

2018

**Global Health Distance
Learning Program**

Student Handbook

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The mission of the Uniformed Services University of the Health Sciences is to educate, train and prepare uniformed services health professionals, officers and leaders to directly support the Military Health System, the National Security and National Defense Strategies of the United States, and the readiness of our Armed Forces.

Program Introduction

USU's Graduate Certificate Program in Global Health and Global Health Engagement is an 18-credit graduate program that offers coursework in global health science and policy with an extra emphasis on real-world applications relevant to the U.S. military and federal government. Begun in 2016 and fully accredited by the Middle States Commission on Higher Education, the Program's students earn a "Graduate Certificate" in Global Health and Global Health Engagement after successful completion of 18 credits of coursework, all of which can be completed now by distance learning. Students who may be interested in taking only one or two courses are also welcome, and they may obtain a transcript from the University documenting courses completed and credits earned.

Three courses required to earn the graduate certificate include:

- | | | |
|-------------|---------------------------------------|-----------|
| 1. PMO 528 | <u>Global Health 1 (GH1)</u> | 4 credits |
| 2. PMO 539 | <u>Global Health 2 (GH2)</u> | 4 credits |
| 3. PMO 1022 | <u>Global Health Engagement (GHE)</u> | 3 credits |

Elective courses available to students include:

- | | | |
|-----------------|---|-------------|
| 1. PMO 1020 | <u>Comparative Intl. Health Systems (CHS)</u> | 3 credits |
| 2. PMO 1023 | <u>Global Mental Health (GMH)</u> | 3 credits |
| 3. PMO 1017 | <u>Health Context Analysis (HCA)</u> | 3 credits |
| 4. PMO 534 | <u>Medical Anthropology (MDA)</u> | 3 credits |
| 5. PMO 1025 | <u>Global Health and Development (GHD)</u> | 4 credits |
| 6. PMO 862 | <u>Independent Study in Global Health (IDS)</u> | 1-3 credits |
| 7. Coming soon: | Global Health 3 | |

Program Mission

The Program's mission is to prepare globally-minded U.S. military and Public Health Service Commissioned Corps professionals to plan and execute health engagement in support of security cooperation, stability operations, complex humanitarian emergencies, and any health or medical engagement around the world as directed by the Combatant Command or appointed U.S. Government authority in support of national security, in times of war and peace.

Why Global Health?

The (U.S.) military is constrained in the career path for global health, long-term staffing opportunities and adequate flexibility in the use of civilian experts. There is insufficient knowledge within DoD of nongovernmental organizations (NGOs), USAID, and CDC, including their respective cultures and how to most effectively partner with each in delivering health services, training, and capacity-building.

There is a strong argument for systematically cultivating the small cadre of military officers and civilian personnel who lead military global health engagement, identifying opportunities to develop the unique competencies required to optimize success in these critical roles. Ideally this cadre would include medical representatives from a broad spectrum of clinical and administrative backgrounds representing all U.S. military services. In addition to proven competence in core specialties, specialized professional development can include a common educational foundation in global health and international relations as well as significant experience within U.S. civilian assistance agencies, nongovernmental partners, and multilateral institutions. This step should not require additional personnel, but rather rely on more systematic and thorough professional development of those personnel involved in health-engagement activities.



--ADM William Fallon and LTG James Peake



We stand, MSF and NATO, in the same volatile geographic locations, so we must deal with the reality of our coexistence in the tight and tense corridors of war. While we will never have a common understanding, we need to improve our mutual understanding in order to be clear about our different motivations, responsibilities, strategies, and purposes.

-- Christopher Fournier, International President of MSF (Doctors Without Borders)

Dean's Welcome

Among the 141 accredited allopathic medical schools in the United States, only the School of Medicine at the Uniformed Services University of the Health Sciences (USU) can rightfully claim the title, "America's Medical School." Named for the Louisiana Congressman who championed its creation, the F. Edward Hébert School of Medicine at USU was established in 1972 to assure that the U.S. Army, Navy, Air Force and Public Health Service would have a steady supply of physicians and health leaders to provide the medical backbone for their Services.



While a rudimentary form of distance learning existed in his era, Congressman Hebert could never have imagined how information technologies today would allow us to bring the same high-quality education to all of you around the world that we provide our in-residence students in Bethesda. When you enroll in this program you should prepare yourselves for courses equal in quality and rigor to those we offer on campus. You can expect my faculty will provide the same level of enthusiasm, dedication, and even individual attention that in-residence students have come to love. It's a lot of work, but if you finish this Certificate Program you will know you have acquired a strong foundation in this field -- a field that is particularly important to our contemporary military operations.

USU's motto is "learning to care for those in harm's way." As an element of the U.S. Department of Defense, we contribute to America's national security by ensuring that the U.S. military has a "ready medical force" and a "medically ready force" — whenever and wherever they are needed. In addition, the students, faculty and staff of the Hébert School of Medicine are committed to defending the health security of the United States by generating high-impact scientific and clinical discoveries, by delivering compassionate and efficient patient care and by advancing public health throughout the United States and around the world.

Welcome to the Uniformed Services University.

Arthur L. Kellermann, M.D., M.P.H.

Course Descriptions

PMO 528 – Global Health 1 – Course director: Boetig – credits: 4

The first course in the Program is PMO 528, more affectionately referred to as “Global Health 1.” It is a graduate-level global health survey course that provides students with a comprehensive introduction to the field of global health from a development perspective, as well as providing a more detailed examination of some of the most pertinent issues in the field. This course covers topics ranging from international health regulations to surgical concepts in global health, along with maternal and reproductive health, child health, nutrition, cultural considerations, and even an introduction to the role of the DoD in global health, among others.

Various adult-learning techniques are used including recorded presentations, selected readings, class discussions, expert panels, a term paper, and Sakai discussion boards. This class utilizes the “flipped classroom” method of teaching which involves recorded lecture and other material that students study at home, thus freeing class time for seminar discussions. The live seminar sessions are considered a critical piece of this course, and participation in these class discussions is expected. Grading is by letter grade. Prerequisites: none.

PMO 539 – Global Health 2 – Course director: Boetig – credits: 4

PMO 539, “Global Health 2,” is the second course in this series and it is intended to offer a deeper dive into some of the more contemporary topics in global health. Non-communicable diseases, pharmaceutical concepts in LMICs, global health diplomacy and the Global Health Security Agenda will be covered. In addition, topics with multi-dimensional complexity such as female genital mutilation, abortion, and serious ethical challenges in global health engagement will be taught.

Consistent with the Global Health 1 course, various adult-learning techniques will be used including recorded presentations, class discussions, expert panels, and Sakai discussion groups. The live seminar sessions are considered a critical piece of this course, and participation in these class discussions is expected. Students are expected to write an editorial piece within this course. Grading will be by letter grade. Prerequisites: completion of Global Health 1 (PMO 528) with a grade of “C” or better.

PMO 1022 – Global Health Engagement – Course directors: Kumpf & Zuerlein – credits 3

PMO 1022, “Global Health Engagement” is a graduate-level course that teaches the application of global health concepts and principles to “global health engagement,” the methods and means by which the Department of Defense and broader U.S. Government involve themselves in the global health space.

Through the study of history, doctrine, policy, case studies, lectures and seminar discussion with subject matter experts from USU’s Center for Global Health Engagement, students gain competence and confidence to prepare them for participation in global health engagements.

Specifically, students will gain a greater understanding of the strategic, operational, and civil-military considerations of DoD GHE; the framework for establishing the context of a health engagement; and the components of planning, executing, and monitoring a global health engagement activity. Prerequisites: Global Health 1 and Global Health 2, each with a letter grade of "C" or better.

PMO 1023 – Global Mental Health -- Course director: Baines – credits 3

Mental health is recognized as one of the greatest contributors to worldwide global burden of disease, particularly in areas of disaster and armed conflict. This course provides an introduction and broad examination of the several subtopics in this domain and is appropriate for clinicians and non-clinicians alike. Focused on mental health issues in low- and middle-income countries, students will learn about various interventions; the influence of culture in mental health treatment; prevention strategies; theories for scaling-up services; stigma, discrimination and human rights violations common in this field; and the relationship between global mental health and human security. Prerequisites: Global Health 1.

