

Symposium 1- Historical Milestones

SY1-01

Historical Milestones for APACPH and Taiwan Wen-Ta Chiu

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Phase I: 1986-1990

- Three Phases Landmarks in APACPH history with Taiwan can be noted.
- Phase 1: 1986-1990 leadership involvement APACPH & Taiwan.

The Hawaii connection. Taiwan's Minister of Health, Prof. Chun-Jen Shih invited APACPH to assist in the training of senior staff in management and public health, in collaboration with School of Public Health of the University Hawaii. Prof. C. C. Yeh, later also the Minister of Health in Taiwan, was in charge of health manpower development then. Prof. Yaw-Tang Shih, Dean of the School of Public Health, National Defense Medical College, was closely affiliated to APACPH since then. APACPH assisted Taiwan's government in sending more than 50 staff for training overseas in short periods as well as in the MPH programs in key US universities, including training programs in the SPH University of Hawaii, while APACPH members and Alumni from US Universities actively involved.

- Phase 2: the 90's - Universities in Manpower Development

Taiwan's Minister of Health Prof. Po-Ya Chang was closely linked to APACPH activities and supported leadership development and women's health issues. The National Taiwan University became the first

University to join the APACPH, particularly in collaboration of training programs. Prof. Ruey-Shiung Lin, the first dean of the School of Public Health of the NTU later became VP of APACPH. The APACPH organized the first meeting in Taiwan on care of elder populations, while faculties from Japan, Taiwan, and Korea and several APACPH member institutions provided the training in leadership on elderly care issues. Prof. Wen-Ta Chiu then as the Dean of School of Public Health in the Taipei Medical University participated at the conference and made his first presentation to the APACPH on subjects of injury prevention & implementation of helmet use in Taiwan. Prof. Ruey-Shiung Lin was acknowledged for his academic and professional work for health improvement in Taiwan and received APACPH PH Recognition Award. The similar training was expanded to cover Taiwan's local provincial health department and on leadership & management of health care. Prof. Lin and Prof. Fred Chang SG were intensively involved.

Later on, the China Medical University had also collaborative activities with the APACPH on related with traditional medicine and environment health/ Several joint programs of study were developed with APACPH institutions and others such as Johns Hopkins University. Then the Minister of Health, Prof. Po-Ya Chang, had played a key figure in enhancing the roles of health care for women in the Asia Pacific Region and led the APACPH team at the Global Health Council at Washington

- Phase 3: the 21st Century new era - Expanding and consolidating partnerships



APACPH's influence on regional development has grown with commitment and specific achievements. Dr. Mark Liveris, APACPH former President from 1996-1998, Prof. Colin Binns, APACPH former vice president 2002-2004, Prof. Brian Oldenburg, the honorary secretary since 2004, and Prof. Kenji Hayashi, the former president 1998-2001, together enhanced management by establishing a very effective APACPH in the Tokyo office. Prof. Kenji Hayashi also published an APACPH book on health care management in the Asia Pacific region. Prof. Liming Lee, former president 2001-2003, further expanded the APACPH membership and brought in Hong Kong, later shown as a very active member. The SARS crisis was a challenge to APACPH and the successful global control was recognized when APACPH Awarded WHO Director-General and the Vice Premier of the People's Republic of China for the great efforts. Prof. Anuar Zaini, former president 2003-2005 also elevated APACPH status across the university and departments in the region. Prof. Amin Jalaludin, vice president since 2008 helped enhance membership, including Malaysia. Prof. Richard Southby, the past president 2005-2007 served at a time of many organizational developments and helped stabilize the APACPH.

- Expanding Horizons

Several areas are of essential interest of the APACPH in the future, including

- ICUH
- COLLABORATING Centers
- Disaster Management & Injury Prevention

- Oral Health & Cancer Prevention
- Rural/Island Health
- Peace & Health
- Research & Publication

41st APACPH Conference in conjunction with 25th Anniversary of APACPH that has improved our quality and collegiality

SY1-02

The Beginnings: Leadership as Instrument of Change **Walter Patrick**

University of Hawaii, USA

APACPH was founded in January 1984 with just five member Universities-Hawaii, Mahidol, Peking Medical, Philippines and Singapore National. Since then the Asia Pacific Academic Consortium for Public Health (APACPH) has grown to 64 members in 21 countries. The membership spans the globe from George Washington University USA to University of Kazakhstan in Almaty and from Tokyo University Japan to Auckland University New Zealand and several other leading universities in countries in between. Unlike other organizations tending to specialize in research or elite partnerships, our purpose was to create long lasting collaborative partnership among the best to assist the neediest with the support of ministries of health and major international organizations. In that perspective we have maintained our founding vision and the working relationships with global agencies like the WHO UNICEF CDC WB whose leadership witnessed the birth of APACPH in Kauai. Twenty Five is a landmark time for any organization more so for fragile international partnerships. As we assess and enjoy the successes in collegiality collective achievements and community outcomes, we are also challenged by the many tasks that lay ahead.

