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Topic 18: FELLOWSHIP PROGRAM

Pursuant to Resolution XV on this topic adopted by the Directing Council at its X Meeting,^{1/} the Director has the honor of presenting the following report to the XV Pan American Sanitary Conference for consideration.

Report

The study of the fellowship program undertaken in conformity with the afore-mentioned resolution covers all phases of that program, even at the risk of repeating some material already analyzed in previous reports presented to the governing bodies since 1953.

Together with the description of the different phases of the program, an examination is made of the problems that have arisen, the consequences thereof, and possible solutions that could be adopted.

The following aspects of the program have been studied: (a) purpose; (b) priorities; (c) commitments inherent to fellowship awards; (d) selection of fellows; (e) duration of fellowships and facilities furnished; (f) processing of fellowship applications; (g) program and placement; (h) notification of fellowship awards and travel arrangements; (i) orientation and guidance during courses of study; (j) contact with the fellow after completion of studies; (k) scope and financing of the program; (l) coordination with other organizations; (m) evaluation; and (n) general considerations.

I. Purpose of the Program

The constant development of the medical sciences and the advances made in the prevention of disease have brought about in all countries a shortage of public health workers, such as physicians, sanitary engineers, nurses, and auxiliary personnel. The problem of

training those workers varies from one country to another according to the stage of development the country has reached and the educational facilities and services it has available. Even though all the countries are expanding their national facilities for basic professional education, they must still turn to international cooperation for assistance in broadening the studies and specialized training of health personnel. Many agencies -- private, governmental, and intergovernmental -- have for years maintained fellowship programs for the purpose of offering opportunities and facilities for study and training abroad in the fields of public health, medicine, and related sciences when such training is not available in the candidate's own country. The Organization has participated systematically in this effort.

To fulfill these objectives, the Organization's fellowship program facilitates the training of personnel by making available opportunities for:

- a. attendance at academic courses leading to a postgraduate certificate, degree, or diploma.
- b. attendance at courses and similar group education activities limited to a specific purpose; and
- c. observation of practices and techniques through visits to teaching centers and services.

Also, seminars of one or two weeks' duration are frequently organized for the purpose of promoting the study or the development of a specific technical project. There is no "professor-student" relationship in the seminars, since only highly qualified professionals are invited, in agreement with the governments. Persons attending a seminar are referred to as "participants" rather than "fellows."

II. Priorities

Priorities within the fellowship program are adapted to the needs of countries and to the constantly changing developments with respect to public health problems. At present, the fields of study for which fellowships are awarded are classified as follows:

- Public health administration
- Environmental sanitation
- Nursing
- Maternal and child health
- Other public health services, including: mental health, health education, occupational hygiene, nutrition, health statistics, dental health, rehabilitation, and control of pharmaceutical products
- Communicable disease services
- Medical sciences and education

As an example of the changing pattern of public health problems, one can cite the appreciable number of fellowships awarded recently for the study of such subjects as resistance to insecticides and the general aspects of ionizing radiation.

As a result of systematic planning of long-range programs sponsored by the different countries and by the Organization, an attempt has been made to incorporate fellowships as an integral part of national programs already under way or about to be initiated. It has been deemed advisable to give preference to fellowships that promote the development of programs undertaken by the countries with the collaboration of the Organization, as well as activities for the improvement of facilities and services for the education of professional and auxiliary personnel.

On the basis of these considerations, the following priorities are being applied at the moment:

Persons who are, or will be, working in projects conducted by the governments with the collaboration of the Organization.

Professors in schools of public health, and professors who are responsible for teaching preventive medicine and other public health subjects in schools of medicine, dentistry, nursing, veterinary medicine and engineering.

Deans and directors of schools of medicine, to study the basic organization of medical education programs.

Personnel of the public health services (physicians, dentists, sanitary engineers, nurses, veterinarians, health educators, statisticians, nutritionists, laboratory technicians, etc.) and hospital administrators working in government services.

Professors of basic sciences in schools of medicine.

Professors of clinical medicine, when it is necessary to correct an important deficiency in the educational program.

III. Commitments Inherent to Fellowship Awards

The application for and the award of a fellowship create specific responsibilities and obligations for the respective governments, for the candidate, and for the Organization, as follows:

1. In the fellowship application (Annex , page 1), the government guarantees that "the studies to be made under this fellowship are necessary for the strengthening of the national health services

of the country and in the case of a fellowship being granted, full use would be made of the fellow in the field covered by his (her) fellowship." Moreover, the government guarantees that "the absence of the candidate during his (her) studies abroad would not have any adverse effect on his (her) status, seniority, salary, pension and similar rights," and that "on return from the fellowship it is proposed to employ the fellow."

2. The candidate agrees to return to his home country "at the end of the fellowship and to continue in, or enter the service of, the national health administration -- or a technical institution approved by it -- for at least the first three years after completion of the fellowship" and to "comply with the rules summarized in the information booklet" which is delivered to the fellow when the fellowship is awarded (page 5 of the fellowship application).

3. The Organization makes the appropriate plans for study abroad, the necessary arrangements as regards countries and places of study, and provides the necessary financial assistance for these studies.

IV. Selection of Fellows

Of the entire process of awarding fellowships, the selection of qualified fellows is undoubtedly the most important phase. All the attention given and efforts expended in this connection are fully warranted, because the success of the fellowship program depends essentially on the manner in which the selection is made.

The selection of qualified candidates affects in the long run the efficiency of the program in which a fellow is to be employed, and it involves the most profitable utilization of time and money, for the government, for the fellow, and for the Organization. An unqualified fellow clearly jeopardizes the good relations that should exist between the Organization granting the fellowship and the institution receiving the fellow.

In making the selection of fellowship candidates, a number of varied factors must be considered. On the one hand, the technical and personal qualifications of the candidate are very important; on the other, it is necessary to take into account the number of acceptable candidates and their opportunities for making a career in the public health services, as well as the relationship between the selected field of study and the priorities established by the countries.

The determining factors in every selection are: basic education, proficiency in previous studies, experience in the subject to be studied

(at least two years), opportunities within the candidate's own country for the study of the particular subject, functions previously performed and those to be performed on completion of the fellowship, and benefits to be derived from the studies by the candidate's country of origin. At the same time that the candidate's technical qualifications and the educational background are determined, the following must be taken into consideration: age (not older than 55 if retirement age is 60); state of health; emotional stability and maturity; personality; aptitude for the planned work; and, particularly, adequate knowledge of the language in which the studies are to be taken.

In addition to those factors, the candidate wishing to study abroad should have the ability and adaptability necessary to draw flexible, rather than rigid, conclusions from his studies and observations. That is, he should be able to perceive how a program or experience can be applied in his own country, according to local conditions, and not seek to duplicate of copy exactly what he has observed abroad. He should also be prepared to participate in all the activities assigned to him in the country of study, whether related to his fellowship or extracurricular, without complaining constantly of difficulties due to differences in living conditions, diet, or cultural life.

Fellowship applications are processed only at the express request of the Member Governments, through national public health administrations. Some countries have established, within their governmental structure, a committee on selection of fellows, composed of representatives of the public health services and educational institutions, with personnel of the Bureau participating as consultants.

It can thus be seen that the selection of candidates for fellowships is not a simple task. Progressive improvement has been achieved in this selection, a fact that has been confirmed by authorities of the public health schools and other educational establishments, since the majority of them have stated that in general the fellows do meet the requirements for the chosen courses of study.

