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BIENNIAL REPORT 2010–2012
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When our next biennial report is released in 2014 CMB will be 100 years old! What a century it has been for China, Asia, and CMB. Since 1914 the region has been witness to dramatic ups and downs—epidemics, wars, famine—and most recently a global shift of wealth and power toward China and Asia. The people of China and much of Asia have experienced a doubling of life span, an unprecedented achievement in the history of humankind.

Available evidence credits the production and application of the modern medical sciences for this spectacular health transition. CMB, by steadfastly focusing on building the capacity of Chinese and Asian scholars, faculty, and students in key medical universities, has been privileged to be a part of this journey.

Two celebratory conferences will mark CMB’s 100th anniversary—the first in Bangkok in January 2014 and the second in Beijing in October 2014. The celebration will engage Asian and Chinese colleagues, respectively, in the themes that have animated CMB over the course of the century—health policy and system sciences and the education of health professionals to strengthen the performance of health care systems.

To glean lessons from history, CMB has commissioned 6 centennial projects not only to learn from the past but also to inform a fresh strategy of CMB’s work in its second century. Three groups of historians, scientists, and professional practitioners are producing edited volumes advancing scholarship on the history of medicine and public health across China and Southeast Asia and philanthropy for health in China. These volumes in English will be translated into Chinese. A documentary film on China’s health story that captures the roles of CMB and Peking Union Medical College will be produced for a Chinese viewing audience. An interactive multimedia history project will also bring forth historical narratives of Asian health throughout the twentieth century, showcasing scholarly research and rich archival resources.

The centennial projects are informing a CMB strategic planning process to design our work for our second century. That strategy, undoubtedly, will be people-centered. For CMB, our focus on people is everything because people are the active agents who transform knowledge for health. Educating the first generation of China’s medical leaders was perhaps the most outstanding and enduring of CMB’s contributions. That education was not just in scientific competencies but also all-around personal development in humanism, professionalism, ethical conduct, and leadership. Professional development has been the hallmark of the CMB fellowship program, which has been an abiding instrument of capacity building in the past and into the future. Since CMB’s return to China in 1980, fellowships have continued to contemporary times, during which CMB is concentrating on developing the next generation of leaders, strengthening faculty, and awarding distinguished professors.

Lastly, but equally importantly, are CMB’s own people—our trustees, staff, advisors, and partners—who are all members of the CMB family. Through their talent, skills, and dedication, CMB, however modestly, continues to strive to fulfill its lasting mission of advancing the health of the people of China and Asia.

Mary Bullock, Chair        Lincoln Chen, President
CMB Grantees
**Program Overview**

In the past few decades there has been a huge change in the demand for health professionals in China and Asia, driven by shifts in population, disease burden, economic and social structures, educational models, and medical science development. CMB aims to promote knowledge for health, supporting its partners in Asia as they seek evidence-based solutions and prepare health professionals for the twenty-first century.

CMB programs respond to these challenges and open pathways to address them, by focusing on the following 3 programmatic areas:

### Health Policy and Systems Sciences

**卫生政策与体系科学**

- Enhancing the knowledge, methods, and tools to improve health policies and systems performance in China.

### Medical Education

**医学教育**

- Promoting innovations and rural equity in health professional education in China.

### Southeast Asia

**东南亚项目**

- Strengthening health professional education and health policy work in the 5 countries of the Mekong region.

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**CMB Program Support by Category**

- **Medical Education**: $9,903,821 (46%)
- **Southeast Asia**: $2,724,450 (13%)
- **Health Policy and Systems Sciences (HPSS)**: $8,819,527 (41%)
The strength of HPSS is its integrative framework; its challenge is to build bridges among practitioners of diverse specialties.
An Innovative Approach

The Chinese government has elevated reform of the country’s health system to a major national priority, but the corresponding academic capacity to design, guide, support, and assess health policy and systems remains underdeveloped. CMB’s support for key Chinese medical universities aims to build capacity in Health Policy and Systems Sciences (HPSS)—a fresh term that signals an innovative approach to studying the pattern of health problems and the societal responses of health policies and systems. CMB’s HPSS programs promote multidisciplinary, academic engagement among the fields of medicine, nursing, public health, business, and the social sciences.

The strength of HPSS is its integrative framework; its challenge is to build bridges among practitioners of diverse specialties. But the nature of twenty-first century health concerns—whether noncommunicable disease, maternal health, obesity, mental health, among others—underscores the need for this approach. No single discipline can identify all the causes and dynamics of these concerns, chart the best courses of action, or evaluate impacts. HPSS integrates the wealth of knowledge and experience that health professionals generate in clinics, laboratories, classrooms, communities, policy centers, and government agencies.