PMO 1020 – Comparative International Health Systems -- Course director: Koehlmoos – credits 3

Students will apply Roemer's Model of Health Systems to examine resource allocation, management, and health outcomes in the United States and around the globe. The course will focus on the structure and functioning of national health systems based on geographic location and governance in both high income and low- and middle- income countries (democracies, monarchies, and communist nations). Resource allocation across the continuum of nations, and relationship to national health needs, health status, and longevity, are examined.

At the end of the course students will be able to compare the US healthcare system and its management to selected health systems around the globe in order to:

1. Identify the key characteristics and components of the current US health care system;
2. Describe key characteristics and components of global health care systems;
3. Evaluate the forces influencing healthcare and determine their impact on the future of healthcare systems at home and abroad;
4. Predict the likelihood of future health system changes and how they may impact society;
5. Analyze differences in resource allocation across nations and the relationship to quantifiable differences in health outcomes.

PMO 534 – Medical Anthropology -- Course director: Burkett – credits 3

This course introduces students to the link between culture and health behaviors (understanding medicine from the patient's point of view) in order to increase understanding between the "healers" and the populations they serve. This understanding will contribute to better compliance and improved health outcomes. At the end of the course, students will be able to characterize barriers to health services produced by cultural differences, evaluate health-seeking behaviors from a cross-cultural perspective, and characterize their own health care system perspectives as

they relate to their own culture. This course emphasizes the significance of a medical anthropology perspective (both biological and cultural) as applied to global health and military global health engagement.

PMO 1025 – Global Health and Development – Course director: Boetig – credits 4

With GH1 and GH2 as prerequisites, students enter the Global Health and Development (GHD) course with a solid understanding of global health principles and a keen awareness of the challenges inherent in trying to effect change in ways that are sustainable and beneficial long-term for all involved. The students are already aware that very often the most well-intentioned efforts have failed to achieve those high aspirations.

With that perspective in mind, this course takes a big step back and examines global health from the broader lens of a development specialist, with emphasis on theories of development and economics. The overriding theme of this course is that a broader, more comprehensive understanding of development -- the art and science by which societies progress from subsistence living to modern, flourishing states -- is required to understand how to “do global health” the right way.

In this course students will study in detail many of the most spectacular attempts at development since the dawn of the industrial age. Students will harvest what can be learned from successful interventions, as well as learn from what went wrong in some of the most spectacular failures. Upon completion of the course students will be well-versed in the history, challenges and modern theories of this field. Since no manual for “how to do global health” exists, this course provides the in-depth understanding and education that best-prepares students to design, plan and lead global health engagements under any circumstances they might encounter. This course is co-directed by Jean Kayembe, and guest SMEs include Nina Munk, Dale Smith, and Sophal Ear.

PMO 1017 – Health Context Analysis – Course director: Shinwari – credits 3

Successful Global Health Engagements require a foundational understanding of the country or region’s Health Context. Practitioners from both the Department of Defense and the larger Global Health community recognize the need to understand the health context as an enabler for global health engagement efforts. Perceptions of, and approaches to, health may vary significantly across regions, localities, or even within a family. A comprehensive understanding of the health context, through consideration of the cumulative influence of the country context, socio-cultural background, health culture and communication, determinants of health, and the health system, is essential to effective global health engagements.

This course will prepare military health professionals to utilize the health context analysis framework as a standardized tool to collect, organize, and interpret information about a specific country or region and to inform global health engagements. This course is designed to develop the students understanding of the components of the health context analyses framework and to apply the framework to a specific country. At the conclusion of the course the student will be equipped with an in-depth understanding of the components of the health context analyses framework and have the experience to apply the framework to a designated country to enable the successful design and execution of Global Health Engagements.

PMO 862 – Independent Study in Global Health – Course director: Boetig – credits 1-3

Opportunity is available for students to do independent study or research in global health or global health engagement and, under the direction of a faculty member, earn academic credit commensurate with the scale, scope and rigor of the project. This is an attractive option for students with a deep interest in a niche area of this field. A formal proposal must be submitted and approved prior to the start of the project.

Faculty and Staff

Program Administration:

Brad Boetig, MD, MPH, MA

Col (sel), USAF, Assistant Professor of Pediatrics and Global Health
Director, Global Health Distance Learning Program
Course Director: GH1, GH2, and GH and Development (GHD) courses
bradley.boetig@usuhs.edu, (757) 652-9301

Rachelle Paul-Kagiri, MD

Col, USAF, Emergency Medicine Physician and Assistant Professor of Global
Health Director of International Outreach, Global Health Distance Learning
Program Rachelle.Paul-Kagiri@usuhs.edu

Course Directors:

Global Health Engagement (GHE)

Scott Zuerlein, Ph.D.

Assistant Professor and Deputy Director, Training and Professional Development
Division USU Center for Global Health Engagement
szuerlein@cghe.org

Josh Kumpf, MA

Curriculum Manager, Training and Professional Development, HJF
USU Center for Global Health Engagement
jkumpf@cghe.org

Comparative International Health Systems (CHS)

Tracey Koehlmoos, Ph.D.

Director, Health Services Administration Division
and Associate Professor of Preventive Medicine and
Biostatistics tracey.koehlmoos@usuhs.edu

Health Context Analysis (HCA)

Sayed Shinwari, MD, MPH

Assistant Professor of and International Health
Systems Advisor USU Center for Global Health
Engagement sayed.shinwari@usuhs.edu

Global Mental Health (GMH)

Lyndsay Baines, PhD, FHEA

Lyndsay.baines@usuhs.edu

Medical Anthropology (MDA)

Edwin Burkett, MD, MBA
Deputy Director, Defense Institute of Medical
Operations Associate Professor, USU
edwin.burkett@usuhs.edu

**GH1, GH2, and Global Health and Development (GHD) Brad
Boetig, MD, MPH, MA**
Bradley.boetig@usuhs.edu, (757) 652-9301

Teaching Faculty:

Global Health 1 (GH1)

Brad Boetig, MD, MPH, MA (course director)
Stephen Waller, MD
Rahul M. Jindal, MD, PhD, MBA
Stana Ilcus, MD, MPH
Ramey Wilson, MD, MPH, MA
Shakir Jawad, MD
David Welling, MD

Global Health 2 (GH2)

Brad Boetig, MD, MPH, MA (course director)
Stephen Waller, MD
Thomas Cullison, MD
Scott Lyons, Esq.
Bernard Nahlen, MD, MPH
Schuyler Geller, MD
Jean Jacques Kayembe, MD
Rahul M. Jindal, MD, PhD, MBA
John Gilstad, MD
Stephanie Petzing, PhD
Nathaniel Reynolds, PhD
Dale Smith, PhD

Global Health Engagement (GHE)

Scott Zuerlein, PhD (course director)
Josh Kumpf, MA (course director)
Shakir Jawad, MD
Jim Fike, MD, MPH
Charles Beadling, MD
Kevin Riley, PhD
Nicole Chevalier, DVM, MPH, DACVPM
Kristina McElroy, DVM, MPH, DACVPM
Sayed Shinwari, MD, MPH
James (Jamie) Reeves, MD
Tammy Servies, MD, MPH
Brad Boetig, MD, MPH, MA

Global Health and Development (GHD)

Brad Boetig, MD, MPH, MA (course director)
Jean Jacques Kayembe, MD (co-course director)
Nina Munk
Dale C. Smith, Ph.D.
Sophal Ear, Ph.D.
Stephen Waller, MD

Comparative International Health Systems (CHS)

Tracey Koehlmoos, Ph.D., M.H.A. (course director)

Global Mental Health (GMH)

Lyndsay Baines, PhD (course director)

Health Context Analysis (HCA)

Sayed Shinwari, MD, MPH (course director)

Medical Anthropology (MDA)

Edwin Burkett, MD, MBA (course director)

Program Admission Requirements and Procedures

Students interested in taking graduate coursework in global health via distance-learning at USU must have successfully earned a bachelor's degree from an accredited institution, and the transcript(s) documenting this degree and coursework must be forwarded to the Committee on Admissions along with a short bio, curriculum vitae (CV) and USU online application. The online application and other information related to application dates can be found on the Program website, <https://www.usuhs.edu/pmb/gh-distance-learning>

Upon submission of the above materials, the Committee will evaluate candidates on their fitness for graduate coursework in global health at USU. The Committee will render a decision of either *accept*, *decline*, *defer*, or *request more information*. Candidates will be notified of this decision via email using the address they provided on the web-based USU application.