The main problems related to this matter are:

1. Insufficient knowledge of the language in which the course is taught

It is obvious that one cannot study a subject satisfactorily without being fluent in the language in which the course is being taught. Up to now the policy has been that any candidate for a fellowship for

study abroad must be able to prove, before leaving his own country, that he can speak, write, and understand the language in which he will study. Some have argued that such a requirement is too strict, and that fellowships are denied to many able persons who, if given the opportunity to spend a certain period in the country of study with only an elementary knowledge of that country's language, would be able in the new environment to learn the language much more rapidly and effectively than if they had studied it at home. This would, of course, involve additional expense for the period of language study and would also decrease proportionately the time the student could devote to his professional studies. For this reason, even though it is recognized that qualified persons occasionally may be denied the opportunity for study abroad, the policy of proof of language ability before leaving his country has been maintained.

To evaluate this ability in the candidate's own country is exceedingly difficult. As a practical matter, from the standpoint of academic studies, there is no real need to test persons whose mother tongue is Spanish and who are to study in a country where Portuguese is spoken, or vice versa. In a few instances it is necessary to test the ability of English-speaking or French-speaking persons to handle the Spanish language; but the major problem is to evaluate the English language ability of Spanish-speaking, Portuguese-speaking, or French-speaking persons who are going to study in an English-speaking country. After a series of trials with various methods, the Bureau has decided to use the facilities of a language institute in the United States which has a special service, with correspondents in almost all countries of the world, for giving a uniform test to candidates. The tests are both oral and written for candidates wishing to take academic studies, and oral only for those seeking travel grants. In practice, this method has proved very successful and the difficulties encountered previously have almost disappeared. Nevertheless, most of the universities still insist, and with good reason, that applicants arrive at the school in time for a period of orientation and language refresher course in the environment in which they are to study.

2. Age of the fellow

Besides the general age limitation imposed by the fellowship regulations, there exists a special problem with regard to academic study. The relation between age and ability to follow a complete course of study varies widely. Some persons at the age of 35 years have already passed the period in which they are able to learn easily. Others at 55 are still able to adapt to student life and to the need for learning new facts and new ideas. Undoubtedly the latter are in the minority. This problem is of great importance with respect to academic studies, and for this reason schools in general have established an age limit for applicants. Some public health schools do not accept students over 40 and most of them reject those over 45.

Each case must, of course, be considered individually, on the basis of the applicant's background and experience. In recent years the Organization has awarded fellowships for academic public health studies to only

three candidates over 50 years of age; one of them failed completely, leaving the school and giving up his fellowship after six weeks; one completed the course with great difficulty and under physical and emotional stress; and only the third completed the course successfully.

3. Medical examination

The fellowship application (Annex , page 6) specifies that the medical report is to be filled out "after thorough clinical and laboratory examination including X-ray of the chest." An effort has been made to facilitate the fulfillment of this essential requirement and to permit the physician to establish precisely and clearly the results of his examination. Despite the care taken, however, there have occasionally been cases of fellows who arrived at the place of study in a state of health incompatible with the workload of studies they were to assume. Most important of these are fellows forced to return home because of a cardiovascular lesion or other chronic conditions. There has even been a case of a fellowship recipient arriving in a fairly advanced stage of pregnancy.

4. Inadequate orientation and lack of understanding of the objectives of the studies

It may happen, for various reasons, that some fellows fail to receive adequate and complete information on the nature of the studies they are to take, or are not interviewed by an adviser responsible for giving them prior orientation. Others who do receive full information and orientation accept the fellowship without endeavoring to understand thoroughly the nature of the courses they are to take, particularly when such studies are somewhat similar to the clinical specialty they practice in their professional work.

Both cases result, on arrival at the place of study, in surprise at the assigned program of studies and an attempt at any cost to change it, in order to take subjects more closely related to their private interests. For example, a fellow awarded a fellowship for studies in maternal and child health may seek to use it for studies in clinical pediatrics.

Such cases are gradually being eliminated, as the result of better selection and the insistence on interviewing applicants so as to explain to them in detail the nature of the course they are to take.

V. Duration of Fellowships and Facilities Furnished

Fellowships are awarded usually for periods of from two months to one year. In justified cases, however, such periods can be increased or decreased to meet the specific training needs of each candidate.

These limits are based on the consideration that, on the one hand, it is very difficult to obtain appreciable benefit in a period of less than two months, except in the case of a highly qualified professional and a selected specialty, and that, on the other hand, one year is generally sufficient for acquiring the basic training required for a specialized subject. By way of example one can cite the course for the Master of Public Health which covers only one year, including the field practice. Moreover, to extend fellowships beyond one year would involve consequent decrease in the number of fellowships that could be awarded.

The fellowship is designed to cover only those expenses directly related to the studies, such as:

1. Costs of international travel and travel within the country of study.
2. Tuition fees for courses included in the study program.
3. Book grant, varying according to the type of studies.
4. Monthly stipend paid in the currency of the country of study, in an amount that varies from country to country.

There are two types of stipends: (a) the "travel rate," which is paid to fellows remaining in one place 30 days or less; and (b) the "resident rate," which is paid to those remaining more than 30 days in the same place.

The travel rate is higher than the resident rate. Obviously, the fellow who has to travel from one place to another must spend more money, since he has insufficient time to seek adequate and economical lodgings. For the same reasons, the first stipend paid to all fellows is of the "travel" type, since the individual does at first incur greater expenses, until he can settle down in his lodgings.

The amount of the stipend is established in accordance with the cost of living in the country of study, determined on the basis of background data compiled periodically. The information generally used is that from a special section of the United Nations responsible for establishing a "common scale of stipends" which is approved by all UN specialized agencies awarding fellowships, the purpose being to avoid differences that lead to grievances among fellows studying the same courses at the same place. In the matter of stipends, the Bureau also holds periodic consultations with other agencies, such as ICA and the Rockefeller Foundation, in order to maintain uniform criteria insofar as possible.

All international agencies have more or less the same system for covering fellowship expenses. However, one or two of them grant

an additional special allowance to married fellows. The PASB and all United Nations specialized agencies have considered that the responsibility for these expenses should be borne by the fellow and his government. As has been stated in previous reports, "a stipend is not a salary or an honorarium; it is an allowance for room, board, and incidentals paid to a fellow while on official assignment for study abroad. It is not supposed to cover the fellow's routine expenses at home for self or family and should therefore not be considered as a substitute for any salary paid to a fellow at home." The governments, on submitting the fellowship application, certify that "the absence of the candidate during his (her) studies abroad would not have any adverse effect on his (her) status, seniority, salary, pension and similar rights" (page 1 of the fellowship application).

It is for these reasons that, when deciding the amount of the stipend, consideration is given both to the cost of living in the country of study and to the need for providing the fellow with sufficient means to live comfortably and derive the maximum benefit from his studies.

Generally speaking, it is estimated that 40 per cent of the stipend covers lodging expenses, another 40 per cent food, and the remaining 20 per cent incidentals. The studies made in this regard show that the fellows at the various professional levels usually experience no financial difficulties and are able to support their families adequately when they receive, in addition to the stipend, the salary that should be paid them by their governments.

Despite the commitment established in the fellowship application, and the several resolutions adopted on the subject by the Directing Council (among them, Resolution XIX of the IX Meeting), some governments suspend payment of the fellow's salary or provide only a "fellowship aid" representing but a small proportion of the salary. This situation undoubtedly jeopardizes the effective execution of the fellowship program. Many candidates refuse the fellowship at the last moment, when all the arrangements have already been completed; or, if they do accept the fellowship without retention of salary, there invariably arise disagreeable family and financial situations that unfavorably affect the results of their studies. For this reason fellows have on several occasions refused to stay for the period of practical training scheduled at the end of their academic studies, returning to their countries without having completed the plan established for the fellowship.

