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5-1-2007

AKU Newsletter : May 2007, Volume 8, Issue 1

Aga Khan University

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Recommended Citation

Aga Khan University, "AKU Newsletter : May 2007, Volume 8, Issue 1" (2007). *AKU Newsletters*. Book 5.
http://ecommons.aku.edu/aku_newsletter/5

THE AGA KHAN UNIVERSITY

Newsletter



MAY 2007

VOL 8. NO. 1



Are We Prepared for Tomorrow's Knowledge Society?

"The great and central question facing the Ummah of today is how it will relate to the 'Knowledge Society' of tomorrow," said the Chancellor, His Highness the Aga Khan at AKU Convocation 2006.

The Chancellor reflected on the challenges facing the Muslim Ummah as he awarded degrees to students ready to join the professional field. Drawing attention to the accelerating pace of social growth worldwide, the Aga Khan said that the world was moving into a new condition of human life which many observers describe as the "Knowledge Society" - contrasting it with the Industrial Societies or the Agricultural Societies of the past. "In this new era, the predominant source of influence will stem from information, intelligence and insight rather than physical power or natural resources," he said.

"Quest for a better life, among Muslims and non-Muslims alike, must lead inevitably to the Knowledge Society which is developing in our time," he said urging the Muslim Ummah to work towards creating and joining the knowledge societies. "That will mean embracing the values of collaboration and coordination, openness and partnership, choice and diversity—which will under-gird the Knowledge Society, learning constantly to review and revise and renew what we think we know - learning

how to go on learning," the Chancellor emphasised.

Chief Guest Mr Mohammedmian Soomro, Chairman Senate of Pakistan, applauded AKU's efforts in creating qualified human resources. "We are proud that a University chartered in our country has grown to have teaching sites in several countries on three continents, fulfilling the terms of its international charter granted in 1983," he said.

The Chief Guest remarked that a large portion of teachers trained at the University's Institute for Educational Development are from government-sector schools, who return to their schools to teach according to modern methods. He expressed gratitude on behalf of the government to AKU for its pioneering efforts to act as a partner and advise on policy issues.

Full text of Chancellor's address available at:
<http://www.aku.edu/news/con2006/>

"The Aga Khan University has been described as a 'problem-oriented university' – a description of which we should all be proud" - Chancellor His Highness the Aga Khan

Chancellor Installs President Firoz Rasul

At the Convocation ceremony in 2006, the Chancellor formally installed Firoz Rasul as the President of the University. He had introduced President Rasul as successor to the first President, Mr Shamsh Kassim-Lakha at the previous Convocation.

The investiture of a university president is a formal induction into office. The ceremony is typically held during the new president's first year in office or at the conclusion of the first year. The Chancellor presented President Rasul with a replica of the University seal in the form of a medallion which symbolises presidential authority and trust.



"I am pleased today to be able to offer an official welcome to our new president, Firoz Rasul, as he is formally invested with presidential authority. Firoz, and his wife Saida, bring with them years of experience at the highest level in academia and in entrepreneurship, and it is precisely in these two areas that AKU requires continuing world-class leadership," said the Chancellor welcoming the new president.



The Aga Khan described the transition of presidency as the transition of the University into a new stage of development. "We are now moving at an accelerating pace into a new phase of our history—a period in which our energies will be focused more than ever on reaching out to new locations, new disciplines and new partners. It is a time when we will become more inter-dependent, more inter-disciplinary and more international - just as our world itself is becoming more inter-related."

In his address, President Rasul said, "At the outset, I pledge my commitment and dedication to the Chancellor, the Trustees, the faculty, staff, students, alumni and donors, that I will serve to the best of my ability, and with integrity and humility, to uphold the name and reputation of the University."

"I am awed by the vision for this University and at the same time inspired by the ambitious goal to create an international institution, unique in its approach and dedicated to the enhancement of the quality of life of peoples of the Muslim and developing worlds," Rasul said.

Addressing the graduates, the President reminded them of the fundamentals of education at AKU, "All that you learnt at AKU will serve you well to deal with new challenges and opportunities. But most significantly, I hope your education has enabled you to become a 'citizen of the world'. By that I mean the ability to understand and value perspectives other than your own."

He reflected upon the kind of education AKU endeavours to impart in order to prepare its students for playing a leading role in the world, "AKU will prepare students to analyse and synthesise; to articulate their ideas and arguments; to appreciate different perspectives; to question existing paradigms; to be life long learners; to make the difficult choices in life within an ethical framework, and above all to serve humanity. In doing so, the institution aims to create an environment of academic inquiry, of educational responsibility, of research, of compassion and of humility," he said.

By emphasising upon the holistic development of students' personalities, the President expressed his expectations from AKU model of education, "Our graduates will have more than just a technical presence in this world. They will also have a spirit of generosity, a sense of aesthetics and art and erudite character."



History of Investiture

The history of investiture can be traced as far back as the Middle Ages, when investiture ceremonies signaled the transfer of office by either religious clerics or a political monarchy. Today, universities view investitures as opportunities to welcome a new era and celebrate centuries old traditions as a community.

Academic institutions around the world set and maintain traditions for investiture ceremonies.

Colourful processions of faculty in regalia accompany the president on the day of investiture. At Columbia University, the president would lead dozens of students and faculty in a five-kilometre Fun Run, followed by a ceremonial robing in the Library.

At Rice University, Houston, designated representatives will knock on the door of the president's house robed in academic regalia and present a scroll summoning the president to his investiture ceremony.

Several academic events like symposia, workshops and exhibitions may be held alongside. Various items and traditions are characteristic of academic investitures, for example a ceremonial mace, gonfalons (banners), academic regalia and a presidential medallion. In the case of AKU, it is a replica of the University seal.

Professor Perwaiz Iqbal Award of Excellence in Education



The 2006 University Award of Excellence in Education was presented to Dr Mohammad Perwaiz Iqbal, the Kurban Nagji Professor of Biochemistry, for outstanding contributions to medical education, including curriculum and course design and development; evaluation of programmes and students; and development of learning resources and teaching. He has also received the outstanding teacher award of the Medical College. The Government of Pakistan awarded him the Sitara-e-Imtiaz in 2002.

Awards 2006



Dr Bo S. Lindblad - Professor Emeritus

Professor Bo Lindblad of Karolinska Institute, Stockholm, Sweden, served as Professor and Chairman, Department of Paediatrics, AKU Medical College from 1994 to 1998 and has been a visiting professor at the University ever since. His annual visits have been a source of encouragement and inspiration to his colleagues in the department and the Medical College. Dr Lindblad has been instrumental in developing research collaboration and exchange programmes for faculty development and students between AKU and the Karolinska Institute. Professor Lindblad is currently Professor Emeritus of International Child Health, International Coordinator and Principal Investigator at the Karolinska Institute.

Professor Rabia Hussain University Research Award



Dr Rabia Hussain, the Gulamali Hirji Professor of Microbiology, is a molecular immunologist who has made substantial contributions to the understanding of infectious diseases such as malaria and leprosy. She is a prolific researcher, with 111 research publications in journals of national and international repute, as well as many chapters in internationally indexed books and journals. In addition, she has over 130 abstracts of presentations in conferences and seminars within Pakistan and abroad.

