

COMMENTARIES

Lessons learned in a European–Latin American collaboration for developing postgraduate education in public health

MEMBERS OF THE EUROPEAN LATIN AMERICAN PUBLIC HEALTH NETWORK *

Background: New funding from the European Union (EU) allowed the collaborative development of postgraduate education in public health between five countries in South America and Europe. **Methods:** A planning meeting, two workshops, a final meeting and the use of e-mail and faxes for discussing curricula were employed. **Results:** One new master of public health in Argentina has begun, plans for new masters in Chile have been developed. A new collaborative module using the Internet was started and is now in its third year, new European plans for distance learning are being developed. Possibilities for collaborative research have been identified and those involved developed a broader horizon and international contacts. The planned grant from the EU was 72,040 Euros. Staff time spent administering the project was much greater than time spent discussing curricula. This is the only publication. **Conclusion:** Although the aims were achieved, the opportunity costs were great, as methods of assessing European research do not value such work highly and the administrative burden of small EU grants is high. Once a network is established greater efforts should be put into electronic communication, but European programmes currently do not fund such 'remote' support.

Keywords: education, Europe, international collaboration, Latin America

International collaboration on public health is not new^{1,2} and postgraduate courses in public health in Latin America have been emerging since the 1960s.^{3–8} This paper describes the process and outcome of a project funded by the EU America Latina Formacion Academica (ALFA) programme supporting the development of postgraduate curricula between three centres in Europe and two in South America. The European Latin American Public Health Network (ELAPHN) comprised Glasgow University, Scotland (coordinating centre), University College Dublin, Ireland, Universidad de Autonoma de Madrid (UAM) Centro Universitario de Salud Publica (CUSP), Spain, Universidad Nacional de Tucuman, Argentina and Universidad de la Frontera Temuco, Chile. The aim of the project was to establish new master's degree programmes in Tucuman and Temuco and build

common themes in master's degree programmes throughout the network. It also aimed to lay the foundations for future collaboration in the areas of environmental health, health promotion, health informatics and social sciences in relation to medicine.

INITIAL STATE OF EXISTING AND PLANNED COURSES

In April 1996 when the project started, the three European centres offered (and still do) master of public health (MPH) degrees and other postgraduate degrees (table 1). The two South American countries had initial plans for new postgraduate degrees.

Markets

Neither Argentina nor Chile had a career path in public health. In Tucuman, the market for a postgraduate course in public health was not clear. The aim was that potential students would include university staff themselves, hospital/health service 'chiefs' and environmental/public health officers. From the nature of their work and the economic circumstances of most, it was clear that any course should be mainly if not wholly part time. Therefore, potential students and their employers needed to be persuaded of the benefits of such postgraduate education. More work was needed in order to identify the numbers of potential students in the Tucuman region of Argentina. Temuco had an existing MSc in clinical epidemiology and drew students from throughout Latin America. The original proposal put forward by Temuco was for a new

* Members of the European Latin American Public Health Network:
 - University of Glasgow, Scotland (Coordinators), Dr Ray Jones, Professor Jim McEwen, Mr Neil Craig, Dr George Morris, Dr Mar Soler-Lopez
 - University College Dublin, Ireland, Dr Anna Clarke, Professor Bernadette Henty
 - Universidad de Tucuman, Argentina, Dra Rita Wasserman de Cunio, Profesor Horacio Puga, Dr Cristian Daud, Profesor Marcelo Lopez
 - Universidad de la Frontera, Temuco, Chile, Dr Sergio Munoz, Profesor Jaime Serra
 - Centro Universitario de Salud Publica, Universidad Autonoma, Madrid, Spain, Dra Carmen Gallardo, Profesor Angel Otero, Dra Pilar Martin
 Correspondence: Dr Ray Jones, Senior Lecturer in Health Informatics, Department of Public Health, University of Glasgow, 1 Lilybank Gardens, Glasgow G12 8RZ, UK, tel +44 141 330 5007, fax +44 141 330 5018, e-mail: r.b.jones@udcf.gla.ac.uk

MSc in biostatistics and a MPH with the emphasis on becoming a centre of excellence for training teams of researchers to work in different centres in Latin America. Given the description of Chile and its health problems and needs by the Chilean partners, the European partners expressed doubt over the need for an advanced course in biostatistics. The Europeans expressed more enthusiasm for Temuco's other, more embryonic idea, an MSc in environmental health.

Staffing and finance

A major barrier to starting a new master's programme in Tucuman was finance. Postgraduate teaching was not part of the contract of university staff. University staff were not well paid and many had second jobs in the health service or private sector in order to supplement their income. It was proposed that fees from the new course would pay staff, but Tucuman faced the problem of obtaining initial funding for establishing the course. This situation was similar to the financing of CUSP in Madrid. CUSP provides courses under the auspices of the UAM but has an autonomous budget; fees from the MPH and short courses are used to pay staff.