China’s universities are natural forums for building capacity in HPSS, as they host the wide range of disciplines that can contribute to productive health research, practices, and policy-making. As importantly, they are well positioned to nurture a spirit of inquiry among faculty and young scholars. Through its programs, CMB helps China’s universities build HPSS expertise through support for research and capacity building.

Centers of Expertise. CMB supports expertise in this emerging field through its support for 2 HPSS

37 grants
17 institutions
$8.8 million

Distinguished Professor
Xu Biao
Professor of Epidemiology, School of Public Health
Fudan University

As a CMB Distinguished Professor, Dr. Xu Biao found that the CMB award gave her more freedom in selecting research topics and carrying out pilot studies. That opportunity opened another avenue to pursue her research on infectious disease epidemiology and built on her interest in the connections between access to health care and disease control.

Recommended by the CMB liaison office at Fudan University and supported by the Freeman Foundation, she attended the Salzburg Global Seminar session, ‘The Greatest Untapped Resource in Healthcare: Informing and Involving Patients in Decisions about their Medical Care’. “This opened a new area of medical care to me,” she reflected, “and many research ideas of mine actually came from this seminar.”

Helping patients make the best decisions, she realized, is particularly challenging when universal coverage is not ensured. As she described in a blogpost she wrote after the seminar, “In low and middle-income countries like China, where universal coverage of healthcare services has not been reached, a big concern is whether patients with equal needs can get equal access to health services under shared decision-making processes.” This coincides with a major theme of her research at Fudan University’s School of Public Health. “I examine how the gap between rich and poor, the cost of medical services, and inequity in access to comprehensive information can influence patients’ decision-making.”

As in other areas of HPSS research, Dr. Xu finds that the laboratory cannot be separated from the community. “In my work, I am interested in finding the best ways to move from research to intervention, and from research to policy. In the public health field, it is important to see public health research done scientifically and with good ethics.”

Xu Biao was a 2008 CMB Distinguished Professor. Her blogpost on shared decision-making can be found at http://blogs.bmj.com/bmj/2010/12/23/biao-xu-shared-decision-making-in-china/
centers and 6 collaborating programs at our partner universities. These universities are strengthening linkages across disciplines; introducing their faculty and students to new tools for evidence-based medicine and policy-making; and expanding their networks to include the input of health professionals, educators, and government officials from China and abroad.

**HPSS People.** To develop the knowledge and talents to build HPSS capacity, CMB has introduced awards for Distinguished Professors, Faculty Development, and Next Generation Fellows. These awards give medical professionals additional resources to pursue HPSS-related research, either in their home institutions, through study abroad, or by participating in international conferences.

Similarly, CMB’s Open Competition and Seed Grant Competition increase opportunities for young HPSS investigators to initiate their own research projects. Now underway are projects that address a diverse range of frontline health issues, such as the rational use of antibiotics in rural areas, health technology assessment, and school-based intervention against childhood obesity, among others.

CMB also helps open channels of communication among the growing number of HPSS researchers in China. The annual Westlake Forum brings together key Chinese university leaders, researchers, and policy-makers to share experiences and bring greater visibility to health policy sciences.

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**FACULTY DEVELOPMENT**

Liu Aimin
Physician and Nurse in Charge
Lecturer and Program Officer, Division of International Exchange and Cooperation
Kunming Medical University

Through CMB Faculty Development Awards, a young Chinese educator or researcher can more easily access the knowledge and experience of peers in other countries. That was what Liu Aimin of Kunming Medical University found during her study at the London School of Hygiene and Tropical Medicine. “The most exciting part was to be able to communicate with my teachers and my 61 classmates from all over the world. Most of them have been international nurses working in rural, mobile health clinics in resource-poor countries, such as post-earthquake Haiti, Malawi, Uganda, Kenya, Tanzania, Ghana, Nepal, and India. What a vast amount of experience!”

She also took away a new sense of purpose in her profession. “I was impressed by the respect that the teachers have for nurses and their belief that we can apply what we learn and make a difference.” She already sees ways that she can make a difference at her home institution. “I teach community nursing to undergraduate nursing students. I hope I can inspire my students to learn more about how to develop skills in communicating with people in the tropics and in resource-poor situations about basic hygiene, sanitation, and the prevention of disease.”

Liu Aimin’s course of study was brief—“I cannot expect this course will cover all I may need or wish to know in such a wide field in just 5 months”—but she expects the impact to be long-lasting. “The course has encouraged me to continue my own self-education. I have always been interested in working in global health and development, and I hope to broaden my students’ horizons on nursing around the globe.”

