



OUR MISSION STATEMENT

The mission of the Institute for Global Health is to support global health education research and capacity building with MSU colleagues and our global partners that will advance Michigan State University as a leader in solving global challenges.

A MESSAGE FROM OUR DEAN



Both the College of Osteopathic Medicine and our Institute for Global Health are closely connected when it comes to our missions. We both seek to deliver world-class education and research experiences while always looking for ways to expand these capabilities. By doing this, we continue to build on an ever-increasing framework of unique opportunities for our students and our global health partners.

Global health experiences bring a whole new perspective to teaching and learning the art of medicine. It's these experiences that can challenge our students in ways they never thought possible. As one example, providing care in health care environments that are different from the settings they are accustomed to here in the United States helps our students further develop their clinical skills in more profound ways, while gaining valuable medical insights they might not be able to learn at home.

Understanding the cultural background of our patients also is an essential component to providing quality care. To really appreciate culture, one should experience it first and the Institute for Global Health provides these valuable opportunities.

These goals and experiences are fully integrated into our college, and along with the greater university, we can continue to develop novel and bold new areas of research and educational opportunities worldwide.

The osteopathic profession and the college's 50-year history of teaching our students the holistic mechanisms that underly health has always aligned with an emphasis on primary care. Unique, global experiences in health delivery at diverse locations can further these efforts and help our students, residents and fellows become world-class physicians.

We are incredibly proud of our global health partnerships and look forward to expanding our efforts.

Andrea Amalfitano, D.O., Ph.D.

Dean, College of Osteopathic Medicine

A MESSAGE FROM OUR DIRECTOR



Teamwork! How often do we hear about the value of teams in creating a winning organization? Winning coaches have the mantra that "everyone on the team contributes!" All of us want to be part of a successful team. The player that practices hard against the star player is challenging their teammate to be the best he or she can be. Although that player may not be involved in an actual game, their contribution is equally important. This is an appropriate metaphor for what we try to accomplish at the Institute for Global Health (IGH) – building teams within our university and with our partners abroad.

Michigan State University has 17 colleges and IGH partners with the majority of these. The colleges of Human Medicine, Nursing, Veterinary Medicine and the International Studies and Programs have been our partners for 31 years. We share with them the global mission of creating opportunities in education, research and capacity-building in more than 20 countries on five continents. We have built partnerships through research and study abroad programs with the colleges of Social Sciences, Natural Sciences, Engineering, Business and Agriculture and Natural Resources. These interdisciplinary teams partner together to address health disparities around the globe.

The IGH team recognizes that the responsibility for addressing global health extends beyond our clinicians. Frequently, I have students who are not studying health sciences lament that they feel they cannot have an impact in our study abroad teams. I reply that they can have as much impact as any medical, nursing or veterinary student through their compassion and willingness to help link health sciences with broader societal issues for the most vulnerable.

For most of the world's population, their definition of "health" is a roof over their head, adequate food supply and security, clean water and sanitation, immunizations, and maternal and infant welfare. We read daily the impact climate change has on millions of people in Africa, and now Australia. Our environmental/climate scientists and researchers can have as much impact on the "health" of the world's population than a brigade of physicians and nurses.

Teams! IGH is committed to working with all our partners to build interdisciplinary teams that can address the health of vulnerable populations. We welcome your thoughts and input on how you can be part of our winning TEAM to make a difference in the world!

William Cunningham, D.O., M.H.A.

Director of the Institute for Global Health

ONE HEALTH PERSPECTIVE



The importance of a comprehensive "One Health" approach has never been more obvious than during the COVID-19 pandemic.

History is replete with examples of the many important ways in which human health, animal health and environmental health are intertwined, and this is particularly true in the field of infectious diseases. Throughout human history, our interactions with animals and the environment have played major roles in the epidemiology of endemic, epidemic and pandemic infectious diseases of humans. While this is particularly apparent during pandemics such as the 1918 influenza pandemic, the 2009 H1N1 influenza pandemic and the 2019-2021 COVID-19 pandemic, these interactions affect many infectious diseases.

Environmental factors such as climate change affect the epidemiology of many infectious diseases, especially those spread by insect (e.g., mosquito) or arthropod (e.g., tick) vectors and may lead to increased infections in both humans and animals along with an expanded geographic range of these infections. Many different types of environmental changes also may result in more human contact with animals and vectors that spread zoonotic infections by both direct contact with animals (e.g., rabies from an animal bite), indirect contact with a contaminated environment (e.g., histoplasmosis after exposure to a chicken coop), a vector intermediate (Lyme disease from a tick bite), or contaminated food or water (many examples, including important bacterial infections that are increasingly resistant to standard antibiotic treatment).

Strategies that focus exclusively on the prevention (or diagnosis or treatment) of human infections or only on animal infections or only on environmental factors fail to take advantage of the great synergy that is afforded by a comprehensive approach. This is particularly true in the academic and research arenas, where discoveries in one area often lead to important new insights into other areas.

Partnerships between biomedical researchers in human and veterinary medicine and scientists who study the biology of mosquitoes, ticks and other vectors are particularly important. These partnerships have played critical roles in our understanding of zoonotic infections such as Rocky Mountain Spotted Fever and West Nile virus infection and are key to our understanding of previous and future outbreaks of human disease caused by pathogens spread from animals - from Ebola to animal influenza viruses and animal coronaviruses. Interdisciplinary teams are the key for solving future wicked problems. With that in mind, the Institute for Global Health in 2020 started a Master of Science online program in Global Health designed to empower graduates with the tools and skills needed to address global health challenges.

