

## Overseas Teaching Program Goes Global!

Diann H. Bridenbaugh, M.D., Chair  
*Committee on Global Humanitarian Outreach*

Phillip O. Bridenbaugh, M.D., Immediate Past Chair  
*Committee on Overseas Teaching Program*

**As the ASA membership has grown** over the past decade, so has the need for the leadership of the Society to redefine the goals and operations of ASA to better meet the needs of the membership and the public. This seems to be the era of "CHANGE" at every level of governance, from the federal government to ASA. One of the themes of this change is to provide more services and opportunities for the membership to become involved not only in and for the people of the United States, but the world as well. To that end, all of organized medicine seems to be going "Global!" The ASA Committee on Overseas Teaching Program has, therefore, been renamed the ASA Committee on Global Humanitarian Outreach.

### ASA-OTP Up to the Present:

The ASA Overseas Teaching Program (OTP) was created in 1990, at the suggestion of Nicholas M. Greene, M.D., who had previously served for two months on the Hospital Ship S.S. HOPE. While the United States and the developed world enjoyed a high standard of medical and anesthesia care, it was lacking in the underdeveloped countries of the world. The goal of the OTP was to send volunteer physicians to Africa to teach anesthesia providers a safe anesthesia practice and to leave them with the knowledge and materials to teach their future anesthesia personnel.

In the ensuing 19 years, ASA-OTP has sent more than 100 volunteer anesthesiologists to Africa to our programs in Zambia, Tanzania, Uganda and Rwanda. They went for one to three months at a time, and many returned on other tours. Not only did our volunteers give daily lectures to the anesthesia

personnel in the hospitals (which were teaching hospitals in their country), they taught and supervised the administration of anesthesia in the perioperative areas of recovery and intensive care. In the later years, teaching included medical students and postgraduates training in anesthesia. These trained physicians assumed leadership of the anesthesia services in regional hospitals where there were no anesthesia-trained physicians.

The currently active ASA programs exist in Rwanda at the University Hospital in Kigali, the capital of Rwanda, and at the Kilimanjaro Christian Medical Center (KCMC) in Moshi, Tanzania. The program in Rwanda is co-sponsored with the Canadian Anesthesiologists' Society's International Education Foundation. It is an M.Med. program comparable to our residency program. Lectures and supervision of non-physician anesthesia personnel in its Allied Health programs are included.

The KCMC program in Tanzania has been slower to grow due to economic and political issues within the country. ASA sponsored the Nicholas Greene Scholarship to support training of a physician through a five-year residency training program. He, in turn, stayed on as faculty and has since trained two additional physicians. That may sound inconsequential to our world, but there are fewer than 20 anesthesiologists in the entire country of Tanzania, which has a population of more than 40 million. (These are numbers not unusual in many African countries.) Due to recent medical licensure changes in Tanzania, it appears that ASA volunteers will have to be licensed to teach clinically. Now on hold, it is probable our program in Tanzania will have to be concluded.



Diann H. Bridenbaugh, M.D., is Director of Clinical Anesthesia, Department of Anesthesiology, University of Cincinnati.



Phillip O. Bridenbaugh, M.D., is Professor Emeritus, Department of Anesthesiology, University of Cincinnati.

### **ASA-GHO: A Future of Change?**

As part of the ASA Long-Range Planning program, there were recommended changes in many committee structure or functions. One recommendation of the ASA leadership, and affirmed by the 2008 House of Delegates, was the renaming and redefinition of the ASA Committee on Overseas Teaching Program to the ASA Committee on Global Humanitarian Outreach (GHO). In addition to a continuing commitment to teach anesthesia in underdeveloped countries (Rwanda, for example), the goals of the committee were to be directed more globally through a diversity of service opportunities to interested ASA members and through collaboration with a variety of national and international organizations and their global outreach programs.

The 2009 GHO committee members have recognized the magnitude of the task of providing ASA members – who have varying degrees of knowledge and interest in volunteering for “Outreach Teaching and Service Activities” – with information for determining what types of opportunities might be suitable to their abilities, interests and availability within any number of organizational programs. Over the years, ASA has cultivated close working representation with a number of international and national specialty and governmental organizations. Examples include the World Federation of Societies of Anaesthesiologists (WFSA), World Health Organization (WHO), and many of the national societies of anesthesiology (CAS, AAGBI, ESA, etc.). Similarly, ASA has strong affiliations with many of the U.S. surgical specialties for societal, political and governmental reasons.

To that end, the GHO committee has attempted, through conference calling, to prioritize this amalgamation of providers and consumers of global humanitarian

outreach. ASA leadership has recommended that we start by using the American College of Surgeons Webpage [www.operationgivingback.facs.org](http://www.operationgivingback.facs.org) as a template for our activities. We recommend to all interested members that they log on to that Webpage for one of the most detailed collections and information sources for anyone interested in overseas volunteering. We will discuss creating a similar format for ASA using links with all of the relevant organizational providers.

There are many other areas for collaboration that will need to be explored. A large number of ASA members have already had significant experience, in addition to ASA-OTP, of serving with WFSA programs, WHO, Health Volunteers Overseas, Operation Smile, religious or other surgical and medical organizations. The GHO committee welcomes any and all reports of your experiences with these organizations and any others that you believe would be of mutual interest to ASA members. The GHO committee feels challenged and excited to create an information base and administrative support system that will encourage many more ASA members to reach out

to anesthesia personnel in developing areas of the world where there are educational and material needs. For additional information, consult the WFSA Webpage [www.wfsahq@anaesthesiologists.org](mailto:www.wfsahq@anaesthesiologists.org), and the ASA Web site [www.anaesthesiologists.com](http://www.anaesthesiologists.com).

*“The GHO committee feels challenged and excited to create an information base and administrative support system that will encourage many more ASA members to reach out to anesthesia personnel in developing areas of the world where there are educational and material needs.”*