The book grant also has been the subject of study and investigation among both teachers and fellows. After introduction of more flexibility and an increase in the maximum, it appears that the grant is adequate to cover the needs for the basic books required in the courses of study.

VI. Processing of Fellowship Applications

The proposed candidates for fellowships, after being chosen, fill out the fellowship application and submit it together with the necessary

documentation attesting to their professional competence and past educational record. This documentation consists usually of photostatic copies of the professional degree and, in the case of students taking academic courses, copies of the ratings obtained in previous studies.

There have occasionally been complaints as to the difficulty of collecting the documentation required for submittal with the fellowship application, the implication being that this is merely a routine and bureaucratic measure. However, it should be borne in mind that the educational institutions and certain countries require this documentation as a basis for deciding whether the candidate meets the requirements for admission to such institutions or other training centers.

Once the fellowship application has been completed and the required documentation attached, it is transmitted by the health authorities to the appropriate PASB zone office, which seeks the opportunity to interview the candidate and examine his educational background and experience. If the zone office deems that the application meets the requirements of the project to which the fellowship will be charged, and that it conforms also to the established priorities, it will transmit the application to headquarters with the pertinent recommendations.

The headquarters office then makes the decision on the basis of the candidate's background and experience, the zone office's recommendation, and the budgetary situation; it is also responsible for placement and for other arrangements required in connection with the fellowship award.

In the case of fellowships for academic studies, arrangements are made directly with the university centers (schools of public health, nursing, etc.). For travel grants that include visits to governmental services or other specialized institutions, arrangements are made with the national health administrations, through the zone office concerned.

Any delay in receipt of the application has a considerable bearing on the proper functioning of the fellowship program. It is evident that the steps outlined above involve a certain amount of time. Furthermore, institutions and agencies that are being asked to receive students need additional time to study the applications and make their own decisions. Late applications force hurried and sometimes inadequately-considered decisions and often give rise to difficulties and misunderstandings for both the fellow and the institution that he is to attend. Such delays lead to unnecessary postponement of training.

To correct this situation, most schools have set a time limit for the receipt of applications, in some cases as long as five months before the proposed starting date. The Organization has been pleased to comply with this requisite because the time limit has made for better planning. There will, of course, always be emergency situations, but these can be kept to a minimum.

VII. Program and Placement

Equal in importance to the selection of applicants is the choice of the place of study.

There is no doubt that the active cooperation and good will of national health administrations and of universities in receiving and accepting PASB/WHO fellows has greatly enhanced the fellowship program. It is essential that the selected place have available facilities, services, material, and teachers of a caliber consistent with the great effort involved in international study. In dealing either with academic institutions or with agencies offering services, there has to be awareness of the special needs of students from other countries. In this connection, the report of the recent meeting of the WHO Expert Committee on Professional Education, dealing with the problem of foreign students, is being awaited with interest.

To carry out the task of placement most efficiently, the Organization takes into consideration the following:

1. The suggestions of the government concerned, and the functions to be performed by the fellow on return to his own country.
2. The fellow's own suggestions, as well as his previous training and experience, and the language in which he is able to study.
3. The recommendations of the zone office concerned.
4. The information and experience available to the Bureau concerning training facilities and vacancies in educational institutions.
5. The desirability of the candidate's studying in countries where health and socio-economic conditions and problems are similar to those in his own country, if appropriate training facilities are available in those countries.
6. The possibility of including, when it can be arranged, two or three month's field visits after an academic year's course.
7. The need for avoiding an excessive number of visits; obviously, it is far more advantageous for the fellow to make long stays in few institutions rather than short stays in many. Also, it is necessary to avoid arrangements for studies to commence during vacation periods and to exclude travel to distant places for short periods of stay.

The suggestions of the governments and of the candidates in this respect are most useful and valid, but frequently are based on information that is not completely up-to-date. They often suggest one or two establishments well known because of prestige acquired through the years and because of the number of fellows that have studied in them. However, owing to lack of information, no mention is made of new institutions that have developed in recent years, many of which offer not only special facilities in certain important fields of study but also new educational methods and ideas.

The Bureau has at its disposal up-to-date information on the quality of facilities available and vacancies in the various training centers, and it attempts always to place the fellow in the center or institution best suited to his needs, in accordance with his experience and previous training.

Another essential aspect of placement, as has been mentioned, is the need to find for the fellow an environment at the same time different from that to which he is accustomed, so that he may receive the stimulus of new ideas and new plans, and yet with living conditions and health problems similar to those in the fellow's own country. His adjustment in the country of study will thus be made easier, as will his return to the country of origin and his interpretation of the new knowledge acquired during his studies. The schools of public health of Santiago, São Paulo (Brazil), Mexico, and Puerto Rico fulfill these requirements admirably, as do the facilities offered by the national health services of those and other countries for field programs and observation visits. An effort is therefore made to send to the United States and Canada only those fellows who already have the necessary experience to observe there whatever might be most useful and adequate for them and for their countries, or those who are interested in acquiring a knowledge of subjects that are not yet taught fully in the Latin American countries. The Bureau has promoted and aided in various ways (exchange of professors, assignment of visiting professors, provision of equipment, etc.) the development of facilities and services for study and training in the Latin American countries.

Another method used to improve the instruction given to fellows -- one that has proved very profitable -- is the award of fellowships to professors in the different schools of public health of the Americas to enable them to visit the countries from which the fellows come, study their problems, and adapt the teaching programs to the needs of those students. All the schools have participated in this program and the benefits from each fellowship have been spread through the respective faculty by means of reports and staff meetings. In this way it has been possible to obtain marked improvement in the personal relationships between professors and students, thanks to better understanding of the conditions and problems affecting fellows.

Choice of a proposed place of study by the Organization is only half the problem, for the institution or service concerned has to agree to accept the fellow.

Decision as to which students may be admitted to public health schools rests, of course, with each school, although some deans have been of the opinion that they have a moral obligation to admit any student who has passed through the rigorous selection of an international organization like PASB/WHO.

Public health schools, as well as other educational institutions used, generally receive a volume of applicants much larger than the number of vacancies available. Special selection committees have therefore been established to screen applications and choose the best qualified candidates. It is sometimes necessary to submit placement requests to several schools before one with available vacancies is found, and this is another reason for insisting that fellowship applications be submitted with the complete required documentation and within the established time limit. Another factor is the reduction in the number of vacancies in public health schools in the United States available for students from other countries, due to the recently expanded national fellowship program. That program has attracted many candidates and the schools have consequently been forced to be more strict about their entrance requirements.

Establishment of a program during the summer season in the countries of study also leads to difficulty. In those periods, educational institutions generally are closed and the staff of health centers and services, in a vacation period, is reduced to the minimum required to handle routine matters. It is therefore difficult, if not impossible, to make arrangements for visiting fellows. Many countries have made it clear that during the summer months they can receive no visiting students or only a very limited number in necessary cases.

VIII. Notification of Fellowship Awards and Travel Arrangements

Once the pertinent requirements have been met and the program of studies confirmed, the formal fellowship award is issued. Clearly, before a fellow is notified that he has been awarded a fellowship, there must be an assurance that he will be admitted to the center where he is to study. Notification of fellowship awards is made through the respective zone office; a certificate of award is forwarded, together with instructions, to the government and to the recipient. The letter of instruction contains the necessary information to guide the fellow as to where to report and whom he should see on arrival, the financial arrangements connected with the fellowship, and the office that will pay the stipends, as well as information on the program of studies and the itinerary he is to follow.

An information booklet on the fellowship is also forwarded with the letter of instruction. It describes procedures affecting the fellows and refers them, through a question-and-answer system, to the matters of greatest interest to them, such as amount of stipends to be paid, travel arrangements, expenses for which the Organization is responsible, those which the fellow must assume, etc.