Convocation 2006



Omar Aftab Chaudhry (MBBS '06) receiving the Best Graduate Award



Princess Zahra Aga Khan, Member Board of Trustees, AKU with Dr Yasmin Amarsi, Dean AKU School of Nursing



His Highness Prince Rahim Aga Khan with Dr J. Robert Buchanan, Member, Board of Trustees, AKU



Chief Guest Mohammedmian Soomro, Chairman Senate of Pakistan and the Chancellor



The Chancellor (left) with Dr Ghulam Arbab Rahim, Chief Minister Sindh (right) and AKU President Firoz Rasul (centre)



Faculty leading the academic procession



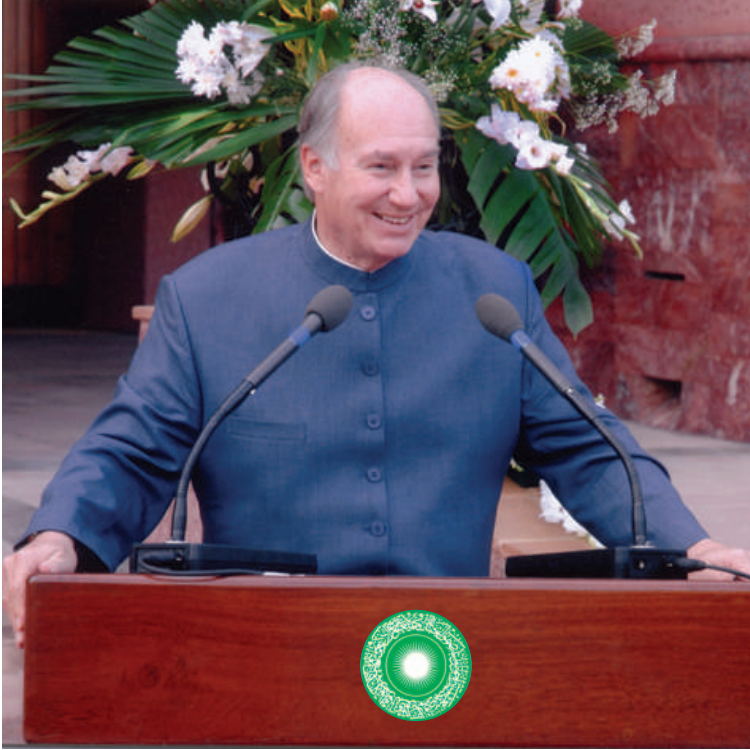
Chancellor His Highness the Aga Khan addressing the Convocation



AKU-IED graduate receiving the MEd degree



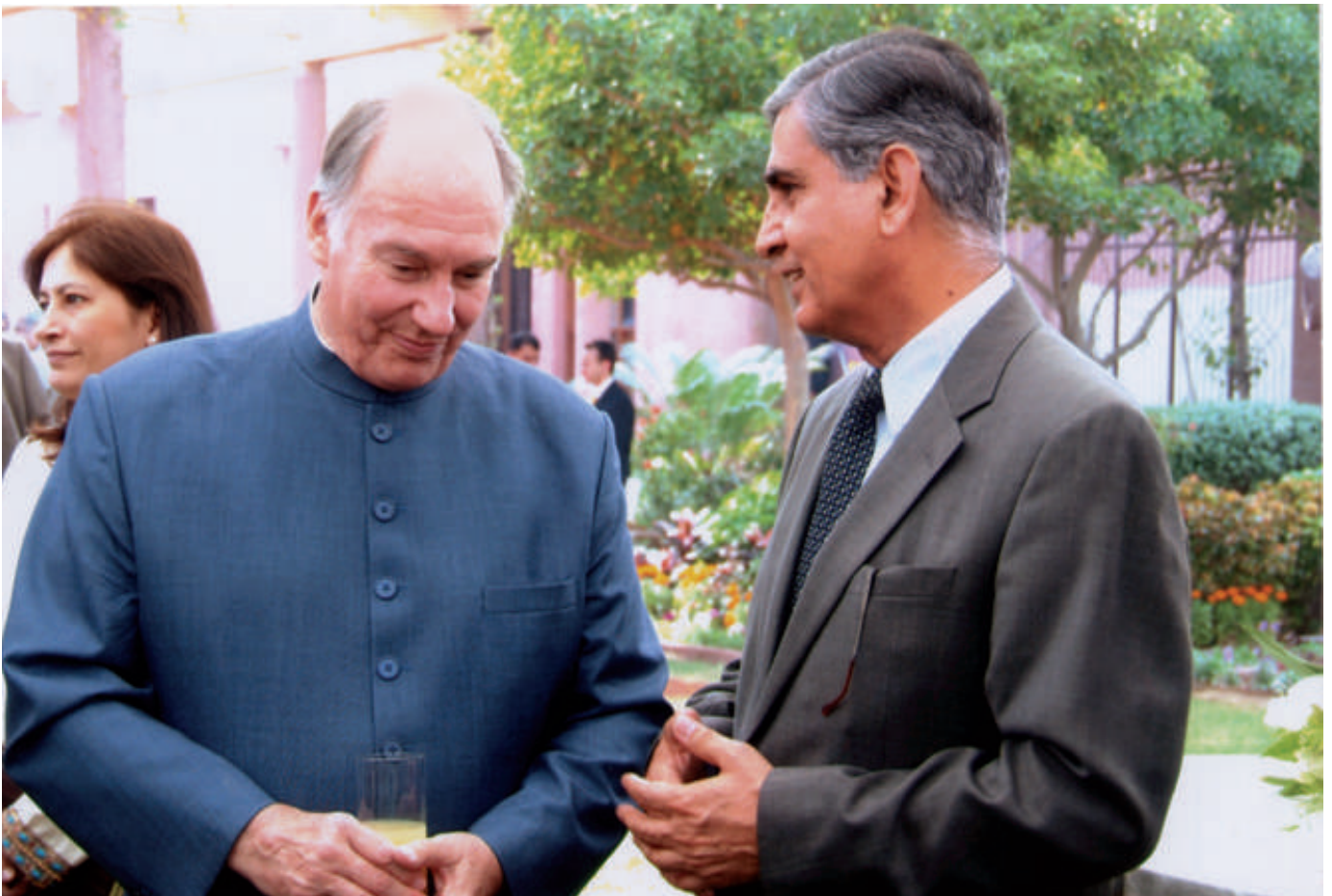
Ms Tunje Jacinta Waiithera, a graduate of the Registered Nurse diploma programme on distance learning mode receiving her diploma from AKU President Firoz Rasul at a graduation ceremony in East Africa. Nurse Tunje is working at the African Air Rescue



Corporate donors throughout Pakistan have provided funds in support of major capital projects at AKU Stadium Road campus. Chancellor His Highness the Aga Khan expressing his gratitude to the donors at the lunch hosted in their honour



Chancellor His Highness the Aga Khan being escorted by Mr Munnawar Hamid, Member of AKU Board of Trustees and Chairman Resource Development Committee, Corporate



Mr Zaffar A. Khan, Chairman of the AKU Annual Giving Committee with the Chancellor

Why Do Societies Ignore Early Child Development?



