



Volume 2
November-December 2008

TTUHSC Global Matters

The Newsletter for the Center for International and Multicultural Affairs

UPCOMING EVENTS

The President's
Forum on
International Health



Noon CST
Room ACB 120

Scheduled presenters for
November & December:

November 5

Gabor Racz, M.D.
TTUHSC Pain Journey

November 19

Myrna Armstrong, Ed.D., RN
Body Art and Tattooing

December 3

Jean Michel Brismee, PT, ScD
Spinal Manipulations

Free lunch provided by Texas
Tech Federal Credit Union to
the first 35 attendees.

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International Health



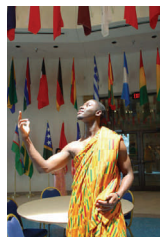
An Interview with Kweku Hazel

School Of Medicine Class of 2012

written by Emma Carrasco



Kweku is currently a first year international medical student at Texas Tech University Health Sciences Center in Lubbock. The name Kweku, in Ghana, means a male born on a Wednesday. Although the name Kweku is unique in the U.S. in his home country it is the equivalent of having a very common name like John. Normally, there are three questions that start a conversation after Kweku speaks: where are you from, how did you get here, and what are you doing here? After years of answering these questions in that specific sequence, he came up with an acronym, G.P.S (Ghana, Plane and School) to save him and curious Texans some well deserved time.



Kweku was born and raised in Ghana; a country in West Africa about a third the size of Texas but with approximately 22 million people. His family includes five siblings who all study and work in Ghana. During his final year of high school, Kweku was accepted into a foreign exchange program in Rockwall, Texas. Adapting to another family and high school in Texas was perhaps the most difficult endeavour he had ever undertaken. Language and cultural boundaries had to be learned on a daily basis. While in Texas, his grandfather, who was the most influential person in his life, passed away due to a very treatable medical condition. This situation, combined with an excellent high school biology instructor, motivated Kweku to seek a career in medicine. After graduation, he returned to Ghana with the value of an education in the United States. He did return to Texas and completed an associate's degree from San Jacinto College in Houston and then earned a Bachelor of Science in Chemistry from Texas Tech University.



"My experience in the United States has made me a better person. I feel privileged to be given the opportunity to experience medicine in Ghana and the U.S. because both have such different cultures and resources. My plans are to share my experiences and knowledge gained whenever possible. Interestingly, I have met a wider variety of Africans in Lubbock than while living in Africa. My time in the U.S. has truly been worthwhile. Meeting people from so many cultures, backgrounds, and religions has fostered lifelong friendships."



The TTUHSC Chapter of AMSA is proud to host the
2008 AMSA Southeast Regional Conference



**Falling through the Cracks:
Access and the Underserved**

December 5-7, 2008

Includes two days of programming covering topics such as:

- Immigrant health
- Global Burden of HIV & TB
- Spotlight on Transgendered Health
- Infectious Diseases at Home and Abroad
- The Impact of Poverty on Health
- Programs for Getting Involved Internationally

Sunday's program is sponsored by the TTUHSC
International and Multicultural Medicine Club

Keynote speakers include Ed Zuroweste, M.D. and Joseph
B. McCormick, M.D., M.S.

For registration information visit:
www.ttuhsu.edu/student-services/AMSA.aspx

For questions contact: Alexander.Yu@ttuhsu.edu

VISA NEWS

UK CHANGES VISA REGULATIONS

In November 2008, the UK Border Agency (UKBA) will begin to implement a five-tier visa regulation system. Information can be found at the following link:
www.ukba.homeoffice.gov.uk/managingborders/managingmigration/apointsbasedsystem/howitworks

Educational establishments must also apply for a sponsorship license. Even American institutions that only offer short-term study abroad programs in their own premises in the UK to students who are enrolled in the US and who come to the UK for one or two semesters before returning home to finish their degree courses, must apply for a license from the UKBA. Information for education providers can be found at the following link:

www.ukba.homeoffice.gov.uk/employers/points/sponsoringmigrants/eligibility/tierstudents/

Students and prospective students who intend to stay longer than six months, and those coming for less than six months but who wish to work while studying, are required to obtain a student or prospective student visa in advance of traveling to the UK. Failure to do so will result in the student or prospective student being refused entry to the UK. Students may apply on-line at the following link:

www.ukvisas.gov.uk/en/howtoapply/infs/

Information regarding the U.K.'s visa changes taken from the Overseas Security Advisory Council website. For more information see www.osac.gov

HIV in Uganda: More than a Virus

by Revathi Ravi, School of Medicine class of 2012

He smiles at me, an almost sneer, as if I have asked an outrageous thing. "Yes I will. We die as a family, or she can go live on the street," he says.