Unfortunately, in interviews with fellows during their courses of study, it has been shown that only a small percentage of them read the booklet carefully and retain the information contained therein. This is true of both professional and non-professional fellows. Much of the correspondence between the Bureau and the fellows would be unnecessary if all fellows were to read this booklet with care.

The fellow is also instructed to obtain and take with him pertinent information on public health problems in his own country, so that he may be in position to report such information to his professors and fellow students in the course of his studies.

At the time the letter of instruction is forwarded, arrangements are made to furnish the fellow with the necessary transportation and to pay him the first stipend. Since the travel itinerary is determined by the program of studies, any change or delay enroute will be at the expense of the fellow.

Fellows must make the necessary arrangements to obtain passports and visas, although the Bureau will assist them when required. For example, to facilitate the securing of visas for certain countries that have established special requirements, a special document is sent to the fellow certifying that the applicant will be studying under the sponsorship of the Organization.

Visas have constituted a special problem in cases where the country of study does not maintain diplomatic relations with the fellow's country of origin. Generally, this problem can be overcome by having the fellow stop enroute in a third country where, with previous advice, consular services have usually been most helpful in providing visas. In the past, still another problem has arisen in the United States, a country receiving so many students, owing to a law that required a U.S. governmental or private organization to assume responsibility for a future fellow. The law did not take into account international organizations and each case had to be resolved by finding a sponsor in the United States. This presented no difficulty to fellows going to institutions, but it did entail many problems for those receiving travel grants. New regulations were issued in 1957, and these now enable the Organization to sponsor its fellows.

IX. Orientation and Guidance during Courses of Study

Whether the fellow is to take academic courses or to visit institutions, it is desirable that he have a clear idea of what his experience will cover and that he become familiar with the different details of his relationships during the fellowship period.

It is understandable that fellows, on arrival in a foreign country, may often encounter not only technical or administrative problems but also problems of adjustment, since the culture and living conditions are sometimes very different from those in their own countries.

For fellows receiving travel grants, need for orientation varies according to the complexity of the proposed subject of study and the number of visits scheduled. Whenever possible, plans are made for fellows to visit the Washington Office or a zone office before embarking on their study journey.

The orientation of fellows who are to take academic courses is usually in two parts: a visit to the Organization's headquarters, or to the zone office, before proceeding to the institutions of learning, and a period of varying length at the school. During the first part, the program is reviewed, educational and administrative arrangements explained, and necessary adjustments made.

One of the main purposes of the second phase is to attempt to give the students ample opportunity to become accustomed to the language they are to use. In some schools specific instruction is provided for this purpose. Even where language does not constitute a problem, it is necessary for the fellows to have sufficient time to become acquainted with the school, the faculty, university life, the city, transportation facilities, and other general conditions. One university has insisted that the orientation course last six weeks for students whose mother tongue is one other than that used in the school. Others have arranged language courses of one to four weeks' duration. Experience has shown that proper orientation is essential, but further studies are needed with respect to the duration and the content of the course.

During the school year the majority of schools assign to each student some member of the faculty as adviser. Depending on the interest of the adviser, the students derive much benefit from this ever-present source of counsel. Nevertheless, the faculty adviser, while he knows the problems connected with the school, may not be familiar with those related to the fellow's situation at home.

The assistance of Bureau personnel is of evident value in the solution of these problems and therefore, when the academic fellows are installed in their places of study, Bureau staff members visit them at least on two occasions. The first visit is made more or less half way in the first trimester, and the second, half way in the last trimester, before the end of the course. During the first visit, a lengthy and careful interview is held with the individual fellows in order to find out how each has adjusted to his new surroundings, what his living conditions are, what problems he has, how his studies are progressing, and what the results of the first tests and examinations have been. These interviews are complemented by others held with professors assigned to the individual students as counsellors. Also discussed with the professors are the fellow's attitude and conduct in class and the need, if any, for readjustments or changes in the program of studies. In some problem cases,

it is necessary to hold several interviews both with the fellow and with the professor, until an adequate solution is found. An effort is also made to attend classes and group projects as a means of better understanding the situation and the manner in which fellows are participating in the studies.

Generally speaking, the purpose of the second visit is to discuss the field activities supplemental to the academic studies, in addition to reviewing the fellow's general situation. Experience obtained in these visits has shown the need for devoting at least two hours to each fellow.

On the other hand, fellows may at any time request, by correspondence, advice and guidance in solving any problem affecting them. The volume of such correspondence is heavy.

Contact is also maintained with fellows through the reports they are required to submit at the end of each quarter. These reports contain a description of their activities during the quarter, a list of professors they have had, and a list of the institutions visited. They also summarize the observations and impressions obtained during the studies.

This contact is greatly facilitated by the close and excellent relations maintained with the faculty of the teaching establishments and with the personnel of the health services, who give invaluable cooperation in the development of the fellowship program. Another contributing factor is the cooperation furnished to educational institutions through lectures for students and faculties on the activities and programs of PASB/WHO and the data furnished the schools on the countries of origin of the fellows.

During the school year 1957-1958, 23 educational establishments were visited in the United States and Canada, and two interviews were held with each of the 111 fellows studying in those establishments. The total of interviews was actually greater, for through a cooperative arrangement interviews were frequently held, during these visits, with persons attending the institution as fellows of the U. S. International Cooperation Administration. Staff of the Fellowships Branch also visited Latin American schools of public health and held interviews with 102 fellows. Although such visits are made only once a year, because of the distance and expense involved, these schools are also visited regularly by staff members of the respective zone office, through which continuous contact with the fellows is maintained.

X. Contact with the Fellows after Completion of Studies

To help evaluate the benefits derived from the fellowship program, an effort is made to maintain periodic contact with former fellows during a two-year period after completion of the fellowship studies.

On completing the fellowship, fellows are requested to submit a final report, which generally consists of three parts: (1) a summary of the studies taken; (2) an analysis of the knowledge acquired, with particular reference to the fellow's future work; and (3) any comments on the fellowship itself, especially if difficulties were encountered and, if so, how they were solved.

Subsequently, ex-fellows are asked to submit two supplementary reports on the opportunities they find for applying the knowledge and training acquired during their fellowship studies. The first report is due at the end of six months and the second, due within two years after return to the country of origin, is supplemented by an additional report from that country's national health administration on the utilization of the fellow's services and on the activities carried out in connection with the fellowship studies.

These reports provide very valuable data for evaluating the fellowship program and for avoiding the repetition of errors made in planning some fellowships. Awards made to professors of public health schools to enable them to visit the countries from which their students come and to renew relations with former fellows provide still another means of maintaining such contact and appraising how training acquired through fellowships is being utilized.

XI. Scope and Financing of the Program

As the funds available to the Organization for field activities have expanded, the number of fellowships has grown steadily. As a gross measure one can compare the total of 812 fellows and participants in the four-year period 1950-1953, with the total of 1,663 in the four years 1954-1957.

In the first three years in the latter period, the number of fellowships remained more or less stable, but in 1957 the increase was considerable.

Table 1
Number of PASB/WHO Fellowships, 1954-1957

| Year | Number of Fellowships awarded | Participants at seminars | Fellows from other regions studying in the Americas |
|-------|-------------------------------|--------------------------|---|
| 1954 | 282 | 37 | 69 |
| 1955 | 246 | 144 | 93 |
| 1956 | 276 | 154 | 114 |
| 1957 | 432 | 92 | 120 |
| Total | 1,236 | 427 | 396 |

The 57 per cent increase recorded in 1957 was due in large measure to activities for the training and preparation of personnel for malaria eradication programs; approximately one third of the increase corresponded to fellowships related to other programs. The number of fellows from other regions who come to the Americas to study has also increased from year to year.