Dr Fraser Mustard, emphasises the importance of early child development for establishing healthy, prosperous societies

At the symposium on Early Child Development, Dr Fraser Mustard, a Trustee of AKU and Founding President of The Canadian Institute for Advanced Research, asked "Why is there such a gap between what we know and what we do?" His question was related to human beings' long standing desire to establish prosperous, healthy and tolerant societies. And he wanted to know why society did not pay due attention to early child development, which modern research has proven to be the make or break period in one's life.

The symposium titled 'Early Child Development Programmes: Enabling Evidence-Based Practice and Policy,' was organised by AKU Human Development Programme (HDP) which was established in 2003 to support human development through multidisciplinary research, education and training.

Results of studies in areas of neuroscience, health, behaviour and literacy prove a correlation between adverse circumstances in early years of child development and common sociological and health problems faced in adult life. The problems may include criminality, drug abuse, depression, coronary diseases, diabetes, obesity and blood pressure.

Evidence proves that improper progress affects a child's gene structure. By the age of six, neural pathways leading to particular functions can be shut if not properly utilised and cause dysfunction. Level of literacy, language skills and IQ are also set by the age of six, according to researchers.

In the presence of such widely accepted research, it is astonishing

to note that societies around the world still pay little attention to providing circumstances conducive for the proper growth of the child. Little is done to support and educate mothers in providing proper time and attention to their children. Easy access to activities and appropriate education to supplement the child's mental growth in the critical years, also remain elusive for a large majority of population.

Dr Mustard warned against the consequences of poor investment in Early Childhood Development. He stressed that the knowledge of brain development gives us an opportunity to establish prosperous, healthy, tolerant, pluralistic, sustainable, democratic societies and considerably reduce violence. "Failure to close this gap," he suggested, "could put our societies and experiments in civilisation at risk."

Dr Gulzar Kanji, Visiting Faculty, AKU, formerly Head, AKU-Institute for Educational Development Professional Development Centre, Northern Areas, asked if measures arising from studies in the richer world can be universally applied to all situations and contexts. She urged that measures and studies take into account the wider cultural and linguistic contexts, the devastating impact of grinding poverty, and infections of epidemic proportions.

The symposium was AKU-HDP's second international gathering. It provided a forum for discussion on future practice and policy to support Early Child Development, particularly in developing countries.

Dr Kazim Bacchus 1929-2007

Aga Khan University is deeply saddened by the news of the demise of Dr Kazim Bacchus, the first Director of Aga Khan University Institute for Educational Development (AKU-IED), who passed away on March 22, 2007 in Edmonton, Canada.



Dr Bacchus had an exceptional academic career, the major part of which was spent as a Professor of Education at the University of Alberta, where he was the founder of Centre for International Education and Development. He also worked at the University of West Indies as Principal of College of the Bahamas, before joining AKU-IED in Karachi. Dr Bacchus played a critical role in the development and improvement of educational systems throughout the developing world. He was recognised nationally and internationally for his contribution to various disciplines in the field of education.

Dr Bacchus' remarkable contribution to the development of AKU-IED, Pakistan (1993-1997), as well as to the field of education will always be remembered.

Dr Anita Zaidi

Infections Cause Almost Half of All Newborn Deaths in Pakistan

Dr Anita Zaidi graduated at the top of her class in AKU's first cohort of medical graduates in 1988. She completed residency training in paediatrics and a medical microbiology fellowship from Duke University, paediatric infectious diseases fellowship at Children's Hospital, Boston, and a Masters in International Health from Harvard School of Public Health. She has been the recipient of several awards including an Aga Khan Foundation Scholarship. She is currently an associate professor of paediatrics and microbiology at AKU and holds a core faculty research appointment. Her major area of research is neonatal infections and vaccine-preventable diseases in developing countries.



You have recently been given a large grant award from the National Institute of Health's Fogarty International Centre in the United States. How will you be utilising this award?

The grant of US \$ 650,000 allows AKU to establish a training programme in infectious diseases of major importance to child survival in Pakistan. This programme is a collaboration between our Department of Paediatrics at AKU and Emory University and Centers for Disease Control in the USA. Other departments at AKU, Community Health Sciences, Pathology and Microbiology, and Basic Biological Sciences are also partners.

A number of cutting-edge research projects in the field of vaccinology and newborn infections are planned, which will allow young researchers at AKU to acquire sophisticated research skills in basic (bench) research as well as in epidemiological research in infectious diseases. Additionally, this grant has enabled us to start the first paediatric infectious disease training programme in the region.

What got you interested in infectious diseases?

I love children, and I realised very early on as a medical student that I wanted a career centred around children. Undergraduate experiences in Karachi's katchi abadis (slums) and then a year working with Aga Khan Health Service, Pakistan in the Northern Areas and Chitral proved formative in developing my interest in infectious diseases, as I perceived first-hand how many children were killed or maimed by infectious diseases that were easily preventable or treatable. The disease burden is staggering. Infections account for almost half of all newborn deaths in Pakistan, to cite but one measure.

What made you return to Pakistan?

AKU represented a very attractive career opportunity for me. Our Department of Paediatrics has attracted significant external grant support and earned an international reputation as a leading centre for research and academic inquiry. Much of the credit for this goes to Professor Zulfiqar Bhutta, who is the current chair. His support and guidance have been key in helping me identify and avail research opportunities. As an alumna, I have a strong bond with AKU, which also factored in my decision to return.

Do you feel being a researcher holds special challenges for women?

Balance between work and home life is an issue for all women with children and a demanding professional career. There are no easy solutions, and many of us rely on the tremendous support of husband, family, and domestic care providers. There are very few good role models. Research careers involve a great deal of travel, which is especially difficult when your children are young. Women researchers in countries such as the United States are developing networks of support for women to get together and share ideas. I think identifying a good mentor, especially a woman mentor early on in one's career can be a source of great help in difficult times.

What advice do you have for trainees and young faculty contemplating careers in research?

My advice would be to focus on problems of local or regional relevance, to think big but start small, have a clear vision and goals,

and understand the importance of networking. Research is about discovery and dissemination of new knowledge and can offer a very rewarding and fulfilling experience for motivated individuals.

What research facilities and support are available at AKU?

AKU is certainly the leading institution in the country in terms of research facilities and academic support in Pakistan. There is a well-established system of internal funding to encourage young faculty in start-up projects. The AKU Research Office also provides key services to aspiring scientists, including identifying sources of external funds, assistance with grant-writing, and advice on budgeting and finance. There is also a culture of collaboration and mentoring, and a busy academic calendar with meetings, conferences, and invited speakers all the year round. These are important attributes that make this

University a uniquely supportive environment in Pakistan's academic landscape.

At the same time, comparison with regional institutions in India, Bangladesh, and Thailand indicates that much more can – and should – be done. We have to be reflective and innovative in order to position ourselves to avail the substantial opportunities and interest that exists in the global health community to support centres of excellence in research in developing countries. We can only do this by taking on the challenge to excel as a centre of discovery, not just regionally, but globally. Ultimately, a university's true mission is discovery and dissemination of new knowledge in the service of humanity. We are becoming better positioned to fulfil our true potential and look forward to exciting times ahead.