It has been almost two years since that hot summer afternoon in Uganda, and I can re-live the memory almost as if it was yesterday. The man had spelled out the common fate of the women before me: death, but the killer this time couldn't simply be coined with the three letters, HIV.

This man's reply comes soon after asking another woman the same question: whether she would have sex with her husband, knowing he had HIV. Her eyes were fearful and cautious, gazing around at her fellow women, and then in the corner where the men were. "No, we do not want it. We are ok with not having it." The men, do not agree. Thus sets the stage for one of the greatest medical tragedies of all time, which has spent the greater part of the last 30 years opening the eyes of the world to more than a virus, but repression, inequity of health, discrimination, and social standards all over the world.

Aside from the ingrained repression in this patriarchal society and cultural outlook on views of sex that makes it so easy for this infection to spread, there are more road blocks. In my time in Uganda, I failed to meet a single physician, but found remote areas filled with midwives and medical officers, unable to prescribe a single medication. I watched as a woman and her baby waited for a doctor who would never come, to help her child suffering from malaria, and would eventually die of treatable infection a few days later.

The HIV virus began as an innumerate disease, but has grown to shed light on the crucial factors outside of medicine, that truly dictate what the medical field will and can do. It has pushed us to ask why so many are murdered relentlessly, and forced light on the social, psychological, economical, and cultural factors that drive the very life of the world today. In Africa, it uncovers a society that requires more than a quick fix, in order to turn the situation around.

As I run along the trans-African highway, through the dew that touches the riches and beauty of the land I see before me, I fall in love with a country that is filled with the strength of women to keep going, and children who continue to smile, despite not having shoes on their feet, and very little in their stomachs. Uganda is not devoid of the richness to combat the poverty and lack of health that runs rampant in this area. It has ingrained in me an understanding of my duty in my training as a physician, how crucial it is to be more than just a doctor. To see everything that affects an individual. The blaring reminder of the HIV epidemic, which continues to claim lives all over the world, is sound enough of the tragedy that ensues when medicine takes an isolated path.

Country Close-up* *every issue CIMA will select a new country to feature

Republic of Ecuador

The republic of Ecuador is located in the northern portion of South America between Colombia and Peru. It is approximately the size of Colorado and has a population of over 13,750,000 people. A large majority of this population is mestizo, a mixed Indian and Spanish ethnicity. It's diverse terrain includes jungle area, a rich agricultural coastal plain, mountain valleys, and a group of volcanic islands in the Pacific Ocean. In recent years the urban population has increased significantly as Ecuadorians from the central highlands and coastal lowlands have migrated towards the cities. Spanish is the official language although many indigenous languages are popular as well, especially the Ecuadorian dialect of Quechua.

In the 16th century Spanish forces arrived in Ecuador defeating the Inca armies and establishing colonial rule. It wasn't until 1822 that Ecuador gained its independence from Spain. It was in that year Ecuador joined the Republic of *Gran Colombia*. It became a separate republic in 1830. For the most part, both the 19th and 20th centuries were a time of great political turmoil. The 21st century has



also seen the rise and fall of many political leaders as Ecuador's political parties tend to be factionalized. In July 2008 assembly members met to draft a new constitution, the 20th constitution since Ecuador's independence. A long history of border disputes with Peru was finally settled in 1998 while the ongoing conflict in Colombia is still an important border issue impacting Ecuador.

Ecuador's major exports are petroleum, bananas, shrimp, coffee, cut flowers, cacao, hemp, wood, and fish. It is the world's largest exporter of bananas and plantains. The dollar was adopted as the national currency in 2000, a decision which helped stabilize the nation's economy and foster economic growth. However economic growth has slowed with the decline of petroleum production.

According to World Health Organization statistics the life expectancy for Ecuadorians is 70 years for males and 76 for females. The infant mortality rate is 26 of every 1,000 live births. The top ten causes of death for all ages are Ischaemic heart disease, cerebrovascular disease, diabetes, lower respiratory infections, hypertension, tuberculosis, perinatal conditions, violence, stomach cancer, and nephritis and nephrosis.

