Since opening its doors in 1986, Health Volunteers Overseas has focused on global health. Our work has revolved around this concept, promoting education of local health care providers as a way to ensure quality health care is available to those who need it.

But what exactly is “global health”? Though a seemingly straightforward term, an article published in *The Lancet* January 2014 issue highlights the complexity of “global health” and the importance of understanding the concepts behind it. In the article, lead author Julio Frenk, PhD, and his colleagues highlight how global health has evolved over the years, arguing that the current era of globalization requires a broader conceptualization of the term that “...makes clear that health and sustainable development are inseparable.”

Frenk and his colleagues track the progression of “global health” over the years. The term first appeared early in the 20th century, when it was used in reference to epidemics and health conditions in developing countries and it was often used synonymously with “international health.” This understanding of global health implied an “us” and “them” approach, which reinforced the idea of using western technology to address basic health care needs. There was an assumption that if the right equipment, vaccines, and supplies were available, then the world's health problems would be eliminated, or kept at bay. The idea failed to grasp the complexity of health care challenges and the need for comprehensive solutions.

Another approach to global health focused on the elimination of specific diseases (smallpox, polio, malaria, TB). This concept remains popular today and, while laudable efforts, the millions of dollars allocated to such causes frequently give little acknowledgement to the context of health care in the affected areas, neglecting fragile health systems and lack of trained personnel.

In the current era of globalization, argues *The Lancet* article, we should view global health as the health of the global population and the product of health interdependence. While diseases have never stopped at the border, today’s travel and trade allow faster and broader spread of disease. The globalization of information and technology, the consumption of more foods traditionally found in a “western” diet, and increased prevalence of motor vehicles have led to increases in stress-related conditions, cardio-vascular diseases, diabetes, certain cancers and injuries. Years ago, the health community did not...
Dear Friends,

Our cover article looks at global health as a form of interdependency and a recognition that health issues across the world truly do have an impact on us. Our goals in global health care should be striving to improve health care for all.

Many HVO volunteers have remarked over the years that the skills they learned as volunteers abroad served them well here at home, whether it was learning to trust their intuition with a diagnosis, showing more patience and understanding with patients from other cultures, or volunteering with underserved populations here in the US. As you will see in the volunteers highlighted in the News and Events section, each of those physicians has shared their skills and knowledge both overseas and in their own community.

Global health is about this give and take, the back and forth sharing of information and skills, as we learn from each other. With each encounter, we strive for a healthier world – a goal from which we will all benefit!

Best wishes for a healthy spring and summer! I urge you to take a break from your routine and schedule a volunteer trip; it will make a difference in your life and in the lives of those with whom you collaborate.

Sincerely,

Nancy

Nancy A. Kelly, MHS
Executive Director
### Anesthesia
- Malawi: 2 - 4 weeks
- Vietnam: 2 - 4 weeks

### Dermatology
- Cambodia: 2 - 3 weeks
- Costa Rica: 1 - 2 weeks
- Uganda: 3 - 4 weeks
- Vietnam: 2 - 4 weeks

### Hand Surgery
- Honduras: 1 week

### Hand Surgery/Hand Therapy
- Nicaragua: 1 week

### Hematology
- Cambodia: 2 - 4 weeks
- Tanzania: 1 - 4 weeks
- Uganda: 2 - 4 weeks

### Internal Medicine
- Bhutan: 1 month
- Cambodia: 2 - 4 weeks
- India: 2 - 4 weeks
- Uganda: 1 month

### Nurse Anesthesia
- Belize: 2 - 4 weeks
- Bhutan: 1 month
- Cambodia: 2 - 4 weeks

### Nursing Education
- Bolivia: 2 - 4 weeks
- Cambodia: 2 weeks
- Tanzania: 3 - 4 weeks
- Uganda: 2 - 4 weeks
- Vietnam: 2 - 4 weeks

### Oncology
- Bhutan: 2 - 4 weeks
- Costa Rica: 1 - 3 weeks
- Honduras: 1 - 4 weeks
- Paraguay: 1 - 2 weeks
- Vietnam: 1 - 4 weeks