AKUH Starts Paediatric Cardiac Surgery

Five months old Zara was admitted to AKUH with acute pneumonia. She had a history of health problems and was not gaining any weight. Investigations revealed that she had an uncommon form of congenital heart disease that had to be corrected surgically. The baby underwent open heart surgery three weeks later, after which, she spent a critical 48 hours in post operative intensive care. Zara has just celebrated her first birthday, is growing well and in good health. This was the first case of Total Anomalous Pulmonary Venous Connection to be operated at AKUH.

Each year, 120,000 children are born with congenital heart disease in Pakistan. Almost 90 per cent of these children either die or are diagnosed so late that even surgery cannot treat the problem. Therefore, many parents of children with congenital heart disease are forced to travel outside Pakistan for corrective surgery. Paediatric cardiac surgery is a super speciality and there are only

a limited number of trained paediatric cardiac surgeons in Pakistan.

The paediatric cardiac surgery programme at AKUH began in June 2006. It is the result of many months of planning and extensive international training of support staff. It is backed by the Paediatric Cardiology Programme which has been in place since the early 1990s, providing preoperative, intraoperative and post operative care to children undergoing cardiac surgery. A team of paediatric cardiac surgeon, paediatric cardiac anaesthetist/ intensivists, paediatric cardiac perfusionist and a specialist surgeon's assistant from Freeman Hospital in Newcastle-upon-Tyne in the UK also spent two weeks at AKUH to help launch the programme.

The surgeries so far undertaken varied from complete repairs of complex abnormalities of heart in neonates to older children.



AKU-ISMC Welcomes First Cohort from Nine Countries

Aga Khan University Institute for the Study of Muslim Civilisations (AKU-ISMC) welcomed its first cohort of MA students in September 2006. The group of 15 are from nine countries: Canada, India, Indonesia, Iran, Pakistan, Tajikistan, Tunisia, United Kingdom and the United States of America. The students come from various cultural and educational backgrounds, including the social sciences and humanities, education, architecture and the visual arts.

Aga Khan University established AKU-ISMC in the United Kingdom in 2002. The goal of the Institute is to strengthen research and teaching on the heritage of Muslim societies in all its historic diversity.

The MA in Muslim Cultures offers a distinctive way of understanding the various Muslim cultures as they have evolved over time. The course employs tools of the humanities and social sciences, particularly anthropology, sociology, history and philosophy as a framework for learning. The MA stresses the plurality and complexity of past and present Muslim cultures, studies them as part of world cultures and encompasses prevalent currents of thought as well as marginal and sharply contested perspectives. Students will develop an understanding of the character, not only of Muslim cultures historically, but also of the complex social, political and economic processes that they are undergoing in the contemporary world.

The two-year Master's Programme comprises various elements: core courses and electives; a field-based language immersion course; educational excursions; a communications and organisation course; and fieldwork which contributes to the dissertation.

During the two-year programme, students must complete a total of 29 courses, consisting of 23 core courses and six electives. The elective courses will vary from year to year.



The MA seeks to equip students with the fundamental skills needed to enhance their capacities as global citizens, intellectuals or practitioners in a variety of fields. The Institute's aim is to contribute to the training of reflective and critical women and men capable of addressing contemporary challenges, particularly those facing Muslim communities today, by drawing upon modern academic tools, critical thinking, ethical commitments and the practices of engagement and participation.

First Impressions



"I am happy to be involved in AKU-ISMC. This was my opportunity to enhance my skills and knowledge on the study of Islam and Muslims with a social sciences approach. The ideas of tolerance and respect for plurality and the diversity in terms of religiosity, which this institute attempts to build, have been my concern for a long time."

-Achmad Tohe, Indonesia



"When I study history, I sometimes think about what it was like to be present at significant times in world events. Things that come to mind would be Noah sailing his ark, Moses meeting Ramses and so on. Just imagine studying at the Al-Azhar in Cairo during the Fatimid Golden Age or working with Sinan to build the largest dome building in the known world. Imagine being one of the first explorers who discovered America or about the first group of people that landed on the moon.... Well now I can stop thinking about it... I am here!"

-Malik Ajani, USA

Advanced Nursing Studies Programme in East Africa Partner for HIV/AIDS Training



The two weeks intensive training includes practical field visits by nurses to various community based HIV/AIDS projects, didactic lectures, self-study, behavioural data collection and practical workshops

Two decades of experience with HIV / AIDS have clearly identified that health practitioners at various levels - including physicians, nurses, counsellor supervisors, laboratory technicians and programme managers - all require additional skills and training in HIV/AIDS-related prevention, care and treatment interventions. The most critical training gaps identified are in human capacity development and knowledge sharing, in particular for nurses, who are heavily engaged in HIV/AIDS-related service delivery.

To address this critical gap, the African Regional Capacity Building Network for HIV/AIDS – prevention, treatment and care (ARCAN) was set up, fully sponsored by the World Bank, to support a sub-regional network of learning sites in Ethiopia, Kenya and Tanzania, with its Steering Committee operating from the Office of the Prime Minister of Tanzania, Honourable Fredrick.T. Sumaye.

Aga Khan University Advanced Nursing Studies programme (AKU-ANS) in East Africa was identified by ARCAN to be an implementing partner and learning-site in Kenya, and awarded the singular responsibility to provide evidence-based HIV/AIDS training to nurses in the region, using a ‘training for trainers’ model of approach.

It is against this background that 149 registered nurses from Ethiopia, Kenya and Tanzania have been trained at the AKU-ANS East Africa campus. Five training sessions have been conducted since July 2006. The training is the first of its kind for nurses in the region. Participants are taken through course modules including fundamentals of HIV/AIDS; ARV therapy; prevention, counselling, care and support for children, orphans and adults living with HIV/AIDS; care of the carriers; project development and management skills; legal, ethical stigma and discrimination issues; and teaching and learning strategies for prevention, behaviour change and community mobilisation.

Professor Laetitia King, Chief Academic Officer and Associate Dean of the AKU Advanced Nursing Studies Programme, emphasised that training and sharing of knowledge is an intricate component of the project. She recommended regular training programmes even if there are a few participants.

ARCAN had identified high quality training institutions as its implementing partners in the region, with AKU-ANS championing the nurse training-of-trainers in HIV/AIDS in the region.

Professionalism in Medicine: Spotlight on Ethics

Not long ago, a multinational pharmaceutical company introduced a drug for dementia in Pakistan. To promote their new product, the company offered to fly neurologists and psychiatrists from across Pakistan to Bangkok, Thailand, for a three-night, all-expenses-paid trip. The 70 Pakistani doctors who signed up,

5.40) daily and has limited efficacy, offering a very poor cost-benefit ratio for the vast majority of Pakistani patients.”

Increasingly, medical journals and discussion forums are highlighting these concerns. Dr Khan, for example, has published his critique in *Psychiatric Bulletin* (2006, 30; 85-88), a prominent journal published in the UK. These voices are part of a worldwide debate about the drug industry’s influence on physicians’ prescribing habits, conflicts of interest, and falling standards of professionalism.

Institutions around the world are responding through advocacy groups to call for limits on the interaction of physicians with drug companies. Policies and guidelines are already in place at several leading centres, including Yale, Stanford, and the University of Pennsylvania, which include limits on gifts, travel fees, speaking engagements, and ghost-writing payments.