Furthermore, the age of genomics offers the opportunity for metagenomic research that analyzes the genes and gene expression patterns (the latter are affected by diet and other environmental factors) of the human (or animal) and the pathogen – of course in some cases the genome of the vector is also important. The future of infectious diseases requires us to understand how the interplay of these factors leads to disease, as this will be the key to more effective strategies to prevent, diagnosis and treat infections.

For more information on IGH and One Health visit: https://ighealth.msu.edu/

B. Keith English, M.D.

Professor and Chair Department of Pediatrics and Human Development College of Human Medicine, Michigan State University

IGH PUBLICATIONS 2020 - 2021

MCCALL C., WU H., O'BRIEN E., XAGORARAKI I. (2021)

Assessment of enteric viruses during a hepatitis outbreak in Detroit MI using wastewater surveillance and metagenomic analysis.

Journal of Applied Microbiology. DOI: doi:10.1111/jam.15027

BANO, S., & XIA, Q. (2020). CHINESE UNDERGRADUATE

Students' Perceptions of Learning: The Role of Language and Culture in Short-term Public Health Study Abroad Program.

Journal of Comparative & Amp; International Higher Education, 11(Winter), 85-88.

OOMMEN J Z, HODGINS M, HINOJOSA R, ET AL. (2021)

Accuracy of Weight Estimation Using the Broselow Tape in a Peruvian Pediatric Population.

Cureus 13(6): e15807. DOI: https://doi.org/10.7759/cureus.15807

JELINEK K, HARDING L, BRICENO R, ET AL. (2021).

Prevalence of high-risk human papillomavirus genotypes in two regions of Peru.

Int J Gynecol Obstet. 00:1-6. DOI: https://doi.org/10.1002/ijgo.13625

DELELLIS N., WILSON F., BELSITO JR. F., CUNNINGHAM W. (2020).

Affordable Care Act did not reduce inappropriate use of emergency room services.

European Journal of Public Health, Volume 30, Issue Supplement 5.

DOI: https://doi.org/10.1093/eurpub/ckaa165.386

WHO WILL SHAPE A BETTER WORLD? SPARTANS WILL.

INTRODUCTION
Pages 1-7

CAPACITY BUILDING
Pages 8-15

EDUCATION Pages 16-17

RESEARCH Pages 18-23

FACULTY AND SCHOLARS
Pages 24-27





ARMED FORCES COLLEGE OF MEDICINE ARAB REPUBLIC OF EGYPT

In 2017 the Institute for Global Health (IGH) entered into an agreement with the Armed Forces College of Medicine (AFCM) to update and revise their medical school curriculum. During the past four years the Michigan State University team of medical education consultants have travelled to AFCM on twelve occasions positioning AFCM for accreditation and medical education leadership in Egypt.

The goal of that academic cooperation between MSU and AFCM is to create a pedological approach to medical education that enables AFCM to achieve "a world-class military medical school and international accreditation". To achieve such a goal, IGH's team of consultants started by revising AFCM 's curriculum to transition from the legacy 6+1 medical curriculum to the new requirements for the 5+2 curriculum. That first goal requires solidifying and extending AFCM's technological capacities for effective curriculum management through adopting an informatics learning management system that includes monitoring and assessing the progress of AFCM's students and the effectiveness of their learning, as well as the efficacy of the faculty's teaching.

The project's specific goals of the agreement are to achieve the medical education curriculum revision, technology enhancement, professional faculty development, accreditation readiness, and clinical and diagnostic medical skills. AFCM is currently consulting with MSU to add other programs to the project's main components, such as research and a master's in medical education.



The professional development of AFCM faculty takes place through onsite quarterly conferences in Cairo as well as AFCM faculty members travelling to MSU for customized programs in medical education and clinical specialities. AFCM students also travel to MSU and attend month long "observerships" in six specialties in select hospitals in the Lansing and Detroit areas.

This agreement also is to prepare AFCM to be accredited by the their national governing body for accreditiation (NAAQE) so their medical school graduates can apply for graduate medical education training in the U.S. through examination by the United States Medical Licensing Examination (USMLE). The Educational Commission for Foreign Medical Graduates (ECFMG) requires medical schools outside the United States to be accredited by their national accrediting authority by 2023.

**For more details about the 5-year cooperation between MSU and AFCM, see the project literature, such as the yearly and quarterly reports.

GLOBAL HEALTH TRAINING

To meet the mission of Michigan State University and the Institute for Global Health, IGH provides certificate programs for advanced educational training. These programs offer international students and professionals a new perspective on medical disciplines while helping them develop cultural competency and language proficiency. Health care students and professionals take part in learning activities on campus and at selected medical/health institutions across Michigan with guidance from American physicians, medical students and administrators.

Global Osteopathic Manipulative Medicine Training

2-4 Weeks in East Lansing

Eastern traditional medicine professionals broaden their knowledge of the American model of osteopathic care, philosophy and practice through hands-on experiences.

Global Health Observership Program

4 Weeks at Sparrow & McLaren Greater Lansing Hospital and its affiliated health centers

International medical students and professionals learn American medicine and health care delivery in a hospital environment.

Global Healthcare Professional Shadowing Program

4-12 Weeks at McLaren Greater Lansing and Ingham County Health Department

International health care professional students explore health care management and delivery.

Global Hospital Management Training Program

2 Weeks, Various Michigan Hospitals
International physicians and health care administrators
learn about American hospitals with leadership and
supply chain perspectives.

