

A FRAMEWORK FOR INTERNATIONAL COOPERATION FOR ACADEMIC CAPACITY DEVELOPMENT IN VIET NAM

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Abstract

Over a six year period, Queensland University of Technology (QUT) in Australia collaborated with four Vietnamese partners to enhance academic capacity in Public Health teaching and research. Following a detailed strategic planning exercise in 2006, Faculties in Hue, Ho Chi Minh City and Can Tho Universities of Medicine and Pharmacy and the Hanoi School of Public Health worked on a multi-level development strategy with the support of The Atlantic Philanthropies until 2011. This paper describes and reflects upon the framework that guided this collaboration. The six main elements are closely integrated. The project supported comprehensive international, inter-faculty and intra-faculty activities designed to improve teaching materials and methods and enhance research skills of junior and mid-level academic staff. We suggest the model can be applied to future efforts for development of biomedical sciences and other academic fields in Hue and throughout Vietnam.

International cooperation for development of university teaching and research has a long history. There are numerous ways in which national, regional and global partnerships are formed. Various conceptual models have been developed to guide the work, and many practical strategies have been applied (Martinussen & Pedersen, 2003; Stephens, 2009). Techniques for cooperative work are changing with the ever-expanding global reach of new educational technologies (Olcott, 2012; Richter & McPherson, 2012). The funding sources that underpin global cooperation are also changing as a result of

rapid economic development and evolving foreign aid priorities (European Commission, 2012).

Global trends in development cooperation in higher education have been described comprehensively elsewhere (Boeren, 2012; Stephens, 2009). Within the specific context of Viet Nam, the purpose of the present paper is to describe and reflect upon a recent collaboration between one Australian University (QUT) and several universities in Viet Nam that teach in the field of Public Health. It outlines the logic of the approach and the main outcomes. Although focused on

Public Health only in Universities of Medicine and Pharmacy, it is suggested that it could be applied to other areas such as training and research in biomedical sciences and social sciences.

Brief history of the QUT-Vietnam Public Health program

Relationships were first formed in 2005-6 when The Atlantic Philanthropies (AP) sponsored QUT to work for six months with the Faculties of Public Health in Hue, HCMC and Can Tho to conduct a needs analysis and to prepare detailed Faculty strategic plans. During that time, we discussed the development needs of each faculty including human resources, existing curricula and infrastructure. Each faculty produced a five-year strategic plan that laid out their vision, mission, objectives and action plans. We then considered how QUT – itself a young university - could best contribute to achieving the strategic plans.