At AKU, the 11th Postgraduate Medical Education (PGME) Conference took up this issue. Under the broad theme of “Nurturing Professionalism in Medicine,” speakers identified influences, demands and strains on professionalism in medicine. The role of post-graduate medical education in promoting professional values – competence, integrity, and service – was highlighted.

“The corrupting interaction of physicians with the pharmaceutical industry, mainly through drug representatives, is widely recognised as the key factor in the commercialisation of the medical profession,” says Dr Aamir Jaffrey, a surgeon and medical ethicist at the Centre for Biomedical Ethics and Culture associated with Sindh Institute of Urology and Transplantation. “The drug industry clearly influences physicians to augment their sales, duly rewarding obliging physicians,” he emphasises. To counter these disturbing trends, Dr Jaffrey suggests formal integration of medical ethics into the PGME curriculum and appropriate role modelling by those in authority.



were part of a larger group that also included doctors from other countries. Even by a conservative estimate, it cost the company about Rs 7,000,000 (US\$ 120,000) for the Pakistani doctors alone. Such attempts at buying physician goodwill and influencing prescribing behaviour are part of a worrisome trend that is marring the relationship between pharmaceutical companies and the physicians who prescribe their products.

“This issue raises serious questions,” says Dr Murad Khan, Chairman, Department of Psychiatry at AKU and a longstanding advocate of ethical standards in physician-pharmaceutical interaction. “Although the company could justify it, questions linger about the rationale for spending this huge amount in a developing country such as Pakistan that lacks a proper health care system and where all medical care is out-of-pocket expenditure,” he notes. “The drug in question costs Rs 320 (US\$

Addressing the opening session, Firoz Rasul, President AKU, expressed his concern about this issue. “Physicians, especially members of the AKU faculty, many of whom are looked on as role models and leaders in their fields, must unfailingly adhere to the highest standards in relating with the pharmaceutical industry,” he said.

President Rasul has since initiated a process to identify practices of concern. One of the main outcomes is a policy consistent with international ethical norms that will be transparent and universally implemented. Professional behaviour at this level requires physicians to follow proper guidelines in interacting with pharmaceutical companies because failure to do so creates a conflict of interest, and compromises their professional ethics.

Deliberate Self- Harm – A High Price to Pay

When 36 years old Aisha was brought to the Emergency Department of AKUH, she was barely conscious and bleeding from the mouth. Aisha had tried to kill herself by drinking a household disinfectant during a domestic argument. The young mother of two, is under treatment for damage to her gastrointestinal tract and in case she survives, is likely to develop breathing and swallowing problems as well as an increased risk of lung infection.

Such cases of deliberate self harm are not uncommon in Pakistan despite the fact that suicide attempts are criminal offences and prohibited by religion. Deliberate self harm is a manifestation of several underlying issues. Compromised social status, untreated depression, and socio-economic distress are factors influencing the trends universally.

In Pakistan, gender issues also play a significant role. Aisha is divorced with two school going children and lives with her mother. It is easy to guess her source of distress. The society attaches a stigma to the status of divorced women, adding to the difficulties of single parenthood.

“Suicidal behaviour (ideations, attempts or completed suicides) is an understudied and under researched subject in Pakistan, a conservative South Asian low income country with a predominant Muslim population. Both suicide and DSH are illegal acts, punishable with a jail term and financial penalty. There are strong religious and socio-cultural proscriptions against suicidal behaviour. Despite this, there is accumulating evidence that incidences of both suicide and DSH have increased in recent times,” notes Dr Muhammad Shahid in a study presented at the Department of Medicine’s fifth Annual Research Retreat. The study deals with the cost of treatment for patients of DSH and is a part of continued research activities by the Departments of Psychiatry and Medicine investigating Deliberate Self Harm in Pakistan. This study has highlighted the economic dimension of the problem.

A major dimension of the cases of deliberate self harm is the discontinuation of treatment by patients. Although families and victims remain strongly inhibited by cultural and sociological considerations, research shows that the majority of patients, who leave against medical advice, are forced by financial constraints.

The annual per capita income in Pakistan comes to US\$ 720. The cost of health care is borne by the patients themselves. According to Dr Shahid and colleagues, the minimum cost of treatment for both the discharged and the admitted patients



varied from Rs 615 (US\$ 10) to Rs 101,710 (US\$ 1,695). As many as 28 per cent of the leaving patients cited financial constraints as the main reason for discontinuing treatment. Left untreated, the psychological issues are likely to resurface in DSH patients. There is a high risk that these patients will attempt to harm themselves again. “Resources of these countries are limited and the health system is mainly based on self financing. It is expensive to provide psychosocial assessments and even more so to admit these patients to medical floors. Considering the limited resources of medical treatment in Pakistan, need of preventive strategies should be emphasised,” the research recommends.

As Aisha’s two children returned from school that day, they had little idea that their mother was fighting for her life in the hospital. While Aisha might survive this time to be able to bring up her children, she would remain at high risk for attempting suicide again as well as facing life long risks of infections and related diseases. This is likely to add to her financial difficulties, completing the cycle of depression and psychosocial distress that leads people to commit deliberate self harm. Cases like this draw attention to the fact that unless more is done to address mental health issues, the society and individuals will continue to pay a high price not only in financial terms but also in far reaching sociological consequences.

Urban Legends

City Slum Dwellers as Deprived as Rural Poor

The world is entering a historic transition. By 2007, for the first time in history, the majority of the world's population will be living in cities. In South Asia, Pakistan has become the most urbanised nation. Urban population in the country will be doubled in the next 20 years. Karachi alone has over five million people living in katchi abadis (slums) and half of the city lives below the poverty line.

The National Urban Poverty Alleviation Program-UNDP (United Nations Development Program) and AKU held a two-day conference in Karachi to address urban poverty and its consequences. AKU's Department of Community Health

with mosquito borne issues, like dengue, air pollution causes lung and heart diseases, drug addiction, and HIV/AIDS. Contaminated water in cities causes gastroenteritis. Injuries are higher in urban areas. A sick work force is bad for business, leads to lost wages, and completes the cycle of poverty."

The conference drew participants from all over the country, which included economists, demographers, government planners, engineers, educators, media experts, doctors, NGOs, and representatives from poor neighbourhoods. Half of the conference time was devoted to coalition building to address the problem of urban poverty. The diversity of the participants



Sciences co-sponsored the event. The objectives of the conference were to raise awareness and share information on urban poverty in the country. Another objective was to work towards building a network or coalition to combat urban poverty.

"Urban population in Pakistan has grown over eight-fold as compared to the four-fold increase in the rural population during the past 50 years." said Professor Mehtab Karim of Department of Community Health Sciences, AKU.

The conference speakers drew attention to the issues facing the urban poor and emphasised upon multi sector growth and collaboration in order to bring about sustainable improvement in the condition of the urban slum dwellers.

Dr Gregory Pappas, Chairman, Department of Community Health Sciences of AKU, said, "The consequences of urban poverty are crowding, inadequate housing, poor education, social disintegration, poor hygiene, security problems, and violence. Urban problems hit poor the hardest. Urban slums are plagued

reflected the need for many skills and stakeholders to solve these complex urban problems.

UNDP is currently supporting the Government through its National Urban Poverty Alleviation Programme (NUPAP), working in seven cities across the country.