Learn more about these programs by addressing an email to Sung Soo Chung: **chungsu1@msu.edu.**



South Korea OMM Program



Chinese Nursing students at McLaren Hospital



Chinese public health students volunteered at local public health organization

IGH UPCOMING EVENTS

SEPTEMBER

O8th-12th - Education and Research Consortium of the Americas Conference (HYBRID)

OCTOBER

- O1st Infect. Disease Webinar series: "Nanotechnology value in epidemiology and virus detection: Latin America" Chapter 1: Epidemiology and the pathogen: Sars Cov 2. Session in English. (VIRTUAL)
- O5th Psychosocial Determinants of Diseases series: "Digital Health Transformation in the Americas". Session in English. (VIRTUAL)
- O8th Infect. Disease Webinar series: "Nanotechnology value in epidemiology and virus detection: Latin America" Chapter 2: Clinical manifestations of Covid-19 in the Americas. Session in Spanish. (VIRTUAL)
- 21st Psychosocial Determinants of Diseases series: "Understanding shifts in infectious disease epidemiology and trends in dynamic modeling". Session in English. (VIRTUAL)
- 22nd Infect. Disease Webinar series: "Nanotechnology value in epidemiology and virus detection: Latin America" Chapter 3: Immunology of Covid-19 osteopathic view. Session in English. (VIRTUAL)
- 26th Water Quality Webinar Microbial forensics: Tracking surface-associated viruses to protect public health (Dr. Volodymyr Tarabara). Session in English. (VIRTUAL)
- 29th Infect. Disease Webinar series: "Nanotechnology value in epidemiology and virus detection: Latin America" Chapter 4: The role of nanotechnology and biosensors during the COVID-19 pandemic. Session in English. (VIRTUAL)

NOVEMBER

• O3rd - One Health/One World Day Event- JSPS Seminar (HYBRID)



EDUCATION ABROAD THROUGH IGH

The Institute for Global Health has many areas of focus, but one of the most well-known in the Spartan community is the Education Abroad programs offered by IGH through the College of Osteopathic Medicine. These programs have been running for almost a decade, although the look and development has changed over the years.

In 2012 there were four international education abroad courses offered through IGH - then, the Institute of International Health. There was one program offered during each season of the year. The winter break program in Brazil was an offering mainly for medical students and was widely known to be very popular - due both to location and topic. The students spent several days in local villages, and then spent a day on a medical boat on the Amazon river providing care to villagers who would travel hours by small boats to be seen and treated for various ailments. IGH also offered a program during spring break to Merida, Mexico, an area in the Yucatan peninsula. At the time, this program was for undergraduate students only, as was the Dominican Republic course in Santo Domingo, offered in late spring/early summer. These programs both were strictly observational courses, with students learning about medical care in other countries by shadowing physicians in hospitals and clinics. In late summer, medical students were offered the opportunity to learn about healthcare in Selcuk, Turkey. This program was also observational, but did allow students to interact with the patients more closely than the undergrad programs. Each of these programs took place over a single week, however, the lessons learned and experiences gained have lasted a lifetime.

As time has progressed, so have the international offerings by IGH. Some programs have grown and developed, others have been suspended due to safety concerns, and many new courses have been created. As of 2020, the Institute for Global Health has a total of twelve international education abroad courses running, with plans for additional programs in development. Each spring break IGH now offers programs for medical, nursing and graduate level students as well as undergraduate students to Mexico. Guatemala. Dominican Republic and Haiti. These courses

provide students the opportunity to learn both about the culture of the area they are visiting, as well as the healthcare systems in each location. Some programs are observational and shadow based, while others are more in-depth and allow the students to be hands-on in providing care to the patients being seen. Students in their last year of medical school can participate in a multi-week course to Havana, Cuba to provide care and shadow in various specialties during their final semester of medical school. In the summer, there are options for students to participate in courses in Cuba, Peru, Korea and Nepal, These programs range from ten days to three weeks. The Nepal course is a three-week One Health based program for undergraduates in collaboration with the College of Veterinary Medicine, the College of Natural Science, the College of Agriculture and Natural Resources, and the College of Lyman Briggs. This One Health course focuses on human health, animal health and environmental health and how they all impact each other. The summer Cuba course is also for undergraduates, with a focus on learning about the culture and public health issues in Cuba. The programs in Korea and Peru are for medical students with a focus on surgical shadowing in Korea, and hands-on primary care in Peru. During winter break, medical students in their second year of pre-clerkship courses are offered the opportunity to learn about public health systems in Havana. Cuba through observation and shadowing.

IGH offers these programs as a way to introduce other medical systems and cultures to MSU students interested in a career in the medical and public health fields, but also to encourage students to think outside the box of what they are used to experiencing in the United States and within the U.S. medical system. Many of these students often go into the courses with the expectation to learn, however they return having taught a small amount, and having learned so much more than they could have ever thought. They return as changed individuals, usually talking about having had the experience of a lifetime, and the impact the program had on their outlook of medicine, and the world. At IGH, this is the best recommendation we can receive for our programs.