All countries of the Hemisphere have participated in the development of the fellowship program. The following Table 2 (page 19) shows the distribution of 1,236 fellowships, by country of origin and type of studies, during the four-year period 1954-1957. Basically, the differences in the extent of participation by the various countries are related to the differences in numbers of applications received, which, to some degree, reflect the number of cooperative projects between the countries and the Organization.

The number of fellowships for academic studies (527), which was considerably higher than the number for travel grants (336), reflects the demand for academic courses as a means of obtaining a solid foundation for specialization.

As the number of fellows has increased, much wider use has been made of institutions and services of the countries within the Region for the training of fellows. Experience gained in administering the fellowship program has shown that it is preferable to make use of existing local resources -- providing the necessary cooperation for their development, when required -- rather than plan special international centers. As can be seen from Table 3 (page 20), all the countries have participated in offering sites for study. Naturally, the figures are particularly high for the countries that have institutions or centers admitting foreign students (especially Brazil, Chile, Mexico, the United States, and Venezuela). At the same time, other countries, as well as these, have provided a very significant contribution by making their medical and public health services available for observation or by acting as host countries for organized short courses.

The close interrelationship between the various fields of study makes it very difficult to classify the fellows according to the subjects they have studied. Nevertheless, it is necessary to make some arbitrary rules, and for several years WHO has followed the principle of classifying a student under his field of major interest. For example, a large number of fellows who take the public health course are primarily interested in the communicable diseases. According to the rules used in this classification, such fellows are grouped under the heading "Communicable Diseases," even though their training is far broader and prepares them for work in general public health. The same holds true for such other headings as "Maternal and Child Health" and "Nursing." This factor should be kept in mind in studying Table 4 (page 21).

Table 2

Fellowship Awards and Seminar Participants in the Americas
by Type of Study and Country of Origin, 1954-1957

| | F E L L O W S H I P S | | | | | Seminar Partici- pants | Total Fellows and Partici- pants |
|--|---|-----------------------------|------------------|----------------------------|---------------------------|------------------------------|--|
| | Courses Organized or Assisted by PASB/WHO | | Other Courses | Other Arrange- ments | Total Fellow- ships | | |
| | Special Short Courses | Within Academic Inst. | | | | | |
| Argentina | 8 | 19 | 30 | 9 | 66 | 26 | 92 |
| Bolivia | 6 | 4 | 14 | 4 | 28 | 14 | 42 |
| Brazil | 38 | 4 | 8 | 13 | 63 | 64 | 127 |
| Canada | 1 | 0 | 2 | 3 | 6 | 1 | 7 |
| Chile | 8 | 0 | 11 | 33 | 52 | 32 | 84 |
| Colombia | 6 | 7 | 18 | 10 | 41 | 34 | 75 |
| Costa Rica | 26 | 6 | 8 | 7 | 47 | 13 | 60 |
| Cuba | 8 | 3 | 4 | 3 | 18 | 14 | 32 |
| Dominican Republic | 14 | 10 | 14 | 8 | 46 | 11 | 57 |
| Ecuador | 8 | 5 | 10 | 4 | 27 | 19 | 46 |
| El Salvador | 16 | 9 | 9 | 6 | 40 | 11 | 51 |
| Guatemala | 22 | 14 | 18 | 26 | 80 | 12 | 92 |
| Haiti | 22 | 1 | 20 | 13 | 56 | 9 | 65 |
| Honduras | 24 | 3 | 6 | 9 | 42 | 10 | 52 |
| Mexico | 34 | 8 | 32 | 48 | 122 | 42 | 164 |
| Nicaragua | 18 | 5 | 15 | 9 | 47 | 6 | 53 |
| Panama | 22 | 9 | 22 | 5 | 58 | 13 | 71 |
| Paraguay | 15 | 19 | 34 | 18 | 86 | 12 | 98 |
| Peru | 21 | 16 | 34 | 11 | 82 | 24 | 106 |
| United States | 8 | 0 | 0 | 25 | 33 | 7 | 40 |
| Uruguay | 8 | 15 | 22 | 7 | 52 | 9 | 61 |
| Venezuela | 3 | 6 | 8 | 16 | 33 | 23 | 56 |
| British Areas Departments of France in the Americas | 33 | 0 | 25 | 41 | 99 | 17 | 116 |
| Surinam and the Netherlands Antilles | 3 | 0 | 0 | 4 | 7 | 2 | 9 |
| | 1 | 0 | 0 | 4 | 5 | 2 | 7 |
| TOTAL | 373 | 163 | 364 | 336 | 1,236 | 427 | 1,663 |

Table 3

Country or Region of Study for Fellowships Awarded in the Americas
1954-1957

| Country or Region of Study | 1954 | 1955 | 1956 | 1957 | Total |
|---|------------|------------|------------|------------|--------------|
| Argentina | 5 | - | 1 | 5 | 11 |
| Bolivia | 2 | - | 2 | - | 4 |
| Brazil | 59 | 31 | 42 | 57 | 189 |
| Canada | 6 | 6 | 6 | 15 | 33 |
| Chile | 60 | 38 | 65 | 70 | 233 |
| Colombia | 6 | 5 | 9 | 8 | 28 |
| Costa Rica | 7 | 6 | 16 | 6 | 35 |
| Cuba | 20 | - | 1 | 1 | 22 |
| Dominican Republic | 2 | 1 | - | - | 3 |
| Ecuador | 13 | 8 | 3 | 6 | 30 |
| El Salvador | 8 | 17 | 18 | 31 | 74 |
| Guatemala | 21 | 23 | 12 | 36 | 92 |
| Haiti | 4 | 3 | - | - | 7 |
| Honduras | - | - | 1 | 1 | 2 |
| Mexico | 31 | 14 | 50 | 109 | 204 |
| Nicaragua | 1 | - | 1 | - | 2 |
| Panama | 4 | 11 | 21 | 7 | 43 |
| Paraguay | 2 | 3 | 3 | - | 8 |
| Peru | 5 | 10 | 10 | 37 | 62 |
| United States | 68 | 88 | 69 | 70 | 295 |
| Uruguay | 4 | 1 | - | 1 | 6 |
| Venezuela | 9 | 37 | 22 | 61 | 129 |
| British Areas | 13 | 12 | 4 | 8 | 37 |
| Departments of France in the Americas | 1 | 1 | 2 | 1 | 5 |
| Surinam and the Netherlands Antilles | - | - | 2 | 1 | 3 |
| Western Pacific Region | - | - | 1 | 2 | 3 |
| Eastern Mediterranean Region | - | 2 | - | 1 | 3 |
| European Region | 6 | 6 | 6 | 12 | 30 |
| South East Asia Region | - | - | 1 | - | 1 |
| TOTAL * | 357 | 323 | 368 | 546 | 1,594 |

* Since some fellows visited more than one country or region, the totals do not correspond to those in Table 1.

