Countries across the globe are striving to reach accepted international standards in care, which may require upgrades to the preparation of certain health care providers. For physical therapists, the accepted entry-level international standard is a Bachelors’ Degree according to the World Confederation of Physical Therapists (WCPT). But what does that mean for diploma-prepared physiotherapists already working in their field? That was the challenge that Enock Chisati, PhD Fellow of the Consortium for Advanced Research Training in Africa (CARTA) and Head of the Physiotherapy Programme at the University of Malawi, faced in early 2018. Now, 2+ years later, a transitional curriculum (tBSc) has been developed to meet the needs of working physiotherapists feeling the personal and professional pressure to upgrade their background. The curriculum has been merged with that of the College of Medicine’s BSc Curriculum. Formal approval was received this fall.

How was such a process navigated so “quickly”? It started in January 2018, when the Administrator of the Kachere Rehabilitation Centre sent a formal request to the College of Malawi to develop a transitional physiotherapy curriculum. The purpose was to upgrade the background of 13 working physiotherapists with diploma-level preparation, filling in gaps in knowledge and providing evidence-based resources for their working toolkit. Upgrading their skills was imperative for both professional and personal reasons, particularly since the “diploma” therapists were supervising BSc physiotherapy students in the clinical setting.

continue on page 6
News & Events
LETTER FROM THE EXECUTIVE DIRECTOR

“Alone we can do so little; together we can do so much.”

— Helen Keller

Dear Friends,

This quote of Helen Keller’s really resonates with me as, together, the world tries to tackle COVID-19. No one is immune to it and there is no country that has not been affected. Yet, by working together to practice safe behaviors and search for appropriate therapeutics and a safe vaccine, we will get through this difficult time.

Our cover article highlights a wonderful example of two colleagues working together across boundaries, an ocean, and many time zones to improve physical therapy in Malawi. Together they developed a curriculum to provide diploma certified physiotherapists in Malawi with the skills and knowledge to “bridge” to a bachelor’s degree, giving those therapists more options for personal and professional advancement, and improving the physical therapy profession in Malawi. The commitment of Enock Chisati and Leslie Glickman in tackling this challenge shows how much can be accomplished through e-volunteer efforts, particularly with an end-goal clearly defined.

The centerfold in this issue highlights some of the work that was done with our projects in 2019 – I hope you will take a few minutes to learn more about 2019 by viewing our first totally digital annual report at: https://tinyurl.com/y36ol5h4. This year – perhaps the most challenging one I have ever faced as executive director of HVO - we are continuing our education and training at our project sites, where possible, through e-volunteer assignments. Such assignments include developing curricula, mentoring faculty, improving skills, and developing protocols, all of which will aid in strengthening the capacity of our partner institutions.

Your support is greatly needed and appreciated. Please make a year-end contribution if you are able. The work continues with your support.

Please stay safe, and be well,

Nancy

Nancy A. Kelly, MHS
Executive Director
HVO's in-person volunteer assignments are currently suspended due to the pandemic. We continue to partner with 77 institutions across the globe and some of them are welcoming e-volunteer assignments. Please check with our volunteer placement coordinators to see if there is an opportunity for you to share your skills and knowledge. The learning continues, just at a distance!

For information on HVO's project sites, please check our website: www.hvousa.org

"The training that HVO volunteers provide improves the skills and knowledge of health care professionals in more than 20 countries. HVO and its volunteers are paying it forward and making a difference in people's lives."

—Stephanie Murphy, MPA, CPA, HVO board member
IN MEMORIAM

Remembering Elizabeth Hillman, OC, MD, LLD, FAAP, FRCP

HVO is saddened by the loss of Dr. Elizabeth Hillman, a pediatrician who dedicated her life to improving the lives of children. She recognized the importance of education and commented, “There is always more to be done and never enough time to do it all – which is why we must teach others.” She ensured that teaching was always a part of her work, and mentored several generations of young physicians. In 1981, she became the first female president of the Medical Council of Canada. In 1994, she and her pediatrician husband, Don, were appointed Officers of the Order of Canada, as recognition of the global service they had provided to improve children’s health. Dedicated physicians, they were also known for their generosity, hospitality, and love of life.