GISHO in Need of Medical Supplies



The **Global and International Student Health Organization (GISHO)** is a student organization at the Amarillo campus recently founded by Dr. Mubariz Naqvi and fourth year medical student, Sophia Tcheung. The club was started to

give more TTUHSC students the opportunity to become involved in international endeavors. It is open to students in the different schools at TTUHSC, and its main focus is to help developing countries with equipment that they do not have access to by recovering unused or lightly used medical supplies to send abroad.

GISHO has contacted local hospitals in hopes of collecting supplies that can be sent to needy hospitals abroad. In addition to hospitals, the club has contacted over 25 local home health care organizations and nursing facilities. The club is currently organizing an inventory of supplies that include ambu bags, urinary catheters, enteral feeding bags, surgical masks, and syringes.

Using the information gained by medical students studying abroad as well as physicians who have worked in hospitals all over the globe, the organization hopes to create "wish lists" for hospitals in desperate need of supplies that

can be easily gathered from local medical providers and institutions. In addition to sending supplies with medical students and faculty who are going abroad, the organization plans to send monthly shipments of supplies. The organization has partnered with the Rotary Club of Canyon, TX, and they have graciously agreed to help finance the shipment of supplies.

In addition to medical supplies, medical books and journals are also in demand. Dr. Naqvi has recruited a group of students to prepare presentations on various topics. These presentations can then be reproduced and distributed to international universities. The organization also plans to contact pharmacies in the area for donations of medications.

If you would like to make a contribution, GISHO is accepting all medical supplies as well as books, journals, and medications. The supplies will be matched to the various wish lists that have been created. GISHO is also accepting monetary donations to help with sending the supplies abroad.

For more information please contact Dr. Mubariz Naqvi at 806-354-5522 or by e-mail at Mubariz.Naqvi@ttuhsc.edu.



Tandoor Chicken—from Payal's Kitchen

Ingredients:

- 1 package chicken wings/drumsticks
- 2 cups yogurt (or amount you think will easily cover the amount of chicken you have)
- 2 teaspoons ginger-garlic paste
- 2 tablespoons dried coriander powder
- 1/2 teaspoon turmeric powder
- 1 teaspoon red chili powder
- 1/2 teaspoon crushed black pepper
- 1/2 teaspoon garam masala (more if you want it really spicy)
- 1 teaspoon curry powder
- 1 tablespoon lemon juice
- salt, according to taste



Method:

In a bowl take yogurt and add all the ingredients to it except for chicken and mix well. To this marinade add washed and cleaned pieces of chicken. Marinate in fridge overnight (preferably for a day - the longer the marination the better the taste)

For roasting the chicken - preheat oven at 425 C. Take a baking tray and cover it with aluminum foil - spray oil on it. Now, take the chicken pieces out of the marinade with bare minimum sticking on it.

Place these pieces on the tray and sprinkle some salt and lemon juice on them. Put the tray in pre-heated oven. Bake for 10 minutes, checking every once in a while. When it looks like the side facing the tray must be done turn all the pieces and let it go for another 15-20 minutes, checking intermittently.

Dip Ingredients:

- 1 cup coriander leaves
- 2 green chilies
- 1/4 cup roasted peanuts
- 1/2 cup yogurt
- 1 teaspoon salt
- 1 teaspoon lemon juice
- some water

Method:

Put all the ingredients in a mixer and grind until makes a fine paste. You can add more water if you want it thinner. You can use the remainder of the marinade to make rice by replacing some water for boiling rice with marinade. Once the chicken is done serve it with the dip and thinly sliced onion, tomatoes and fresh coriander leaves.

Payal Mital is a Cell Biology Biochemistry student from India

VISA NEWS CONT.

SEVIS FEE INCREASE

On September 26, 2008 the SEVIS fee increase regulation was published in the Federal Register. Effective October 26, 2008 the SEVIS fee for F-1 students will be \$200. Also effective October 26, 2008, the SEVIS fee for most J-1 Exchange Visitors will be \$180.

