cgh.uchicago.edu

Saving Lives
AT HOME AND AROUND THE WORLD

Interested in learning more?
VISIT US ONLINE at
cgh.uchicago.edu

CONTACT US at
773.702.5959
uofcglobalhealth@uchicago.edu

University of Chicago Medical Center
Center for Global Health
5841 South Maryland Avenue
MC 2121, Suite G-115
Chicago, IL, 60637
56%
Percentage of African American women who live at least five years after a breast cancer diagnosis, compared to 69 percent of their Caucasian counterparts.

63%
Percentage of deaths worldwide caused by chronic, non-communicable, and often preventable diseases such as Type 2 diabetes, cancer, cardiovascular disease, and lung disease.

7 million
Number of deaths caused by indoor and outdoor air pollution each year.

270 million
Number of children in the developing world (1 in 7) who lack access to health services.
At the Forefront of Global Health

The University of Chicago Center for Global Health collaborates with local and global partners to increase access to global health education and training; foster the development and dissemination of new knowledge; create service learning opportunities; and address global health challenges in novel, transdisciplinary, and sustainable ways to reduce health disparities and inequities in Chicago, our nation, and around the world.
Meeting the Global Health Challenge

A Crisis of Global Proportions

In the 20th century, spectacular advances in medicine — from lifesaving vaccines to cures for deadly diseases — ushered in a golden age in public health. Yet, in the 21st century, new public health challenges have emerged. With increasing globalization, air travel carries once-isolated diseases across borders in a matter of hours. Chronic, non-communicable — and often preventable — diseases such as diabetes and cancer are now responsible for more than half of all deaths worldwide. There are also heartbreaking health disparities that must be addressed. Infant mortality rates are 15 times higher in parts of Africa and Asia than in the developed world, while the average life expectancy in Chicago varies from 65 years in the city’s poorest neighborhoods to 85 years in its more affluent communities.

A Call to Action

Because poor health in any population affects us all — destabilizing economies, disrupting trade, diminishing productivity, depleting our resources, and causing untold human suffering — the global health crisis is a call to action that cannot be ignored. The Center for Global Health is answering this call by drawing on the university’s strengths and resources in fields as diverse as medicine, computation, life sciences, social sciences, and public policy. By serving as a hub for interdisciplinary inquiry, the Center for Global Health is fostering innovation, facilitating groundbreaking research, and advancing the effort to promote and protect health in our community, our country, and around the world.
“We must marshal all of our knowledge and resources to alleviate health-related human suffering, whether this suffering is caused by a catastrophic earthquake, a deadly epidemic or a chronic disease. By leveraging the University of Chicago’s strengths in medicine, public policy, economics, computation, life science, social science, and other disciplines, we have the potential to save untold lives, reduce health disparities, and influence health practices in Chicago’s communities and in distant parts of the globe. The time to act is now.”

Olufunmilayo I. Olopade, MD, FACP, OON
Walter L. Palmer Distinguished Service Professor
Director, University of Chicago Center for Global Health
Shaping the Future of Global Health

Today, the University of Chicago Center for Global Health is expanding opportunities for global health education, research, and clinical service: using genomics to reveal the underlying causes of disease and health disparities; translating basic scientific discoveries into innovative treatments; implementing interventions to reduce household air pollution to improve the health of mothers and children; and forging alliances within the University and around the world to strengthen health systems and increase access to quality care.

Since its inception, the Center for Global Health has forged strong relationships throughout the University and the Pritzker School of Medicine while providing a unifying framework for students, faculty, and staff with an interest in global health. This interdisciplinary focus fosters the development of innovative solutions to the numerous health challenges facing vulnerable populations in Beijing, Chicago, Ibadan, and Kumasi, as well as other locations around the globe.

The extensive international affiliations of Center for Global Health faculty members have opened doors to a wide variety of local and global training and research opportunities. These international connections provide a global infrastructure for the education, service, and research activities of Center for Global Health scholars and their students who, through their academic endeavors, will help pave the way for future breakthroughs in global health.