For many years urbanisation was thought to be synonymous with development. Neglect of urban development, however, has created conditions that perpetuate poverty and harmful health conditions. It is clear that city policies reinforce some of the worst problems. Policy around land use and land tenure has historically favored the rich at the expense of the poor. This compounds poor provision of services for those in greatest need.

Coalition building to combat urban poverty has just begun in Pakistan. Department of Community Health Sciences will continue its relationship with UNDP to explore ways to build on the beginning forged at this conference. Coalition building is a slow and painstaking process. It is, however, a sustainable solution and deserves support.

Universities and Their Alumni



As someone who spent his undergraduate years at AKU, each time I pass through the medical college courtyard, I cannot help reliving the experience. All too often it transports me into fantasy and I find myself sitting in a corner, savouring the setting, transfixed in the moment. This is the basis of the university-alumni bond: everything you do as a student becomes the subject of a later nostalgia.

Alumni occupy a central space within the soul of a university, the way children exist within their parents' hearts. It is a vital, indelible and unalterable link. Out of respect for the parent university, Western tradition has come up with the term *alma mater* – a Latin phrase meaning, literally, “bounteous mother.” In the original Roman usage, *alma mater* referred to a group of mythical goddesses known for nurturing. This is highly apt, because nourishment is perhaps the most fundamental transaction between universities and their alumni.

The university-alumni relationship is unique and complex. A university does give birth to its alumni, but where parents age into infirmity, universities can age into greatness. Alumni get opportunities to shape their university's fate, and it is the most natural expectation that they will contribute to the institution's stature and success. The relationship is founded in nourishment but it can – indeed, should – be bidirectional.

The challenge for alumni is to be able to further the interests of their university as much as possible. Fundraising is the traditional avenue, but only because it is the most tangible and noticeable method of alumni support. To be effective, an alumni body must understand the possibilities of being a currency of influence – not just as ambassadors and representatives of their university, but also as supporters and adherents concerned about the welfare and direction of the mentor institution.

A key issue to ponder is how a university and its alumni body should accord recognition and status to each other in their governance systems. At Harvard University, for example, alumni have a constitutional obligation to nominate a representative to the Board of Overseers (the counterpart to AKU's Board of Trustees). Stanford University, to give another example, cultivates and promotes its alumni community through a range of initiatives including a magazine, an array of online services, career networking, multicultural events, worldwide travel-study programmes, regional gatherings, and reunions.

Around the world, all major universities put substantial energy and commitment into engaging their alumni. At the same time, it is surprising that little formal work has been done to explore the full dimension of university-alumni relations.

Over twenty years old, AKU's alumni body is diverse, accomplished, and spread around the world. They are entering leadership roles not just in health service and academia but also – in the case of the few who diversified from their health careers – in entrepreneurship, civil administration, and politics. Crucially, AKU's alumni see themselves not as mere ambassadors or representatives, but as participants celebrating a shared ethos defined by the university's mission, vision and values.

There is an urgent need to think deeply about how best to develop AKU's alumni relations. The stakes are substantial because we are potentially setting the tone for posterity. The University is young and the enormous goodwill embedded in alumni's hearts and minds is fresh and abundant. We are well placed to seize the moment.

Dr Saad Shafqat (MBBS '88)
Associate Professor, Section of Neurology, AKU

AKU Hospital Earns US Accreditation

High Standards in Health Care and Patient Safety



and is appropriate to the risks and hazards encountered: written policies and procedures are present to address the handling and disposal of infectious and hazardous materials; appropriate safety devices are available; and laboratory staff receives proper orientation, training and update in their knowledge. All of these measures are essential JCI standards.

A total of 368 standards and 1,033 practice variables (termed measurable elements) cover all areas of health care delivery including maintenance of medical records; handling of high risk, comatose or young patients; transferring patients to another institution, safety and security practices in the hospital, procedures in radiology, emergency, anaesthesia and surgery, to name a few. Departments at AKUH fulfil several other such specific requirements in order to ensure patient

While global research in medicine breaks new grounds every day, standards of health care received by patients around the world vary greatly. This situation creates a need for setting standards and goals for health care institutions globally, in order to eliminate risks in the delivery of health care to patients.

In July 2006, Aga Khan University Hospital (AKUH) became the first hospital in Pakistan to receive accreditation from Joint Commission International Accreditation (JCI), world's leading international agency overseeing hospital standards. JCI is a Chicago-based organisation, which establishes and monitors internationally recognised practice standards in health care delivery and hospital care throughout the world.

Compliance to the JCI standards means that when a doctor at AKUH evaluates and manages a patient with a health care problem or when a nurse administers a dose of prescribed antibiotic to a patient under her charge, they follow procedural guidelines against a checklist of prescribed standards, to prevent mistakes and ensure optimal care for the patient.

All staff and departments at AKUH follow similar guidelines and specified standards to ensure JCI compliance. For example, as a patient is admitted to the hospital, one of the standard practices of the staff would be to provide information to appropriate family members or decision-makers on the proposed care, the expected results of that care, and any expected cost to the patient for the care. It is the institution's duty to ensure that patients receive sufficient information to make knowledgeable decisions.

Similarly, standards dealing with laboratory services require the hospital to ensure that a laboratory safety programme is in place

safety and risk reduction in all areas of health care.

This accreditation places AKUH among the very few teaching hospitals in the world to be both ISO certified and JCI accredited. Only three teaching hospitals outside the US have received JCI accreditation so far.

Schedule of Events

April-June 2007

Programme	Date	
Conferences and Seminars		
Second International Critical Care Symposium	April 11 to 15, 2007	
Health Sciences Research Assembly	April 24 to 25, 2007	
Orthopaedic Oncology Course	April 28 and 29, 2007	
Signs, Symptoms and Care		
Cardiology/ Cardiac Surgery	Apr 7	Karachi
OB/GYN	Apr 27	Hyderabad
BMT/Oncology	May 6	Karachi
Paeds/Adult Cardiac Surgery	May	Quetta
Neurology, Neurosurgery	June 2	Karachi
Continued Medical Education		
World Health Day	April 5	

AKU-IED Collaboration with University of London

On September 8, 2006, a ceremony was held at Aga Khan University to graduate the first cohort of the MA in Education and International Development (EID) Programme. This two-year programme is offered through Online and Distance Learning mode by the Institute of Education, University of London (IoE UoL) and is supported by the Commonwealth Secretariat, London. Aga Khan University Institute for Educational Development (AKU-IED) was chosen as a local partner on the basis of its programmatic and research activities and its collaborations with several international universities in North America and UK.