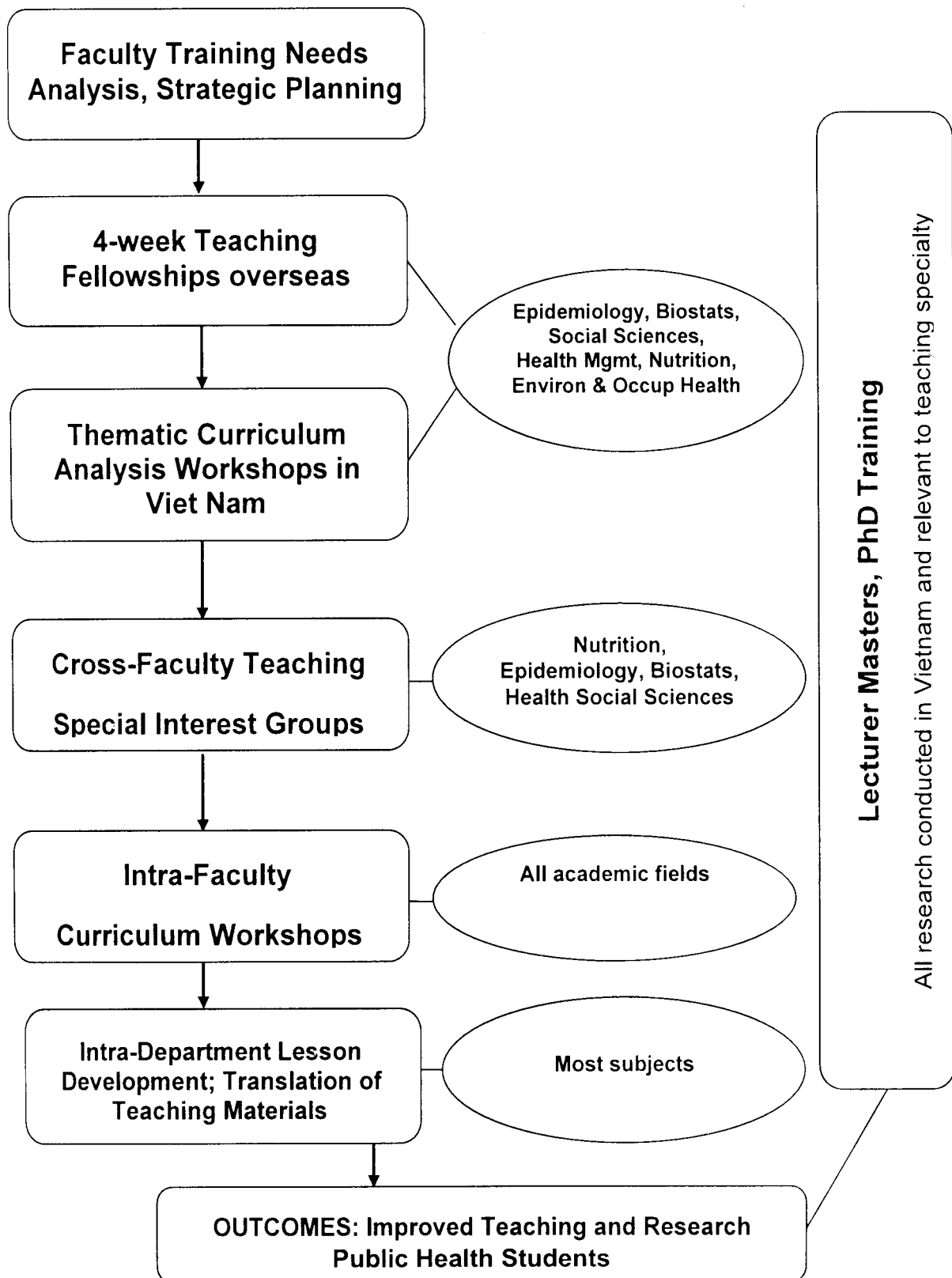
On the strength of this work, AP agreed to support a collaboration from 2007 to 2011. This provided a rare opportunity to implement a multi-layered program of work with the certainty of annual funding. The value of such long-term support cannot be understated; arguably, the separate activities described below could have been done individually with small project funding, but *integration* of the whole program (as illustrated in the project framework) would have been difficult to achieve.

Project management: Five important joint management decisions guided the project from commencement. First, a national partner with advanced expertise in Public Health training especially for Bachelor degree students was engaged (Hanoi School of Public Health). Second, we decided it was most efficient administratively for QUT to be the main financial base and to work in parallel with each separate faculty, rather than to spend time and resources establishing a new office or entity for QUT in Viet Nam. Therefore, we set up a joint management committee, but worked with separate annual contracts.

Third, we decided to build upon existing teaching resources rather than to write new textbooks. This enabled us to respect the Viet Nam Government's training course frameworks and mandated curricula, yet to improve the ways it was taught. Our fourth decision was to share all QUT curricula in Public Health teaching, including books, subject guides, lesson plans, lecture notes, presentations and assessment materials. This follows the philosophy of 'open courseware' that is becoming prominent in leading universities worldwide (Olcott, 2012). The fifth starting point for this project was that we would make every attempt to minimise the funding spent within QUT in Brisbane and maximise the funding spent within Vietnamese partner institutions.