Table 4

Fellowships Awarded in the Americas by Country of Origin and
Field of Study, 1954-1957

| COUNTRY | Public Health Adm. | Sani- tation | P. H. Nursing | Ma- ternal and Child Health | Other Health Services | Com- muni- cable Dis- eases | Med. Science and Ed. | Clini- cal Med. | TOTAL |
|--|--------------------|--------------|---------------|-----------------------------|-----------------------|-----------------------------|----------------------|-----------------|-------|
| Argentina | 20 | 8 | 4 | 1 | 14 | 16 | 2 | 1 | 66 |
| Bolivia | 1 | 2 | 11 | - | 4 | 10 | - | - | 28 |
| Brazil | 2 | 2 | 4 | 1 | 5 | 46 | 2 | 1 | 63 |
| Canada | 2 | - | - | - | - | 2 | 2 | - | 6 |
| Chile | 5 | 1 | 8 | 5 | 6 | 12 | 10 | 5 | 52 |
| Colombia | 12 | 5 | 3 | - | 3 | 18 | - | - | 41 |
| Costa Rica | 1 | 10 | 12 | - | 10 | 14 | - | - | 47 |
| Cuba | - | 5 | - | - | 4 | 9 | - | - | 18 |
| Dominican Republic | 4 | 15 | 4 | - | 5 | 18 | - | - | 46 |
| Ecuador | 5 | 2 | 2 | 2 | 7 | 8 | - | 1 | 27 |
| El Salvador | 2 | 10 | 7 | - | 6 | 15 | - | - | 40 |
| Guatemala | 3 | 18 | 19 | 2 | 8 | 30 | - | - | 80 |
| Haiti | 8 | 4 | 10 | 1 | 1 | 30 | 2 | - | 56 |
| Honduras | 5 | 14 | 7 | - | 1 | 15 | - | - | 42 |
| Mexico | 6 | 21 | 17 | 5 | 17 | 51 | 4 | 1 | 122 |
| Nicaragua | 5 | 11 | 11 | - | 7 | 13 | - | - | 47 |
| Panama | 5 | 17 | 8 | 1 | 8 | 18 | 1 | - | 58 |
| Paraguay | 17 | 10 | 8 | 4 | 11 | 34 | 1 | 1 | 86 |
| Peru | 15 | 8 | 13 | 1 | 9 | 35 | - | 1 | 82 |
| United States | 1 | 1 | - | - | 1 | 9 | 20 | 1 | 33 |
| Uruguay | 8 | 10 | 14 | 2 | 5 | 12 | - | 1 | 52 |
| Venezuela | 4 | 6 | 2 | - | 4 | 17 | - | - | 33 |
| British Areas Departments of France in the Americas | 12 | 2 | 11 | 1 | 15 | 54 | 3 | 1 | 99 |
| Surinam and the Netherlands Antilles | - | - | 2 | 1 | - | 4 | - | - | 7 |
| | - | - | - | - | 1 | 4 | - | - | 5 |
| TOTAL | 143 | 182 | 177 | 27 | 152 | 494 | 47 | 14 | 1,236 |

A study of Table 4 shows, as might be expected, that the biggest category is "Communicable Diseases," which increased markedly in 1957 as the result of the programs of malaria eradication. The fields of "Nursing," health statistics (included under "Other Health Services"), and "Sanitation" also occupy a prominent place in the classification, as does "Public Health Administration."

Funds to support the fellowship program come from all the categories available to the Organization, as can be seen from the following totals for the past four years:

| | |
|--|------------------|
| PASO - Regular budget: | \$ 323,284 |
| PASO - Other funds, including OAS funds for the Pan American Foot-and-Mouth Disease Center and, in 1957, the Special Malaria Fund: | 117,897 |
| WHO - Regular budget: | 778,942 |
| WHO - Technical Assistance: | <u>1,003,831</u> |
| Total | \$ 2,223,954 |

It is to be expected that WHO/Technical Assistance would provide the largest proportion, since fellowships, both as parts of projects and as individual projects, are readily acceptable under that Program. Furthermore, most of the Category II projects are fellowships and these are used for substitution as savings appear from delays in Category I projects. Sometimes these funds are made available only late in the year and it has been possible to utilize them only because enough good applications were on hand to permit prompt awards.

Another conclusion of great significance to be drawn from these figures is that one must have a single set of rules and procedures, regardless of the source of funds.

XII. Coordination with Other Organizations

Apart from numerous other considerations, the above-mentioned contributions of funds are an essential and determining factor in maintaining complete coordination with the procedures and regulations governing the award of fellowships in the WHO, which are applicable also to fellowships financed with funds of the Technical Assistance Program.

For the purpose of maintaining coordination between the United Nations and all specialized agencies that award fellowships, a Technical Working Group on Fellowships has been in operation for several years;

the group meets periodically to study and recommend solutions to the common problems related to this subject. In this way, it has been possible to maintain close collaboration among all the interested agencies, and the policies and procedures governing fellowship awards have been improved progressively from year to year. Numerous difficulties seriously hampering the development of the program, such as those encountered when each agency unilaterally followed its own procedures, have now been eliminated.

The application of the measures and decisions adopted by the Technical Working Group suffer unavoidable delays, inasmuch as each agency has its own administrative procedures. Nevertheless, this fact has not significantly affected certain suggestions made by the Bureau, such as those for the increase of some stipends.

A mechanism has been established for the rapid exchange of information on variations in cost of living for fellows, so that all agencies will make, at the same time, whatever changes in stipends are considered necessary. In this way, in the Americas, for example, important increases have been made in the stipends fixed for Brazil, Chile, and the United States. Similarly, changes in other portions of the regulations, such as definition of travel status and payment of a higher stipend during the first month of an academic fellowship, have been agreed upon.

As requested by the X Directing Council, in the third paragraph of Resolution XV, the proposal to establish various categories of fellowships, in accordance with the professional status and experience of the fellow, was discussed with WHO headquarters and with the Technical Working Group on Fellowships. The general reaction was completely against the proposed system of points, which was considered far too complicated and likely to give rise to many misunderstandings and difficulties.

Progress is also being made in another aspect of the problem of coordination. In the Americas there are many other organizations awarding fellowships for purposes often similar to those of PASB/WHO. Most prominent are the Rockefeller Foundation and the Kellogg Foundation, particularly in the field of medical education, and the U. S. International Cooperation Administration, with its broad program of work in all aspects of health services. Since these groups have different basic financing and methods of operation, it is not at all easy to achieve uniformity of fellowship procedures. Nevertheless, the machinery of the Medical Education Information Center, set up in 1952, has served as a method for exchanging information on many fellowship problems. For example, distribution of a consolidated list of fellowships awarded has helped avoid duplication.

XIII. Evaluation

The development of the fellowship program requires considerable effort on the part of the countries that select and propose the applicants, of the countries and institutions that provide the teaching services for training fellows, and of the agencies that award the fellowships. The cost of that program absorbs an important part of the budget of the Organization. It is therefore of the utmost importance to determine what results are being obtained.

On repeated occasions, stress has been laid on the value of international cooperation in the education and training of selected individuals who subsequently will utilize the knowledge acquired to contribute toward the improvement of health conditions in their countries. The Rockefeller Foundation, which has long experience in the matter, after analysing its fellowship program of 33 years (1917-1950), made the comment that "in retrospect, few activities of the Foundation appear of more general and enduring value."

On various occasions an effort has been made to define precisely the value and usefulness of fellowships, but difficulties are always encountered. There is no doubt that the selection of the fellow and the quality of his studies have a most significant bearing on the success or failure of the fellowship program. However, the basic aspect of evaluation is perhaps the ultimate use the fellow makes of the knowledge acquired.

The contribution that the fellow, on returning to his own country, makes in matters relating to the expansion of existing services, the introduction of new methods and techniques, the establishment of new types of services, or the improvement of local educational and training facilities, will serve to evaluate the results of a fellowship. To this end, a requirement has been established whereby the former fellow and the national health administration concerned must report, within two years from the termination of the studies, on the activities carried out and services rendered during that period, for the purpose of ascertaining whether the services are in keeping with the training acquired.

Recently, the WHO made a general evaluation of fellowships awarded with WHO funds. The results obtained are applicable also to PASB because of the similarity of the two programs.