Dr. Hillman became an HVO member in 1993 and volunteered in St. Lucia and on numerous occasions in Uganda. She served on the Pediatric Steering Committee for a total of nine years, sharing her knowledge and wisdom from years of working abroad.

Following the death of her husband, she established the Hillman Medical Education Fund, which supports health education and develops future leaders in medicine, particularly in East Africa.

The work she did leaves a legacy of healthier children and many physicians committed to improving global health care. Her commitment to education continues.

The Passing of Thomas Littlefield, DDS

It is with sadness that HVO reports the passing of Thomas Wentworth Littlefield, of Michigan and, later, Florida. Dr. Littlefield was the first periodontist to practice in Northern Michigan, where he worked for many years. He volunteered on the Michigan Periodontal state examination board and served as the specialty State Peer Review Chairman.

Having studied at a Jesuit high school, Dr. Littlefield was a life-long learner, who lived his values. He relished life, and enjoyed traveling and sharing his love of sports and music with family and friends.

Dr. Littlefield joined HVO in 1999 and became a committed volunteer to St. Lucia, serving five weeks each year over the course of eleven years to provide oral health care training.

HVO extends condolences to his family and many friends, and remembers a life well-lived.
Serving Abroad During the Pandemic

Guest contributor Trenton Harper, a nationally registered paramedic, shared his experience with an HVO staff member. This is an excerpt of the piece, which appears in full on the HVO website.

On the 14th of January, I arrived in Bhutan through HVO, as a Rita Feinberg Fellowship recipient. Shortly after my arrival, I began my assignment collaborating with the Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB) and Jigme Dorji Wangchuck National Referral Hospital (JDWNRH) in Thimphu, on the country’s new Emergency Medical Responder (EMR) training program. The 3-year program would be graduating its first class of advanced life support level pre-hospital providers in June. The EMR scope of practice is relatively equivalent to a paramedic, although more limited in some regards while more advanced in others. The primary goal for my position was to provide field training and preceptorship to students completing the last semester of their second and third years. The hope was that I would help translate the training they had received from their emergency medicine physician and nurse instructors as well as their in-hospital clinical experiences to the out-of-hospital environment. The third-year students were scheduled to graduate in June before being placed at regional hospitals throughout Bhutan.

You had recently arrived in Bhutan when the pandemic began appearing in the US. What sort of response to COVID-19 did you see in Bhutan?

By the time the WHO declared COVID-19 a pandemic on March 11th, Bhutan had imposed restrictions that included the entry of foreign citizens and the cancellation of classes in Thimphu; the students I was there to serve were sent home indefinitely. Many businesses closed as social distancing, wearing of face coverings, and hand washing were emphasized and acted on, although adherence waxed and waned over the coming months. I transitioned to working shifts in the Emergency Department, going on the now rare request for ambulance transport (with a new level of PPE), and deepening my friendships with my Bhutanese colleagues and the other remaining HVO volunteers. I witnessed the relatively small capital city transform from its bustling baseline to a much quieter, distanced version of itself. For the first time I walked to work without the need to step aside for others on the sidewalk; the cultural norm of unaggressive bumps as you walk past on the typically busy sidewalks was gone; providing a wide girth was the new norm (especially for an obvious westerner such as myself). The number of patients in the ED dropped drastically as staff worked to implement the many new changes to everyday operations. Separate clinical spaces were established adjacent to the main hospital: a mobile “flu clinic” through which many patients requiring COVID-19 screening were funneled, separate units for suspected and positive cases, and housing for the COVID care teams as they rotated through service.

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Advancing the Physiotherapy Profession... continued from page 1

The request for training had reached Enock Chisati; however, he had no immediate resources. A chance meeting with Leslie Glickman, PT, PhD, an HVO member working in Malawi on a Fulbright Project, created an unexpected opportunity. Dr. Glickman was interested in learning more about formal physiotherapy education in Malawi, having worked with the physiotherapist staff and faculty in Malawi for over 4 years. She was an educational consultant who just by chance had experience with the development and implementation of a transitional and post-professional program at the University of Maryland from 2001 to 2013. As an HVO member, she had provided educational and programmatic consultation to the physiotherapy program faculty in Suriname in 2010. While other HVO volunteers had previously provided consultation clinical and educational services to the Physiotherapy Programme in Malawi, the new request required specific expertise that had not been available from prior volunteers.