PASSPORT CARDS

U.S. citizens traveling via land or sea to Canada, Mexico, the Caribbean region, or Bermuda may apply for a Passport Card. For more information and for application procedures visit:

www.travel.state.gov

IMPLEMENTATION OF ESTA

Beginning August 1, 2008 the Department of Homeland Security began implementation of the Electronic System for Travel Authorization (ESTA). ESTA is a new fully automated, electronic system for screening passengers before they begin travel to the U.S. under the Visa Waiver program (VWP). It is anticipated that ESTA will become mandatory for VWP travelers in January 2009. For more information regarding ESTA visit:

www.esta.us

When in... Austria

Shake hands with everyone in the room (even children), maintain eye contact and say, "Grüß Gott" (God's greeting). Wait for a woman to offer her hand for a handshake.

Austrians appreciate a little knowledge of their unique culture and history. To lump them together with Germans will cause offense.

Austrians are well-behaved and sticklers for doing things the right way and obeying the rules. They are also very direct and will take what you say very literally, so idle promises or invitations will be taken at face value.

Austrians appreciate the finer things in life (Gemütlichkeit), including good food and drink enjoyed in good company. Eating heartily and displaying your appetite and love of food are encouraged.

Don't start eating until your host wishes you "Guten Appetit" or "Mahlzeit" and has started to eat.

Cut your food with your fork. Using a knife suggests that the food is tough.

In a restaurant or bar never sit at a table labeled *Stammtisch*, which means it is reserved for the regulars.

When staying in an Austrian's home, be aware that water is metered and is expensive, so don't waste it, and avoid long showers.

Divide your trash in five different categories for recycling or you may incur a fine.

taken from *Behave Yourself*
by Michael Powell



Meet Resident Physician Jorge Burgueno, M.D. Department of Internal Medicine



Dr. Burgueno was born and raised in Cuba. As the largest island in the Caribbean, Cuba has long been known for being both controversial and complicated. As a child and young adult Dr. Burgueno was raised in the Cuba of Fidel Castro's "dream", a "dream" that includes tight government control of all areas of Cuban life, including healthcare and education.

Cuba's healthcare system is supported by the government and as such is highly politicized. Lack of resources forces healthcare providers to focus on prevention. In addition, Cuba has a large number of social workers that are employed to educate the population about nutrition and other preventive health measures. Although the real numbers and health statistics are unknown, there's no denying Cuba's infant mortality rate is one of the lowest in the world and much of Cuba's resources are invested in pediatric care.

Cuba's education policy sets it apart from many underdeveloped countries. Dr. Burgueno estimates the literacy rate to be as high as 97%. For such a large majority of the population to be able to read and write is an advantage many poor countries don't have. Like the healthcare system, the educational system is also supported by the government and is also highly politicized.

It was while attending medical school at Camaguey, Cuba that Dr. Burgueno began to realize how complicated and twisted this "dream" really was. The more he wanted to know about the world and the more knowledge he attempted to gain, the more his eyes were opened to the bigger picture and the truth of this "dream."

Like many Cubans, the economic situation of the country greatly affected Dr. Burgueno's family. In order to assist his family with their financial needs he made the decision to leave Cuba. At first he considered traveling to Spain. However the close proximity of the U.S. made Miami a more feasible option. As Dr. Burgueno will tell you, "When you're desperate you take desperate measures." As a result of this desperation, he made his first failed attempt to enter the U.S. in 1999. After 52 hours of paddling a small boat he was caught by the Coast Guard and sent back to Cuba where he spent 4 months in jail. Once released, Dr. Burgueno was stripped of his physician privileges, forcing him to accept a job selling fresh water fish.

Soon after, he made his second failed attempt to enter the U.S. Once again he was caught by the coast guard, sent back to Cuba, and jailed. After completing his second prison sentence he battled the government to resume work as a physician, however many of his privileges were taken away.

It was in 2002 that Dr. Burgueno made his final attempt to enter the U.S. He flew from Cuba to Brazil and then to Miami where he was accepted as a political refugee. When he arrived in Miami he met the challenges of living in a new country face-to-face. Unable to speak English he accepted the only job he could find—flipping hamburgers and mopping floors at a fast food restaurant. He worked at the restaurant during the day, saved every penny he earned, and attempted to teach himself English at night.

After two months of living in the U.S., Dr. Burgueno was hired as a phlebotomist at the University of Miami. Although it was a way back into the healthcare system, making the transition from up-and-coming young doctor to phlebotomist was not easy. In Cuba he had been an Internal Medicine attending at the University of Havana, as well as Head of Critical Care at a trauma hospital. Now he was just "some guy" drawing patients' blood. But, if there is a moral to Dr. Burgueno's story it is don't ever lose your focus.

