



# Engaging Health Development Cooperation through Learning by Doing

Prof. QIAN Xu

Global Health Institute, Fudan University, Shanghai, China

[xqian@fudan.edu.cn](mailto:xqian@fudan.edu.cn)

# Outlines

1. Brief introduction of organizations

2. Learning by doing

- Partnership building
- China-UK global health support program

3. Lessons learnt

- What works?
- What does not work?
- Our reflections



## 1.1 About the Chinese CUGH

- The Chinese Consortium of Universities for Global Health (CCUGH), a network of Chinese universities that are committed to advancing the development of global health research and education, was established by 10 leading Chinese Universities in November 2013. The number of CCUGH members has grown to 24 by Aug, 2017.
- **Vision** Empower Chinese universities to advance the development of global health research and education
- **Mission** The CCUGH aims to build interdisciplinary collaborations and facilitate the sharing of knowledge among Chinese member universities to address global health challenges. It assists members in sharing their expertise across education, research, and service. The CCUGH promotes mutually beneficial, long-term partnerships among member universities, developing human capital and strengthening institution capabilities to address global health challenges.
- **Activities** Biannual GH university forum for advocacy and communication, workshops for GH capacity building and research methodology, and collaboration with other GH organizations nationally and internationally, ect.

# 1.2 Fudan GHI

Global Health Institute, Fudan University (FGHI) was founded in December 2012; which is one of outcomes from Fudan's Framework Program of Global Health funded by US-NIH-Fogarty International Center in 2008. China Medical Board in US also supported FGHI's first three-year development.

## Framework grants awarded to 12 institutions

To help meet the rising interest in global health on college campuses, Fogarty has awarded \$4.6 million over three years to expand its network of global health education programs to include 12 additional



Center Director Dr. Roger I. Glass with Mary McAndrews, daughter of the late Rep. John E. Fogarty, at the awarding of a Framework grant to Brown University.

campuses in the United States, China and Mexico.

The prestigious Framework Programs for Global Health raise awareness of global health within the academic community and support development of new curricula and degree programs that cut across departments and schools to create a pipeline for the next generation of global health researchers.

Each site will receive about \$400,000 over three years through the flexible program that encourages each institution to develop a structure and activities that best suit its existing strengths and research capabilities.

The new grantees will join the existing network of 19 sites that have received Framework grants since the program's inception in 2005.

Two foreign projects are receiving Framework awards.

With its grant, Mexico's National Institute of Public Health—together with eight academic partners in North and South America—will form a training consortium for the region focused on topics of critical importance such as infectious diseases, tobacco and nutrition.

Since China faces significant reproductive health issues, Fudan University in Shanghai will create a teaching network to address the country's persistently high rates of maternal and child mortality, reproductive tract infections and sexually transmitted diseases.

At Brown, students will be offered a set of foundation courses, intensive faculty mentoring and a foreign site experience.

Oregon Health and Science University will build on its strengths in environmental science, cancer and neuroscience, while the University of Texas Medical Branch at Galveston plans to leverage its expertise in telemedicine.

Harvard University will join with partners in India, Tanzania and Brazil to address various aspects of nutrition and its impact on health—both under-nutrition and the emergence of obesity, diabetes and cardiovascular disease in developing countries.

Through its award, Northwestern University will offer its students public health study abroad programs, in collaboration with partner institutions in Mexico, China, South Africa, Uganda and France.

Tulane University will expand its existing relationships with sites in Peru, Mexico, Argentina, Thailand, China and Mali.

Duke University is planning to establish an interdisciplinary master's degree program in global health that will promote the sharing of foreign field sites among the network's members, leveraging existing relationships and fostering new research collaborations abroad.

The University of Pittsburgh will integrate certificate programs from four participating schools—public health, medicine, public and international affairs and law—to prepare the next generation of scientists, physicians, policy makers and lawyers to tackle global health issues.

Ohio State University's program will include global health courses for college-preparatory students, a minor in global health for undergraduates and an interdisciplinary specialization for graduate students.

The University of California, San Francisco will partner with colleagues at UC Berkeley to transform global health offerings in the Bay Area.

In addition to Fogarty funding, the new awards are being supported by NIH partners including the Eunice Kennedy Shriver National Institute of Child Health and

Human Development, the National Institute of Biomedical Imaging and Bioengineering, the National Cancer Institute, and the National Institute of Neurological Disorders and Stroke.

For more information: <http://tinyurl.com/4ekbms>



Telemedicine is a specialty of the University of Texas Medical Branch, recipient of a Framework award.

Courtesy: UTMB Photo



## 2.1 Learning by doing: partnership building

- US-Chinese university partnership for global health
  - Duke-Fudan intuitional partnership network since 2012
  - UW-Chinese Universities capacity building program since 2013
  - China-Harvard-Africa Network (CHAN) member since 2016
- Fudan-Africa institutional partnership for global health since 2014



## 2.2 Learning by doing: three parties' cooperation

- China-UK global health support programme (GHSP) since 2013
  - GHSP-OP102 to distill Chinese experiences and lessons on safe motherhood and child nutrition
  - GHSP-OP302 to provide consultancy to Chinese Government on global health strategies
  - GHSP-OP401 to apply relevant Chinese experience to improve MCH in Ethiopia and Myanmar.

China-UK global health support programme (GHSP) is a new health development cooperation programme. Its aim is to make a more active and effective contribution to global health governance and health improvement by strengthening the partnership between China and UK in the field of global health

### 3. Lessons learnt - what works?

- Multi-actors' collaboration can help better implementations
- Some Chinese implementation experience could be shared with other LMIC after adjusted in the local context, such as
  - Community mobilization for safe motherhood (**More community awareness raised**)
  - Strengthening the linkage between community and health facility to promote service utilization (**Facility-based childbirth increased**)
  - Emergency referral and rescue capability is the key to reduce MMR (**More life saved in project designated rescue center: an INGO**)
  - On-the-Job training and supervision could be an incentive measure for health center's providers (**very welcomed by grassroots level health workers**)

### 3. Lessons learnt - what does not work?

- Community mobilization and social marketing of service utilization will not be effective if local stakeholders, especially religious leaders, are not been involved.
- Emergency referral does not work well at community level if no health project at the local
- Referral hospitals have no enough capacity for emergency obstetric care due to lack of specialists
- Promoting facility base childbirth will not be a safe strategy if no supervision for quality of care at the local health center
- The project effects will not be extended if the project policy could not be incorporated into local regulations during the project life.



### 3. Lesson learnt - our reflections

- Mutual learning by doing together
- The involvement of multi-actors in health development cooperation can facilitate identifying the bottle-neck issues, developing appropriate implementation strategies, helping each other for effective implementation and providing supportive supervision for best practices.
- The collaborative efforts should create added value to the health care within local context
- Improving maternal health needs constant efforts to make changes according to the Chinese experience. Long term project should be considered by donors to continuously support LICs for their unfinished agenda on maternal health.

Together, we can go far!