“The Center for Global Health fulfills a critical need. Ninety-five percent of worldwide health research funding goes to medical problems that affect only five percent of the population. It takes a program like ours to do research relevant to the needs of people in developing nations.”

Christopher Sola Olopade, MD, MPH
Professor of Medicine
Clinical Director, University of Chicago Center for Global Health
Our Goals

- To collaborate with communities and partner institutions worldwide to **advance global health education, research, and clinical care**
- To focus on global health topics that **leverage the University’s existing strengths**, including chronic disease across the lifespan, maternal and child health, genomics and systems biology, climate change, and urban health services and systems delivery
- To engage the collective expertise of faculty and students in the University’s departments of medicine, social sciences, anthropology, business, law, and public policy to **develop interdisciplinary solutions for complex global health problems**
- To address healthcare disparities and inequities in novel and sustainable ways
- To use genomics to **reveal the underlying genetic causes of disease and health disparities**

Our Four Areas of Focus

**Education**
The Center for Global Health connects University of Chicago students and faculty to a wide range of global health opportunities on campus and sponsors global health seminars, workshops, panel events, and lectures throughout the academic year. The Center also coordinates a comprehensive global health education program that includes the Global Health Scholars Track at the Pritzker School of Medicine; introductory and topics courses on global health for undergraduate and graduate students; summer global health research projects, internships, and fellowships; and opportunities to engage in fieldwork or service learning at international sites under the sponsorship of Center for Global Health faculty for students at all levels and in all programs of study.

**Research**
The Center for Global Health promotes and supports research activities at partner sites in low- and middle-income countries. As part of a major research university, the Center encourages faculty and student research that advances the field of global health and leverages the University of Chicago’s institutional strengths, with an emphasis on the following areas: health, environment, and vulnerable populations; maternal and child health; chronic, non-communicable diseases across the lifespan; and health systems development.

**Training and Professional Development**
The Center for Global Health offers a wide range of opportunities for University of Chicago students and medical residents to **train at partner sites around the globe**, as well as opportunities for international students, residents, and scholars to spend mentored time with faculty at University of Chicago Medicine.

**Advocacy and Service**
University of Chicago faculty, students, and staff are committed to serving locally and globally to **strengthen health systems in an interdependent world**. The Center for Global Health facilitates this service by matching the University’s institutional strengths to in-country needs. After Haiti’s 7.0-magnitude earthquake in 2010, the Center partnered with the Chicago Medical Consortium to serve as the central command for Chicago’s Haiti Response. The Center also supports the efforts of University of Chicago faculty interested in organizing international humanitarian disaster responses or performing sabbaticals in low-resource areas.
Our Global Reach

The Center for Global Health has forged partnerships across the University of Chicago campus and at sites around the world where faculty members, students, and trainees can participate in clinical or research activities.

Our Partners

The University of Chicago has established formal, reciprocal partnerships with these and other institutions around the globe to share resources and offer training opportunities for students and faculty.

LOCAL
- Chicago Council on Global Affairs
- Illinois Department of Public Health
- Chicago Family Health Center
- Metropolitan Chicago Breast Cancer Task Force
- Susan G. Komen Chicagoland Area
- The University of Chicago College and Graduate Schools

GLOBAL
- Argentina
  - Hospital Italiano de Buenos Aires
  - Universidad Nacional de la Plata
- Bangladesh
  - Bangabandhu Sheikh Mujib Medical University, Dhaka
  - UChicago Research Bangladesh
- Chile
  - Universidad Andrés Bello, Santiago

China
- China Medical University, Shenyang
- Peking Union Medical College, Beijing
- Shanghai Children’s Medical Center
- Shanghai Renji Hospital and Shanghai IBD Center
- Wuhan University
RESEARCH IN ACTION