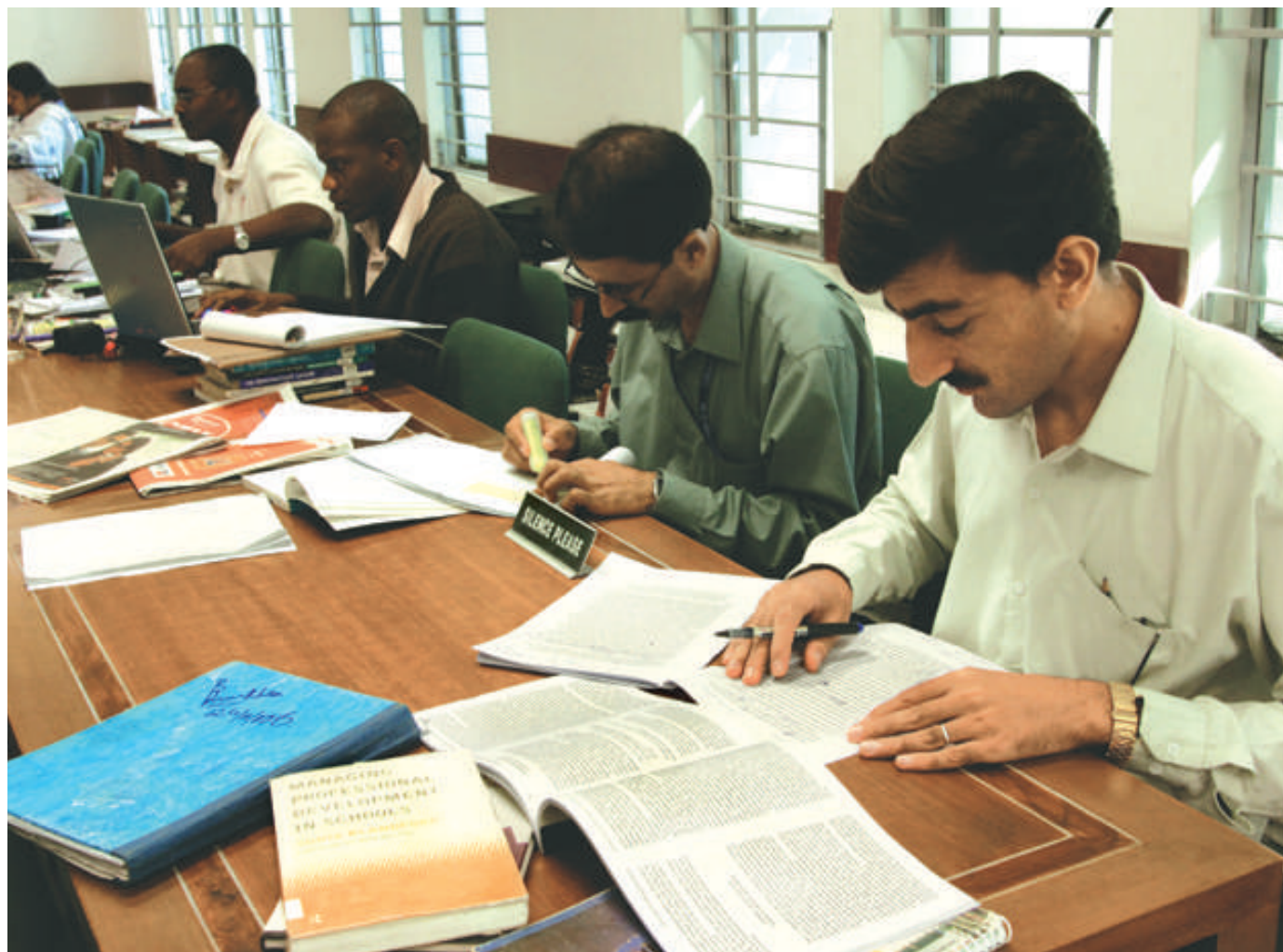
The twenty graduates of the MA EID programme included individuals from AKU-IED and its cooperating schools in the public and private sectors within and outside Pakistan. Through this programme, the Commonwealth Commission allocates scholarships to students from South Asia for developing capacity of education institutions. The programme offers specialisation in early childhood education and development, educational leadership, international development, economics of education, and health education.

During the programme, the course participants also visited IoE-UoL, London for the residence-component. This exposure visit

provided them with opportunities to interact with the faculty, students and researchers at IoE and learn about different practices and experiences. Overall the programme enabled the participants to enhance their knowledge and skills in their focused areas of interest. MA EID 2005 class graduated with an extraordinary 100 % success.

As a result of this successful experience, IoE-UoL has planned to offer more scholarships to candidates from South Asia and also to work in East Africa, through AKU-IED, Eastern Africa. For strengthening the partnership with AKU-IED, IoE-UoL has also expressed a keen interest in further extending the collaboration in teaching and research through the British Council and Higher Education Commission Link.

Since graduating, these professionals have been involved in various activities in their own contexts and have been contributing to the development of their institutions in their specialised areas. This impact can be seen clearly at AKU-IED and its Professional Development Centre in Northern Areas, where the graduated faculty and staff members have been promoted and assigned new responsibilities which involve work in educational planning, economics and international development, health promotion and international development.



AKU-Examination Board

Lessons in Learning

“Our students are taking more interest in their studies now. That’s the biggest change we have noticed after switching to Aga Khan University Examination Board (AKU-EB),” said Nadia Feroz, Vice Principal at Shah Wilayat School in Karachi. Her assessment of the impact of the Examination Board hits the target. An examination board is eventually a mechanism designed to assess the level of comprehension achieved by a student.

AKU-EB was established in 2003 with the objective of positively affecting the standards of teaching and learning at the secondary and higher school levels in the country. The traditional method most prevalent in schools in Pakistan is based on supplying information to the students in a pre-digested format. The examination at the end of the term requires reproduction of the information by the student rather than encouraging him or her to utilise the information received.

AKU-EB adopted the top-ended approach of changing the focus of examination questions towards understanding and application of knowledge. The affiliated schools are responding by introducing changes in their method of teaching in order to secure good results in the examination set by AKU-EB.

As principals of several affiliated schools from Karachi have shared, the examinations pose increased challenge leading to extra efforts on their part to help students learn according to the examination requirements. Examination questions include multiple-choice items and structured questions which lead the students from the familiar to its application in less familiar circumstances. Mrs Hussain of Shaheen Public School also feels that the students are now taking more interest in their studies and are learning by application.

However, she is mindful of the demands of the period of transition, “Many students, who were scoring well in the previous system, have secured low marks in the practice examinations conducted last year. This is discouraging for parents and students, especially the slow learners.” She attributes it to the extra challenge the examinations are providing and feels that it will take another three or four years before the new system takes root and eventually brings the slow learners into its fold. She stresses the need for more workshops for teachers of the kind that AKU-EB has already offered in seventeen subjects for more than 400 key teachers, at least three per school.

The Examination Board has developed its own e-marking software - with the help of the University’s in-house IT services

- at a fraction of what it would have cost from the three existing global suppliers. This system will ensure accuracy of results, completion on a timely basis and provide valuable analysis of student performance by subject and areas that need improvement.

AKU-EB has anticipated the new demands on teachers by bringing them together to prepare student support materials to enrich and extend the teaching books prescribed according to the national curriculum. The additional material outlines specific learning objectives and suggests activities to enhance analytical, observation and comprehension skills. These include classroom games, study visits, group activities, and self assessment checklists for students and teachers, providing clearly laid out objectives and expected results. As several teachers from affiliated schools point out, the method of teaching advised by AKU-EB discourages learning by rote and stimulates the students’ minds.

The Board has already successfully conducted a practice secondary school examination in 2006 for 2, 200 students from 63 schools. Five thousand students from 88 affiliated schools from across the country will be examined in May 2007.

“We thought carefully before deciding to seek affiliation with AKU-EB,” says Nadia who is pleased that the decision taken by her school is already showing signs of progress. “I can give you another measure of the impact of AKU-EB. The use of the library in my school has increased manifold ever since we adopted this new teaching method,” she says. Nadia and several other school principals believe that AKU-EB is a culturally appropriate, educationally valuable, yet affordable examination system for children in Pakistan.



“What is Religion?” Karen Armstrong



“Religion is not a doctrine, not an obligatory belief, not violence. Religion is about compassion, the golden rule, about reaching out to other communities,” she said, emphasising that it was the need of the hour, in the global context of religious strife and rising tide of fundamentalism.

Armstrong started her lecture by explaining the nature of religion, as it emerged during “The Axial Age” (c 900 to 200 BCE), when many of the spiritual traditions came into being. Religions such as Rabbinic Judaism, Christianity and Islam were all secondary flowerings of this original spiritual transformation, she said.

Armstrong highlighted how today religion is often associated with dogmatism and has become cause for strife, conflict and some of the worst catastrophes of our time. Explaining the need for compassion, she outlined the contrasting concept of ego that produces the dogmatism plaguing the world. “Ego is the great enemy of spiritual life,” she quoted from Buddhist philosophy. The ecstasy of stepping out of the mundane, into the divine company is the ultimate goal of all spiritual movements. Traditions of Islam like prostration demand abject surrender of the ego in order to achieve this ecstasy, she stated, and defeating the ego and embracing compassion instead, is the bedrock of spirituality.

Defining compassion as “dethroning yourself from the centre of your life and putting another, seeing someone else as sacred,” she cited examples and quotes from Prophet Muhammad (peace be upon him), Prophet Ibrahim (SAW), Jesus (SAW), Buddha and Confucius. She stressed that the essence of Quran was a command of constantly treating others with compassion and empathy.

“The West has a huge lesson to learn and see the spirit of Islam. What the world needs now is compassion. We need to go to the core, and discover the spirit central to all religions and traditions,” she concluded.

Following the tragic events of September 11, 2001, Muslims, Islam and fundamentalism became topics of significance in popular discourse and were broadly judged, misjudged and confused for each other.

On the one hand, the atmosphere around the world was of anxiety regarding the future; and knee jerk reactions from some people and societies who believed they had found an identity for an unseen enemy. On the other hand, the understated and often underestimated pulse of scholarly curiosity and pursuit worldwide, created a placating impact by continued public discourse and debate on the subject.

Writer and broadcaster Karen Armstrong is a proponent of this scholarly discourse that has allowed people of different faiths to join in and form a unity in diversity. She delivered a lecture on the topic “What is Religion” under the Aga Khan University’s Special Lecture Series in Karachi, engaging the audience in a debate about origins of religions and the universal theme of compassion that she has found to be at the base of all faiths.

Karen Armstrong spent seven years as a Roman Catholic nun in the 1960s, but then left her teaching order in 1969 to go to Oxford to study literature. She is a regular columnist for the Guardian newspaper. Since September 11, she has become chiefly known for her work on Islam and Fundamentalism. She has addressed members of the United States Congress on three occasions, has participated in the World Economic Forum in New York and Davos, and was one of three scholars invited to speak in the United Nations in the first session ever devoted to religion. She has recently been appointed to the United Nations initiative “The Alliance of Civilizations”.

AKU’s Special Lecture Series programme is a part of its policy of encouraging broad-based education in which eminent personalities are invited to discuss topics of public interest.

Telemedicine Connecting Capabilities

Years of national conflict and neglect have left Afghanistan's health care system in shambles. Afghan citizens who cannot travel abroad for specialised health care evaluation and treatment due to a lack of financial resources, stand at a clear disadvantage. Recognising the need to provide Afghan populations with access to high quality, modern health care solutions, the French Medical Institute for Children (FMIC) in Kabul was established by La Chaine de l'Espoir, a French humanitarian agency and is being managed by Aga Khan University Hospital, Karachi (AKUH,K).



Radiologists at AKUH in Karachi discussing a patient's CT brain image transmitted from Kabul

As a result of nearly three decades of war, Afghanistan's telephone lines are barely functional, providing a major opportunity for the cellular communications to step in. This, in turn, enabled the utilisation of telemedicine to support the available health care facilities. Telemedicine connects the clinical expertise available in an established health care facility to users in remote areas in order to provide collaborative care for the patients. It also provides access to academic fora, medical data bases and clinical guidelines. Through the telemedicine link FMIC in Kabul can be assured access to the capabilities of AKUH in Karachi.

The biggest obstacle for the newly opened FMIC has been the lack of availability in Afghanistan of highly qualified medical specialists. Through the use of telemedicine, early specialist diagnosis of many medical conditions can be made from a distance. Often, with this expert assistance, the medical conditions can then be successfully treated in Afghanistan, providing the additional benefit to the patient of being able to obtain treatment closer to home and greatly relieving the cost and emotional impact on patients and their families.

Telemedicine utilises broadband technology to provide real-time, high-speed access for the transfer of medical imaging, video, data and voice transmission. CT Scan images captured at FMIC will be converted into digital files and transmitted to AKUH in Karachi through a telelink. Here, radiologists will receive images on a 'radiology image diagnostic station' and send the electronic reports back through the system to Kabul. The process of digitisation of images will ensure optimum readability and analysis on the highly-specialised equipment.

To enable education through the telelink set-up, the facilities at AKUH, K and FMIC will also operate as learning centres. Expansion over the next three to five years is planned to connect other major Afghan hospitals to FMIC as a referral centre and then to AKUH, K through the telemedicine link.

Roshan, the largest provider of mobile communications in Afghanistan, and a member of the Aga Khan Fund for Economic Development, has contributed approximately \$500,000 in base

stations, antennae, equipment, connection costs and training and support, including a radiology image diagnostic station able to handle X-ray and CT images for AKUH, K. Cisco Systems has contributed over \$110,000 in equipment and a five-year remote support contract that will help the hospital maintain the network. Al-Moyad, a technology supplier from Bahrain has contributed approximately \$30,000 worth of video-conferencing equipment for AKUH, K and FMIC and other technology and medical suppliers have made their own contributions towards the project. Both AKUH, K and FMIC will also have a group video-conferencing system to facilitate consultations and training.

The recent telecommunications boom in Afghanistan has set the stage for a unique opportunity for the country to benefit from medical expertise in neighbouring or far away countries, while it builds up its own resources.

Roshan Supports Humanitarian Causes

Roshan, which means "light", is the largest provider of mobile phone services with 1.2 million subscribers and over 850 direct employees. Roshan is Afghanistan's largest taxpayer, largest investor and largest private employer. As part of its corporate social responsibility, Roshan supports numerous humanitarian causes and social projects in Afghanistan in commerce, health, social welfare, and education.

In addition to the partnership in telemedicine project with AKU, Roshan has funded training for Afghan laboratory and radiology technicians at AKUH, K to address the lack of skilled manpower in Afghanistan. Roshan also provides operational funds to help meet the growing demands on the FMIC patient welfare fund. In 2006, Roshan made available \$175,000 and is increasing the amount to \$250,000 in 2007.

Other Roshan social projects include soup kitchens - which provided hot soup to 10,000 children per month in 2006, health workshops, scholarships for gifted students, an alternative livelihoods programme for the people of Wakhan and the construction of playgrounds throughout Kabul.