The study was made by sending to each former fellow a questionnaire, to be returned through his government, reporting on the position he was occupying and how he was applying the knowledge acquired during his fellowship.

The resulting statistics were discussed at the Eleventh World Health Assembly. Although certain criticisms were made of this material because of the relatively small proportion of questionnaires returned in the Americas, the experience of the zone office and project staff, as well as

interviews by the staff of the Fellowships Branch, nevertheless, indicate that the following generalizations are justified:

1. A large majority of the fellows assumed, on their return to their own countries, the specific functions for which they were trained.

2. Most of these fellows demonstrated the necessary ability to introduce new methods of work, to establish new services in the agencies or institutions where they worked, and to disseminate the knowledge acquired abroad, through lectures and articles. Some have trained local personnel to replace foreign specialists. Others have been active in promoting the promulgation of new health laws or the revision of those in force. Moreover, nearly half the former fellows maintained contact with their fellow students and professors, for the purpose of exchanging information on the work they were carrying out.

3. Very few of the former fellows stated that the studies followed had not proven adequate to meet the needs of their assigned functions.

Undoubtedly, the results vary from one country to another, and they are of course better when the fellowships form part of a project directed toward the development of a specific aspect of some public health program or service.

The number of former fellows who do not put their training to proper use is very small. Many of the failures are due to non-compliance with the commitment assumed by governments to employ fellows on their return. On the other hand, there have been cases, although fortunately few, where fellows have for one reason or another refused to accept the position offered by the government on their return to their country.

XIV. General Considerations

It has been rightly said that the caliber of any public health program can be measured in the ability and competence of the people running it. Thus, the great contribution of the fellowship program is to facilitate provision of the kind of international education and training that will raise that competence to the highest possible degree. It is clear from this study that the fellowship program constitutes a large and significant part of the Organization's work, that it embraces all fields of activity, and that its operation is a complicated matter presenting a large number of interrelated problems.

In any fellowship activity, one is dealing essentially with individual human beings who, despite similarity of requirements and standardization of programs, will vary enormously in personality, concern for personal comfort, likes and dislikes, capacity for independence, and adaptability to other lands. Even in the simplest cases there are myriad details to settle for each fellow, most of which have been barely touched

on in this study. Some measure of the complicated nature of the administrative problems involved may be obtained from a management study carried on recently on the operations and staffing of the Fellowships Branch. This study was made in the light of the constant efforts to simplify procedures and to decentralize activities and decisions to the greatest extent possible. Nevertheless, it was demonstrated that the average number of letters, memoranda, and documents of various types connected with each academic fellowship was 145, and that the average for each travel fellowship (approximately 3 months' duration) was 73. For a fellow who presents unusual problems, such as a highly specialized field of study or unforeseen circumstances during his fellowship, these figures are much higher.

It is inevitable that fellows will wish to make changes even after a program is well advanced. Such changes often require cables and long-distance telephone calls and may result in inconvenience for all concerned, particularly those who have already made plans to receive a fellow. They also require a much greater expenditure of staff time. Thus, changes must be kept to a minimum, even though sometimes they are desirable and essential.

It is for reasons such as these that the various foundations and governmental agencies granting fellowships believe that a professional staff member should not have more than 50 or 60 fellows for whom he is responsible. The average at the Bureau has been considerably higher, but recent additions to the staff have reduced the average to manageable proportions, although it is still substantially higher than in other agencies.

Administrative complications and variations in sources of funds make it particularly important that advance planning be carried out to the greatest extent possible. As brought out earlier in this study, funds often become available for fellowships on short notice at the end of the year. Only by having ready a series of good applications that have gone through all the preliminary stages is it possible to make good use of these funds. In this planning, national health administrations must play an active role to maintain their personnel needs under constant review, while being always on the lookout for the sort of person who can profit from international study.

Throughout this study there is abundant evidence of the need for recognizing the tripartite responsibility described in Chapter III. The fellow must do his part, but cooperation between the Organization and the government is essential at every stage. Through mutual participation and effort, the true dynamic quality of a broad fellowship program can bring about the basic aim of strengthening the health services of the Member Countries.

Annex: Fellowship Application Form

**WORLD HEALTH ORGANIZATION
ORGANIZACION MUNDIAL DE LA SALUD
PAN AMERICAN SANITARY BUREAU
OFICINA SANITARIA PANAMERICANA**

**FELLOWSHIP APPLICATION
SOLICITUD DE BECA**

**I. LETTER OF TRANSMISSION
CARTA DE TRANSMISION**

INSTRUCTIONS

To be completed in triplicate and to be signed by the Head of the National Health Administration of the Government sponsoring the application.

To be forwarded to the appropriate Regional Office of the World Health Organization approximately six months prior to proposed commencement of study, together with the following, also in triplicate:

- Part II Personal History and Proposed Study
- Parts III and IV Medical Report and Recommendations of Selection Committee

INSTRUCCIONES

A llenar por triplicado y a firmar por el Director de la Administración Nacional de Sanidad del Gobierno que apoya la solicitud.

A transmitir a la Oficina Regional correspondiente de la Organización Mundial de la Salud, aproximadamente seis meses antes de la fecha en que deban comenzar los estudios, junto con las tres partes siguientes, del cuestionario, completadas asimismo por triplicado:

- Partes II—Datos personales y estudios propuestos.
- Partes III y IV—Informe Médico y Recomendaciones del Comité de Selección.

The Government of _____
El Gobierno de _____

herewith transmits the application of _____
transmite por la presente la solicitud formulada por _____

for a fellowship to study _____
con el objeto de obtener una beca para estudiar _____

The studies to be made under this fellowship are necessary for the strengthening of the National Health Services of the country and in the case of a fellowship being granted, full use would be made of the fellow in the field covered by his (her) fellowship.

The absence of the candidate during his (her) studies abroad would not have any adverse effect on his (her) status, seniority, salary, pension and similar rights.

On return from the fellowship it is proposed to employ the fellow as follows:

Los estudios a seguir con la beca solicitada son necesarios para reforzar los servicios nacionales de sanidad del país y, en el caso de concederse la beca, la colaboración del candidato será plenamente utilizada en la especialidad para la cual le haya sido concedida la beca.

La ausencia del candidato, durante sus estudios en el extranjero, no le causará perjuicio alguno, desde el punto de vista de su situación, derechos de antigüedad, sueldo, pensión y otros derechos análogos.

A la expiración de la beca, se prevé dar al becario el siguiente empleo:

Title of post _____
Denominación del cargo _____

Duties and responsibilities _____
Funciones y responsabilidades _____

Place and date _____ Signature _____
Lugar y fecha _____ Firma _____

Official address _____ Title _____
Dirección oficial _____ Título _____

To be completed by the WHO Regional Office - A llenar por la Oficina Regional de la OMS

Date project notified
to TAB on WHO 27

I endorse this application for _____ months' study in the following countries:

WHO No.

Please make the arrangements for study taking the following comments into consideration:

TAB No.

Source of funds
and allotment No.

Any changes included in the above endorsement as compared to the original proposals of the government and the candidate have been accepted by them.

Place and date:

Regional Director

**WORLD HEALTH ORGANIZATION
ORGANIZACION MUNDIAL DE LA SALUD
PAN AMERICAN SANITARY BUREAU
OFICINA SANITARIA PANAMERICANA**

**FELLOWSHIP APPLICATION
SOLICITUD DE BECA**

**II. PERSONAL HISTORY AND PROPOSED STUDY
DATOS PERSONALES Y ESTUDIOS PROPUESTOS**

INSTRUCTIONS

To be typewritten in triplicate by the candidate. Each question must be answered clearly and completely to avoid any difficulty in placement. Read carefully and follow all the directions. It is desirable to include all relevant information on this form but if necessary, additional pages of the same size may be attached. Please complete in English or Spanish. Be sure to sign and date the form.