Why Breast Cancer Hits African Women Harder and Earlier

While practicing on the South Side of Chicago, Olufunmilayo “Funmi” Olopade, MD, treated a disproportionately high number of African American women with an aggressive form of pre-menopausal breast cancer similar to what she had seen as a medical student in Ibadan, Nigeria. She began to wonder: Was there an underlying genetic factor that predisposed women in the African diaspora to this early onset breast cancer? This question prompted her to travel back to Nigeria to study genetic patterns of breast cancer in women who were indigenous to the region. While conducting the research in partnership with investigators at the University of Ibadan, Dr. Olopade found that the majority of African women diagnosed with breast cancer had triple-negative tumors—a type of breast cancer that progressed rapidly and did not respond to first-line treatments currently in use. Her research also identified breast cancer mutations in African families that are markedly different from those found in Caucasian women—a breakthrough that has changed the course of breast cancer screening and treatment on the African continent and in communities all over the world.

“We cannot wait for developing countries to catch up on genomic research,” says Dr. Olopade. “We must go out and implement evidence-based interventions to save women’s lives and reduce global breast cancer disparities now.”

GHANA
- Komfo Anokye Teaching Hospital, Kumasi
- Kwame Nkrumah University of Science and Technology, Kumasi
- Maternal and Child Health Hospital, Kumasi

INDIA
- Science Health Allied Research Education (SHARE), Hyderabad

LEBANON
- American University of Beirut

MADAGASCAR
- Centre Hospitalier Universitaire de Flanarantsoa

NIGERIA
- Lagos State University Teaching Hospital, Lagos
- University of Ibadan/University College Hospital

SOUTH KOREA
- Asan Medical Center, Seoul
- University of Ulsan College of Medicine, Seoul

UNIVERSITY OF CHICAGO CENTERS
FRANCE
- University of Chicago Center in Paris

INDIA
- University of Chicago Center in Delhi

CHINA
- University of Chicago Center in Beijing
Key Partners and Projects

Since 2009, the University of Chicago Center for Global Health has developed key relationships with these and other partner institutions and organizations to address pressing global health issues in low-resource regions.

DHAKA, BANGLADESH
Bangabandhu Sheikh Mujib Medical University
The University of Chicago Research Facility in Bangladesh is a well-established center offering exposure to public health interventions and research efforts in chronic diseases, as well as the opportunity to examine the correlation between health and the environment.

HYDERABAD, INDIA
Science Health Allied Research Education
Science Health Allied Research Education (SHARE)-India provides rural outreach and care focused on infectious diseases. Students can participate in research projects investigating the health issues that affect the rural and urban poor in India, including the role of social networks in HIV tracking and prevention.

SANTIAGO, CHILE
Universidad Andrés Bello
Medical students and trainees have the opportunity to participate in clinical rotations through the Universidad Andrés Bello at both public and private hospitals in Santiago while improving their Spanish language skills.

IBADAN, NIGERIA
University of Ibadan
The Chicago-Ibadan partnership exposes students and trainees to cutting-edge research on the science of health disparities through collaborative projects in maternal and child health, breast cancer, pulmonary diseases, and sickle cell disease. University of Chicago faculty, trainees, and students can experience healthcare delivery in a resource-limited setting, particularly as it relates to rural and tropical medicine.

CAPETOWN, SOUTH AFRICA
University of Capetown
By working in a variety of health clinics, students and trainees can learn how sustained partnerships with local, community-based organizations play an integral role in improving health outcomes and service delivery.

BEIJING, CHINA
Peking Union Medical College
Medical students and trainees have the opportunity to participate in clinical electives and observerships, as well as collaborative research, joint seminars, and symposia through our partnership with the Peking Union Medical College.
Using Big Data to Forecast Food Security

Joshua Elliot and Ian Foster of the Computation Institute, a joint initiative of the University of Chicago and Argonne National Laboratory, are in a race against time. As the world heats up, the two research scientists are working together to predict the impact of climate change on one of our most critical global health issues: food and water security.

By feeding massive amounts of data into state-of-the-art supercomputers, the pair is creating cutting-edge climate models to predict the dramatic effects that increasing temperatures, rising sea levels and changes in precipitation will have on agriculture and freshwater supplies — particularly in the developing world, where drought and famine already pose serious threats to human survival.

Elliot and Foster connect these climate models with models for agriculture, hydrology, economics, and other sectors to create multifaceted forecasts of global climate impacts. Their work with the Computation Institute’s Center for Robust Decision-Making on Climate and Energy Policy helps inform governments around the world about the best strategies for coping with the consequences of climate change.
Through the Center for Global Health, University of Chicago students and trainees are engaged in global health projects worldwide. These future leaders in global health are being mentored by University of Chicago faculty members as they study the impact of environmental pollution and climate change on health, track the transmission patterns of HIV to stop the global spread of AIDS, evaluate the economic barriers to breast cancer care, and more. Their training and service in developed and developing countries, in bustling metropolises and remote rural outposts, in the laboratory, and in the field is helping to pave the way for lifesaving therapies and programs to prevent disease and promote health in every part of the world. The following stories are just a small sampling of the opportunities available to University of Chicago students and trainees as they prepare for future careers working on the front lines of global health.

RESEARCH IN ACTION

Investigating the Impact of Household Air Pollution

More than three billion people worldwide rely on firewood, coal, and kerosene for their cooking and heating needs. Burning unclean fuels in homes with inadequate ventilation causes pollution linked to acute lower respiratory infections, chronic obstructive pulmonary disease, ischemic heart disease, and stroke. Household air pollution contributes to more than four million premature deaths each year. Women and young children, who spend more time indoors, are disproportionately affected by this household hazard.

Pulmonologist Sola Olopade, MD, clinical director at the Center for Global Health, and his team have demonstrated the severity of household air pollution from cooking with firewood indoors and its adverse impact on the lung health of women and children in Ibadan, Nigeria. He is currently leading a multidisciplinary team of investigators in the first randomized control intervention study to rigorously investigate the impact of exposure to air pollution on pregnancy outcomes in a cohort of Nigerian women.

The team will determine the personal exposure of pregnant women to pollutants and compare outcomes in women using clean-burning bioethanol stoves with those using traditional fuels while monitoring intrauterine growth rates, fetal birth weights, and the frequency of adverse pregnancy outcomes. The study outcome will have significant policy implications for the adoption of safe cooking stoves.
Improving Cancer Care in Rwanda

The war on cancer in Rwanda is just beginning, and Rebecca DeBoer, MD, is training on the front lines — thanks to a unique fellowship offered through the University of Chicago Center for Global Health.

“If there were ever any doubt that cancer is a pressing problem in rural east Africa, the overflowing oncology ward and clinics at the Butaro Cancer Center for Excellence in Rwanda provide ample confirmation,” says Rebecca DeBoer, MD.

Yet, according to the 31-year-old physician — who recently completed her internal medicine residency at the University of Chicago and plans to pursue a career in global health and oncology — those intent on treating cancer in Rwanda face frustrating obstacles.

“There are no oncologists in Rwanda,” she points out.

“Diagnostic technologies at the Butaro Cancer Center are basic, the nearest CT scanner is an hour or two away, the closest blood bank is 45 minutes away, and the closest radiation machine is in Uganda.”

Despite the dearth of local resources, strides have been made in building capacity through an international collaboration between the Rwandan government and Partners in Health. With the opening of the Butaro Cancer Center in 2012, patients with treatable malignancies are receiving care that is transforming what would have been a certain death sentence into a new lease on life.

But the war on cancer in this resource-poor region is just beginning — and DeBoer is training on the front lines — thanks to a unique fellowship offered through the University of Chicago Center for Global Health.

DeBoer spent the first six months of her fellowship mastering basic global health competencies through an orientation and practical training at the University of California San Francisco, an Introduction to Global Health and Social Medicine course offered by Partners in Health in Haiti, and a series of workshops with other global health trainees at the University of Chicago.

With this training completed, DeBoer is heading to northern Rwanda to spend six months working as a district clinical associate (DCA) at the Butaro Cancer Center. As the Center’s Oncology DCA, she will oversee the management of cancer patients using treatment protocols developed for the Rwandan context and play an integral role in multidisciplinary initiatives that are currently underway to improve cancer care delivery at Butaro. She will also be involved in training Rwandan general practitioners who rotate through the oncology service.

For DeBoer, the fellowship is a long-harbored dream come true.

“There are many opportunities to gain global health training in disciplines such as infectious disease,” she explains. “But a global focus on oncology is just beginning to gain momentum. Training opportunities in this field are still rare.

“This is my chance to get firsthand experience on the ground, in the trenches, taking care of cancer patients and really getting a good understanding of what the needs and challenges are,” DeBoer reflects. “This fellowship has truly opened the door for me to a career in global health.”
Meeting Mental Health Needs in the Developing World

Since his first year as a student at the University of Chicago Pritzker School of Medicine, Kunmi Sobowale had been searching for training opportunities in global mental health as he prepared for a career as an academic psychiatrist. But opportunities to conduct research in global mental health were few and far between.

Three years later, he found his opportunity — thanks to a Fogarty Global Health Fellowship — a prestigious, one-year clinical research training program for pre- and post-doctoral candidates. Cosponsored by the Fogarty International Center and the National Institutes of Health (NIH), the fellowship connects some of the brightest aspiring scholars with mentorship and research opportunities that foster leadership in health.

“I was able to undertake this fellowship because I had great mentors at the University of Chicago who supported my research interests and endeavors in global health,” says Sobowale today.

When Sobawale applied for the fellowship, there were three projects focusing on mental health. One — a research study on a novel psychotherapy approach for low-income women in Vietnam — appealed to Sobowale because of his interest in mental health equity and access to care.

It is common knowledge that mental health resources in the developing world are scarce. According to the World Health Organization, 75 to 85 percent of people with severe mental health conditions in low- to middle-income countries do not have access to mental health treatment.

Sobowale encountered this sobering reality soon after his arrival in Vietnam as a Fogerty Fellow.

“In Vietnam, there is only one psychiatrist for every 300,000 people,” he states. “People living in poverty in Vietnam are more likely to have traumatic life events that increase their risk for depression, while people with schizophrenia are more likely to face discrimination and reduced economic opportunity.”

During his fellowship, Sobowale collaborated with experts at the Da Nang Psychiatric Hospital and local, non-governmental organizations to stem the increasing tide of morbidity and mortality associated with mental disorders.

He worked closely with Tam Nguyen, the program manager for BasicNeeds Vietnam, which was launched in 2010 to help people with mental illness live and work successfully in their communities by combining health, socioeconomic, and community-oriented solutions with changes in policy, practice, and resource allocation.

“They tested the novel delivery of psychotherapy, combining psychotherapy with a livelihood intervention to reach women facing the dual burdens of poverty and mental illness. “To my knowledge, this is the first study to use these psychotherapies to teach income-generating skills — and one of the first studies to use behavioral activation and problem-solving psychotherapies in a low- or middle-income country,” says Sobowale. “The women in the study acquired skills that will enable them to deal with their depression and escape poverty.”

Sobawale feels that his experience in Vietnam laid a solid foundation for his future career as an academic psychiatrist. He gained quantitative, qualitative, and project management skills while forging important connections with fellow pioneers in the field of global mental health.

By leveraging these skills and connections, Sobowale hopes to continue his work at the forefront of global health — and help bring about lasting change in the lives of mentally ill people in developing countries around the world.

Training to Advance Breast Cancer Research in Nigeria

Like many of us, Stella Odedina has a personal stake in the global fight against cancer. Just as she was about to begin her PhD studies in epidemiology at the University of Ibadan in Nigeria, her aunt died of breast cancer. The graduate student was not alone in her loss. Every day in Nigeria, 30 women die from the disease, leaving mourning family members like Odedina behind.

The hard reality of breast cancer mortality in her country shaped the course of Odedina’s subsequent studies — and she made a resolution to devote her life to breast cancer research. While pursuing her PhD studies, she began her clinical research training, recruiting participants and collecting blood samples for a collaborative research study on cancer risk conducted by the University of Chicago and the University of Ibadan.

In 2012, Funmi Olopade, MD, director of the University of Chicago’s Center for Global Health, visited the Ibadan campus. She was there to share the news about a recent National
Institutes of Health (NIH) grant that the center had been awarded to train clinical researchers from developing countries in complementary, interdisciplinary skills in fields related to their work in healthcare — skills in areas such as bioethics, behavioral science, epidemiology, and health policy. Dr. Olopade saw the grant as an opportunity to help develop world-class, interdisciplinary research capacity in Africa — and she was looking for applicants.

Odedina jumped at the chance. She submitted her application, got accepted into the program, and traveled the 6,000 miles from Ibadan to the University of Chicago campus to further her training. In Chicago, she has taken courses in topics such as Health Services Research and Proposal Development through the Summer Program in Outcomes Research Training while working on her dissertation proposal, which she has presented to a diverse team of researchers and clinicians.

“I also participate in lab meetings for the Nigerian Breast Cancer Study, where I get to hear directly from the scientists,” says the 32-year-old doctoral student.

The interdisciplinary meetings have inspired Stella to advance her knowledge of the science behind breast cancer diagnosis and treatment.

“I have a growing interest in molecular and cell biology,” she notes, “These meetings are shaping my career goals.”

Odedina’s training at the University of Chicago will enable her to become a leader in lifesaving clinical research in Nigeria. She will also be able to use what she has learned to coach her team in the rigorous scientific and ethical standards that will enable them to explore new frontiers in breast cancer treatment and prevention.

“There is so much that I can share with my research team back home,” she points out. “For instance, many members of my team are interested in learning STATA [a powerful statistical analysis software program], and now I will be able to train them.”

Ultimately, Odedina hopes to follow in the footsteps of her fellow Nigerian, Dr. Olopade. She plans to pursue a career in health sciences and hopes to one day lead her own breast cancer research lab, where she will continue to advance research in her field until women like her aunt will have a fighting chance in the battle against breast cancer.

**RESEARCH IN ACTION**

**Evaluating the Health Effects of Arsenic Exposure**

Today, 77 million people in Bangladesh are suffering from arsenic poisoning — the result of a disastrous “water improvement” project back in the 1970s. The poisoning began when well-intentioned development groups dug millions of hand-pumped tube wells, which they encouraged villagers to use for drinking and cooking instead of relying on potentially contaminated surface and river water. But a deadly health threat was lurking in the wells, where naturally occurring arsenic was leaching into the water.

By the early 1990s, Bangladesh was in the midst of a public health crisis described by the World Health Organization as the “largest mass poisoning of a population in history.” Arsenic poisoning would soon prove to be responsible for a host of deadly ills, ranging from skin lesions and cancers of the skin, bladder, liver, and kidney to cardiovascular, endocrine, and neurodevelopmental disorders.

In 2006, University of Chicago epidemiologist Habibul Ahsan, MD, and two colleagues from Columbia University founded UChicago Research Bangladesh (URB), a center for arsenic-related research, treatment, and education in Bangladesh. Dr. Ahsan and his team are currently leading a series of large epidemiological and clinical studies at the center to investigate the health effects of arsenic exposure and evaluate strategies for prevention.
Training Tomorrow’s Global Health Leaders

The Center for Global Health serves as a gateway to global health education and training, connecting students and faculty at the University of Chicago and partner sites around the world to a wide variety of local and global health opportunities. The Center sponsors seminars, workshops, and lectures on global health topics and manages a comprehensive, interdisciplinary global health education program at the undergraduate, graduate, and professional levels.

Pritzker School of Medicine

The Center for Global Health works closely with the University of Chicago Pritzker School of Medicine to provide and support diverse opportunities for medical students interested in global health. Through the Global Health Scholars Track, Summer Research Program, international clinical electives, and various student interest groups, global health is robustly integrated into the Pritzker experience.

Global Health Scholars Track

This comprehensive, four-year curriculum is part of the Scholarship and Discovery curriculum at the Pritzker School of Medicine. Because global health is a multidisciplinary endeavor, the Global Health Scholars Track draws upon disciplines throughout the University and exposes students to fields that are essential to the pursuit of global health, including epidemiology, biostatistics, economics, sociology, anthropology, law, ethics, and human rights. The track combines didactic, seminar, clinical, and research components to foster the development of the diverse skills needed to work successfully with patients, health systems, and institutions around the world.

Summer Research Program

The 11-week summer medical research program gives first-year medical students an opportunity to work with faculty mentors while conducting research at local, national, and global sites.

International Clinical Electives

These supervised training opportunities enable medical students to engage in research projects at partner institutions worldwide while developing clinical and research skills vital to a career in global health.

The Global Health Certificate Program

THE GRADUATE PROGRAM IN HEALTH ADMINISTRATION AND POLICY (GPHAP) offers the Global Health Certificate Program, which was developed by the Center for Global Health, the Pritzker School of Medicine, and GPHAP. The program — which draws students and faculty from the University’s graduate schools of business, social service administration, medicine, law, and public policy — focuses on low- and middle-income countries and trains students for leadership roles in global health. Applicants must be enrolled in, or admitted to, one of the participating professional schools.

“Global health problems require innovative solutions — solutions that cannot be arrived at without effective global collaboration and interdisciplinary teamwork.”

Leyla Ismayilova, PhD
Professor, University of Chicago Graduate Program in Health Administration and Policy

Dr. Ismayilova studies child mental health and well-being in sub-Saharan Africa, the Middle East, and the former Soviet Union.

Global Health Hospital Medicine Fellowship

This global health opportunity within the University of Chicago Hospitalist Scholars Training Program trains hospitalists in care delivery, medical education, and quality improvement in resource-limited settings. The program is ideal for graduating residents or early-career hospitalists who plan to pursue careers in global health. In addition to service as hospitalists at the University of Chicago, participants engage in clinical service opportunities at a partner site in a resource-limited setting.
The College

The Center for Global Health is committed to increasing global health opportunities for students in the College — both in the classroom and in the field. The Center played an integral role in the development of the College’s Introduction to Global Health and Topics in Global Health courses and continues to advocate for expanded course offerings in global health and increase the number of global health internship opportunities at partner sites.

Student Programs

GLOBEMED links undergraduates with partner organizations in Africa, Asia, and the Americas to support maternal health, water, sanitation, hygiene, nutrition, and income-generation projects, as well as communicable disease prevention and capacity building.

HEALTH LEADS recruits and trains local college students to serve as Health Leads Advocates at our partner clinics, where they connect patients with basic healthcare resources.

MEDLIFE improves access to healthcare, education, and sustainable development in low-income countries. The University of Chicago chapter works to extend the right of healthcare to all Chicagoans and organizes weeklong mobile clinic trips abroad.

TEAM HBV engages students to prevent and control hepatitis B and liver cancer in their communities through educational outreach, advocacy, community partnerships, and prevention.

THE CENTER FOR GLOBAL HEALTH VOLUNTEER PROGRAM offers opportunities for students to gain valuable insights into the world of global health research and policy as they work with staff members on global health projects.

THE MEDICAL AND PUBLIC HEALTH BRIGADES at the University of Chicago are student-led brigades that develop and implement sustainable health initiatives and public health programs in Honduras and Panama.

EDUCATION IN ACTION

Studying Community Needs in Ghana

Zimbabwe native Kimberley Mbayiwa is passionate about the region in which she was born and raised. Yet the quality of life in her homeland — and many other countries in Sub-Saharan Africa — is marred by economic crisis, poverty, unemployment, political strife, repression, and a woefully inadequate health infrastructure.

Mbayiwa hopes to help change that. The 25-year-old international student, who is pursuing her master’s degree at the University of Chicago School of Social Service Administration (SSA), is enrolled in the Global Health Track of the Graduate Program in Health Administration and Policy (GPHAP) to gain the skills and knowledge she needs to improve the mental, physical, and social well-being of vulnerable populations in the Sub-Saharan region.

“My GPHAP practicum enabled me to work with Dr. Sola Olopade in Ghana, where the Center for Global Health is improving and expanding community development projects in rural areas,” says Mbayiwa.

Mbayiwa was also awarded a GPHAP Arthur Quern Fellowship, which supports summer fieldwork, internships, and independent projects that foster the development of leadership skills in the field of health policy and management. The fellowship, combined with support from the Center for Global Health, enabled Mbayiwa to conduct a community needs assessment to identify local priorities in two rural communities in the Ashanti region of Ghana.

In Ghana, Mbayiwa worked closely with local partners to engage leaders and community members in a dialogue. Using elements of community-based participatory research that included observation, community mapping, and focus groups, she helped define needs and identify community strengths, weaknesses, and resources. By analyzing this data, she hopes to make recommendations for interventions to sustainably support social, economic, and health systems in CGH working areas.

“This opportunity enabled me to put my education into action,” says Mbayiwa, “and inspired me to pursue a career in research, policy, and programming in Sub-Saharan Africa.”
Global health cannot be achieved by one nation, one organization, or one university working alone. We must work together — across disciplines and across borders — drawing on our diverse skills and knowledge, sharing our resources, and committing our time and talent to save lives, reduce health disparities, and strengthen health systems. Whether you are a student, physician, scientist, or educator; a corporate partner or a community leader; a philanthropist or a concerned citizen, your involvement with the Center for Global Health will have a profound and lasting impact, alleviating human suffering and enhancing health far beyond the borders of our city and our nation.

There are many ways to get involved:

LEARN
- Sign up to receive updates about global health activities, events, and funding opportunities at cgh.uchicago.edu/contact-us.
- Attend global health workshops, panel discussions, and lectures sponsored by the Center for Global Health.
- Enroll in a global health course at the College.
- Spend mentored time with faculty members affiliated with the Center for Global Health.
- Become a Global Health Scholar at the University of Chicago Pritzker School of Medicine.
- Sign up for one of our global Summer Research Projects for medical students.
- Become a University of Chicago Global Clinical Research Fellow.

SERVE
- Serve locally or globally by helping with humanitarian disaster responses.
- Engage in fieldwork or service learning opportunities at international sites under the sponsorship of faculty affiliated with the Center for Global Health.
- Join one of our student global health groups.
- Perform a sabbatical in a low-resource area.
- Mentor a student interested in global health.

SUPPORT
- Support our efforts by giving online at cgh.uchicago.edu.
- Support our Global Health Scholarships, which enable students at the Pritzker School of Medicine to engage in research and service in international health settings during their breaks from medical school.
- Sponsor a fieldwork initiative or research site.

“A child could die of a broken arm or diarrhea in Ghana. Most likely, a child in Chicago would not die of those things. That hit me hard. I thought, ‘This is worth supporting.’ People think of philanthropy as one party giving and the other receiving, but I now think of it more as sharing. We’re providing what we have — and they’re providing what they have. It’s a human interchange.”

Susan R. Kiphart
Benefactor, University of Chicago Center for Global Health
Interested in learning more?

VISIT US ONLINE at
cgh.uchicago.edu

CONTACT US at
773.702.5959 or
uofcglobalhealth@uchicago.edu

University of Chicago Medical Center
Center for Global Health
5841 South Maryland Avenue
MC 2121, Suite G-115
Chicago, IL 60637
cgh.uchicago.edu

Saving Lives
AT HOME AND AROUND THE WORLD

Interested in learning more?
VISIT US ONLINE at
cgh.uchicago.edu
CONTACT US at
773.702.5959
uofcglobalhealth@uchicago.edu
University of Chicago Medical Center
Center for Global Health
5841 South Maryland Avenue
MC 2121, Suite G-115
Chicago, IL, 60637