The Program accepts applications on a "rolling" admissions basis, so interested students should apply early. New cohorts begin the third week of August each year, in sync with the University's Fall term for in-residence students. Students may email globalhealth@usuhs.edu with any admissions-related questions.

As of 2018, the Distance Learning Program is still only accepting and enrolling students who are in the U.S. military active-duty or Reserves, Guard, or U.S. Public Health Service Commissioned Corps.

CONOPS for GH1 and GH2 Courses

“CONOPS” is DoD-speak for “Concept of Operations,” or the goals, objectives, strategies, tactics, policies, activities, responsibilities and processes related to an operation. Or if you prefer, in plain English, the following is a bunch of introductory information that explains how the GH1 and GH2 courses will be run. GH1 and GH2 are the first two courses in the Certificate Program.

Each course is divided into “modules” which are made up of approximately one week’s worth of material. They are called modules instead of lectures because each module will often contain several lectures, sometimes an interview or panel discussion, reading material, etc., all related to that module’s topic. Most often we will have one module per week, but sometimes there will be two or three smaller modules (“mini- modules” if you will) that are all completed in the same week, but that is rarer.

Students are expected to go through the module (from top-to-bottom) each week on his or her own *prior* to joining the scheduled weekly VTC (video teleconference) session.

Often there will be “thought-provoking questions” raised during the lectures or in the text, and these will be topics for conversation in the “forums” or discussion-board section of the course site on Sakai. Students are not “absolutely required” to post something in these discussion boards “every” week, but they are highly-encouraged to do so, and to reply by posting anytime they have a thought or perspective to share, or anytime they have a question that faculty or another student could answer. There is no hard rule about how much or how little students are required to post on the discussion boards, but they will be taken into consideration when calculating the portion of the grade that is represented by “class participation.”

Students *are* required to take the online quiz that is posted each week *prior* to joining the VTC sessions. The short quiz will be Sakai-based, approximately five minutes or less, usually always multiple choice, closed-book, and does count toward course grades. The quizzes should be low-stress, however, and will often draw heavily (although not exclusively) from the material prompted in the “study guide,” so it is to your advantage to review that guide prior to attempting each quiz. See the Program’s *Policy on Note-Sharing and Examination Integrity*.

After reviewing the material in the module, posting or at least reading other’s comments on the discussion board, and taking the quiz posted for that week, students and faculty will meet on VTC for seminar-style discussion on the topic.

There is a final exam at the end of the GH1 course. The final is Sakai-based, closed book, approximately 45 minutes in length, and does require that students have a proctor (as specified in the packet of policies signed by students at the beginning of the course).

The final exam is completed sometime during the one-week period specified on the syllabus when the student is able to arrange a time with his or her proctor. The timed exam is automatically submitted on Sakai upon completion. Students who have done well on the quizzes throughout the course and have generally understood the material in each module will not have difficulty passing the final exam.

There is a short paper requirement which varies slightly between the GH1 and GH2 courses. See the “paper” section of each course page for more information. Keep in mind, however, that this paper is not a master’s thesis; rather, it should be thought of as an enjoyable opportunity for you to get credit doing a deeper exploration of a subtopic of interest to you. Students should put some effort into it, but it should not take an inordinate amount of time or become something that is a lingering burden.

Lastly, note that the GH1 course (and most other courses) begin with the first VTC session scheduled as an “introductory” session which has three purposes: for students to meet each other and faculty, to have an opportunity to ask questions, and to give everyone a chance to work out any bugs with their headsets before beginning the next session with a quiz. Please take note of the dates on the syllabus which specify when the first quiz will begin.

Although this CONOPs may seem like a lot of information all at once, rest assured that this information fully covers you for the first two courses *and*, in addition, most of the other courses in the GH Certificate Program will follow similar procedures.

Getting Started: Sakai

Upon being accepted to the Program, you will need to work through the following steps prior to the start of the first course:

1. The first thing one needs to do is to obtain a Sakai account with username and password if you don't already have one.

Instructions will be sent to students on how to obtain Sakai accounts upon acceptance to the Program. If you have not received instructions or need help, email Mr. Guy (james.guy@usuhs.edu) for assistance.

If you already have a Sakai account, then you need to email Mr. Guy (james.guy@usuhs.edu) to inform us of your Sakai username so that we can add you to the appropriate course site in Sakai.

If you have technical difficulty creating an account, or you can't remember the username or password of your old account, please contact sakaihelp@usuhs.edu for assistance.

2. Once you have a Sakai username and password, watch [this video here](#) to learn how to navigate to Sakai, find the first course site, and get started!
3. Navigate to the "forums" section of the GH1 Course and post an introduction of yourself to your classmates.
4. Browse the site to familiarize yourself with Sakai and its functions.

Getting Started: VTC (Video-Teleconference) Sessions

General Information:

All the VTC (video-teleconference) sessions occur on Adobe Connect. Adobe Connect is not perfect, but it is the best available. Note that this Program's Adobe Connect subscription is "not" the same as "DCO" (the DoD's prior attempt at running Adobe's software on DoD servers) which was almost universally disliked. This Program uses an account with Adobe such that the sessions are hosted on Adobe's servers to maximize the quality of the experience.

No matter what VTC platform is used, however, the biggest determinant of the quality of the experience is the amount of conscientious effort and attention-to-detail that the participants make in preparation for each session. All participants need to acquire the proper equipment and make concerted effort to have their equipment properly setup and tuned each week. See the following tutorials for an overview of how to get started in Adobe Connect.

Getting Started in Adobe Connect Video Tutorial (Normal Version)

Getting Started in Adobe Connect – very abridged version

Some general principles to always keep in mind:

- You will need a headset. This is not optional. You can use any brand you want, but please get one that is designed specifically for VTC. Most program faculty use the Logitech H540, available on Amazon and elsewhere for about \$30.
- You should really, really try to not use WIFI. WIFI was never intended to be used for VTC. Ethernet cables are very inexpensive and easy to plug into your router and computer. If your computer is not near your router, it's easy and cheap enough to obtain a long (100-feet or more) Ethernet cable to use during the VTC session, and you can put it away when not in use.
- Even with proper equipment, getting your computer, headset, and software properly set for the VTC sessions will often require some effort and attention to details. Please seek help from Program support (globalhealth@usuhs.edu) with questions and take advantage of the sessions that are offered specifically to do equipment and "comm checks." In addition, faculty will try to log in to all sessions about 15 minutes early to allow students to do last-minute equipment checks and adjustments. Please do not show up to class right at the start time still requiring assistance.
- Always remember the number-one rule of computers: if it's not working and you can't figure out why, try turning it off and turning it back on again. You will be amazed how often the most frustrating problems with Adobe Connect self-resolve if you exit the program, close your browser and then re-open the program. Even more problems self-resolve if you reboot your computer.
- See the next section, "Setting Up a USB Headset" if you prefer written instructions instead of video tutorials.

Setting Up a USB Headset:

1. Plug headset into the computer's USB port.

If you're having trouble getting your computer to recognize the headset, try plugging the headset in when the computer is off; then turn on the computer. Or, plug your headset in, and then fully reboot your computer.

2. Test your headset's sound output by playing a video on Youtube or elsewhere and verify that you can hear the sound.

- a. If you don't hear any sound from your headset, right-click (not left-click!) on the speaker icon in the toolbar on the very bottom right of your Windows screen.

- i. Select "Playback Devices"

1. If you don't see anything, then right-click in the whitespace and check "show disabled devices."
2. Find your headset in the list of devices. If you don't see your headset, then your computer is not recognizing your headset. You may have a bad headset, a faulty computer (bad USB port?), or you might be missing a necessary driver. Or you might be working on a government computer that is blocking USB port access. Seek local tech support if this is the case.
3. If you see your headset listed among the devices (but you don't hear any sound when you play Youtube videos or music or anything else), then right-click on the headset in the list of playback devices and make sure to select "enable." Also select "set as default communication device." That should do it.
4. You may also want to right-click to disable all other speakers, headphones, and other devices listed under "playback," to ensure that the computer (and Adobe Connect) defaults exclusively to your headset for all sound output.