All three European centres had contributions to teaching from academic members of staff, other regular contributors and invited speakers. However, the funding, numbers and proportional contributions to teaching differed (table 1). Glasgow and Dublin also had modules taught by academics in other departments. All three centres used specialists from health agencies outside the university, for

example health boards and hospitals. However, in Glasgow these were usually honorary unpaid appointments; staff contributed for their own interest, for their career development or in response to academic contributions to health service work. In Dublin and Madrid, these external speakers were paid on a sessional basis.

In Glasgow, academic members of staff were funded by a variety of sources including 'core' funds from the university, funds from the health service and elsewhere. In Dublin, academic staff were funded totally by the university. Temuco had a very large well-established department of public health with some 50 staff. In Temuco, Glasgow and Dublin, postgraduate teaching was part of the staff member's contract and hours spent teaching were at the discretion of the head of department. In Madrid, staff were paid from the CUSP budget for sessions taught. In Tucuman, departmental structures were fairly weak and the new initiative was at a faculty level. Staff would have to be paid for teaching on the new course.

PROCESS

An initial planning meeting in Glasgow was followed by workshops in Tucuman and Temuco and a summative meeting in Madrid. In between, there were bilateral meetings between the two Latin American countries and significant traffic in faxes and e-mails.

Terminology and communication

Much time was spent understanding each other's situations, systems and terminology. For example, the South

Table 1 Comparison of MPH courses in Glasgow, Dublin and Madrid in 1998

	Glasgow	Dublin	Madrid
Market (typical numbers starting each year from different sources)	Two career PH doctors Nine other doctors or dentists Ten nurses Seven other health scientists	Five career PH doctors Seven other medics Two nurses Two other health disciplines	Eight career PH doctors Four pharmacists and four vets Four other health scientists Ten Latin Americans
New students each year	28	16	30
Structure	Modular: nine credits from choice of approximately 40 modules plus project	Common course	Modular: core 64 credits, options 15 credits and project
Full time	October–September	October–May	October–April
Part time	2 or 3 years	2 years	–
Ratio full time:part time	1:2 new students and 1:5 all students	50:50	100:0
Assessment	Each module separately, examination and coursework	Four papers plus oral plus computer assignment	Each module separately, examination and coursework
Project	3 months	3 months	3 months
Timetabled contact time	180 h	250 h	Core 460 h and options 110 h
Student fees	EU £2,610 Overseas £9,980	EU £3,586 Overseas £8,200	EU £4,100 Overseas £4,100
Funding of fees (typical number per year)	Personal 10 and NHS 16 Other 2	Personal 13 and NHS 2 Other 1	Personal 12 and 'free' places 8 European Social Fund 10
Teachers	Academics 12 Honorary staff 20 Invited speakers 30	Academics 5 Other university staff 20 Invited speakers 10% funds	Academics 9 Contracted staff 70% Paid invited speakers time
Funding of staff	University and research funds	University funds	CUSP autonomous budget
Other postgraduate degrees and short courses	Medical informatics, community care, and travel medicine. Modules can be taken separately	Occupational health, health services management and MMedSci	Occupational health, environmental health, management and short courses based on modules

Americans used 'epidemiologia' with a wider sense than the Europeans to include the ideas of health services research. Furthermore, there were different assumptions about what an epidemiologist was or could do. Chile had had a number of links and funding from the USA and this was reflected in the strength of clinical epidemiology; there were jobs and a career structure for clinical epidemiologists, which was not the case in the European centres. Translations between Spanish and English also caused problems. The process of communication was also difficult at first. Temuco, Glasgow and Dublin were well endowed with connections to the Internet from the beginning. Madrid only became connected during the course of the project, while Tucuman only established a regular e-mail link at the end of the project.

Workshops

The aims of the two Latin American workshops were to both further discussion by examining the local situation looking at facilities, staff and funding and to use the presence of the 'international experts' to lend weight to local negotiation and bargaining.

Costs

The funding from the EU ALFA programme for the project was planned as 72,040 Euros with a contribution from the network partners of 26,360 Euros of staff time. In reality, the contribution from the network partners was much greater than this. To date the ALFA programme has not paid its contribution.

RESULTS

The project helped produce a number of successful outcomes.

Tucuman MPH

Plans were passed and the degree started in January 1998 with 25 students consisting of mainly doctors and nurses. The degree is part time over 2 years with an estimated 1,200 hours of work for the student including both distance learning and attendance at seminars in Tucuman. The modules include Introduction to Public Health, Health and Health Needs, Statistics and Informatics, Organisation and Management of Health Services, Social Participation, The Argentine and local system of health services, and Technical English for Public Health. The students will also undertake a project.