In 2004 Dr. Burgueno joined a research team at the University of Miami and began working in the Orthopaedic-Oncology division. Hard work and resourcefulness enabled him and other colleagues to create a tumor tissue bank, funded by Sylvester Comprehensive Cancer Center at the University of Miami "Miller School of Medicine". He was offered a position to run the bank however he turned it down in order to pursue his original goal, to become what he had been before—a physician.

After passing the appropriate tests to validate his M.D., Dr. Burgueno began applying for residency programs. He interviewed with multiple institutions and just as the interview process was beginning to wrap up he received an invitation to interview at TTUHSC. On his arrival to Lubbock he remembers looking out the window of the plane, not seeing any houses, and wondering where in the world he was going. However, despite the sparse terrain, it only took half an hour once the interview was complete for Dr. Burgueno to decide this was the place for him.

Dr. Burgueno still maintains contact with his family members in Cuba. He estimates that he spends 10% of his salary on phone calls to Cuba. In addition to his parents and siblings, he has a 15 year-old son residing in Cuba. He calls once a week for updates on the lives of those he cares for the most.

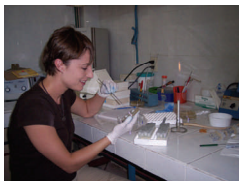
At the time of this interview Dr. Burgueno had just completed the Immigration and Naturalization test which will allow him to become a U.S. citizen. He was waiting to hear the results while also beginning the process of applying for his son to join him in the U.S. In addition, he had very recently married Diana Vega, a woman he calls "the most beautiful person in the world."

As rumors of the coming change to Cuba's way of life surface in the media, Dr. Burgueno hopes the much needed change does come, but that it comes slowly. History gives evidence that if change comes quickly and suddenly it can often be accompanied by violence. For the sake of the country he cares so much about Dr. Burgueno hopes the changes are more gradual and lasting.

Don't Drink the Water!

by Katherine Duncan, School of Medicine class of 2011

We've all heard it—"Don't drink the water! Don't eat the native food!" But does local food pose problems only for travelers? This summer, the International Health Scholarship from TTUHSC-SOM allowed me to conduct epidemiological research in Guadalajara, Mexico, under Herbert DuPont, M.D., one of the world's leaders in infectious diarrheal research, and his international medical team. Clearly, there is a link between international travel and infectious diarrhea. However, it is believed that pediatric populations in many foreign countries suffer from these same illnesses chronically.



I worked together with a first year medical student from UT-Houston, acquiring samples of cheap foods from street-side and market vendors in Guadalajara and nearby villages. In the lab, we processed each item, then plated and grew specimens that we then harvested and packaged for their return to Houston. At the UT School of Public Health Center for Infectious Disease laboratories, other researchers will genotype the sample strains so that they can be compared to the types obtained from local populations of infected children and students.

This trip was a fantastic opportunity to build experience in international medicine and research. In addition to interacting in Spanish each day, I was immersed in the culture of research and clinical practice in Mexico. My partner and I volunteered at a village pediatric clinic where we worked under young Mexican physicians completing their public service year. We learned from and nurtured relationships with our international university research partners at the Universidad Autonoma de Guadalajara. Another student research team was helping to conduct a Phase III clinical trial, and through our interactions with them, we acquired a firsthand look into the world of clinical pharmaceutical trials. Every afternoon, we received lectures from UT-Houston Medical School Professors of Infectious Disease. They gave us tips on conducting international research efficiently and shared their own rich experiences of international travel—from conventions to research to medical humanitarian missions as disease detectives for the United States Center for Disease Control.



My Guadalajaran research elective was incredibly enriching both personally and professionally. It helped prepare me not only for the transition to El Paso where I will complete my clinical training, but also for a career working closely with Hispanic populations in Texas and throughout Latin America. Through the International Medicine Club, my fellow officers and I are working with students and the administration to raise awareness of the opportunities available to medical students who want to study abroad, expand the international program, and increase International Health Scholarships available to future students in the medical school and across TTU Health Science Center disciplines.