3. Now let's setup and test your headset's microphone.

- a. First thing to do is to enable the headset's microphone and *disable all other microphones* (this latter part is very important).
- b. Right-click on the same sound icon in the toolbar at the bottom right of your Window's desktop. This time, select "Recording Devices."
- c. Find your headset among the options listed. If you don't see your headset, try right-clicking in the whitespace and check "show disabled devices."
- d. Speak into the headset and confirm that you have green sound bars rising as you speak. This verifies that the computer is receiving input from your microphone. If this is not happening for you, then right-click on your microphone (in the list) and select

“enable,” and best to also select “set as default communication device” if that option is available.

- e. Next, “disable” all other microphone options. This is very helpful to ensure that you don’t also have an inferior microphone (i.e. the native microphone on your laptop) being used by Adobe Connect to pick up sound. “Enable” your headset’s microphone in the list of recording devices, and “disable” all other options.
- f. Test your headset’s microphone by going to [Online Voice Recorder, linked here](#).
- g. If you can make a successful recording on that site above, *and* the sound quality is good, then you are done with setting up your headset. Congrats!
If you are unable to make a recording on that site, or if you have poor sound quality, then you need to diagnose and fix these troubles *before* attempting to work with Adobe Connect. Adobe Connect will not fix any problems native to your headset or your computer; it will only complicate them. This might be the time to try the same steps above with a different headset and/or a different computer.

Logging into the Adobe Connect Session:

*** Only begin this section if you have already successfully set up your USB headset outside of Adobe Connect, as outlined in the preceding section!*

1. Locate the link to the VTC session. The link may have been emailed to you, but if not, ***the VTC link for all courses can be found in Sakai under the Syllabus Tab for that course.***
2. When Adobe Connect opens, enable your microphone and webcam by clicking on the icons across the top. They should toggle “green.”
3. Use the drop-down menu to the right of your microphone icon to adjust the volume of your microphone to approximately 35%.
4. If you are having any difficulties at all, [see this video tutorial](#).

Thank you for taking the time and making the effort to do what is necessary to make the VTC session the best it can be. This is important to ensure a good experience not just for you, but also all your classmates.

Course Policies for GH1 and GH2

Policy on Attendance and Class Participation

Graduate education involves learning not just from lectures and reading, but also from each other. The collective breadth and depth of experience of the student body is something that distinguishes top-quality graduate education from the undergraduate experience and other learning environments. The daily interaction between mid-career professionals at USU, both inside and outside of structured classes, is a valuable part of the graduate educational experience. As we begin to offer graduate education via distance learning we are attempting to replicate that value and experience as much as possible. In the GH1 and GH2 courses, the Sakai discussion boards and the live interaction that students have on weekly VTC sessions are the tools used to attempt to achieve that replication, as much as possible, for students in the distance environment.

Replication of that environment using Sakai and VTC sessions absolutely requires that a critical mass of students actively participate in these forums. When students participate in these forums they not only benefit individually, but their participation is also important to the educational experience of their classmates. Student participation in the discussion boards and live VTC sessions is, therefore, required.

There is at least one other reason why participation in the discussion boards and VTC sessions is critical: graduate education is supposed to push and challenge students to question the very foundation of their current beliefs. Some of the material in the GH1 course, and particularly the GH2 course, is designed to not just present facts and figures but to present alternative ideas that are outside the status quo, or even what might be considered outside the “norm.” The discussion boards and VTC sessions are a means by which faculty can then assess how students are reacting to these non-traditional perspectives and, if necessary, help them reach a new understanding that is often unique to that student – i.e. different from the perspective they had before starting the class, but one also not necessarily in-line with the perspectives taught in class. In addition to faculty helping students reach this new understanding, other students often unknowingly play a role in facilitating this educational process. This is, therefore, another reason why student participation in the discussion boards and VTC is required.

Absolutely requiring all students to attend *every* VTC session, however, is unrealistic when life gets in the way. Therefore, attendance and participation policies need to be designed to maximize flexibility for students who still live in the “real world,” without appreciably compromising the quality or rigor of the graduate educational experience. A best attempt at striking that fine balance is presented below.

Attendance Policy:

- Participation in all VTC sessions is required. There is not an “option” to skip and “just post instead.”

- If life absolutely requires a student to miss a VTC session, see section below on “how to make up class participation points.”

Grading Rubric for “Class Participation”:

Weekly participation is worth a certain number of course points per week (the exact amount is listed under the “grading” tab on the course page. Students can earn these points by either posting on the discussion board, speaking during the VTC sessions, or some combination of the two.

We decline to arbitrarily require students to post every week by a certain day and then respond to somebody else’s post every week, as is the requirement in many other distance-learning courses at other Universities. In our experience that tends to create an inordinate amount of inane reading on the discussion boards that is of lower quality and educational value. In contrast, points will be awarded for class participation based on the following rubric:

- Each week as quiz grades are being entered, a grade for class participation will also be generated.
- If the student posted in a substantive way on the discussion board then full credit is given.
- If the student made a substantive contribution to the live VTC session then full credit is given.
- If the student made no contribution to the VTC session *nor* any substantive contribution to the discussion board (neither a post nor a thoughtful reply) then some other things are considered:
 - Did the student post a particularly substantive, informative, or high-quality contribution in the week or two prior? I.e. is this someone who is a high-participant but just didn’t have much to say this week? If that’s the case, the student might likely still receive full credit for this week’s class participation points, too. In other words, one does not absolutely *have* to post or say something *every* week.
 - Was there adequate opportunity for students to contribute in the live VTC session this particular week? Sometimes, as occurs in in-residence courses, too, there simply isn’t time for everyone to have an opportunity to converse, particularly if a guest SME monopolizes a lot of time. If that was the case in a particular week, that will be taken into consideration.
- If a student made no substantive contribution on the discussion board and did not take advantage of opportunities to participate in the live VTC, and if said student is not known to otherwise be a frequent contributor, then said student will notice a gradual decrease in the number of points awarded each week for participation.

The above system is more subjective and more complex than simply giving students a “check” for posting something every week and another “check” for replying to someone every week, but our experience has shown that this method leads to the ideal balance that produces a good amount of quality, substantive participation while also minimizing the “filler” (low-value posts that are obviously just written to take up space and meet a requirement).

How to make up class participation points

If someone absolutely had to miss a session and that student has a burning desire to still earn their “class participation” points even though they were not in class and did not participate, then students can write a two-page paper to make up for missed points.

Students will earn full credit after two pages (double spaced); approximately one page worth of writing would earn half credit. Papers can be emailed to the course director.

Note that this does not need to be a research paper or any kind of formal writing. Rather, students can write down their thoughts/commentary/questions about the topic they missed – these might be the things they otherwise might have said in the discussion or seminar portion of the course.

While students can email this paper/writing to the course director, if a student knows in advance that they are going to have to miss a session, it might be better if the student posts this writing on the discussion board before the class session so that other students benefit from that student’s participation. This writing can take any form, to include commentary, analysis or any other reflection on the subject matter in the module. Students may also suggest outside materials that relate to the module topic and post and then write about them.

If faced with writer’s block, one option is to think of what aspect of the topic was not covered but possibly should be. Find some information on that (do a Google or PubMed search) and write on that subtopic. Be sure to give some of your own thoughts and commentary on the subtopic too. Another option is to give thoughtful responses to several student postings, and start a few postings of your own, such that the sum of your contributions that week would total about two pages of writing (double spaced) if they were to be added together. Whenever possible you should do this forum participation before the scheduled class session, as the number of students who are going to read what you write after the class session has already passed is pretty minimal. That’s not to say you can’t post after the session, but it’s less ideal.

Other Policies and Memoranda

The three documents:

- Policy on Academic Environment
- Policy on Content for all USU Global Health Courses
- Policy on Note-Sharing and Examination Integrity

need to be printed, signed, scanned and uploaded prior to beginning the GH1 course. They can all be uploaded within the “Tests and Quizzes” tab of the GH1 Sakai Course Site. See the video tutorial on “Getting started in Sakai” for more information.

The following two documents should be printed/signed/scanned and uploaded at the end of the course when you take the final exam.