Organizational Networks: The APACPH Collaborating Centers

Promoting leadership for Health was one of our primary goals to influence policy and redirect services to the underserved. The WHO Collaborating Center established (1987-2000) at the University Hawaii with partnership of international agencies and member universities was the key to this effort. Not only did world leaders support this effort but people like Hafdan Mahler (DG WHO) and James Grant (Director UNICEF) and their Regional Directors (SEARO WPRO and PAHO) served as visiting faculty to the center conferences and training programs. Nearly 100 specialists were trained. Doctoral (5) Masters (38) and other research fellows (56) on short term programs were partly or fully funded by the Center, member universities or our global partners. A Multi-University Joint MPH program was generated through this effort.

Over the years APACPH developed the concept of Collaborating Centers where one or more universities with expertise in an area of need (Oral Cancer, hospital management, etc.) and resources would partner with one or more universities usually in an economically less developed country (LDC) in mitigating the problem. Through demonstrated active partnerships, four such APACPH collaborating centers have been established: (i) Disaster Management and Injury Prevention (Lead University Taipei Medical University) (ii) Oral Health & Cancer Prevention (Lead University Kaohsiung Medical University) (iii) Rural /Island Health Research (Lead University University of Malaya Sabah) and Peace & Health (Lead University UHawaii; USC and Colombo Medical College). Another one on Humanitarian Assistance is being planned.

SY1-03

Island Health: Bridging Past and Present

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Objective: The Asia-Pacific region is a region that has small islands. In these islands, people face difficult challenges for the delivery of health care due to complex health, communication and development problems. The Ryukyu Islands have been known as longevity islands with historical successful primary health care stories of elimination of tropical diseases, such as malaria and lymphatic filariasis (LF). After the 2000 G8 Summit in Okinawa, the Global Fund was established in 2002 focusing on infectious diseases. It was also noted in the 4th Pacific Islands Leaders Meeting in 2006, that Okinawa's potential, as an island prefecture of Japan, can contribute further to the sustainable development of the Pacific region. Furthermore, APACPH was founded in 1984 and aimed at contributing towards enhancing public health in the Asia-Pacific region. The University of the Ryukyus joined in 1990. In order to make the

past to be instructive, an effort to bridge the past and present was tried by using a model case of a LF Elimination.

Methods and results: Literature search and review of LF elimination was carried out to clarify the factors of the successive elimination project in Okinawa. The suggested factors were task shifting to paraprofessionals and community participation. The current situation of LF control programme in endemic countries was analysed to point out major problems in each context. Each country is facing problem in service delivery, health work force, health information system, etc. Based on analysis of these problems, the lessons learnt from Okinawa experience will be applied in each context of different islands.

Conclusion: APACPH can learn from Okinawa's success in disease control and it can continue to develop island health through education, research and training of healthcare professionals. More needs to be met to develop island health both for the control of communicable and non-communicable diseases.

SY1-04

APACPH Achievements and New Public Health Challenges in the 21st Century

Pornpimol Kongtip

Mahidol University

After the propitious WHO meetings of the Association of the Schools of Public Health in the Middle East, Africa, S.E. Asia and the Western Pacific regions, senior public health experts met in Bangkok and established the Asia Pacific Consortium for Public Health for the Asia Pacific region. Dr. Debhanom Muangman, then Dean of the Faculty of Public Health, Mahidol University, Bangkok, Thailand, was unanimously elected as the first President of APACPH and Dr. Jerrold Michael, Dean of the University of Hawaii, U.S.A., was elected treasurer. WHO and USAID gave some financial support from the beginning. 22 Public Health Institutions from the Asia Pacific region joined this consortium and so the constitution of APACPH was drafted and the dissemination of the quarterly published APACPH journal of Public Health also began.