COURSE NAME	COURSE NUMBER	INSTRUCTOR OF RECORD	PROGRAM LEADER(S)	PROGRAM ASSISTANT(S)	ATTENDED 2019-2020
Global Health: Dominican Republic - Cultural and Clinical Immersion (UG)	OST 690	May Kay Smith	Rebecca Malouin	Rafael Marinez	20
Global Health: Guatemala - Clinical Immersion	OST 691	Gary Willyerd	Gary Willyerd	Richard Bryce	10
Global Health: Mexico - Clinical Immersion	OST 686	Jacob Rowan	Jacob Rowan	Sabrina Vieyra	24
Global Health: Dominican Republic - Clinical Immersion (COM)	OST 690	William Cunningham	William Cunningham	Rene Hinojosa	15
Global Health: Peru - Clinical Immersion	OST 687	Gary Willyerd	Gary Willyerd	Shane Sergent	cancelled due to COVID-19
Global Health: Turkey - Clinical Immersion	OST 692	William Cunningham	Jaret Beane	Robin Pedtke	N/A
Global Health: South Korea - Clinical Immersion	OST 693	William Cunningham	Sung Soo Chung	N/A	cancelled due to COVID-19
Global Health: Cuba - Clinical Immersion	OST 688	William Cunningham	Gary Willyerd	Rene Hinojosa	cancelled due to COVID-19
Global Health: Haiti - Clinical Immersion	OST 689	William Cunningham	William Cunningham	Robert Fillion	cancelled due to COVID-19
Global Health: Nepal - Clinical Immersion	OST 694	Melinda Wilkins	Melinda Wilkins	William Cunningham/ Gary Willyerd	cancelled due to COVID-19
International Clerkship Rotation (set-up for Clerkship rotations that are outside of a group)	OST 685	William Cunningham	William Cunningham	N/A	22 (-5 COVID-19 interruptions/ cancellations
*Global Health: Cuban Healthcare System & Culture (proposed May 2020)	OST 688	William Cunningham	Rene Hinojosa	N/A	cancelled due to COVID-19
Global Health: Dominican Republic - Clinical Immersion (COM)	OST 690	William Cunningham	William Cunningham	Arpon Shahed	5







RYAN HODGEMAN STUDENT IN ACTION

I began medical school with an extensive history in global health work – it was and continues to be the focus of my professional career. The 5 years preceding my tenure at Michigan State University College of Osteopathic Medicine I lived in Botswana, worked with a non-profit Harvard based organization enhancing oncologic care in low- and middle-income countries (LMICs), and conducted pediatric epilepsy research in Zambia and Tanzania. MSU's premiere global footprint and COM's dedication to global health sustainability and research is the reason I am a Spartan today. What I did not know as I began my medical training was how important and complimentary the practice and study of global health was to my growth as a physician.

Michigan State emphasized the importance of understanding my patient in order to provide him or her with the best individual care. In order to empathize and understand what "health" means to my patients, I need to see through their cultural lens. This art of medicine takes practice and global health engagement is the best teacher. In my experience I do not believe a person can appreciate culture without experiencing it. Immersing oneself in another culture, even

for the first time, can create an awakening of the idea of otherness. We must be able to elevate our patient's priorities in order to provide effective care at all levels – global health continues to teach me this in a way no other medium can.

In addition to cultural competency. practicing medicine in resource-limited settings forced me to rely on clinical skills in a more profound way. As a graduating medical student, by far the most rigorous clinical training I received was in a community clinic in rural northern Haiti where I could not rely on imagining and lab testing to make my diagnosis. In conjunction with a preceptor, I clinically examined more patients in one week then in most of my month-long clerkship rotations. Learning clinical medicine in a community without robust healthcare infrastructure also provides for opportunity to experience advanced disease processes that are less often seen, but no less important.

Partnering with resource-limited communities provides health care education we can't achieve by staying home. Global Health practice has made me a more culturally competent care provider and a more skilled clinician. The benefits I received as a healthcare student are made possible by the University's dedication to build sustainable and mutual partnerships. Maintaining these partnerships is vital to our understanding of diversity, improved global health care, and the ongoing education of MSU's student body.

I am currently the first year resident in the United States Army in Emergency medicine and indebted to the University for the opportunities it has provided me. Please contact me if I can be of any assistance at hodgeman@msu.edu

Very Respectfully,

Ryan Hodgeman, OMS IV



ARPON SHAHED RESIDENT IN ACTION

To the Deans and leaders of the Colleges at Michigan State University, I wish to share my experience in medicine and passion for global health in hopes of continuing to build upon the cross disciplinary relationships between the colleges for a better and healthier world.

I spent a large part of my childhood in Bangladesh learning from my father, who retired as Brigadier General in the Bangladeshi Army, by travelling with him to rural Bangladeshi communities to aid different development projects. I learned some of the most important lessons from people who had the least, leaving me with a lasting impression of how dramatic health inequalities are locally and globally. My father prioritized the wellness of these communities as he himself came from a similar background. He was raised in a small village named "Magura" by a young widow with three younger siblings. Throughout the course of his career helping vulnerable people, corrupt government officials made it difficult for him to continue development projects. Our family received threats from such officials and were forced to leave our home. We were lucky to leave and started anew in Canada.

My journey into medicine began after I was accepted into the Michigan State University College of Osteopathic Medicine (MSUCOM) Canadian Scholarship program. As my second round of immigration began into the United States, I had dreams of pursuing a career in global health to continue on my father's mission. MSUCOM provided me with a strong osteopathic medical foundation and supported me through my immigration process immensely. I also was fortunate to meet Dr. William Cunningham, Associate Dean at MSUCOM, early in my medical training. He then introduced me to the Institute for Global Health (IGH) and mentored me towards a strong education in global health.