After securing approval from HVO’s Physical Therapy Steering Committee, Dr. Glickman and Mr. Chisati began moving forward with the process to develop a new curriculum. The steps included determining what was needed, already available, and feasible. They created and distributed an “interest survey” to potential students to determine their interest in the program. The courses in the diploma and Bachelors’ programs were compared and analyzed to determine where there were gaps in course content, required hours of study, and objectives. A tentative list of courses for the new program was developed, with the identification of 14 courses, learning objectives, topics, and outcomes, spread over 2 years. The process included assessing the College's computer lab, library, learning management system, and other educational resources needed to support the program, all of which were adequate. Dr. Glickman & Mr. Chisati hoped to find similar programs that might have been developed in the College of Medicine and University of Malawi to gather ideas or lessons learned, but none were found.

Once the initial preparation was completed, a new curricular proposal was developed. The programme as it exists now meets the needs of working professionals, is delivered on a part-time basis, AND available almost entirely remotely via the Internet. In view of the pandemic, there may be a need for further modifications to some curricular details involving in-person experiences. This will need to be revisited following the approval process in concert with
specific health requirements for educational programmes in Malawi at the time.

During the early process, prospective students were interviewed to gather qualitative and quantitative input, and to assess their informal enthusiasm for the curriculum. Input from the faculty was gathered for their reactions to the plan and the draft program. The Administrator of the Kachere Rehabilitation Centre was kept apprised of the process, with an opportunity for input. Details were fine-tuned as potential faculty were identified for each course, including the need for HVO or other US-based professionals to fill in gaps. A recommendation from the College and University administrators resulted in merging the new programme with the existing Bachelors’ programme, which also simplified the approval process. The merged curriculum was approved by the University of Malawi’s Academic Programmes and Curriculum Committee and submitted to the University’s Senate. They recommended minor amendments, then resubmission. Formal approval has now been received, and the curricula are awaiting the Vice Chancellor’s endorsement. Roll-out of the full program is anticipated when classes re-open.

With the goal in sight, there are still a few steps that will need to be completed. As soon as final approvals are received, the faculty for the first year of courses will be confirmed. Curricular expectations will be reviewed with them and, if any gaps remain, an alternative plan will be developed to address those needs. The details of all program support (computer lab, library, etc.) will be confirmed with the appropriate contacts so they are clear on the needs for the new program. Communications will be sent to the students for any required actions on their part (registration, orientation). Meetings with the students will also take place remotely, as needed.

During the curricular approval process, Dr. Glickman and Mr. Chisati collaborated with Fanuel Bicton, one of the recent BSc graduates, on the development of a case report of the project. This report was just published in a new Malawi text this summer. With significant detail, the case report outlines the steps and process used to develop this unique curriculum. Both Mr. Chisati and Dr. Glickman felt the experience of working collaboratively online was fruitful; however, working at a distance did pose challenges in time-zone differences

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HVO’s 2019 Annual Report

BUILD - INVEST - ADVANCE - TRANSFORM

3,200+
health professionals trained and mentored

16
scholarships awarded to health professionals at partner institutions

From the HVO community:
25+
 presentations
14
 publications

Local project coordinators saw improvements in:
85%
patient outcomes
89%
staff clinical skills

“Our staff members are more skilled and confident now. We have started a new procedure for cleft lip and palate care, which has helped us get recognition in Nepal.”
—Dashrath Kafle, MD, Kathmandu University School of Medicine, Nepal

Dr. Matthew Best (center) with orthopaedic colleagues in Ghana.

Dr. Bruce Anderson (L) shares oral health care tips in Laos.

Health Volunteers Overseas
Transforming Lives Through Education

Read more about our work: https://tinyurl.com/y36ol5h4
Support HVO’s Dedicated Health Volunteers and Global Partners

Our work depends on the generosity and commitment of members, donors, and sponsors. In our new annual report, we share a few stories about how your contribution helps build capacity, invest in health professionals, advance global health, and transform lives.

We are grateful for your support.

Dr. David Beaton Lovejoy Jr., an orthopaedic surgeon, wanted to make an impact beyond his community. To celebrate his life, his family established a memorial fund for orthopaedic residents to get experience at HVO sites. So far, 19 have received fellowships.

Ways to Support HVO’s Work

Give online: www.hvousa.org/donate

Ambassador-at-Large: Make your gift a recurring one!

The HVO Legacy Circle: Include HVO as a beneficiary in your estate planning.

IRA Distribution: If you are 70 1/2 or older, you can make a “qualified charitable distribution” from your IRA to HVO and avoid taxes on transfers of up to $100,000.

Gifts of Securities: You may avoid capital gains tax on securities held long-term and provide a tax deduction equal to the fair market value at the date of transfer.

Donor Advised Funds: Donor advised funds are an increasingly popular way to support HVO with funds you have already set aside for charitable purposes.

Read more about our work: https://tinyurl.com/y36ol5h4

After a career caring for newborns and teaching, Dr. Winston Koo wanted to share his skills in resource-challenged countries. He was drawn to HVO’s emphasis on education and training. After four assignments, Dr. Koo says he has learned as much as he taught.

HVO’s nurse anesthesia project in Cambodia began in 2004 to improve care delivery. Today, a dedicated team of anesthesia providers delivers expert care and also teaches others in Cambodia and Laos.
Advancing the Physiotherapy Profession...

and connectivity. They found WhatsApp was the best platform to communicate with meetings scheduled in the first half of the day in the US. International collaborations, particularly those related to education, require patience, persistence, dedication, and a real commitment to producing legitimate outcomes. Challenges clearly create opportunities, as evidenced in this story. For now, the two educators are eager to see their hard work come to fruition. They are excited to see a realistic vehicle for the diploma-trained physiotherapists to move ahead in their careers and advance the physical therapy profession in Malawi. The constraints of COVID-19 will reinforce the value of the platform for this program...This good-news story will continue thanks to HVO volunteers.

New Books


The book is available to preorder now: https://novapublishers.com/shop/malawi-its-history-culture-environment-education-and-healthcare/

Many people face the difficult situation of caring for family members with a serious illness, while trying to maintain their career and family life. The role is never easy, but the support of others can make a difference.

HVO volunteer Deborah Boyle, RN, MSN, AOCNS, FAAN, is an oncology nurse who has also been a caregiver in her personal life. Her new book, *The Caregiver’s Companion*, provides a path to moving forward through this difficult circumstance. (https://www.ons.org/books/caregivers-companion)
As was the case for health care providers around the world, the learning curve was steep... from the complexities of critical care practices to the relatively simple donning and doffing of PPE, I watched as all level of staff rose to the occasion.

What initialy felt like being dunked into a bizarre new version of home has normalized, with me accepting that we will most likely continue to see ongoing cases for a long time to come.

Have you been in touch with your colleagues and students in Bhutan? What are they reporting?

Thankfully, I was able to help the third-year students finish their final semester and exams before I departed at the end of June. They have since received their assignments and are now working throughout Bhutan. I have remained in touch through social media; I get the occasional question or story regarding a patient contact. Since I departed, the country has experienced an apparent case of community transmission along the border. This resulted in a national lockdown much stricter than anything previously enacted. Health care providers were required to travel directly to and from work and, otherwise, to remain at home. But, everyone made it through.

As always, we recommend consulting your tax advisor for details.

2020 Tax Changes Affecting Charitable Donations

Several legislative changes may make it easier for donors to take advantage of tax savings in 2020.

**New deduction:** Donors can now deduct up to $300 ($600/married couple) in charitable giving without itemizing (for those who take the standard deduction). This is an “above the line” adjustment that will reduce the donor’s adjusted gross income.

**Higher limits:** Individuals can now deduct charitable gifts up to 100% of their adjusted gross income (the previous limit was 60%). Corporations can now deduct up to 25% of their taxable income (up from 10%).

**Required minimum distributions waived:** Although RMDs from IRAs have been suspended until 2021, donors over the age of 70 ½ can still make qualified charitable distributions of up to $100,000 directly from their IRAs. This remains an efficient and tax-friendly way to donate to nonprofit organizations in 2020.

As always, we recommend consulting your tax advisor for details.
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*The Volunteer Connection*, HVO’s biannual newsletter, is available by mail or electronically for those who prefer. Subscriptions are free to HVO members and donors. Previous issues are available on the HVO website under “HVO News.” The newsletter is produced by the communications staff at HVO.

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