Our international collegial collaborations were later expanded when many other well developed countries such as Australia, Japan, and China, also gave funding support.

At Mahidol alone, in 16 years, we have graduated over 19,000 Public Health workers, many of whom were active in subsequently establishing 17 more schools of Public Health in Thailand. Also, almost 900 students from foreign countries have returned to work in their countries after graduating from Mahidol. Our achievements have not gone un-noticed. Our global contribution has been acknowledged by both my receiving the Harvard School of Public Health Alumni Award of merit in 2003, and also our being the recipient of the 2009 Bill Gates foundation which kindly donated

\$8 million to facilitate our extensive Population Development Association project.

In this 21st century we are living with many new Public Health challenges, such as:

1. Population problems i) an aging population, and ii) a refugee population.
2. Emerging new epidemic diseases and new chronic diseases much as H1N1A flu, plague, and HIV etc.
3. Drug addiction and mental illnesses, and 4. An array of environmental problems, and an inadequate budget to combat these challenges.

Ladies and gentlemen while trying to solve all the above Public Health problems with the best medical and public health knowledge, compassion, appropriate technologies, alternative medicines etc., in order to achieve the goal of sustainable health development before the end of the 21st century, I strongly hope that all of you take good care of your health and also the health of your loved ones.

Exercise regularly and refrain from drinking alcohol and smoking. I also recommend that you meditate to calm your mind and body. I meditate for 10 minutes every day and it yields excellent results. Lastly, I wish you all success and happiness in all of your personal and professional endeavors.

Symposium 2 - Health and Green University

SY2-01

Education for Sustainability = Healthy Universities *Ian Thomas*

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Universities play a critical role in shaping the professionals and decision-makers of the future. The education students receive, plus the physical and social situations in which they receive education at universities, guide their future practice. So we need to ensure that students gain an education that helps them to maintain their own health, and to contribute to public health, both directly and through the health of ecosystems. Such issues are not confined to the class-room, but are evident in the students' interactions with others, and with their interactions with their physical surroundings. Irrespective of their faculty or discipline, Education for Sustainability (EfS) provides a framework for making connections between the students' curriculum, the place where they study, their profession, and the community in which they live. Through EfS students are involved in educational approaches that develop a range of skills that enable students to analyse the effects that their decisions can have on the physical environment and ecosystems, on social issues (including public and their own health), and on economics. Development of these skills is assisted by use of the university campus as a 'living laboratory' where projects and internships are used to build sustainability into campus operations, and can be used to support the health of ecosystems, the human community and individuals. These skills are then

available when students graduates and make work-related decisions that can affect ecosystem health, public health, and their own health.

EfS is an important base upon which healthy universities can be established. To provide direction for implementation of EfS the presentation will identify the skills that are associated with this area of education, and examine the role of Problem Based Learning in development of skills.

SY2-02

Chemical Management System in Academic Activities- Experiences in Kyoto University on Chemicals Registration and Asbestos Control *Shin-ichi Sakai*

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Various kinds of chemical substances are used through research and education activities at universities. Appropriate management of the chemicals is essential for protecting students' and staffs' health and from the viewpoint of environmental pollution control. Management system in Kyoto University for many chemicals used in our daily academic life is reported together with the management of the past used asbestos. The amount of chemicals used at Kyoto University in 2006 was; Chloroform: 17tons/ Dichloromethane: 10 tons/ Toluene: 4 tons and Benzene: 0.8 tons. We try to use as little amount of chemicals as possible and have introduced a system, KUCRS (Kyoto University Chemicals Registration System), for the purpose of appropriate management of substances which are in use. This is a uniform management system using web to grasp the status of chemical substances by registering them. It enables us to calculate the transfer amount of chemicals into the air, water and wastes from the data on inventory quantity and usage of chemicals. Results obtained are reported to the PRTR (Pollutant Release and Transfer Register) system.

Health damages by asbestos are now a nationwide concern in Japan. The number of deaths due to malignant mesothelioma, mainly caused by exposure to asbestos, amounted to around 1000 person per year. The main causes of fliable asbestos, which led to its exposure to human, has shifted to the process of renovation, dismantle, rebuilding, and disposal of building from the previous manufacturing, processing and using. At universities, we still have buildings that contain asbestos, and have been trying to take measures to remove them. It is important to prevent exposure of human to asbestos and its emission into the environment during removal.