- Exam Proctor Acknowledgement Form
- Exam Proctor Validation Form



Policy on the Academic Environment in USU Global Health Courses

Memo to: Students, faculty, and all who participate in global health courses at USU

This memo explains the distinction between military training and university-based graduate education.

Military training typically involves instructors imparting knowledge to students in a very structured, top-down fashion. Lectures in military training courses typically follow the “tell the student what you are going to tell them; tell it to them; then tell them what you just told them” briefing model. There are typically opportunities to ask questions, but all questions are expected to be of the sort where the student is seeking clarification or additional guidance from the instructor. If there is any dialogue among the students in the course, rank is ever-present and there is an expectation that junior personnel will defer to the opinions and perspectives of senior-ranking personnel on all matters. Opportunities to challenge the status quo are generally not present; when they are, this type of dialogue is usually very limited.

University-based education, particularly at the graduate level, is very different. While all students and faculty are expected to be respectful of each other always, military rank does not automatically elevate one’s opinion or perspective relative to another. Global health courses at USU are an academic meritocracy, where the relative value of one’s perspective or opinion is based solely upon the strength, coherence, and validity of one’s argument. Students of younger age and/or lower rank should feel empowered to ask questions and provide opinions in their participation in our live VTC conversations, our discussion boards, and elsewhere.

It should also be mentioned that the principles of this meritocracy extend even to the nature of the student-professor interaction. Students should *not* feel that they must agree with the positions or perspectives presented by any professors in the program; quite the opposite, students are *actively encouraged* to question or challenge concepts, ideas, positions, conclusions or any other aspect of the content being taught.

And finally, while positions, perspectives, and opinion that are based on experience, evidence, or persuasive argument are valued greatly, students should also voice thoughts and propose ideas that are less-refined or in the “brainstorming” phase of development, without fear of ridicule or attribution.

This policy outlines an academic culture which is very different from traditional military culture. This cultural shift is *critical* to the provision of an academic environment that fosters maximal growth and intellectual development of all participants.

“I understand and agree to all of the above.”*

 (Printed name and date)

 (Student signature)

* I do see the irony here. We just established an explicit policy that you don’t have to agree with what is being said, and now you are required to sign that you agree with what was just said.



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4301 JONES BRIDGE ROAD
BETHESDA, MARYLAND 20814-4712
WWW.USUHS.MIL



Policy on Content for all USU Global Health In-Residence and Distance Learning Courses

Memo to: Students, faculty, and all who are granted access to Global Health Division online materials

The study of global health at the graduate level requires frequent critical review and analysis of policies, programs, missions, and other academic work. This critical analysis and discussion – essential to the learning process – is appropriate within the context of the academic environment at USU. That academic environment (often referred to as an “academic umbrella”) now extends to various locations around the world with the launch of our distance learning courses.

Students are encouraged to take full advantage of this “umbrella” in which they should feel completely free to express opinions and ask questions that might otherwise be discouraged in more traditional settings. Likewise, the instructors and professors within the global health courses will utilize the liberties afforded by this unique environment to challenge students to question themselves and to think in new ways. At times, professors may even make impassioned, descriptive arguments in favor of an idea or position in which they themselves do not agree; this is done both for the benefit of students and the advancement of scholarship.

Fostering and protecting this unique environment requires that several rules be followed in the absolute. All course materials to include lectures, discussion board postings, live conversations and unpublished text are non-attributable (Chatham House rule). Students *are* free, of course, to quote and cite any materials used within the course that are already published elsewhere. If a student (or other faculty member) would like to quote, paraphrase, or otherwise relay content to anyone not registered in the course, they are highly encouraged to do so (as this can greatly further learning and understanding) but that student or faculty member absolutely must check first with the author of the comment or text and must also notify the course director. First violation of this policy will be grounds for dismissal from the course and the program.

In addition, and perhaps more importantly, students (and faculty) are absolutely prohibited from attempting to download, screen capture, or otherwise reproduce and distribute course materials in any way. It should go without saying, too, that all opinions expressed within the context of all courses at USU are not necessarily representative of the University, the Department of Defense, the Services, or the US Government.

Adherence to these simple but firm rules is necessary to preserve the academic environment that distinguishes university learning from job training venues. We are confident that you will both enjoy and greatly benefit from the opportunity to learn in this environment, and we greatly appreciate your cooperation in helping to preserve it.

If you have any questions about this policy, please email globalhealth@usuhs.edu. Otherwise, please sign the acknowledgement on the following page and submit to the course director.

(sign next page)

Policy on Content for all USU Global Health In-Residence and Distance Learning Courses As a student

enrolled in coursework at USU, I hereby agree that:

- I will not attempt to download, screen-capture, or otherwise copy any of the course materials.
- I will not allow anyone else to use my username and password to access course materials.
- I understand that all of the materials, to include materials within the modules and material posted by individuals in the discussion boards, is non-attributional without explicit permission from the course director. If I want to cite something from the course for use in a paper or project (as many students have done in the past), I will email the course director for clearance.

“I understand and agree to all of the above.”

(Printed name and date)

(Student signature)



Policy on Note-sharing and Examination Integrity

Memo to: Students, faculty, and all who are granted access to Global Health Division online materials.

Providing fair and effective quizzes and tests for courses that are offered up to four times per year is a big but necessary challenge. The questions on quizzes and tests will change over time, but it would be very difficult to change them all four times per year. Therefore, students who take this course are asked to be even more conscientious about test-question integrity than they might normally be for a course that is only given once per year.

In addition, “study guides” are offered by professors in the Global Health 1 and 2 (and in select other courses) to highlight which concepts are fundamental to an understanding of this field. To truly benefit from the guides, however, students must actively seek out answers to the questions as they go through each course. Simply memorizing another’s notes will not afford the student a breadth and depth of understanding that is expected of someone who has completed graduate coursework in this field. Students are therefore *prohibited from sharing notes they might take that are based on the study guides with any other students who have not equally participated in the generation of answers to study guide questions*. It is sometimes beneficial for students to create notes together (or in small groups if desired); therefore, students *are* permitted to share notes with classmates who have equally-participated in their creation.

In accordance with the above two concerns, students are required to agree to the following code of conduct to participate in GH1 and GH2:

As a student taking the Global Health 1 or 2 course, I hereby agree that:

- If I create notes based on a study guide, I will not share my notes with any classmate who does not also equally contribute to their creation.
- If I create notes based on the study guide, I will not share my notes with anyone in any other global health class, now or in the future.
- I will not give others (in this class or in future classes) guidance on tests or quizzes I have already taken.
- I will not accept guidance from others who have already taken tests or quizzes in a course that I am taking or have yet to take.

“I understand and agree to all of the above.”

(Printed name and date)

(Student signature)



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USU Global Health Distance Learning Program - Exam Proctor Acknowledgement Form

The Uniformed Services University (USU) is now providing education in global health via distance- learning to DoD students around the world. It is a top priority at USU to ensure that the quality and rigor of this education is as high via distance-learning as it is for our in-residence students. We also are an accredited institution that must meet certain standards regarding academic processes, one of which involves the integrity of the examination process.

In accordance with these requirements, all students taking courses via distance-learning (DL) at USU must, at the beginning of each course, name a proctor who agrees to supervise the timed examination at the end of certain courses. The proctor should ideally be either the student’s supervisor, or someone named by the supervisor to perform this brief task. The proctor may not be someone that the student supervises.

The specific duties for being a proctor will vary slightly with each different course, but in general (and specifically for the first two courses in the Program, GH1 and GH2), the duties of the proctor will be:

1. Print and sign the form below acknowledging willingness to serve as this student’s proctor.
2. At the end of the course (in approximately 11 weeks), arrange for one block of time at least 45 minutes in length when proctor can observe the student taking an online examination.
3. Ensure that the student took the examination under testing conditions without any assistance from any other individuals, notes, other browser windows, or any other means of assistance.
4. Sign the proctor validation form (will be provided at the time of the examination) acknowledging the above conditions were met and no problems occurred.

We at USU fully recognize that our student population consists of military personnel who have demonstrated high integrity throughout their careers, and therefore this process may seem unnecessary or even insulting to some. We ask that you understand our situation. We must meet the standards of civilian accrediting bodies who require a higher level of “integrity assurance” that might otherwise be necessary for our military population. We must follow this process to provide students with academic credit for their work be able to provide the highest assurance to anyone about the integrity of our examination and educational processes.

If you agree to serve as this student’s proctor, please sign below:

(Print name)

(sign and date)

“As a student taking a DL course administered from USU, I agree to abide by all of the conditions above.”

(Print name)

(sign and date)

Faculty Bios

Scott Zuerlein, PhD, MHA, FACHE

Dr. Zuerlein is the Deputy Director for Training and Professional Development at USU's Center for Global Health Engagement (CGHE). He brings 22 years of invaluable USAF Medical Service Corps experience to this Program having served two tours as an Air Force International Health Specialist and Team Chief at CENTCOM during the peaks of the Afghanistan and Iraq conflicts (2005-2011). In his current capacity, Dr. Zuerlein guides and directs program activities to develop and conduct training and professional development activities designed to equip military health system professionals to plan and conduct global health engagement activities. His specific interests with respect to global health and global health engagement are in the strategic level systems and relationships that enable and guide the conduct of tactical level engagement activities. Dr. Zuerlein also supports Center efforts by offering a range of knowledge and experience in the areas of health services administration, health policy, public health, and global health systems engagement and development. Dr. Zuerlein is the director of the GHE (Global Health Engagement) course.



Stephen G. Waller, MD

Dr. Waller is a Professor in the Division of Global Health, Department of Preventive Medicine, and in the Department of Surgery, Uniformed Services University of Health Sciences, Bethesda, Maryland, USA. He is a USU School of Medicine graduate, class of 1983. His Air Force career as an optometrist, flight surgeon, commander, medical planner, and ophthalmologist spanned over 30 years. He has performed and taught eye surgery in 16 countries and has given over 60 invited medical lectures on all six continents. He has authored over 100 publications, including two books and 12 book chapters. His current global health projects include the establishment of eye banks in Tibet and Guyana and capacity building and development in Vietnam and Burma, and consulting for four other international non-profit organizations. Dr. Waller co-directs the GH1 course, and consults on every course in the Program.



Jean Jacques Kayembe, MD

Dr. Kayembe is a physician and surgeon from the Democratic Republic of the Congo. He was Medical Director of one of the largest hospitals in the country, Monoke Hospital in Kinshasa, from 2010-2012 which treated over 12,300 patients per year, including 3,650 surgeries on a patient population of whom 2,132 had HIV and 789 were malnourished children. He then served as Medical Coordinator of Institut European de Cooperation et de Developpement, Pointe-Noire (Republic of Congo), where he led the evaluation and strengthening of health structures and



programs in the Democratic Republic of Congo, the Republic of Congo, and the Republic of Gabon. As Coordinator he managed and initiated evaluations and audits of 10 health centers, managed training of physicians and staff to include nurses and midwives, designed training modules and developed tools for monitoring and evaluation. Dr. Kayembe's many accomplishments include creating and implementing four outpatient therapeutic nutrition units that helped support 13,436 malnourished children between February 2011 and 2012, and he managed the training of 90 doctors, 145 nurses, and 120 community health workers in primary care with an emphasis on HIV and TB management, pregnancy care, and hospital financial management. He also worked with Medecins d'Afrique to support female victims of sexual assault. Fluent in four languages, Dr. Kayembe was able to accomplish all of this in one of the most violent and resource-poor countries on earth. Dr. Kayembe leads two modules in the GH2 course and serves as co-course director of the GHD course.

Rahul M. Jindal, MD, PhD, MBA



Dr. Jindal's surgical career has been a combination of clinical transplantation, academic productivity and teaching, with a particular interest in global health and minority issues. Dr. Jindal's academic interests are wide ranging including pancreatic islet transplantation, psychological aspects of dialysis and kidney transplantation, increasing minority rates of transplantation, analysis of national dialysis and kidney transplant data bases, and policy issues affecting global health. Author of "The struggle for life: A psychological perspective of kidney disease and transplantation" which has become a standard textbook for transplant and dialysis programs around the world. Dr. Jindal is the author or co-author of over 180 manuscripts in peer-reviewed medical journals. In 2008, Jindal and his colleagues performed the first living kidney transplant in Guyana as well as setup the first comprehensive renal replacement therapy. This was followed by establishment of a corneal transplantation program in Guyana. Dr Jindal and his colleagues have now carried out 26 missions to Guyana averaging 3 a year. Dr Jindal also has several teaching and public health missions in India. Dr. Jindal received the Leadership Award by the "International Leadership Foundation", Washington, DC, 2013. He also received the Outstanding American by choice award by the United States Citizenship and Immigration Services, 2013. The Governor of Maryland appointed Dr Jindal as Commissioner, Governor's Office on Service and Volunteerism, Maryland (2013). Dr. Jindal was also appointed as Commissioner to the Human Rights Commission, Montgomery County, Maryland (2014). Dr. Jindal was awarded the Fulbright-Nehru Distinguished Chair to carry out research and teaching in India (2015-6) and is the recipient of the Ellis Island Medal of Honor for 2015. During the Fulbright award, he established medical student exchanges between USU and several institutions in India. Dr. Jindal teaches in both the GH1 and GH2 courses.

Thomas R. Cullison, RADM MC USN (Ret.)

Rear Admiral (Ret) Thomas R. Cullison has been actively involved in health policy and international health engagement issues since retiring in 2010 following a 38-year Navy career that culminated in service as Deputy Surgeon General. Prior to joining CGHE, he was Deputy Surgeon General of the Navy and Deputy Chief Bureau of Medicine and Surgery. He began as a surface warfare officer in USS Charles R. Ware (DD 865), participated in riverine salvage operations in Vietnam and served as a saturation diving officer. Dr. Cullison received his doctor of medicine degree in 1979 from Indiana University School of Medicine. Following a surgical internship and orthopedic



surgery residency at Naval Medical Center, San Diego his clinical assignments included Naval Hospital, Camp Pendleton as Chief of Orthopedic Surgery and Naval Medical Center, San Diego as Assistant Chairman of Orthopedic Surgery and Director, Sports Medicine Service. During this period he deployed as Leader of Surgical Team Seven and Commander Amphibious Task Force Surgeon.

Rear Admiral Cullison's Navy Medicine leadership career began in San Diego as Surgeon General Specialty Leader for Orthopedic Surgery and Director of Surgical Services. He later served as Deputy Commander Naval Medical Center Portsmouth, Commanding Officer Naval Hospital Camp Lejeune, Fleet Surgeon U.S. Pacific Fleet, Command Surgeon U.S. Pacific Command, Medical Officer of the Marine Corps, Commander Naval Medical Center Portsmouth VA and Commander Navy Medicine East. His personal awards include Navy Distinguished Service Medal, Legion of Merit with three gold stars, Bronze Star with Combat V, Defense Meritorious Service Medal with Oak Leaf Cluster, Meritorious Service Medal, Navy Commendation Medal, and Combat Action Ribbon.

His professional activities have included: Adjunct Assistant Professor of Orthopedic Surgery at the Uniformed Services University of Health Sciences (USU), Clinical Assistant Professor of the University of California San Diego School of Medicine, Diplomate American College of Healthcare Executives, Board of Councilors of the American Academy of Orthopaedic Surgeons, Board of Directors for the Society of Military Orthopaedic Surgeons and Fellow American Orthopaedic Association. RADM Cullison lectures and owns an entire module within the GH2 course.

Sayed Alam Shinwari, MD, MPH, CSA

Dr. Shinwari is course director of the Health Context Analysis (HCA) course. He works as an International Health Systems Advisor for Training & Professional Development Division at Center for Global Health Engagement. Dr. Shinwari is serving as a Global Health Engagement consultant specializing in the reconstruction and stabilization of healthcare systems in post-conflict environments.

Dr. Shinwari is a graduate of Kabul Medical University (KMU) Kabul, Afghanistan (2006) and received a Masters of Public Health (MPH) in Global Health from George Washington University (2011). He started his career working as a general practitioner in Kabul, before joining various U.S. Army-sponsored medical trainings and observation programs in hospitals located in Afghanistan, India, and the US. Since the onset of Operation Enduring Freedom, Dr. Shinwari has worked as a public health coordinator for the U.S. Army (2003-2007). He coordinated and conducted various public health projects, serving as a liaison between the Afghan National Army/National Police, the Afghan public health sector, the Afghan population, the International Security Assistance Forces (ISAF), NATO, International Organizations, NGOs, and U.S. Army officials. Dr. Shinwari has been serving as the President of Afghan Medical Professionals Associations of America since 2015. Dr. Shinwari was born in Afghanistan's Nangarhar province and was raised in Kabul. He speaks Pashto (Native), Dari (Native), Farsi, Urdu and English.



Col Ramey Wilson, MD MPH

Col Wilson brings both academic chops and also a whole lot of operational experience to his teaching within the GH1 course. Currently serving overseas as the Command SG for Special Operations Command Africa, Col Wilson previously served as the Command SG 1st Special Forces Group (Airborne); Command Surgeon Special Operations Joint Task Force Afghanistan/NATO; Battalion Surgeon, 4th Battalion, 3rd Special Forces Group (Airborne); and Battalion Surgeon, 2-508 Parachute Infantry Regiment, 82nd Airborne Division, Afghanistan. Col Wilson is a West Point graduate with an MD and MPH from USU, and completed both residency and academic fellowship in internal medicine. Col Wilson has authored a book chapter on the roles and relationships between NGOs and the military in conflict zones and has 16 articles published in the peer-reviewed literature.



Shakir Jawad, MD



Dr. Jawad joined the Uniformed Services University for the Health Sciences in October 2006 as a faculty member and Assistant Professor at the Military and Emergency Medicine Department. During that time, he also served as a senior technical Adviser to Project Hope. In 2007, he was extensively involved in developing the International Health Division at the Office of the Assistant Secretary of Defense for Health Affairs where his primary role was to develop DoD policy on Global Health Engagements through considering the partner nation's perspective. Dr. Jawad has served as senior adviser and subject matter expert in assessing training requirements and curriculum development and testing for the Defense Medical Language Initiative (DMLI) pilot program. Currently, Dr. Jawad is a senior advisor on Global Health Engagement, providing his subject matter expertise to the Defense Threat Reduction Agency/Cooperative Biological Engagement Program (DTRA/CBEP). Dr. Jawad is an Affiliate Professor and distinguished senior fellow at the Center for the Study of International Medical

Policies and Practices at George Mason University and is a member of the editorial board of the World Medical and Health Policy Journal.

Prior to arriving to the United States in August 2006, Dr. Jawad served as Director General for operations and technical affairs at the Iraqi Ministry of Health. He played a critical role in reconstructing and overseeing the medical component of the New Iraqi army. At great personal risk and sacrifice to himself and his family, Dr. Jawad proposed and led the Ministry of Health effort to rehire 18,000 health providers from the disbanded Iraqi Ministry of Defense. This was in coordination with the Coalition Provisional Authority's Health Team. His work with the coalition forces to resuscitate and stabilize the Iraqi national health system reduced the impact and damage caused by the invasion and saved thousands of lives. Before 2003, Dr. Jawad served with distinction for 26 years as a military medical officer in different units; his last rank was MG (sel) serving as the chair of the department of Orthopedic Surgery at Hammad Shihab Military teaching Hospital in Baghdad, Iraq. Dr. Jawad was born and raised in Baghdad, Iraq and graduated from Al Almustansiryah medical school in 1981; has a Master's Degree in Biomechanics of

stress fractures and a combined PhD/ Board certificate in Orthopedic Surgery. Dr. Jawad has combined experience of 40 years serving in and outside the United States. Dr. Jawad lectures in the GH1 and GHE courses.

Nina Munk, MS

Nina Munk, a contributing editor at Vanity Fair since 2001, is a journalist and author whose work has appeared in Vanity Fair, The New York Times Magazine, The New York Times, The New Yorker, and Fortune. Among other literary prizes, she has been awarded three Business Journalist of the Year Awards (including “most outstanding winner of all categories”) and three Front Page Awards. Her article about mismanagement at Harvard University was shortlisted for a Gerald Loeb Award and is included in *The Great Hangover: 21 Tales of the New Recession from the Pages of Vanity Fair*.



Nina’s newest book is *The Idealist: Jeffrey Sachs and the Quest to End Poverty*, the profound and moving story of what happens when the abstract theories of a brilliant, driven man meet the messy reality of human life. Deeply reported over a period of more than six years, *The Idealist* is the result of repeated journeys to sub-Saharan Africa where Nina not only sat in on Sachs's official meetings with heads-of-state, but also immersed herself in the lives of people in two isolated villages, Ruhiira, in southwest Uganda, and Dertu, on the arid border of Kenya and Somalia. Accepting the hospitality of camel herders and small-hold farmers, and witnessing their struggle to survive, Nina reveals clearly and empathetically the hurdles that lie on the path to ending global poverty.

The Idealist, nominated for the Lionel Gelber Prize and a finalist for the Governor General's Award and the National Business Book Award, has been widely praised. It has been named a Book of the Year by The Spectator, Forbes, and Bloomberg, among others. More at www.ninamunk.com.

The Idealist is required reading for all students in the Global Health and Development (GHD) course, and Nina joins USU students for seminar, Q&A and discussion.

Lidia S. Ilcus, MD, MPH



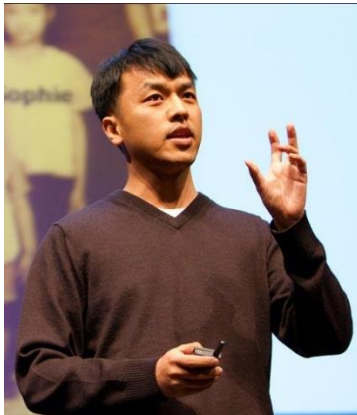
Dr. Lidia “Stana” Ilcus is a physician board-certified in internal medicine, critical care, aerospace and occupational medicine. Col Ilcus has deployed five times while serving as a flight surgeon in various locations around the world including with AFSOC (Air Force Special Operations Command) and as the Deputy Crew Surgeon for International Space Station and U.S. Space Shuttle Program missions; she has completed multiple command tours around the world including as OIC of 1st Special Operations Squadron; and she brings a most unique perspective to our global health curriculum having served as a field physician with Doctors Without Borders prior to joining the USAF. Col Ilcus lectures on U.S. military and NGO relations in the Global Health 1 (GH1) course.

Dale C. Smith, Ph.D.

Dr. Smith is Professor of Military Medicine & History at USU. He serves as Associate Chair, Military Medical History and Chair, MEM Committee on Appointments Promotion & Tenure in the Department of Military and Emergency Medicine. In 1979 he received his Ph.D. in the History of Medicine from the University of Minnesota under the direction of Professor Leonard G. Wilson. From that time until he moved to the Uniformed Services University in 1982, he was on the Faculty of the University of Minnesota. He is the author of numerous papers on medical history. His critical edition of *William Budd's Essay on the Causes of Fevers* was published by the Johns Hopkins University Press in 1984. His most recent book is a centennial history of the American Gastroenterological Association (1999). Dr. Smith is active within the historical profession, having served as chairman of the program committee (1984) of the American Association for the History of Medicine (AAHM), as a member of the NIH Special Study Section on the History of the Life Sciences on two occasions, as a member of the Council of the AAHM, as Associate Editor of the *Journal of the History of Medicine and Allied Sciences*, on the editorial board of the *Bulletin of the History of Medicine* and as the editor of the *AAHM NewsLetter*. In 1987 he received the Laurance D. Redway Award for Excellence in Medical Writing. He has been honored with the USU University Medal for his commitment to the academic life of the university and by the medical students with the honor of being named the Outstanding Civilian Educator in 2005. From 2006 until 2013 he served as the Senior Vice President of the USU. His professional interests include the history of medical education, the history of infectious diseases, the history of surgery, and the problems of patient evacuation in military operations. Dr. Smith lectures in the GH2 course and holds a seminar in the GHD course.



Sophal Ear, Ph.D.



Dr. Ear is a tenured Associate Professor of Diplomacy & World Affairs at Occidental College in Los Angeles where he teaches international political economy, international development, international security, Asian security, and senior comprehensives (theses). Previously, he taught comparative political economy, Asian political economy, and how to rebuild countries after wars at the U.S. Naval Postgraduate School and international development policy at the Maxwell School of Syracuse University. He has consulted for the World Bank, was Assistant Representative for the United Nations Development Programme in East Timor, served on the Board of the Macau Property Investment Fund and as an Advisor to Cambodia's first private equity fund Leopard Capital. An elected member of the Crescenta Valley Town Council and serving as its Corresponding Secretary, a TED Fellow, Fulbright Specialist, and Young Global Leader of the World Economic Forum, he serves on the Boards of Omnibus Trading Corporation, E2 Lighting USA, Inc., the Nathan Cummings Foundation, Refugees International, Partners for Development, the Center for Khmer Studies, the Southeast Asia Resource Action Center, the Southeast Asia Development Program, and the International Public Management Network, the latter two of which he serves as Treasurer. He is on the Editorial Boards of the *Journal of International Relations and Development* (Palgrave), the *International Public Management Journal* (Taylor & Francis), *Journal of Southeast Asian American Education & Advancement* (Purdue University), and *Politics and the Life Sciences* (Cambridge University Press). He is the author of *Aid Dependence in Cambodia: How Foreign*

Assistance Undermines Democracy and co-author of *The Hungry Dragon: How China's Resources Quest is Reshaping the World*. He wrote and narrated the award-winning documentary film "The End/Beginning: Cambodia" (47 minutes, 2011, [news blurb](#)) based on his 2009 TED Talk, *Escaping the Khmer Rouge*, and has appeared in four other documentaries. He is the Executive Producer of *In the Life of Music*, a powerful intergenerational tale that explores love, war, and a family's relationship to the song "Champa Battambang," made famous by Sinn Sisamouth, the King of Cambodian music, depicting the lives of people whose world is inevitably transformed by the emergence of the Khmer Rouge; and *Some of My Best Friends Are Kimchi*, a film that explores conceptions of authenticity, race, and privilege in both documentary film and foodie culture. In 2015 he was named a 40 Under 40 Inspiring Professor by NerdWallet and in 2016 won the Reverend Clementa C. Pinckney Achievement Award for Extraordinary Leadership in Public Service by the Public Policy & International Affairs (PPIA) Fellowship Program. A graduate of Princeton and Berkeley, he moved to the United States from France as a Cambodian refugee at the age of 10. Dr. Ear lectures and holds a seminar session in the Global Health and Development course.

Tracey Lynn Pérez Koehlmoos, Ph.D., M.H.A.

Dr. Koehlmoos is course director of the Comparative International Systems course. Dr. Koehlmoos joined the faculty of the Uniformed Services University in July 2015 to lead the development of a robust health services administration and policy research and graduate program in support of the military health system. Previously she served as the Special Assistant to the Assistant Commandant of the Marine Corps. As senior program liaison for community health she served as a senior representative of the Marine Corps on community health policy and research working groups at the interagency, Department of Defense and Department of the Navy levels. She made recommendations on complex issues requiring knowledge of administrative laws, policies, regulation, and precedent applicable to the administration of community health programs and gender integration. Further, she monitored research to test new and best practices to improve the lives of Marines, their families and the communities in which they serve.



Dr. Koehlmoos is a health systems and policy scientist who specializes in leading complex tasks, program development and capacity building across the spectrum of health systems building blocks. Prior to transitioning to domestic and defense healthcare, she lived and worked in Saudi Arabia, Pakistan, Nepal, Bangladesh and Indonesia. Previously Dr. Koehlmoos served as the head of the Health & Family Planning Systems Programme at ICDDR,B in Dhaka Bangladesh. There, she scaled up zinc for the treatment of childhood diarrhea; founded the Centre for Control of Chronic Diseases and created and led the Centre for Systematic Review, which focuses on health systems and policy issues in low- and middle-income countries and conducted capacity building in this methodology across South Asia.

An award-winning researcher and writer, she has more than 125 publications appearing in the *Lancet*, *PLoS Medicine*, the *Cochrane Library*, and *Health Policy* among others and a host of multi-media productions including television series and a documentary. She is an associate editor for the *Journal of Medical Case Reports* and serves on the Cochrane Library Oversight Committee. She blogs for the *British Medical Journal*. Her consultancies include the World Food Programme, the World Bank, the World Health Organization and the National Academies of Science, Institute of Medicine.

Dr. Koehlmoos holds a Bachelor of Arts *cum laude* from Davidson College and a Master of Health Administration and Doctorate of Philosophy in Public Health from the University of South Florida. She completed an administrative fellowship at Tampa General Hospital in Tampa, Florida.

A former Army Air Defense Artillery officer who earned the Army Commendation, Army Achievement and South West Asia Service medals, Dr. Koehlmoos post-Army awards include the Family Support Group Leader Europe Award, the Army Civilian Achievement Medal, the Department of the Navy Meritorious Civilian Service Medal, and the Honorable Order of Joan d'Arc. She is a graduate of the Joint Military Attaché School. She is the widow of Colonel Randall 'Moose' Koehlmoos, US Army, and mother of Robert (USMA 2016), Michael and David Koehlmoos.

Charles Beadling, MD

Dr. Charles W. Beadling is an Associate Professor in the Department of Military and Emergency Medicine. Previously, he was the Director, Center for Disaster and Humanitarian Assistance Medicine (CDHAM) which was the focal point of expertise for the Department of Defense in the evolving missions of Global Health Engagements. He serves as lead on several programs at the USUHS Center for Global Health Engagement. Dr. Beadling is a Fellow of the American Board of Family Medicine, holds the International Diploma in Humanitarian Assistance from Fordham University, and holds the Diploma in the Medical Care of Catastrophes from the Society of the Apothecaries of London, and has been appointed the Deputy Convener for the United States by the Society. He also serves as an Associate Editor for *Disaster Medicine and Public Health Preparedness*. Dr. Beadling lectures in the Global Health Engagement (GHE) course.



David Welling, MD



Dr. David Welling is a Professor of Surgery at USU and has a long-standing interest in global health. He speaks fluent French, conversational German, and some Spanish. He is Chairman of the International Relations Committee of the USU Department of Surgery and is heavily involved in sending medical students to countries such as Mexico, the Philippines, India, and (occasionally) France. He was on active duty in the US Air Force for 30 years, nine of which were spent serving in Germany. He also spent 2 1/2 years living in France, in service to his Church. One special interest has been his desire to improve humanitarian missions, as he believes that often these missions are ineffective, and at times even harmful, to the populations they are supposed to help. He firmly believes that global health is, or ought to be, a core competency of all students at the Uniformed Services University. Dr. Welling lectures in the Global Health 1 (GH1) course.

Tammy Servies, MD

Commander Servies is currently the Associate Program Director of the Public Health and General Preventive Medicine Residency at the Uniformed Services University of the Health Sciences (USU). As an Assistant Professor in the Department of Preventive Medicine and Biostatistics, she is the course



director for Field Epidemiology, Chronic Disease Epidemiology, and the residency journal club. She is also an instructor in several classes throughout USU to include the medical student field training exercise, Operation Bushmaster. Her global health experience includes planning and executing Pacific Partnership in four countries in 2014 and 2015 with follow-on reassessments in 2016. As an instructor for the Defense Institute for Medical Operations, she continues to teach preventive medicine and public health courses throughout the world. CDR Servies received her Bachelor of Arts in Biology from the University of Chicago in 1998, Doctorate of Medicine from USU in 2003, and her Master of Public Health from USU in 2013. Dr. Servies lectures in the GHE course.

Rachelle Paul-Kagiri, MD

Col Paul-Kagiri serves as Director of International Outreach for the Graduate Certificate Program. Although this Program began by serving only students from the U.S. Army, Navy, Air Force and Public Health Service, the U.S. Combatant Commands quickly noted the value that co-educational partnerships contribute to achieving strategic objectives related to security cooperation and humanitarian assistance. As the former Director of DIMO (Defense Institute of Medical Operations), Col Paul-Kagiri (aka “Col PK”) brings to this Program years of experience working international partnerships related to global health engagement. Dr. Paul-Kagiri is a board-certified emergency medicine physician, an assistant professor of global health at USU, and a consultant and project leader at USU’s Center for Global Health Engagement. Col PK was born and raised in Haiti and is fluent in French.