Co-operation for Academic Capacity Development

Model of Integrated Activity (example: Public Health)



The Project Framework and Processes: Strengths and limitations

The initial strategic planning exercise in 2005-6 highlighted difficulties at each level of academic activity. In each faculty there were shortages of staff at Masters and PhD level and consequently, few staff who could contribute actively to curriculum revision and innovation in teaching methods. Generally, the curricula and materials were quite old and/or (in many cases) adapted from lessons for medical students with minimal population health context. Most of the curriculum lacked evidence derived from relevant Vietnamese research. Many staff carried heavy responsibility for teaching but were unsupported by good, recent reference books. Although national academic networks had been operational for some years (supported principally by the Netherlands Government projects), some academics - particularly those at the start of their teaching careers - were working in relative isolation without the benefit of regular contact with peers in other universities in the same field with whom they could share ideas and resources. In the three faculties, especially in Can Tho and Hue, few staff were skilled in English and could not access internet resources easily. Together, these conditions depleted the impetus needed for continuous quality improvement.

The project conceptual model was designed to address each of these concerns, and to do so in an integrated way.

Thematic teaching fellowships and workshops: Curriculum review in each field was first stimulated by teaching fellowships in Brisbane. Staff selected by Deans were invited for one month to work closely with QUT mentors. It was agreed that, as much as possible, the selected fellows should be junior

to mid-level lecturers. There were two groups each year (except only 1 group in 2009) which covered all main teaching areas of Public Health. The fellowship activities included small group consultations with QUT lecturers, immersion in large group and small group classroom teaching sessions, and guided exploration of the QUT online resources with open access to those resources and the QUT Library.

During these fellowships in Brisbane, entire curricula were provided free. Also, funding was allocated to each Faculty to purchase up to AUD\$1000 worth of recently published textbooks for each of the seven fields to build up departmental libraries. Thus, each university received \$7,000 worth of new textbooks.

Two core activities facilitated by academic staff at QUT were a) For the Teaching Fellows to systematically compare and contrast curriculum structure and lecture content between the three faculties and QUT, and b) to draft the objectives and program for a subsequent workshop in Vietnam to which all academics in each area were invited. The workshops provided the opportunity for in-depth critique of curriculum content, including consideration of strengths and limitations. This aided development of an action plan for curriculum revision within each department. Formal and informal feedback on these fellowships and workshops was in general very positive

Special Interest Groups At the conclusion of each thematic workshop, cross-faculty Special Interest Groups (SIGS) were established. The main objective of these SIGS was to sustain the work done during the teaching fellowships and curriculum workshops through a) Meetings to work on finer details of subject content and

share teaching ideas and materials, and b) To support the network for joint research or other professional activities that should directly or indirectly enhance teaching.

The SIG strategy had mixed success. The most productive SIGs were those in Nutrition, Epidemiology and Biostatistics. The Nutrition SIG brought together the faculties with colleagues in national and regional nutrition centres. One outcome was that there is now input by this SIG in a project designed to introduce a new nationally recognised degree in clinical nutrition.

Critical reflection on the SIG concept: The strategy was introduced to foster collaboration between universities for fine-grained analysis of strengths and weaknesses in curriculum and teaching methods, with a secondary aim to foster joint research or professional endeavours. The SIG idea was not new. Before introducing the strategy we researched the history, objectives and operation of SIGs that exist under the aegis of national or regional Public Health Associations in Australia and Britain. Many SIGs started from a small base and eventually flowered into large active professional groups and sometimes into national associations (e.g. the Australasian Epidemiology Association). It may be that a few SIGs or at least the network by other names will survive this project. For example, leaders of the Nutrition group developed independent activities in 2011-2012. However, a possible flaw in the SIG strategy is that the main focus is on curriculum improvement and critical analysis of the inter-university comparability of curriculum. This is the heavy, rudimentary work of teaching. Most well functioning SIGs internationally have a broader focus on research and personal professional development.

Intra-Faculty Curriculum Workshops:

Each faculty devoted considerable time and effort to successful operation of internal workshops on curriculum improvement. The main focus was on cross-subject mapping of content and revision of weak elements within teaching for Bachelor of Public Health students. In part these were stimulated by the critical analyses undertaken during Teaching Fellowships, thematic workshops and SIG activities.

The intra-faculty reviews were also stimulated by the parallel process of implementation of the **Academic Credit System (ACS)** process that has been mandated by the Government. In Ho Chi Minh City UMP FPH, for example, six one-day workshops systematically examined the change that is needed to modify curricula for BPH, MPH, CK1 and CK2 curricula to meet the requirement of relative equivalence in subject credit points and depth of teaching, modelled on systems formed in the ASEAN ACS and the European Bologna process. The current project was particularly influential because we hosted three national workshops on ACS. The first of these in 2007 introduced concepts and examined objectives, international frameworks and the costs and benefits of ACS. The second brought together universities where implementation had started with those who were contemplating the changes and considered practical steps in the transition. The third national workshop reviewed progress from 2007-2009 in the three partner faculties and HSPH, with input from other medical universities.

Intra-department curriculum activities:

Primarily with the support of funds transferred to each faculty for Academic Resources Development, most departments in

each of the 3 faculties became actively engaged in updating textbooks, lesson plans, handouts, assessment and other core teaching materials. Nearly all elements of the curriculum have been influenced by this project. Improvement of this material is central to what we hoped to achieve; that is, for the quality of training in the classroom to improve. The informal feedback from lecturers is that the quality of teaching in many fields was enhanced.

We did not assess the teaching outcomes quantitatively, as the systems for student evaluation of teaching performance and the perceived quality of individual subjects is not comparable over time (or was non-existent in some faculties or departments). Indeed, the first classes of BPH students only commenced near the end of the project in one faculty (Can Tho). Further, if change was occurring, it would have been difficult to disentangle effects of this project from concurrent project-specific work with other groups (e.g. The Netherlands projects) or through government inspired strategies for teaching improvement. Nevertheless, retrospect quantitative assessment could have been attempted, and is recommended for further work of this nature.

Postgraduate training of teaching staff

At the outset it was recognised that institutional capacity development and postgraduate training of teaching staff are inseparable. The original plan in 2006 was to recruit four PhD students and 6 MPH students for study at QUT. Two candidates for PhD were recruited among Hue faculty staff, but in HCMC and Can Tho no staff members with Masters degrees, sufficiently advanced English and suitable life circumstances could be recruited for a doctorate after one year of searching. With the consent of The Atlantic Philanthropies, changes were made to convert

PhD to MPH scholarships. Eventually, 2 PhD and 9 MPH students studied at QUT.

The first PhD student to submit his thesis was Dr Nguyen Minh Tam. His thesis passed the internal and external examination processes with high praise. Dr Diem Vuong Doan Khanh completed next and her work was also highly praised by independent international experts. There were nine scholarships for junior staff to complete MPH degrees. A positive outcome for the longer-term development of these faculties is that four of these MPH students have, by the end of 2012, progressed to PhD study at other universities. Funding has come from other sources, mainly the Australian Government. Within the next three years, the total number of doctoral level staff teaching in each faculty will increase significantly.

It is important to emphasise that all PhD and MPH students in the QUT project completed their research work based on studies in Viet Nam. This work included engagement with diverse parts of the health sector, from the Health Information Department of Cho Ray Hospital in HCMC, to the Emergency Department of Hue Central Hospital and to commune health centres in Hue, HCMC and Can Tho. Our work has extended from a Maternal and Child Health Clinic nutrition project to health education in high schools to studies of the negative impact on health of small factories for metal smelting. The graduates are now publishing their work internationally or nationally and are integrating their research findings into teaching.

Long-term outcomes from the project

National and international collaborations for community health research: One excellent development was a decision by QUT's Vice-Chancellor to provide funds for 3 years (2011-2013) to support a collaborative

'Centre for Community Health Research' in Hue University of Medicine and Pharmacy. The Centre is based in the new Faculty of Public Health building..

This Centre is instrumental in supporting the sustainability of outcomes from our work. Some staff of the research centre are QUT graduates and from this position they have continued research commenced in PhD projects. The centre engages with national colleagues brought together in several networks, particularly in mental health, health social sciences, epidemiology and biostatistics. In 2012, four additional PhD projects have involved intensive collaboration with this research centre. These projects include linkages with Hanoi Medical University, the Ministry of Education and Training, The Research and Training Centre for Community Development in Ha Noi, the School of Psychology at QUT and the World Health Organization. Funding has been sourced from AusAID, the Viet Nam Government, and a Prime Minister's Asia-Australia Endeavour Award.

Ongoing contribution to development of Clinical Nutrition in Vietnam: A significant recent achievement that should promote sustainability of our work was success in attracting Five Endeavour Executive Awards (Australian Government) for leaders in universities and Nutrition Centres in HCMC and Ha Noi to work with QUT on development of a new national curriculum in clinical dietetics. This work extends directly from the collaboration established by this project's Nutrition SIG.

International student experiences in Viet Nam: In addition to the work described above, we have been active in supporting student placements of undergraduate public

health students from QUT to connect with Vietnamese students. In the past 5 years, 51 QUT Bachelor of Health Science students have had their practical placements in Viet Nam, and most of them were located at the partner faculties, with the great number working in Hue College of Medicine and Pharmacy.

Long-term contribution to postgraduate training of the future Public Health workforce in Vietnam: This project with four faculties has become reasonably well known in the Public Health sector in Vietnam. QUT's reputation for providing high quality training that is responsive to the needs of partner institutions has significantly increased recruitment. In the academic year 2011-12 QUT School of Public Health had many students who are employed by the Hanoi School of Public Health, Hanoi Medical University, the National Institute of Hygiene and Epidemiology, the National Institute of Nutrition, the Khanh Hoa provincial health department, the HCMC Institute of Hygiene and Public Health, Family Health International and other agencies. These students are supported by scholarships such as Australian Leadership Awards, Australian Development Scholarships, Endeavour Award, The Vietnam Ministry of Education and Training and The Rockefeller Foundation.

Future work in Biomedical Sciences: One recent extension of this relationship has been for Hue University of Medicine and Pharmacy to develop cooperation with QUT to enhance teaching and research in biomedical sciences. In 2010 and 2012, exchange visits focused on research and undergraduate training have forged potentially productive agreements to work together at multiple levels in the future.

Conclusion

This paper has outlined the framework for collaboration and considered strengths and weaknesses. There have been tangible outcomes for teaching, research and human resources. The techniques we used in thematic workshops and fellowships to critically examine curricula worked well, are now being adapted to biomedical sciences and could be applied in other contexts. Through the active participation of a large number of staff in QUT and the three partner faculties in workshops, SIGS and Teaching Fellowships, we have established relationships that have sustained beyond the initial project. Long-term benefits will come from broadening the internationalisation of research and training in the Faculties through specific initiatives such as the International Collaborative Centre for Community Health Research in Hue and the clinical nutrition initiative with groups in Ho

Chi Minh City and Ha Noi.

Together, we have learned how to do this type of work effectively by maintaining a clear focus on the needs of individual, mostly young staff as they attempt to cope with heavy teaching duties and modest resources, and strive to develop their research careers. The other valuable lesson was that success depends on the close integration of the six main elements of the program model. Where it fell down (for example, in the failure of several SIGs to thrive), this may have occurred because of insufficient attention to people and timely follow-up of group plans. Where it worked well, we had both sides challenging each other's ideas and responding enthusiastically. In all, it has been a valuable experience in capacity development for all partners, and should have practical benefits for the health sector in Hue and throughout Viet Nam.

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