INSTRUCCIONES

A completar por el candidato a máquina y por triplicado. Las respuestas deben ser claras y precisas, con el objeto de evitar cualquier dificultad en la adjudicación. Leer cuidadosamente y cumplir todas las instrucciones. Es preferible incluir en este formulario todos los datos requeridos. No obstante en caso necesario, se pueden añadir hojas suplementarias del mismo tamaño. Se ruega llenar el formulario en español o en inglés. Los candidatos que se proponen estudiar en países de habla inglesa deben llenar el formulario en inglés. No se olvide de poner la firma y la fecha.

Space for photograph
Espacio para la fotografía

1. Family Name (Surname) - Apellido

First name - Nombre

Other names - Otros nombres

2. Mailing address - Dirección postal

3. Home address - Domicilio particular

4. Place of birth
Lugar de nacimiento

Date of birth
Fecha de nacimiento

Nationality
Nacionalidad

Marital Status - Estado civil

5. Sex - Sexo

Male
Masculino Female
Femenino

6. Name and address of person to be notified in case of emergency
Nombre y dirección de la persona a prevenir en caso de accidente

7. Languages - Idiomas
(list mother-tongue first)
(la lengua materna en primer lugar)

READ - LEER

Ecell. Muy Bien
Good Bien
Fair Regular

WRITE - ESCRIBIR

Ecell. Muy Bien
Good Bien
Fair Regular

SPEAK - HABLAR

Ecell. Muy Bien
Good Bien
Fair Regular

8. Residence or Travel in Foreign Countries
Residencia o Viajes al Extranjero

Year Año
Country País
Length of stay Duración de la estancia

9. EDUCATION: (start with last attended institution and work backwards)

GRADO DE INSTRUCCION: (indíquese en primer lugar la última institución docente a la que se asistió y enumérense las demás por orden cronológico inverso)

Name and Place
Nombre y lugar

Years attended
Años de estudios

from - de to - a

Major fields of study
Materias principales

Degrees
Diplomas

10. List membership of professional societies and your activities in civil, public or international affairs.

Enumerar las asociaciones profesionales de que se forme parte así como las actividades cívicas, públicas o internacionales.

11. List the most important publications you have written (do not attach)

Indicar las obras más importantes publicadas (sin adjuntar documento alguno)

**PERSONAL HISTORY AND PROPOSED STUDY
DATOS PERSONALES Y ESTUDIOS PROPUESTOS**

continued - continuación

Name:
Nombre:

**13. Proposed field of study
Materias a estudiar**

To be completed in a language which can be used for working purposes in the proposed host country:

A completar en un idioma que pueda emplearse para trabajar en el país donde usted se propone estudiar

14. Detailed description of subject matter to be studied:

Descripción detallada de la materia a estudiar:

15. Description of the practical use you will make of this study on your return home in relation to the responsibilities you expect to assume.

Explicar la manera en que usted se propone aplicar en la práctica, al regresar a su país, y en relación con las funciones que habrá de asumir, los conocimientos que haya adquirido.



**DATOS PERSONALES Y ESTUDIOS PROPUESTOS
PERSONAL HISTORY AND PROPOSED STUDY**

continued - continuación

Name:
Nombre:

16. Length of time required for study
Período de tiempo necesario para estos estudios

17. Proposed countries of study and institutions at which study is preferred (list in order of preference)
Países donde se propone realizar los estudios e instituciones en las que preferiría estudiar (por orden de preferencia)

Country - País

Institutions - Instituciones

18. Earliest date you could start if awarded a fellowship
Fecha más próxima en la que usted estaría en condiciones de empezar en el caso de obtener la beca

19. Is there any definite period you cannot be absent from your home country?
¿ Hay algún período determinado en el cual le resultaría imposible ausentarse de su país de origen?

20. Previous Fellowships or Scholarships
Becas obtenidas anteriormente

| Dates - Fechas From - de To - a | Awarded by Concedidas por | Place of study Lugar de los estudios | Subject(s) studied Materias estudiadas |
|------------------------------------|------------------------------|---|---|
| | | | |

21. Fellowships or Scholarships applied for: 1. not granted. 2. still pending.
Becas solicitadas anteriormente: 1°) denegadas. 2°) en tramitación

I certify that my statements in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. If selected as a Fellow, I undertake to:

1. Comply with the rules summarized in the information booklet: "WHO Fellowships."
2. Return to my home country at the end of the fellowship and to continue in, or enter the service of, my national health administration—or a technical institution approved by it—for at least the first three years after completion of my fellowship.

Place and date:
Lugar y fecha:

Certifico que las declaraciones hechas por mí en respuesta a las cuestiones precedentes son, según mi leal saber y entender, verídicas, completas y exactas. En el caso de obtener una beca me comprometo:

- 1° A cumplir el reglamento que figura en forma resumida en el folleto de información titulado "Las Becas de la OMS."
- 2 A regresar a mi país al final de mi beca y a continuar o entrar al servicio de la administración sanitaria de mi país o de una institución técnica aprobada por ella—por lo menos, durante los tres años siguientes a haber terminado mis estudios como becario.

Signature:
Firma:

INSTRUCTIONS:

To be completed in triplicate by a registered medical practitioner designated by the appropriate Administration after thorough clinical and laboratory examination including X-ray of chest. The Organization reserves the right to require the candidate to undergo a further medical examination before he takes up his fellowship.

INSTRUCCIONES:

A llenar por triplicado por un médico autorizado para ejercer y designado por la correspondiente Administración nacional de sanidad, después de un examen médico minucioso acompañado de análisis de laboratorio y de un examen radiológico de los pulmones. La Organización se reserva el derecho de exigir al candidato que se someta a un nuevo examen médico antes de comenzar sus estudios.

Name of candidate - Nombre del candidato

Age - Edad:

Sex - Sexo:

Is the person examined at present in good health and enjoying full working capacity?

¿ Estima usted que la persona examinada goza de buena salud y de plena capacidad para el trabajo?

Is the person examined able physically and mentally to carry on intensive study away from his (her) home?

¿ Estima usted que la persona examinada está en condiciones, desde el punto de vista físico y mental, de realizar estudios intensos en el extranjero?

Place
Lugar

Date
Fecha

Examining Physician
Firma del Médico

Exact address (to be typewritten or printed)
Dirección exacta (a máquina o en mayúsculas)

INSTRUCTIONS - INSTRUCCIONES:

To be completed in triplicate by the Chairman of the Committee.
A llenar por triplicado por el Presidente del Comité.

**IV RECOMMENDATIONS OF SELECTION COMMITTEE
RECOMENDACIONES DEL COMITE DE SELECCION**

1. Comments on educational qualifications, experience in the subject to be studied, age, health and personality.
Observaciones relativas a los estudios anteriores, experiencia en la materia que se propone estudiar, edad, estado de salud y personalidad del candidato:

2. Comments on the linguistic ability of the candidate:
Observaciones relativas a los conocimientos lingüísticos del candidato:

3. Comments on most desirable country, institution and length of training:
Observaciones relativas al país y la institución más conveniente, así como sobre la duración prevista de los estudios en cuestión:

Names and titles of Board Members:
Nombres y títulos de los miembros del Comité:

Signature of Chairman of the Committee:
Firma del Presidente del Comité:

- 1.
- 2.
- 3.
- 4.
- 5.

Address: _____
Dirección:

Place: _____ Date: _____
Lugar: _____ Fecha: