secretariat for the Health Watch.

9 Funding

The School received generous grants from the Rockefeller Foundation (\$250,000 which includes initial and strategic planning grant), The James P. Grant Trust (\$150,000), UNICEF/Bangladesh (\$40,000), BRAC Afghanistan (\$40,000), DFID (\$12,700), and BRAC (over \$200,000). The one million dollar *Global Health Award* that BRAC received from the Gates Foundation in 2004 is being used to initiate an endowment fund for the School. For the first batch of MPH students, the School provided full scholarship to all its students. For subsequent classes, students will be expected to make some contribution; the School will continue to provide scholarship support for students in need.

A brief summary of the (unaudited) statement of expenditure is shown below.

1.0 Expenditure	Amount in Taka
1.1 Expenditure for Faculty and Administration staff:	
Foreign faculty expenditure	15,218,489
Local faculty expenditure	1,593,732
Administrative staff	1,611,774
1.2 Expenditure for Students	7,235,115
1.3 Rent, utilities, printing and stationery cost	2,018,697
1.4 Maintenance cost	3,011,836
Total operational expenditure	30,689,643
2.0 Capital expenditure	
2.1 Computers	790,540
2.2 Equipment	1,062,068
2.3 Furniture	575,185
2.4 Vehicle	1,805,718
2.5 Books	226,300
Total Capital expenditure	4,459,811
Total expenditure	35,149,454
<i>Expenditure financed by:</i>	
Donor Grants	16,211,972
BRAC	18,903,682
Other Income	33,800
	35,149,454

ANNEXES

Annex 1 : Profile of MPH Students 2005-2006

International Students

Zabih Ullah Maroof - Afghanistan

Dr Zabihullah Maroof completed his Bachelor of medicine and Bachelor of Surgery from Mazar-e-Sharif Medical Institute in 2000. He has been working in the IGICH (Indiragandhi Institute of Child Health, Kabul Afghanistan) since Feb 2002 and doing his post graduation in this Institute. He has worked as a Master trainer in the CAF (Care of Afghan Families) a national NGO running some health projects in different parts of Afghanistan. He has attended trainings such as Management of severe Malnutrition, ARI, CDD, AIDS, HMIS and IMCI. He has been trained on Pediatrics in AIIMS (All India Institute of Medical Sciences) for 3 months (from June-October, 2004).

Manjula Singh – India

Manjula has a post graduate degree in Social work from Delhi School of Social Work, University of Delhi (1997-99) and a Diploma in Human Resource Development from All India Institute of Management Studies, New Delhi (1998-99), Manjula, worked for five and a half years with CARE India, an International Private Voluntary organization (July 1999- January 2005). For the past two years she worked as a Programme officer in Delhi, India, spearheading urban HIV/AIDS Prevention Programme for vulnerable populations including commercial sex workers, truck drivers and youth.

Lakshmi Durga Chava – India

Lakshmi Durga Chava has completed Masters degree in Food and Nutrition from Andhra Pradesh Agricultural University, Hyderabad. She also has a Post Graduate Diploma in Business and Administrative Management. Currently, she is working as Project Manager for Health and Nutrition interventions in Andhra Pradesh Rural Poverty Reduction Project implemented by Society for Elimination of Rural Poverty under the Department of Rural Development.

Philemon Odiwuor Yugi – Kenya

Philemon Yugi holds a Masters in Psychology from Varanasy Sanscrit V. and Bachelor of Liberal Arts in psychology and Health Science from Spicer Memorial College, India, a Diploma in Community Development from PREMESE Africa and a certificate in Community Health Nursing, Kenya. He has been coordinating HIV/AIDS programme in East and Central Africa for Adventist Development and Relief Agency Africa regional Office (ADRA AFRO) with focus in Kenya, Rwanda and Congo (DRC).

Netra Prasad Bhatta – Nepal

Netra Prasad Bhatta has completed his Master degree in Sociology from Tribhuvan University, Kathmandu (2004). He also has B.Sc. Nursing degree from CMC, Vellore, India (1999) and Bachelor in education from Tribhuvan University, Kathmandu (1994). He has more than 12 years of extensive working experiences in health and development field especially in child survival programs. He has been working as a CORE Coordinator for CORE group Nepal based in Kathmandu. He is overall responsible for planning, coordinating, facilitating, supervising, managing, monitoring and evaluating the child health programme including polio eradication, IMCI and positive deviance nutrition (PD/Hearth).

Najia Rafiq Paracha - Pakistan

Najia Rafiq Paracha has recently completed a diploma in development studies from IQRA University, Islamabad, Pakistan with special emphasis on research methodology, reproductive health, gender issues and statistical tools for social sciences. Najia also has a Masters in Business Administration from Bahria University, Islamabad, Pakistan. Currently, she is working as a free-lance consultant on Behavior Change Communication interventions with Family Health International and Reproductive Rights Awareness Research with School of Human Rights.

Emilita Monville-Oro – Philippines

Emily, a cum laude graduate of Bachelor of Arts in Nursing at St. Paul College of Manila, Philippines, has 14 years of working experience that covers clinical nursing, public health and capacity development activities. She devoted eight years to working in a tertiary private hospital providing clinical nursing care to patients, and leading a post-graduate training programme for hospital staff. She is currently a Programme specialist on Community health and training of the Regional Center for Asia, at the International Institute of Rural Reconstruction (IIRR).

Victoria Nankabirwa – Uganda

Victoria Nankabirwa has a Bachelors in Medicine and Bachelors in Surgery, from the Makerere University Medical School {2003}. She has a certificate in Adolescent Sexual Reproductive Health. She has been involved in a number of workshops. Recently [Feb 2004-August 2004] she worked as an intern in the Dept of Pediatrics and Child health Mulago Hospital.

Nabudere Harriet – Uganda

Nabudere Harriet has a Bachelors in Medicine and Bachelors in Surgery, from the Makerere University Medical School from 1992-1998. From 2002, she has been working as a Senior Medical officer with International Medical Group, and she was the Medical Officer from August 1999 onwards. International Medical Group is a private healthcare management

organization comprised of International Hospital Kampala, International Air Ambulance clinic and International Medical Centre.

Rowan Wagner – United States of America

Rowan Wagner has a Bachelor in Science from the University of Central Arkansas, Community Health Education, (1998). His area of work is in strategic planning, funding raising, programme/project development and is a member of the Core Working Group on Social and Behavioural Change and TB. He has worked in a number of countries, including Turkmenistan, Moldova, Kazakhstan and Tajikistan. Current work experience (April-June 2004) has been as materials developer for the British Council in Uzbekistan.

Bangladesh

Abul Hasanat Mostaque Ahmed

Abul Hasanat Mostaque Ahmed has an MBBS (1993) from Chittagong Medical College, Chittagong University. He has been working in BRAC since 1998. He is currently a Senior Medical Officer in a BRAC Health Centre in Mymensingh (2003-present). His work responsibilities include management of staff and clinic, attending to patients in Outdoor, Emergency and ensuring obstetric care, and coordinating with government, NGO workers and community leaders.

Asifuzzaman

Mohammed Asifuzzaman has an MBBS from Dhaka Medical College (2003). He just recently did an internship in Dhaka Medical College Hospital (2003-2004). Asifuzzaman is passionately committed to improving the health of the poor and is eager to expand his knowledge of public health issues and incorporate this into his work in the future

Khurshid Alam

Mr. Khurshid Alam did his Master of Demography from the Institute of Statistical Research & Training (ISRT), University of Dhaka (1997) and Post Graduate Diploma in Human Rights and Legal Aid from the Humanist and Ethical Association of Bangladesh (HEAB) (2003). He has earned about 6 years of experiences in public health, population and livelihood working with a number of organisations.

Nabeel Ashraf Ali

Nabeel Ashraf Ali has Bachelors from Minnesota State University at Moorhead, USA in Philosophy. Despite his background, Nabeel has worked exclusively in the area of Public health for the past few years (1999-2004). He is currently working as a Senior Research Officer at the Center for Health and Population Research, ICDDR, B. He is responsible for process documentation as well as behavioural change communication in research and intervention.

Taskeen Chowdhury

Taskeen Chowdhury has a Masters in Nutrition from the University of Dhaka (1994). She is currently working as an Analysis and Reporting Officer in Helen Keller International (HKI), Bangladesh (2001-present). She has extensive experience in analysis of survey data as well as monitoring and observing field teams for data collection in rural areas. Before joining HKI Taskeen had been involved in several research projects (funded by WHO, BMRC etc.) in the capacity of Research Fellow.

Anupama Haque (Pinky)

Anupama Haque (Pinky) has obtained her Bachelor's of Dental Surgery from the University of Dhaka in 2002. Since then she has worked in two Oral and Maxillo-facial surgery clinics as Associate Dentist. She has worked as an educator for adolescents for one year (2004). She is currently conducting private research on the prevalence of caries and malocclusion in early school age group children to determine the need for early professional intervention.

Nusrat Humaira

Nushrat Humaira has an MBBS (2001) from Bangladesh Medical College and Hospital. She is currently working as a Branch Manager in Shakti Foundation which works with disadvantaged women in Dhaka. She is keen to expand her knowledge on public health issues and apply that knowledge in work in the future.

Abdus Salam Khan

Abdus Salam Khan has a Masters in Business Administration from the University of Wales, UK, in 2002. His previous degrees include a Masters of Science (1988) and Bachelors of Science (1987) from the University of Dhaka, Bangladesh. He is currently working in government, as an Assistant Chief at the Health Wing Socio-Economic Infrastructure Division in the Planning Commission.

Rumana Jesmin Khan

Rumana Jesmin Khan has an MBBS from Sir Salimullah Medical College, University of Dhaka (2000). Her research project was on 'Practices of contraceptive methods among the 3rd and 4th class employees of Medical College and Mitford Hospital. Rumana has a Masters of Science in Health Economics (2003) from the Institute of Health Economics, University of Dhaka. Her thesis explored 'myocardial infarction patients in Dhaka city and its relationship to household income.' Rumana is currently working as a Medical Officer in PSKP Family Health Partnership clinic (May 2001-till now).

Humaira Matin

Humaira Matin completed her BA (Hons) in (1994-1997) from the University of Dhaka and Masters of Science in Sociology (1997-1999) from Aligarh Muslim University, India. Her thesis

explored Prostitution in Bangladesh. Since 2004, she is working as a Programme Associate at the Bangladesh Centre for Communication Programs (BCCP).

Sohely Rahman

Sohely Rahman has an MBBS from Sylhet MAG Osmani Medical College (1994). Since 2003, she has been working as a Medical Officer at the Bangladesh Women's Health Coalition (BWHC) Project on RTI/STD/AIDS Programme. In 2003, she served as a Centre Manager at BWHC in Jatrabari. Sohely has successfully completed a Diploma in STD/AIDS from a Consortium of Thai Training Institutes for STDs and AIDS

Selim Reza

Selim Reza has an MBBS (1997) from Shere-Bangla Medical College, Barisal, affiliated with University of Dhaka. Selim Reza is currently working in BRAC, Afghanistan as Manager-Technical Services, PPA Project (World Bank project), BRAC health programme (2004 - present).

Ayesha Sania

Ayesha Sania has an MBBS from Dhaka Medical College (2003). In the past she has carried out research (2001) on the Assessment of Nutritional status of people residing in a village of Gazipur Union. She has also had internship training in the Department of Gynaecology and Obstetrics (April 2003- April 2004). Ayesha is currently working as a lecturer in Community Medicine at the Bangladesh Medical College and Research Institute (BMSRI).

Mizanur Rashid Shuvra

Mizanur Rashid Shuvra has an MBBS from Dhaka University (Mymensingh Medical College) in 2002. His main background is in the area of medical education but he is keen to develop his career in the field of public health. Shuvra has carried out a number of studies/workshops on problem-based learning: 'Feasibility on problem based learning in Mymensingh medical college (2002-2003); orientation workshops on problem based learning in different medical college of Bangladesh WHO-CME.

Ahmed Parvez Zabeen

Ahmed Parvez Zabeen has an MBBS from Sylhet MAG Osmani Medical College (1989). He also has a Postgraduate Certificate Course on Health Economics from University of Dhaka (1989). He is currently the Assistant Registrar, Department of Surgery, Bangladesh Medical College (1997-present). He has over 15 years of clinical experience.

Annex 2 : Seminar Series

Date	Topic	Speakers
July 20, 2005	Use of qualitative research tools in programme evaluations	Dr. Peter Winch, Johns Hopkins University
August 24, 2005	Environment and Poverty	Dr. David Ludden, University of Pennsylvania
August 31, 2005	Making of Health & Population Sector Programme in Bangladesh (Part 1)	Dr. Enamul Karim, formerly of MoH, Gov't of Bangladesh
September 7, 2005	Making of Health & Population Sector Programme in Bangladesh (Part 2)	Dr. Enamul Karim, formerly of MoH, Gov't of Bangladesh
September 14, 2005	Health programme design in public-private partnerships	Dr. Ahmed Al Kabir, John Snow Inc., Bangladesh
September 28, 2005	Studying and designing a programme on childhood disabilities	Dr. Naila Khan, Dhaka Shishu Hospital
October 5, 2005	Development of the Bangladesh Integrated Nutrition Project	Dr. S. K. Roy, ICDDR,B and Dr. Zeba Mahmud, Micronutrient Initiative, Dhaka
October 12, 2005	The making of the Bangladesh Drug Policy	Dr. Zafrullah Chowdhury, Gono Shasthaya Kendra
October 19, 2005	The challenges of child health improvement: global perspectives	Dr. Shams El Arifeen, ICDDR,B, Dr. Jennifer Bryce, formerly of WHO, Dr. Cesar Victora, University of Pelotas, Brazil, and Prof. Robert Black, Johns Hopkins University
October 23, 2005	The success and challenges of family planning in Bangladesh	Dr. Abu Jamil Faisal, Engender Health, Bangladesh
November 2, 2005	Designing health programs through demand side financing	Dr. Khairul Islam, Orbis International
November 7, 2005	Studying child injury and designing a programme	Dr. Iyorlumun Uhaa, Unicef, Dhaka
January 8 2006	Lead poisoning in Bangladesh	Dr. Shahidullah, visiting Fulbright fellow at SPH

Annex 3 : Student seminars

Seminar titles	Name of the presenters	Dates
Preventing dental caries in Jamaica	Pinky, Netra	23 February
Eliminating measles in Southern Africa	Victoria, Nabeel	3 March
Preventing iodine deficiency disease in China	Taskeen, Salim	16 March
Curbing tobacco use in Poland	Humaira, Yugi	30 March
Reducing fertility in Bangladesh	Emily, Salam	20 April
Controlling Chagas disease in Southern Cone of South America	Rumana, Khurshid, Asif	4 May
Improving health of the poor in Mexico	Lakshmi, Zabeen	18 May
Preventing diarrhoeal disease in Egypt	Ayesha, Maroof	1 June
Controlling Onchocerciasis in Sub-Saharan Africa	Harriet, Shuvro	15 June
Saving mothers lives in Srilanka	Najia, Moshtaque	29 June
Controlling tuberculosis in China	Nusrat, Rowan	15 July
Preventive HIV/AIDS and sexuality transmitted infections in Thailand	Sohely, Manjula	27 July

Annex 4 : List of Participants at Curriculum Development Meeting¹

Abbas Bhuiya, ICDDR, B - abbas@icddrb.org
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Tahmeed Ahmed, ICDDR, B – tahmeed@icddrb.org
Zarina Kabir, Karolinska Institute – zarina.kabir@neurotec.ki.se

¹ Alphabetically listed

Annex 5 : Workshop on Strengthening of Public Health Capacity in Bangladesh.

Organised by:	BRAC University, James P Grant School of Public Health.
Organisers:	Professor Mushtaque Chowdhury, Dean Professor Demissie Habte, International Director
Facilitator:	Professor J. Patrick Vaughan, London School of Hygiene and Tropical Medicine
Held at:	BRAC Training and Resource Centre (TARC), Savar 11-12 November 2005.

1. Background:

Significant improvement in health status has taken place in Bangladesh during the past few decades, as shown by the marked lowering of infant and child mortality, reduction in fertility, a moderate reduction in maternal mortality and malnutrition, and an increase in life expectancy. These improvements have been achieved largely through effective vertical programs of immunization, family planning and community outreach services. However, despite these advances the quality, equity, efficiency and scope of health services are not seen as adequate by users of the public sector health services, as indicated by client surveys².

There is today an urgent need to strengthen public health capacity in Bangladesh in order to implement the Health, Nutrition and Population Sector Programme (HNPSPP), which the Government of Bangladesh, together with development partners, is now launching. To achieve this programme there is now a recognised need to strengthen the skills and motivation of public health practitioners.

²See World Bank. Project Appraisal Document: Health, Nutrition & Population Sector Program, 2005

As a part of this effort the BRAC³ University launched the James P Grant School of Public Health in February 2005 in partnership with ICDDR, B⁴ and schools of public health in Europe and North America. It now offers a MPH degree programme.

A further recognised priority is to strengthen the delivery of health services by upgrading the capacity of the Upazila (Thana) Health and Family Planning Officers (UHFPOs), who oversee the health services in more than 450 Upazilas (thanas).

DFID agreed to support the two activities in their Terms of Reference, dated September 28, 2005.

2. Upazila Pilot Study:

The fieldwork for this study, carried out in September and October 2005, has only recently been completed and the analysis is at a preliminary stage and ongoing.

The general objective was to explore the Upazila Health and Family Planning Officer's (UHFPO) experience in managing the Upazila Health Complex (UHC).

The purposive sample of 22 UHCs was selected from the administrative units of Dhaka, Rajshahi, Kulna and Barisal. The study group comprised the UHFPOs and other staff in the complex. The principal investigator and four assistants visited the UHCs and collected information using in-depth and key informant interviews, a pre-tested questionnaire and direct observation.

The preliminary findings were reported to the Workshop and are summarised below.

³ Bangladesh Rural Advancement Committee

⁴ International Centre for Diarrhoeal Disease Research, Bangladesh

3. Workshop Organisation:

The BRAC School, with support from DFID Bangladesh, held this two-day workshop on 11/12 November 2005 at the BRAC TARC in Savar. The participants included UHFPOs and representatives from the MOHFW & Director General of Health Services, BRAC School of Public Health, NGOs involved in the health sector, including BRAC, NIPORT⁵, ICDDR, B, Gonoshatha Kendra, Population Council, development partners, including DFID, the World Bank, UNICEF, and UNFPA.

For the full Terms of Reference see Annex 1.

For the final list of participants see Annex 2.

3.1 Objectives:

The objectives for this workshop were to:

1. Examine the main constraints facing the implementation of health services at national and upazila levels
2. Determine which priority skills that UHFPOs need strengthening
3. Consider how health-training institutions could contribute to this effort.

3.2 Summary of Proceedings:

The sessions were chaired by Dr Demissie Habte, International Director, and opened by Mr. Delwar Hossain, Joint Secretary, Ministry of Health and Family Welfare, Government of Bangladesh. Dr Mushtaque Chowdhury, Dean, then presented the role of the BRAC School of Public Health and the rationale for the workshop.

For full details see the timetable in Annex 3.

⁵ National Institute of Population Research and Training.

The introductory presentations were given by Professor Patrick Vaughan on essential public health functions and strengthening capacity at the Upazila level, followed by Dr. Kees Kostermans, Lead Public Health Specialist, the World Bank, on the challenges facing the health sector in Bangladesh.

The participants then broke into three mixed discussion groups to consider what were the main impediments faced by the MOHFW at national and upazila levels in delivering the health services and programs. The findings were reported back in plenary for wider discussion.

The second day opened with a quick review of the previous day's findings. This was followed by a presentation from Dr Shahaduz Zaman, Course Coordinator, BRAC School of Public Health, on the study carried out in 22 Upazilas to assess the work and skills needed for the UHFPOs to work effectively.

The participants again broke out into their discussion groups to consider, firstly, the main impediments that UHFPOs faced in their daily work and, secondly, in which areas they would like to receive further training. The report back was in plenary and followed by active discussions. The final discussions considered how the training institutions might respond.

Mr. Delwar Hossain, Joint Secretary, closed the workshop.

4. Preliminary Findings from the Study of Upazila Staff:

A preliminary analysis revealed the following. Among the UHFPOs only one was female, the average age was 47 years, the average length in government service was 24 years and 9 years as an UHFPO. Only two officers had postgraduate training in Public Health (a diploma and a MPH degree).

The officers reported that the management tasks that occupied most of their time included the supervision of staff and management of personnel, finances, logistics and information. They do some work in the area of collaboration and cooperation with other government departments, local government and allied public and private sector organisations. They are hardly involved at all in enforcement of health laws and under take few community based activities. They are involved, however, in clinical duties which is not actually within their terms of reference.

Some key constraints the UHFPOs face include:

1. A chronic staff shortage and rapid turn over, absence of specialists, staff absenteeism and insubordination, and political interference. Although most UHFPOs stay in a government residence, their families usually live in nearby towns.
2. Financial and logistical constraints include inadequate budgets, no emergency funds, irregular disbursement of funds to UHCs, lack of funds to pay utility bills, no scope for raising local funds, late supply of logistics and supplies, lack of financial training, and complications in settling account irregularities.
3. Information related constraints included difficulties in maintaining the routine health information system, producing the local disease profile and understanding its relevance.
4. Community related issues include the main preventive programmes, the irregular field supervision and a lack of understanding mobilisation and participation.

Finally, on problems related to existing training, UHFPOs reported them to be too short and often not need based or relevant to their job. In addition, there are few incentives to attend and attendance does not help with careers and promotion.

5. Findings from Workshop Discussions:

Below are summarised are the main points arising from the workshop group discussions:

5.1 What are the key impediments faced by health services?

Central Level	Upazila Level
Lack of: - Political commitment Continuity in policies Comprehensive planning Coordination between programs Sufficient budget allocations Monitoring and regulation Frequent staff transfers Difficulties in procurement Managers uninvolved in planning Centralised organisation Too much political interference Ineffective MIS	Lack of: - Health workers in posts Logistics support & transport Maintenance and repairs Integration of health & FP services Sufficient budget allocations Health information Financial proper authority Centralised program management Frequent staff transfers Difficulties in procurement Weak coordination with agencies

Participant's perceptions were of a health system that is very centralised in both policy making and programme management, that suffers from policy instability due to frequent changes (ascribed to political interference), and in which there is a lack of comprehensive planning and budgeting. This situation is compounded by frequent staff changes, a weak management information system and the presence of multiple programmes with a lack of horizontal coordination.

5.2 What are the main tasks carried out by UHFPOs?

Group One Based on time utilised	Group Two Based on mgt themes	Group Three Based on service level
Administration & letters Delegating responsibility Clinical rounds in wards Attend multi-sectoral mtgs Supervisory field visits Monitoring supervisors Authorising MIS forms Logistics & procurements Budgets & expenditures Disburse salary/payments Training coordination	Managerial Personnel, financial, Logistics, training Service delivery Hospital & domiciliary, Emergency preps. National events Representation & coord. Health in govt mtgs Coordination & NGOs Information management Collection & reporting Dissemination	Hospital management Personnel, finances Logistics, MIS Services quality Field programs Supervision Monitoring Multi-sectoral collab. Disaster response Responding to MOHFW Managing unfilled posts

The three groups analysed their situation in three different ways, based on: 1) how UHFPOs utilised their time, 2) along managerial themes and 3) by hospital and field service levels. Based on these three different approaches all groups came to similar conclusions about the main problems they faced in the daily work. It is very clear that the UHFPOs perceived their main problems to be in management rather than in more substantive public health issues.

5.3 What are the priority needs for training and refresher courses?

Group One Based on time utilised	Group Two Based on mgt themes	Group Three Based on service level
Personnel & financial mgt Motivation and counselling Quality assurance Communications & ICTs Disaster mgt	Training for above - Managerial tasks Service delivery Representation & coord. Information mgt	Personnel mgt Finances & accounting Logistics mgt MIS & data mgt Quality assurance Health promotion Resources mobilisation

Five clear priorities emerged for further training. Personnel management and finances and accounting were clearly the first priority, closely followed by programme management, communications and information technologies, and health information systems.

6. Conclusions:

The BRAC University James P Grant School of Public Health successfully held the workshop on “Strengthening Public Health Capacity in Bangladesh” on November 11-12th 2005 at the BRAC Training and Resources Centre (TARC) in Savar. 30 participants, including 6 Upazila Health and family Planning Officers, attended it.

The fieldwork for the Study of Upazila Health Complexes was completed in October and preliminary findings were presented to Workshop participants. The final report will be assembled over the coming months.

There was strong agreement between the Study findings and the experiences expressed during the Workshop.

The priorities were identified for training in order to strengthen public health capacity. Immediate priorities include personnel management and finances and accounting, followed by programme management, communications and information technologies, and health information systems.

7. Policy Implications:

However, if Upazila health and family planning services are to improve the health status of the Upazila's population by improving their quality, access and coverage, high priority must be given to starting a more substantial training programme covering the UHC services. This would cover two main components:

- 1) Theory and practice in population and public health and
- 2) Management and administration of Upazila Health Complex services.

If the above training initiative is to be effective in raising the health status of Upazila populations, the substantial training programme should become a requirement for appointment to the post of Upazila Health and Family Planning Officer. These two initiatives will require leadership and support from the Ministry of Health and Family Welfare.