International Flavor

Tarkaari

from Huzefa Dungalwala
Biomedical Sciences

Ingredients:

5-6 chicken legs
1-2 tablespoons yoghurt
1 tablespoon ginger-garlic paste
2 green chilies, finely chopped
2-3 tomatoes, finely chopped
1-1 1/2 onion(s), finely chopped
spices:
5 cloves
3 cinnamon sticks
3 bay leaves
6-8 black peppers (whole)
2 teaspoons red chili powder
a pinch turmeric powder
1-2 tablespoons vegetable oil
salt to taste

Method:

Marinate the chicken legs with ginger-garlic paste, turmeric, yoghurt, finely chopped green chilies and salt (as per need). Leave for 1-2 hours. Warm the vegetable oil in a pressure cooker. Add cloves and cinnamon. Next add the onions and cook till they become white and transparent. Add bay leaves and whole black peppers and cook till the onions become golden brown. Add red chili powder, turmeric and salt. Add the tomatoes and mix well with the above mixture. Finally add chicken. Cook for appropriate time (usually it takes 4-5 whistles of the cooker.)

SERVE HOT along with bread/naan or rice.



CIMA Celebrates Dia de los Muertos

On October 31 the Center for International and Multicultural Affairs invited all TTUHSC faculty, staff, and students to a celebration for *Dia de los Muertos*, the Day of the Dead.

Observed primarily in Mexico and other Latin American countries on November 1 & 2, the Day of the Dead is an annual celebration to honor and remember the lives of those who have died.



Traditions include building private altars honoring the deceased, using sugar skulls, marigolds, and the favorite foods and beverages of the departed, and visiting graves with these gifts.

It is believed that on the Day of the Dead the spirits of the

dead return to commune with the living. Paths of flower petals, primarily marigolds, and burning incense lead spirits to the houses of their living relatives.



Keeping with the traditions of the holiday CIMA staff constructed an altar with *ofendas* (offerings) to demonstrate this popular aspect of the holiday. Pedro's Tamales donated tamales for the celebration. In addition *pan de los muertos*, or bread of the dead, was served along with hot chocolate. A video explaining the history and traditions of this popular Mexican holiday was shown as guests mingled and enjoyed the Mexican goodies.



Over 100 staff, students, and faculty participated. Participants that brought 2 cans of food to the event were entered into a door prize for a \$25 gift card to Wal-Mart. The cans of food were donated to the Graduate Student Association's canned food drive.

Useful Websites

Need assistance with your next trip abroad? Try visiting the following websites:

- To obtain or renew your passport: travel.state.gov/passport
- To register your upcoming trip abroad with the State Department: <https://travelregistration.state.gov>
- To obtain country specific information regarding your destination: travel.state.gov/travel
- To find a list of vaccinations required or recommended for your destination: www.cdc.gov/travel/destinationlist.aspx
- For information regarding what you can and cannot bring back from your trip (know before you go): www.customs.gov/xp/cgov/travel/vacation/kbyg/
- To locate a U.S. Embassy: www.usembassy.gov
- For information regarding air travel including carry-ons and prohibited items: www.tsa.gov/travelers/
- To view current exchange rates: www.xe.com/ucc/
- Students should also consider purchasing an International Student Identity Card (ISIC) for discounts abroad: www.istc.org
- To vote absentee if an election is being held while you're abroad visit: www.fvap.gov



Growing Up in U.A.E.

An Interview with Usman Jehangiri of the PC/Network Support Team

In 1999, at the age of 18, Usman Jehangiri traveled to Lubbock, TX from the United Arab Emirates (UAE) to attend Texas Tech University. Needless to say, upon arrival he experienced major culture shock. Being used to an area of the world where cities are more compact and built up instead of out, Usman discovered a city very spread out and an area that was much more sparse than expected.

Although he was born in Pakistan, Usman's family moved to UAE when he was 1 years old. Usman's father was offered a job in UAE which he readily accepted as it would provide better opportunities for the family. The transition from Pakistan to UAE was relatively easy on the family due to the close proximity of the two nations and due to the fact that the cultures of the two nations are very similar. Both nations observe the same religious holidays and other than slight differences in style, most other celebrations are observed in a similar fashion as well.

In UAE Usman attended a very unique educational system known as an English Medium School. The school was taught entirely in English, with Arabic, UAE's national language, taught as an additional language requirement. The school compound also included four additional schools including an option for American, French, and Japanese students. This educational system allowed international residents of UAE to keep their native language while at the same time learning the language of their new home.