Since 2014, starting as a MS1, I was privileged to receive adequate scholarships on a yearly basis to help develop a sustainable clinic in Limonade, Haiti. With the highest maternal and child mortality rate in the Western Hemisphere, the country required crucial sustainable care on both a micro and macro scale. Alongside MSU teams and in partnership with local communities and leaders, we improved the health of this community over the years and continue to tackle large projects such as the development of a women's birthing center.



I have continued to work with MSU-IGH throughout my family medicine residency in other countries such as the Dominican Republic and have seen effective outcomes of collaborations with MSU-IGH consortiums projects that directly and indirectly improve the outcomes of vulnerable people. Connecting like-minded people with different academic backgrounds has opened new doors by improving health access for countless people worldwide.

Nearing the end of my residency, I have been extremely fortunate to be selected as an Associate Professor and Researcher at MSU-IGH to continue to spread this spartan vision worldwide. I hope my story sheds light on the benefits of investing into global health practices. While we still have a long way to go, the impact of MSU's investment into cross disciplinary ventures between colleges and clinics has directly improved the health and quality of life for our most vulnerable global citizens. I am honored to continue this work with the support of MSUCOM and IGH.

Arpon Shahed, DO, MBT

Family Medicine Board Certified
Associate Professor and Researcher at MSU-IGH

GLOBAL HEALTH STUDIES

MASTER OF SCIENCE IN GLOBAL HEALTH

is now only 30 credits and can be completed in one year.

- OST 821 One Health Transdisciplinary Collaborations in Global Health
- OST 822 Introduction to Global Health Practice
- OST 823 Global Burden of Disease
- OST 824 Emerging Topics in Global Health
- OST 825 Ethical Issues in Global Health
- OST 827 Global Health Management
- OST 828 Global Health Capstone
- OST 829 Global Health Community Assessment
- OST 831 Evidence-Based Practice in Global Health

Students are invited to participate in an existing global course in one of nine countries, and/or an independent elective at a location of their choice for an additional 3 credits.

GRADUATE CERTIFICATE IN GLOBAL HEALTH

consists of three courses, all within the Master of Science in Global Health Program. Credits are transferable between the Certificate and Master's degree programs.

REQUIRED:

- OST 822 Introduction to Global Health Practice
- Select 2 from the following 4 courses:
- OST 821 One Health Transdisciplinary Collaborations in Global Health
- OST 823 Global Burden of Disease
- OST 831 Evidence-Based Practice in Global Health
- OST 832 Independent Study in United States Health Systems*

*Limited to international students participating in independent study at Michigan State University

PROGRAM COST

- Master of Science in Global Health
 Graduate Student tuition rate: \$890 per credit. Additional
 fees may apply*. Total program tuition cost at 30 credits is
 \$26,700
- Certificate in Global Health
 Lifelong Education tuition rate: \$890 per credit.
 Additional fees may apply*.
 Total certificate tuition cost at 9 credits is \$8,010

Financial aid may be available, particularly for domestic applicants pursuing the Master of Science in Global Health. Financial aid is not available for the certificate program.

*MSU reserves the right to make changes in the types, structures and rates for tuition and fees. Additionally, the amounts listed on this site reflect the current tuition rate only and do not take into account any additional university fees that may apply.

APPLICANT REQUIREMENTS

Applicant requirements are the same for both the Certificate and Master's degree programs.

- A bachelor's degree, professional degree, or equivalent degree from an accredited college or university.
- A cumulative grade point average of no less than a 3.0 on a 4.0 system (*see below if you do not meet this requirement)
- A personal statement
- A current resume or curriculum vitae

*If an applicant does not have a 3.0 grade point average (G.P.A.), the admissions committee will consider other aspects of the applicant. Applicants may provide documents describing work experience and references, etc. for further evaluation.

In addition to the requirements above, international applicants will also require an English language proficiency examination (if English is not the first language).

ADMISSION CYCLE

MSU follows a 3-semester annual cycle. Applications are accepted for each semester for both the Master of Science in Global Health and the Certificate in Global Health on a rolling basis.

Application Deadlines

Fall Semester 2021: July 1, 2021

Spring Semester 2022: December 1, 2021

Summer Semester 2022: April 1, 2022

Fall Semester 2022: July 1, 2022

Spring Semester 2023: December 1, 2022

Summer Semester 2023: April 1, 2023

Fall Semester 2023: July 1, 2023

LINK TO APPLY https://grad.msu.edu/apply

GLOBAL HEALTH STUDIES PROGRAM

Email: globalhealth@msu.edu

Phone: 1.517.884.4000

Website: https://globalhealth.msu.edu

CONGRATULATIONS TO OUR FIRST GRADUATES

In May 2021, Jasmine Dickson and Alyssa Maturen became the first graduates to complete the MSU College of Osteopathic Medicine's new Master of Science in Global Health program. Initiated by the Institute of Global Health, the Global Health Studies program launched the new Graduate Certificate in Global Health in Spring 2020 and the master's program in Summer 2020.

The one-year, online degree covers topics such as the global burden of disease, ethical issues and global health management to improve health and achieve health equity for all people worldwide. It sets the stage for a new approach to interdisciplinary, cross-cultural collaborations to solve complex global health problems spurred by accelerations in technology that impact human, animal and environmental health.

Taught by faculty from colleges throughout MSU, as well as partner universities and non-academic professionals, students of both the master's and certificate programs are able to learn from diverse points of view to better understand root causes and an array of tools to tackle longstanding and emerging issues. The online program also includes an optional education abroad component.



Jasmine Dickson



Alyssa Maturen

MSU-YUCATAN ENGAGEMENT DURING COVID:

"If they can't come to you, go to them."





Travis Gordon D.O.

Not even COVID-19 can stop MSU's initiatives in Yucatan. We continue forward always with our goal to persevere in three areas: osteopathic outreach, collaborative research and educational exchange. Much as everyone else, adaptation to changes has been key.

Outreach - Our "Clínica de Osteopatía", which provides osteopathic evaluation and treatment within the O'Horan Hospital free of charge, has been temporarily closed due to the many cases of COVID-19 seen within the hospital and the potential risk of infection in a high-risk area; we went to work in the COVID unit of the hospital. I spent three months gowning up in WHO-mandated PPE to provide Osteopathic manipulative medicine to those most in need. The experience was difficult—brutal at times—to witness people die so frequently. Sometimes patients passed on your shift, mostly they were simply not there the next day. One minute they were ventilated and declining, and in the next round by their bed there was a black body bag in their place. It was not easy, but through pain and anguish also comes learning.

On this adventure I learned the importance of something as simple as IV fluids in treating a viral infection, which often is not present on the scene. I learned the difference between seeing patients and treating a human being...I witnessed both. I learned that the little things make all the difference in medicine—helping a patient eat or simply reach his or her food plate, constantly titrating supplemental oxygen, discriminating between COVID-related hypoxia and a COVID-related anxiety attack (of which there were many). I could not help but learn that cracking a joke with an old lady and seeing her smile may be the high point of the day for both of us, and very worth doing. It became abundantly clear that this virus, while largely unnoticeable in younger and healthier populations, can wreak havoc on the older, diabetic population frequently seen in the O'Horan's COVID unit. I learned that as physicians we do not know everything and we cannot save every patient in the hospital, nor should we attempt to, in certain cases. Osteopathically speaking, I became intimately familiar with what is biomechanically necessary to facilitate and sustain one of our most basic and often taken for granted functions: breathing. Most importantly for my own personal growth, I learned that sometimes the only thing you can offer a patient is a dignified death- your hand in theirs as they take their last breaths with the peace of at least not passing alone. I have a long way to go in my career as a physician, but after this tremendous, albeit tragic, learning experience, I feel I am well on my way.

As a professor of osteopathic manipulative medicine at MSUCOM, my favorite part of working at MSU is teaching. Unfortunately, COVID and the lack of travel it has created has not been conducive to this area either. As such, I have been working to connect myself more integrally with the student body at MSUCOM and will soon hopefully give some lectures in the osteopathic portion of their curriculum. Furthermore, I am in the planning phase of recreating the elective course "Spirituality in Medicine" so students may continue to learn about this fundamental aspect of human health and doctoring. Perhaps this can be put toward a means of curbing physician burnout in such a high-pressure medical system such as ours today. Lastly, I am in the process of creating a journal club for MSUCOM students

so we may not only become more aware of current osteopathic research and its importance for the future of our brilliant profession, but also to plant the seeds of our own student-based scientific research, which I consider to be a necessity today, especially with fewer clinical and volunteer options for students to set themselves apart as they build a competitive CV for residency applications. I am confident that these educational endeavors will be productive not only for the students, but for my own learning process. If the students cannot come to Yucatan for the time being, we will have to go to them (virtually) for the time being.

Despite current worldwide difficulties, MSU's Institute for Global Health (IGH) continues to engage globally with their virtual "Educational and Research Consortium of the Americas". This consortium currently represents roughly a dozen countries in the Americas with endeavors such as water quality, bees, forestry and human health, psychosocial determinants of disease, and nanotechnology. I have the privilege of being involved in each specific area of focus with Yucatan researchers in each respective consortium. I feel privileged to be a physician involved in initiatives directed at improving these fundamental aspects of human health in a global sense. I am grateful to IGH for providing this unique opportunity to expand my perspective as a physician and as a human being. Not many docs can see patients, give a student lecture and attend a water quality research meeting in the same day. Again, if the world cannot come to you, go to them.

MSU PERUVIAN RESEARCH - NANOTECHNOLOGY

The isolation and identification of a pathogen causative source of a disease is the angular keystone in the management of patients, therefore an increasing number of disciplines in sciences are contributing and making enormous advances especially in nanotechnology.

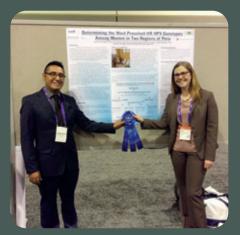
A new diagnostic device based on gold nanoparticles is being validated on Peruvian COVID-19 patients and can detect in twenty minutes the virus SARS-CoV-2 in the clinical setting with no extra technology than what is available at any hospital in the world.

For the past seven years, MSU-COM and IGH have collaborated with the Biosensors Lab from the MSU College of Engineering and their leader, Dr. Evangeline Alocilja, to tackle tuberculosis through early diagnosis and timely treatment of patients using a nanoparticle-based biosensing assay in Peru, which can successfully detect Mycobacterium tuberculosis in sputum samples. This method is just as accurate as the molecular-based diagnostic test "Gen-Xpert" (currently considered the gold standard for diagnosis of TB in the developing world) with the cost of less a dime, giving an affordable and scalable powerful tool for developing countries, to fight back against this disease.



Kenny Briceno M.D.