South American MSc in environmental health

A fairly well-advanced plan was developed for an MSc in environmental health in Temuco. This included possible new links between Temuco and Tucuman for the exchange of staff, supervision of postgraduate degrees and possible collaboration on teaching at both undergraduate and postgraduate levels.

Temuco MSc in biostatistics

A more detailed plan was developed but has not yet been implemented. The general aim of this programme is to

train biostatisticians to serve as advisors, teachers and researchers. One specific aim is to address the large volume of collected yet unstudied data in the public health sector. This will be a 1-year full-time diploma course, which includes the development of a thesis proposal. Completion of the proposed thesis (which can take up to 3 years) and successful defence brings the award of master. The degree has four main parts: a 36 hour compulsory core of statistics, 18 hours of health sciences, statistical computing and mathematics, and a thesis proposal. The MSc may also be offered in Tucuman with the sharing of resources between the two centres.

Comparative health systems using the internet

A new collaborative module as one component of the students' study was established and run twice in 1998 and three times in 1999, with participation from three of the five ELAPHN centres. Although the members of ELAPHN were the founder members of this collaboration, it has been possible to expand membership to other countries.⁹

Staff development and further collaboration

Staff from Latin America have attended short courses in Madrid. There have been new exchanges of staff and the development of research proposals between the two South American partners and between the three European partners. All those who participated in the network have benefited from personal development and new contacts and the discussion of possible collaborative research. Contacts between Glasgow and Tucuman have continued with (self-financed) undergraduate students visiting Tucuman. A new proposal coordinated by CUSP was submitted to the ALFA programme and was offered funding, but there were difficulties in fulfilling the proposal within the funds allocated so the project was abandoned.

DISCUSSION

Educational benefits

Staff at both Tucuman and Temuco felt that they learnt about the practical issues of organising new masters courses, for example the need for a director of the course and the process of internal evaluation. Staff in Tucuman felt that, as a result of the network, they produced an MPH with a 'wider vision' and more flexibility than the original plans. The deadlines provided by meetings forced along the process of developing the curricula and getting internal agreement. Without these deadlines and the presence of the 'external' network, the local process of negotiation in Tucuman may have been delayed considerably. In infrastructure, the international links helped to establish e-mail and Internet links for the faculty of medicine.

The network acted as catalyst for a new proposal from Temuco in environmental health. Staff in Temuco were considering an undergraduate course but after discussion decided it was more appropriate at the postgraduate level. Further discussion enabled them to develop the details of

the course and to incorporate international contributions from Argentina and Europe. However, this is still just a plan and not yet achieved.

Staff from the European centres had the opportunity of broadening their perspectives on public health by learning about the South American experience. The network has given rise to a collaborative module using e-mail and collaboration on postgraduate education through use of the Internet and distance education will continue. The contact has also led to developments in distance learning in the European Centres and the possible contribution to the current changes in the Argentinean health service.

Costs

The official costs of collaboration were 98,400 Euros; the real cost in time from the participating centres was perhaps twice that. Those who have collaborated in EU projects know well the time spent on the bureaucracy of administration. ELAPHN was in the first phase of a new EU programme, ALFA and, therefore, suffered many 'teething problems'. The 'rules and regulations' of the ALFA programme were particularly difficult to meet. We spent much more time obtaining and administering the grant than discussing public health education. Negotiation with the EU and ALFA office over the payment of the grant continues. In the last UK research assessment exercise in which university research outputs were judged, the weight given to such EU-funded projects was small compared with research council-funded projects. This is the only publication from the project. The opportunity costs in time that could have been spent on domestic public health research were therefore great. Yet, if Europe is not to become totally insular in its outlook on public health, such international collaborations are necessary.

The way forward for collaboration

There is great potential for collaboration over distance learning in public health between countries using the Internet.¹⁰ The collaborative module using the Internet, which came out of this project, is now in its third year and obtaining participation from other centres around the world (www.mailbase.ac.uk/lists/comparative-health-systems). E-mail contact is easier and cheaper but use of the Internet is still only just starting in many parts of the world. We would never have established e-mail links with Tucuman and Temuco without the physical meetings. However, while initial meetings for familiarisation with local conditions are valuable, funding needs to shift from one based totally on a 'flights and meetings' model to a model of remote support. The opportunity costs of time spent on administration which could have been spent on research to be included in university research assessment was great.

Main Points

- European financial support for collaborative projects with Latin America should move towards a model of 'remote support' in which, after initial meetings, European-based researchers and workers provide information and educational resources and courses through the Internet.
- If European governments are serious in their desire to encourage international collaboration there must be due recognition for this type of work in assessments of university teaching and research.
- The administrative burden of EU-funded projects should be in proportion to the size of the project; small 'start-up' project grants with minimal bureaucracy would help.

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