As a result of attending the English Medium School Usman became proficient in English as well as Arabic. School hours provided an opportunity to learn and practice English, the community provided opportunities to expand his use of Arabic, and at home he and his family still spoke the native language of Pakistan, Urdu.

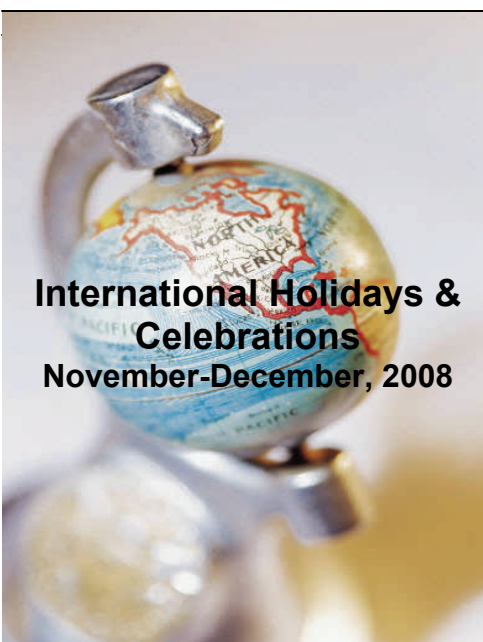
UAE tends to be very diverse for its size and location. The cities of Abu Dhabi and Dubai offer many attractive opportunities for employment. As a result there is a variety of individuals residing in UAE. Growing up Usman had friends and knew acquaintances from France, Finland, Japan, and America, just to name a few.

Before arriving in the U.S. Usman contacted TTU's Pakistani Student Association. A representative greeted him at the airport and over time the group helped get him assimilated to Lubbock. His involvement with the Pakistani Student Association provided a good network for support, helped ease some of the homesickness he experienced, and offered opportunities to build relationships with others who share the same culture and customs.

According to Usman the biggest thing he missed after coming to the U.S. (besides his family members) was the food. It's next to impossible to find good Pakistani food in Lubbock. As a result he eventually learned to cook for himself.

In 2001, while still attending school, Usman met his wife Vanessa, a Dallas area native. They were married in 2003 and both of them completed their undergrad degrees the following year. The couple is expecting their first child in April. As a father Usman would like to incorporate both American traditions and his Pakistani heritage. One way he wants to accomplish this is by speaking Urdu in the home. He also plans to teach his child how to play tennis when they are old enough.

Usman joined TTUHSC in October 2007. He currently works in IT as a member of the PC/Network Support team.



International Holidays & Celebrations November-December, 2008

- November 1-2 All Saints' Day, All Souls' Day, & Dia de los Muertos; Mexico
- November 11 Armistice Day; France & Belgium
- November 12 Loy Kratong Festival; Thailand
- November 15 Republic Day; Brazil
- November 16 International Day for Tolerance
- November 22 Independence Day; Lebanon
- November 30 Bonifacio Day ; Philippines
- December 1 World AIDS Day
- December 2 National Day; United Arab Emirates
- December 6 Independence Day; Finland
- December 7 Arafat; Islamic Religious Holiday
- December 8 Eid al Adha; Islamic Holiday
- December 10 Human Rights Day
- December 12 Our Lady of Guadalupe; Mexico
- December 16 Independence Day; Kazakhstan
- December 22 Hanukkah; Jewish Religious Holiday
- December 28 Hijri New Year



International Student Statistics

According to statistics from the Office of International Affairs (OIA) at TTU, the number of non-immigrant students attending both TTU and TTUHSC for the first time during the Fall 2008 semester is 443. That number is up from the previous Fall semester which recorded 337 new non-immigrant students.

Information from OIA dated September 23, 2008 regarding non-immigrant students attending TTU/TTUHSC for the first time states the following:

Non-Immigrant Undergrad Students—87 (up 45%)

Non-Immigrant Graduate Students—356 (up 29%)

Countries represented—66

Major countries of origin—India (168), China (62), Korea (18), Turkey (12), Norway (11), Nepal (10), Mexico (9), Saudi Arabia (9), France (9), Bangladesh (8)

The total number of non-immigrant students (new and returning) is said to be 1,432.

Peruvian Summer

by Alexander Yu, School of Medicine Class of 2011

Late last year, a classmate, Chris Jones, and I found ourselves trying to figure out what to do with the time off between our first and second years of medical school. With only a few precious weeks of break, we had a few specific goals of what we wanted to accomplish and how we wanted to relax. With interest in international medicine and in improving our Spanish, we both gravitated towards research in South America.