Another example of the great value of new technology is reflected in the HPV project being conducted in the Amazon and coast regions of Peru, where high-risk human papillomaviruses are genotyped to determine its prevalence among Peruvian women, for early treatment to help physicians to stop the progression of the infection to cervical cancer and death of the patient.

A project lead by Dr. Shane Sergeant and continued by a multidisciplinary team at IGH is using data from years of collected anthropometric pediatric measurements to develop point of care technology with the creation of a novel phone application to translate a well-known pediatric device called "The Broselow Tape" to the Latin American settings, so we can accurately determine proper drugs and doses for pediatric emergency treatments.

EDUCATION AND RESEARCH CONSORTIUM OF THE AMERICAS

The Education and Research Consortium of the Americas (ERCA) was established in 2019 with the concept of enhancing the role of the Institute for Global Health in promoting awareness of world health problems at MSU. Six institutions from Latin America and South America, whom IGH has been partnering with for the past decade, joined this Consortium in its collaborative effort to develop global education, research, and capacity building. The result of the annual conference in 2019 was the establishment of four Virtual Institutes for continuing to partner in education and research. Research partners decided upon the greatest challenges which the four Virtual Institutes will address: Psychosocial Determinants of Disease, Tropical Medicine/Infectious Diseases, Water Quality/Waste Management and Ecology and Human Well-Being.



Irene Xagoraraki, Ph.D.

MSU College of
Engineering

Water Quality



WATER QUALITY

Context: A large portion of Yucatan fresh water is concentrated in the cenotes area. Contamination is occurring through many sources: animal waste (pork, turkey) human waster (Ecoli), biological, organic (pesticides, herbicides, insecticides) and inorganic exposure.

Goal: Develop 20-30 testing sites in urban and rural areas, sampling wastewater and water runoff.

Develop a social research tool to analyze the community demographics on the tested areas.

Members: 27 members, 9 institutions.



Robert Paulino, M.D.

Universidad Iberoamericana, Dominican Republic

Infectious Disease Tropical Medicine Virtual Institute



INFECTIOUS DISEASE/TROPICAL MEDICINE

Context: The COVID-19 pandemic and the global burden of infectious diseases/neglected tropical diseases brings to the attention of ERCA members throughout Latin America, to develop sustainable relationships with partner institutions in the Americas proficient in the education and research of infectious diseases and tropical medicine.

Goal: To identify educational and research opportunities on the dynamics of Infectious and Neglected Tropical Diseases.

Members: 18 members, 6 institutions.



Itziar Familiar Lopez, Ph.D., M.D.

MSU College of Osteopathic Medicine

Psychosocial Determinates of Disease



PSYCHOSOCIAL DETERMINANTS OF DISEASE

Context: In Latin America, the principal psychosocial issues confronting society are anxiety, depression, suicide attempts, as well as addiction.

Goal: Prioritize educational and funding sources for the psychosocial determinants of disease.

Members: 16 members, 7 institutions.



David MacFarlane, Ph.D.

MSU College of Agriculture and Natural Resources

Ecology and Human Well Being



ECOLOGY AND HUMAN- WELL BEING

Context: Human well-being is derived from complex, global ecological processes, generated by a web of life that consists of countless other non-human species. Our human societies must actively nurture mutualistic, ecological relationships to sustain a harmonic balance.

Goal: To create educational opportunities and to conduct research to (1) deeply explore beneficial connections between human well-being and conservation of biodiversity and healthy global ecosystems and (2) identify ecologically-based solutions to increase the quality of human life while enhancing the global web of life.

Members: 15 members, 8 institutions.

During 2020 ERCA focused on connecting its members and member institutions; designating a chair for each of the virtual institutes, meeting regularly, and creating a common space for members to share ideas on research and educational opportunities.

As a result of diligent efforts, by December 2020, and amid the pandemic, the virtual institutes brought together 76 scholars, researchers and professionals, and 9 institutions. The Water Quality Virtual Institute submitted the first request of funds for a research proposal on Wastewater virology for \$400,000. The Ecology and Human Well-Being Virtual Institute has received two (2) grants for \$5,000 and \$4,000 to fund seminars with Japanese scholars and continue research in the Yucatan Peninsula respectively.

In 2021, ERCA expects expand the network of key stakeholders within the Consortium and resume the annual conference event in September 2021, in hybrid or in-person mode, for further discussions on current and future projects.

If you would like to become involved with the ERCA institutes and/or projects, please contact us to igh@msu.edu.

RESEARCH THROUGH ERCA

During 2020 each of the Virtual Institutes within the Education and Research Consortium of the Americas (ERCA) outlined research projects that share common interest among the members.



Wastewater Virology and Outbreak Predictions

The immense global burden of human and zoonotic viral infections is widely recognized. Infectious outbreaks can cause devastating and have uncontrollable negative effects. The current COVID-19 pandemic is a striking example. Traditional disease detection systems are based on diagnostic analysis of clinical samples, but this approach assumes that patients are examined in a clinical setting after symptoms have developed and after the outbreak has been recognized. Environmental-based epidemiology can provide a means of obtaining early warnings of potential upcoming outbreaks as well as predicting fluctuations of established outbreaks. The overall objective of this project is to establish and maintain a global network for identification and prediction of viral outbreaks using community-composite sampling and environmental-based epidemiology. Our global network, including most ERCA members, will bring together engineers, physicians, and scientists with the goal to validate and apply two versions of Viral-ID (Viral Identification) and Viral-PD (Viral Prediction) models (residential and watershed) for developed and developing urban and rural locations. The project was pre-selected amongst other submissions to potentially receive funding from the Strategic Partnership Grant (SPG) at Michigan State University. It is the intention of the researchers and lead investigators to aggressively seek and secure extramural funding to enhance basic research in automated surveillance and modelling (NSF), clinical predictions (NIH) and global applications (USAID). Lead PI: Irene Xagoraraki. Co-PI's: William Cunningham, Rene Hinojosa, Jiaguo Qi, Shanker Balasubramaniam, and Shinhan Shiu.



Toxoplasmosis and Mental Disorders

Toxoplasma gondii (T. gondii) is the most distributed parasite in the world, and presents in almost all kinds of environments where it may remain infective for months or even for years. The only known definitive hosts for T. gondii are the felids where sexual replication occurs allowing the elimination of thousands of infective oocysts into the environment. When the intermediate hosts are infected, the asexual replication occurs and produces tachyzoites which circulate in the whole organism showing a distinct tropism for the neural and muscle tissue and later develop into tissue cyst bradyzoites. In intermediate hosts such as humans, latent infection with T. gondii has been associated with behavioral changes attributed to a presumed increase in dopaminergic signaling. For this proposal, a multidisciplinary team including medical practitioners, biologists, psychiatrists and psychologists, will investigate the potential role of T. gondii on a variety of mental disorders and suicide, suicide attempts and suicidal ideation. These data will highlight the relevance of Toxoplasmosis as an important and complex health problem affecting the diverse strata of the Yucatan population in Mexico. Lead Pl: Antonio Ortega-Pacheco. Co-Pl's: Jed Magen, Luis Patron-Vazquez, Matilde Jimenez-Coello, Aileen Aldrich, Gloria Arankowski, William Cunningham, Itziar Familiar- Lopez.



Demographic Analysis of COVID-19 Patients in Trujillo, Peru

The objective of the research project is to understand the socioeconomic characteristics of persons infected with COVID-19, where they live, the household living arrangements and their mobility/transportation conditions in relation to the incidence and risks of viral transmission. A survey of patients affected by Covid-19 will be performed by interviewing about 400 persons at two public hospitals covering the area of Trujillo, Peru. The study is sponsored by the Institute for Global Health (IGH), College of Osteopathic Medicine at Michigan State University

(MSUCOM). It is directed by Dr. Ruben Kenny Briceno, affiliated with IGH and the Hospital Victor Lazarte Echegaray in Trujillo, Peru, and assisted by Dr. Rene Hinojosa, Senior Research Advisor at IGH. The survey has been given to patients at Hospital Victor Lazarte Echegaray and Hospital de Alta Complejidad Virgen de la Puerta, Trujillo Peru. This study will also conduct secondary analyses using demographics of COVID- 19 patients who were treated in Trujillo, Peru. The surveys started in late January 2021 and the investigators expect to have materials for publication by the end of 2021. If you would like to know more about this project please contact: Dr. Ruben Kenny Briceno (briceode@msu.edu), or Dr. Rene Hinojosa (hinojosa@msu.edu).

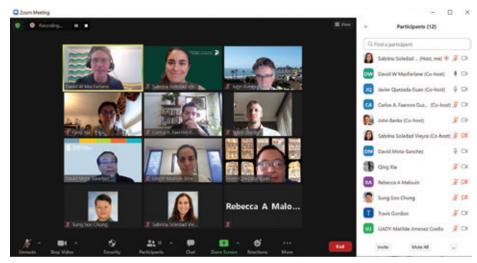


Forest Conservation and Cultivation as Therapy: Restoring Human-Forest Mutualisms in the Yucatán.

Human well-being is derived from complex, global ecological processes, generated by a web of life, composed of countless non-human species. Human societies must actively nurture mutualistic, ecological relationships to sustain a harmonic balance with the web of life that sustains us. The Ecology and Human Well-Being Virtual Institute seeks to (i) explore beneficial connections between human well-being and conservation of biodiversity and healthy global ecosystems and (ii) identify ecologically-based solutions to increase the quality of human life while enhancing the global web of life. For that reason, this virtual institute has selected a project that encompasses all the research interests from our member institutions. The project will work with three (3) main goals below,

- 1. Investigate "analog" forestry systems: to strengthen rural communities, both socially and economically, with tree plantings of high biodiversity chosen to provide commercial products and resiliency, while avoiding agrochemicals and fossil fuels.
- Integrate organic vanilla production into analog forestry systems: Vanilla is a very high value product, indigenous to the Yucatan, but no longer cultivated there at any significant level. This research will explore enriching the genetic diversity of vanilla production systems through conservation and cultivation of vanilla wild relatives, grown in agroforestry systems.
- 3. Link analog forestry systems to human well-being through the One Health concept: this research proposes that active engagement in forest conservation and sustainable cultivation of forest/tree crops could serve as a form of forest 'restoration' therapy for participants, as a co-benefit of establishing and cultivating sustainable analog-agroforestry systems. Principle Investigator: David W. MacFarlane. Co-investigators: Travis Gordon, Javier Quezada-Euan, David Mota-Sanchez, Matilde Jimenez Coello.

If you would like to become an ERCA member and participate in our research projects please send us an email to igh@msu.edu or visit us at https://ighealth.msu.edu/ERCA



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Michigan State University College of Veterinary Medicine and Potter Park Zoo Animal Health Program: A Half-Century of Collaboration in Animal Health Education, Research, and Outreach Dalen W. Agnew, College of Veterinary Medicine, with Potter Park Zoo

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2021