### Oral Health
- Cambodia: 2 weeks
- Kenya: 2 weeks
- Laos: 1 - 2 weeks
- Nicaragua: 1 - 2 weeks
- Rwanda: 2 weeks
- St. Lucia: 2 weeks
- Tanzania: 2 weeks

Please Note: New projects are added regularly and volunteer assignments are made on a rolling basis. For the most up-to-date information on volunteer sites and scheduling, contact the HVO Program Department: info@hvousa.org or 202-296-0928. Visit the website [www.hvousa.org](http://www.hvousa.org).
Ronald Wyatt, MD to receive Community Service Award

Ronald Wyatt, MD will be honored in June 2014 as a recipient of the 2013 David Lawrence Community Service Award. This award recognizes the contributions made by individuals and groups within Kaiser Permanente who make a sustained and extraordinary contribution towards improving the overall health of a community or a population.

Dr. Wyatt was selected from a field of 150 nominees for his work with Orthopaedics Overseas. Dr. Wyatt, a member of HVO since 2002, has completed 12 assignments at orthopaedics projects in Bhutan, China, Costa Rica, Cambodia, Mongolia, Saint Lucia, South Africa, Vietnam, and Peru. He also served as Project Director for the Peru project for three years, where he worked on the development of a national training curriculum.

In addition to his international work, Dr. Wyatt helped establish Operation Access which works with uninsured and underinsured populations in two California counties.

Congratulations to Dr. Wyatt on this recognition of his dedicated service!

Paul Spray, MD, Honored as Humanitarian

Paul Spray, MD was awarded the 2013 Mayo Clinic Alumni Association Humanitarian Award in recognition of decades of dedication to humanitarian care both in the United States and abroad. Between 1959 and 1998 he completed more than 23 assignments abroad. A modest and self-effacing man, Dr. Spray led by example – his leadership and advocacy for sharing orthopaedic education in the US and in resource-poor countries inspired many others to get involved.

Dr. Spray’s international work can be traced back to his involvement with the Orthopaedic Letters Club (OLC) which, at an American Academy of Orthopaedic Surgeons’ meeting in January 1959, appointed a committee to look into ways “to donate medical practice, experience and teaching” to needy countries.

Driven by a desire to counter the negative images of Americans featured in the best-selling novel, The Ugly American, these founding members were convinced that sharing knowledge and expertise with their colleagues in other countries would forge lasting bonds of friendship and respect. They focused their efforts on education knowing that it was the key to long-term development.

Over the years, the OLC evolved into Orthopaedics Overseas which was affiliated with CARE/MEDICO until 1981 when it became an independent organization and, in 1986, became the founding division of Health Volunteers Overseas.

HVO congratulates Dr. Spray on this recognition of his many years of service and dedication.

AAN Joins as HVO Sponsor

HVO is pleased to welcome the American Academy of Neurology as a new sponsor. AAN, the world’s largest professional association of neurologists, was founded in 1948 and is composed of over 27,000 neurologists and neuroscientists dedicated to promoting the highest quality patient-centered neurologic care.

The 2010 Global Burden of Disease Study found that neurological disorders account for almost 11% of the worldwide disease burden. With aging populations in both developed and developing countries, prevalence of neurological disorders is likely to increase. WHO reports that the rate will rise to 14.7% by 2020.

AAN has partnered with HVO to help address this issue, by including neurology components in many of HVO’s internal medicine projects. Initial project sites will be Bhutan, Cambodia, India, and Uganda, with more projects being developed.
**Dr. Samuel Moore**

One of the original founders of Orthopaedics Overseas, Dr. Samuel Moore III, died December 28, 2013 at his home in Oklahoma City. He was part of the initial group of orthopaedic surgeons who rallied behind the idea of contributing his orthopaedic skills and knowledge to others as part of a people-to-people outreach inspired by the negative imagery created by the best-selling novel, *The Ugly American*. His first trip was to Jordan in October of 1959. He also served in the Dominican Republic and in Vietnam.

Dr. Moore, who celebrated his 100th birthday on March 30th 2013, was a man of many interests and passions, including a love of bird watching. He founded and served as the first president of the Oklahoma City Audubon Society in 1947. He authored a memoir, *Flight Surgeon*, which chronicled his adventures over a period of 27 months in Africa, Asia, and Europe as a Captain and Flight Surgeon in the U.S. Army Air Corps during World War II.

One of his most treasured mementos was the July 22, 1961 edition of the Saturday Evening Post with an article, *Doctors of the Desert*, which included numerous photos of Dr. Moore serving in Jordan. Hearing that Dr. Moore had misplaced his copy of the magazine, Nancy Kelly, HVO Executive Director, found a copy online and gave it to Dr. Moore during his 100th birthday party. “He was absolutely delighted when he saw the magazine,” said Nancy Kelly, “I think it was the memory of this first volunteer trip which had such a profound and positive impact on his life.”

HVO is grateful for the service and commitment Dr. Moore demonstrated and will remember him fondly.

**HVO Legacy Circle**

A planned gift ensures that HVO will be able to continue to make important educational strides in the improvement of health care in developing countries.

When you write or review your will, please consider leaving HVO a charitable bequest as an investment in HVO’s future. You may bequeath a specific amount of money or a percentage of your estate. Another relatively simple option is to designate HVO as the beneficiary of a life insurance policy or the assets of a retirement plan.

If you are interested in creating a charitable bequest in your will or in discussing some other charitable aspect of your estate planning, please contact Nancy Kelly at giving@hvousa.org. If you have already made a charitable bequest, please let us know! We will honor all requests to remain anonymous.

Thank you to the following people who have made such a commitment:

- **Anonymous** (2)
- Richard Coughlin, MD, MSc
- Dr. & Mrs. David Frost
- Nancy Kelly & Michael Hagan
- Stephanie & Chris Murphy
- Steven Stoddard, MD
- Jay S. Cox, MD
- Kim Dunleavy, PhD, PT, OCS
- Leslie B. Glickman, PT, PhD, MEd
- Richard & Mary Kemme
- Celia Pechak, PT, PhD, MPH
- Karen Pitts Stubenvoll, MD
- Nancy C. Cox
- Germaine Fritz, DO
- Elaine Goodall, PT, MEd
- Paul Muchnic, MD
- James Pembroke
- Dr. & Mrs. Harry Zutz
HVO Members Recognized for Commitment to Global Health

The recipients of the ninth annual *HVO Golden Apple Award* were announced on April 7, 2014. As part of its World Health Day observances, HVO created this award to recognize the extraordinary educational contributions of volunteers to international program sites. Each HVO volunteer honored with this award has demonstrated a strong commitment to HVO’s educational mission by working on curriculum development, teacher training, didactic or clinical training, or the enhancement of educational resources.

The recipients of the 2014 *Golden Apple Awards* are: Dino Aguilar, MD; Robert Buchholz, Jr., CRNA, MSNA; David Frost, DDS, MS; Katharine Morley, MD; Tom Morton, MBChB, FACEM; Jose Angel Sanchez, MD; Linda Wolff, MPT.

Many of these honorees have also served in leadership positions for HVO overseeing the development of new programs, monitoring the progress of active programs, identifying educational resources for sites, and serving as mentors to their colleagues overseas.

“Volunteerism is at the heart of HVO,” stated Richard Fisher, MD, HVO’s Board Chair. “These dedicated volunteers – from the US and from our partner programs overseas — represent an ongoing commitment to improving global health. The professional collaboration that has developed through the work of these volunteers is making a significant difference in the lives of their patients and colleagues.”

The World Health Organization’s Global Health Workforce Alliance reports, “Health workers are the heart and soul of health systems. And yet, the world is faced with a chronic shortage – an estimated 4.2 million health workers are needed to bridge the gap, with 1.5 million needed in Africa alone. The critical shortage is recognized as one of the most fundamental constraints to achieving progress on health and reaching health and development goals.” In a sobering corollary, they estimate that one billion people in the world will never see a health worker in their lives.

The efforts of HVO’s *Golden Apple Award* recipients are an integral part of HVO’s response to the global health workforce shortage. By highlighting the achievements and contributions of the *Golden Apple Award* recipients, HVO fosters an awareness of global health issues, especially the human resource shortage, which serves as a serious constraint to the delivery of health care around the world.

World Health Day is celebrated annually by the World Health Organization and the international community. Since 1950, it has been held each year on April 7th and focuses on a relevant global health issue. This year’s theme is “Small Bite, Big Threat” which addresses vector-borne diseases such as malaria and dengue. The campaign will work on building awareness of the simple steps that can be taken to prevent these diseases. WHO reports that over half the world’s population is at risk for vector-borne diseases, with 40% at risk for dengue alone. For more information on World Health Day 2014, visit [http://www.who.int/world-health-day/en/](http://www.who.int/world-health-day/en/).
recognize such conditions in developing countries or the countries could not address the conditions due to lack of national health finances and the need to focus on basic public health measures. By revising our view of global health, argue Dr. Frenk and his colleagues, we can begin to address these challenges in a more comprehensive, sustainable way.

With over 27 years of work in the field of global health, HVO has experienced first-hand these shifts in conceptualizing global health. While HVO’s mission has always been to provide education and training in developing countries, our work and partnerships have evolved, reflecting a growing understanding of interconnectivity and the need for a sustainable approach to addressing health care challenges.

The first and most apparent shift in HVO’s work has been in the health challenges our project sites face and the training they require. Our trauma care and rehabilitation portfolios have necessarily evolved with the growth of motor vehicle use and subsequent trauma. We’ve created a cancer care portfolio to help address the growing burden of cancer in Central and South America and Southeast Asia. We receive ongoing requests for training to address non-communicable diseases - from diabetes to cancer, from mental and neurological disorders to traumatic injuries.

Along with shifts in the health challenges our project sites face, we have witnessed an evolution in the training that local health care providers are able to receive. As the interconnectivity of health care challenges becomes more apparent, there have been an increasing number of training opportunities offered regionally. HVO has been able to enhance training for colleagues at project sites by offering travel scholarships for them to attend trainings and conferences offered in nearby countries. This “south to south” approach helps build professional relationships within the region, builds on regional knowledge and skills, and serves to strengthen professions.

As technology has made the world smaller, it has enabled improved communication and allowed our volunteers to share information in real time. This has allowed more give and take in sharing knowledge and skills. Several of our project sites have now been regularly taking advantage of telemedicine conferences, which further strengthens professional collaboration. HVO volunteers have teamed with their colleagues at overseas sites to publish research in national and international journals.

As technology and travel make us aware of how globally interconnected we are, there is an increased awareness that our health conditions and decisions affect others around the world. The Lancet article argues that “global health” should refer to a global interdependency - an awareness that we are all connected and that improving health conditions in one part of the world has positive implications for everyone. This new understanding incorporates a sense of shared commitment and responsibility, and a recognition of our common humanity.

At HVO, our programs and projects will continue to evolve as new opportunities and challenges arise and, in close collaboration with our project partners, we seek to address them through a give and take of knowledge and skills.

Reflections from the Field

Laurie M. Good, MD · Dermatology · Vietnam

I think the biggest challenge for dermatologists in Vietnam is the lack of formal education and resources, including access to medical journals and texts. They have to learn almost purely from experience, which caps most peoples’ knowledge at the level of their instructors. Because of this limitation, I think HVO has the opportunity to send volunteers who can have a big impact by providing more formal learning opportunities.

My interest in HVO stems from my shared belief that TRUE support and betterment of patients’ health comes from the education of LOCAL providers, rather than duffle bag docs carrying expired medications intended for chronic use, and most of which are not stocked by local pharmacies. I have seen that type of medical mission all too often and am a strong proponent of the HVO model of medical volunteerism. I felt very supported by the organization and would enjoy a continued role in the leadership of the dermatology division.

For me, this trip reminded me why I went into medicine and allowed me to participate in the care of patients with truly severe, debilitating skin pathologies. It reminded me why I love dermatology, the value of being a teacher, and reignited my passion for public and global health. I learned so much about the diagnosis and treatment of skin disease where resources are limited and one cannot just order a battery of tests and biopsies to reach a diagnosis. Patients often present with more long-standing, severe, dramatic skin lesions, or the alternative – partially treated disease because streetside pharmacies do not require prescriptions. It requires more problem solving skills, a more detailed history taking and thorough physical examination.

Neil Masters, MD · Anesthesia · Ethiopia

Even if I only changed how one student practices anesthesia, the net effect is that I may have improved the care of the thousands of patients that he/she likely will take care of over the course of his/her career. Of course, we were teaching a class of 20 some odd students, so the actual number of patients that we as HVO volunteers may eventually impact is far, far greater.

Ronald Renz, PT, MMSc · Physical Therapy · Bhutan

My suggestion is that HVO PTs limit the scope of what they present; focus on hands-on practice, and think of things that might “stick” with the staff through hands-on repetition.

One example of this is the reproduction of a “GivMohr” arm sling by PT Genevieve Oliver who accompanied Mike Green on his HVO assignment at the National Referral Hospital. Genevieve volunteered in the PT outpatient department during my assignment. She taught the staff how to make arm slings with help of the staff and sewing equipment in the hand clinic. I will follow-up to see if they have used the slings or made any additional copies.

Overall the experience was “good at the beginning, good in the middle, and good at the end.” I would enjoy volunteering again in the HVO Bhutan PT program.
Bonnie Rathod, RN, MN · Nursing Education · Cambodia
I felt my major contribution was not the actual nursing content I taught, but that I helped to promote the profession of nursing, and our ever expanding role. These hard working nurses were motivated and engaged; given the opportunity I felt they would all do what they could to increase their own nursing education, as well as enhance the nursing profession in Cambodia.

Reanne Booker, MN, BScN · Oncology · Costa Rica
I found it a bit challenging in that I wanted to maximize the time that I had at each hospital. I went to Costa Rica with a fairly firm notion of what I should do to make the best use of my time. I had anticipated giving numerous formal presentations and adhering to a strict timetable (perhaps a reflection of the quite unyielding nature of schedules and agendas that seem to be customary in the Canadian healthcare system). What I quickly realized was that it was better to just be open to the experience and adapt to the needs of the staff as they arose. It meant that I had to be comfortable with spontaneity and know that I would leave with less tangible evidence of what I had accomplished than if I would have done numerous presentations. In retrospect, I think it was somewhat inevitable to feel this way given that I was one of the first volunteers to visit the hospitals and it was not possible to know with certainty what to expect.

Rebecca Kruisselbrink, MD · Internal Medicine · Uganda
I had the privilege to meet and develop strong working relationships with residents and faculty at Mulago Hospital who are similarly interested in building critical care capacity in low-income African countries. We continue to work together and have ongoing electronic communication. Sharing ideas and educational resources, and partnering in research and quality improvement projects has made this collaboration very productive.

Charles Bloomer, DDS · Oral Surgery · Cambodia
We sit in our offices and think life is simple, our clinical treatments are all about the same and our businesses are all about paying taxes. But, somewhere else in this world there are many desperate people who will walk miles for your knowledge and expertise. You will make a difference.

Rose McGrath, RN · Nursing Education · Tanzania
I am very thankful for this opportunity. Having my entire training in North America, I have seen the best and worst in our culture. We take for granted what we have and the accessibility of our resources at the tip of our fingers. Observing nurses in Tanzania and witnessing their ingenuity and tenacity is a humbling experience. I have learned from them as much as I hoped they learned from me. I have noticed a lot of donations and they seem to have excess supplies that they were unfamiliar with, or equipment that has broken down over time and is in disrepair. I hoped that teaching them a few updated nursing skills will encourage them to look at their own practice and change for the better. It has also defined and cemented my desire to continue on the path of teaching.
Become an Ambassador-at-Large!

You can become an Ambassador-at-Large, as a member of HVO’s recurring gift program. As an Ambassador, you can transfer membership dues and yearly donations from a checking account or credit card directly to HVO on a monthly, quarterly, semi-annual or annual basis.

By choosing the convenience of creating a recurring gift, you amplify the impact of your support, saving HVO both time and money. This means that more of your tax-deductible dues and donations can be directed to what you really care about – projects that transform lives through education. Please see the recurring gift section on the membership application or donor envelope to join!
### HVO gratefully acknowledges the following donors whose recurring gifts sustain our work throughout the year....

#### SPECIAL THANKS
#### AMBASSADORS-AT-LARGE
#### (current as of February 28, 2014)

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