As first year medical students, we realized our abilities to diagnose were extremely limited and our ability to treat was non-existent. Thus, we hoped that we could be more productive working in a public health capacity rather than in a clinician-patient setting.

With the guidance and support of various faculty and financial assistance in the form of a TTUHSC International Health Elective Scholarship, Chris and I put together a research project and connected with a volunteer student-engineer group, *Engineers Without Borders*, that traveled abroad working on infrastructural healthcare projects.

By mid June, Chris and I were walking amongst alpaca in the Peruvian Andes while studying water borne diseases. Altogether, we spent the majority of five weeks in two isolated rural villages, far from the big city and from seemingly everyday conveniences.

Bundled under layers of sweatshirts and wrapped in our sleeping bags, we awoke each morning to the sting of Peruvian winter and the crow of roosters and donkeys. Curious and welcoming villagers would then come to chat with us, bringing with them hot matte teas and breakfast.

As the hot sun rose and the days warmed, we took in the majestic mountains and valleys as we worked on our research. We performed physical exams, nutritional assessments on children, and analyzed stool samples. We also interviewed families and talked with village leaders about their health concerns and ways to improve the community's health. Without a health provider in town, the villagers braved steep mountainous treks and dangerous zip-lines over rivers to bring their sick, pregnant and elderly to the nearest nurse and health outpost.



In addition to our research work on water borne illnesses, we worked with *Engineers Without Borders* towards their goal of sustainable community health improvements. We helped construct a water filter to clean the mountain stream of parasites and bacteria so that it could be safely drunk. We also led educational workshops for the kids about hygiene and microbiology, and assessed possible health improvement projects for the future, such as smokeless stoves, solar heated showers, and construction of a health post. After the seemingly endless days, we would settle ourselves down to dinners of corn and potato and were in bed by sundown, usually around eight pm.

Our travels provided us with the opportunity to see a rich culture with preserved traditional customs seamlessly meshed with modern industry and technology. We were invited into homes as friends, ate Quinoa and Guinea Pig, learned a little of the native *Quechua* language, and drank homemade fermented corn. We walked around the majestic, hidden mountain top city of *Machu Picchu* overseeing the lush, tropical *Urabamba* valley and river below. At the end of it all, we sat with new Peruvian friends and reflected on our experiences while taking in dinner and traditional dance at the beautiful ocean side cliff of Miraflores in Lima, the Peruvian capital.

This summer provided us with a unique opportunity not only to explore our own public health and research interests, but also with a chance to see a slice of a proud and ancient culture that we may not have otherwise experienced. I know that we will continue to benefit from the friendships we made and draw from the opportunities and experiences we had as our medical careers develop.

Get Involved

Do you want to get involved in international endeavors? In addition to opportunities offered by TTUHSC you might consider the following organizations:

Volunteer Abroad
www.volunteerabroad.com

International Medical Volunteers Association
www.imva.org

Idealist
www.idealist.org

Cross-Cultural Solutions
www.crossculturalsolutions.org

Peace Corp
www.peacecorps.gov

Global Volunteers
www.globalvolunteers.org

Globe Aware
www.globeaware.org

Projects Abroad
www.projects-abroad.org

Volunteer in Africa
www.volunteeringinfric.org

Universal Giving
www.universalgiving.org

Open Windows
www.openwindowsfoundation.org

VIA
www.viaprograms.org

Unite for Sight
www.uniteforsight.org

i-to-i
www.i-to-i.com

Voluntary Projects Overseas
www.voluntaryprojectsoverseas.org

Women in Progress
www.womeninprogress.org

Volunteer Match
www.volunteermatch.org

United Planet
www.unitedplanet.org

UN Volunteers
www.unv.org



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Center for International and Multicultural Affairs
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Lubbock, Texas 79430-6266

Thank You

- Afrikaans.....dankie or baie dankie
- Arabic.....شكرا لك
- Chinese (traditional)..謝謝你
- Danish.....tak
- French.....merci
- Filipino.....salamat
- Italian.....grazie
- Japanese.....ありがとうございました
- Latvian.....paldies
- Swedish.....tack
- Ukrainian.....Спасибо

Language Lesson

Please send
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