Liu Aimin received a 2010 Faculty Development Award for advanced studies at the London School of Hygiene and Tropical Medicine.
CMB Collaborating Centers

CMB Collaborating Center in Health Development Studies
Peking University
美国中华医学基金会卫生发展研究合作中心
北京大学

CMB Collaborating Center in Western Rural Health Development
Sichuan University
美国中华医学基金会西部农村卫生发展研究合作中心
四川大学

CMB Collaborating Programs

CMB Collaborating Program in Mental Health Policy
Central South University
美国中华医学基金会精神卫生政策研究合作项目
中南大学

CMB Collaborating Program in Pharmaceutical Policy and Economics
Fudan University
美国中华医学基金会药品政策与经济学研究合作项目
复旦大学

CMB Collaborating Program in Non-Communicable Diseases
Peking Union Medical College
美国中华医学基金会慢性非传染性疾病研究合作项目
北京协和医学院

CMB Collaborating Program in Health Systems Research and Policy Translation
Shanghai Health Development Research Center
美国中华医学基金会卫生系统研究与政策转化合作项目
上海卫生发展研究中心

CMB Collaborating Program in Health Policy Evidence
Sichuan University
美国中华医学基金会卫生政策循证研究合作项目
四川大学

CMB Collaborating Program in Migrant Health Policy
Sun Yat-sen University
美国中华医学基金会流动人口卫生政策研究合作项目
中山大学
Progress in health is clear:

Life expectancy in China is

74 years

...but new problems have emerged:

Non-communicable diseases ushered in by lifestyle, environmental, and behavioral risk factors now account for

80%

of China’s disease burden.

New resources are available:

Government reforms started in 2009 committed an extra

$133 billion

Insurance coverage increased to

> 90%

...but gaps persist:

Many people however do not have access to a qualified health professional, since the number of doctors and nurses are insufficient to meet people’s needs.

1.9 million doctors
1.8 million nurses

CMB

To help build the field...

Since 2008, CMB has supported 2 collaborating centers and 6 collaborating programs in HPSS; gave 28 awards for Distinguished Professors, Faculty Development, and Next Generation Fellows; and granted more than $23 million to strengthen HPSS.
CMB supports programs and networks to build the field of HPSS in China

The annual Westlake Forum, co-hosted in 2011 by Zhejiang University and Emory University, provides a platform for HPSS researchers to present their work. (Atlanta, April 2011)

Discussions among young researchers continued at the 2012 Westlake Summer Youth Forum. (Hangzhou; August 2012)

Representatives of CMB Collaborating Programs in HPSS plan next steps in their development. (Beijing; October 2011)

The deans of 10 Chinese schools of public health visited American universities to exchange ideas on best practices. (July 2012; Cambridge, New York, Washington)

Travel support enables Chinese to join international discussions, such as the Harvard America-China Health Summit (Cambridge, September 2011) (left) and the Health System Reform in Asia Conference (Hong Kong, December 2011) (right).
Promoting innovations and rural equity in health professional education in China.
Health Professionals for the 21st Century

In the past decade, China has embarked on dramatic reforms of both its university education and national health care systems, which have been geared toward achieving world class educational standards and ensuring universal health coverage for its people. But producing the human resources needed to meet the health needs of twenty-first century societies is a global challenge and China is looking to the international community for ideas and collaboration. In December 2010, on the campus of Harvard University and in the pages of *The Lancet*, the Commission on the Education for Health Professionals for the 21st Century launched a call for action, urging academic, professional, and policy communities throughout the world to reform higher education in health.

The Commission report articulated a fresh vision, based on a global outlook, a multiprofessional perspective, and a systems approach. The emphasis is on transformational learning, which will require making shifts “from fact memorization to searching, analysis, and synthesis of information for decision-making; from seeking professional credentials to achieving core competencies for effective teamwork in health systems; and from non-critical adoption of educational models to creative adaptation of global resources to address local priorities.”

Asia is responding, and health leaders in China, Thailand, Vietnam, Bangladesh, and India have been especially active in considering ways to adapt the recommendations to fit their national circumstances. Representatives of these 5 countries are now drawing on each others’ experiences through the 5-Country Asia Network (5-C Network).

The Commission’s work enjoyed partnerships in sponsorship among CMB, the Gates Foundation, the Rockefeller Foundation, and *The Lancet*.

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**PARTNER**

**Li Mengfeng**  
Vice President  
Sun Yat-sen University

“In the last decades, Chinese medical institutions have been working hard to catch up with advanced international standards in medical education and research,” says Li Mengfeng, a vice president at Sun Yat-sen University, the dean of its school of medicine, and a distinguished cancer and virus researcher. But he cautions that “the reform of medical education is at a critical point.”

Dr. Li sees medical education at a crossroads. China can take pride in the progress it has made since institutions like Peking Union Medical College and Canton Medical College began training Chinese students in Western medical practices. Today, Dr. Li believes, “our biggest challenge is how to use our history and achievements of the last 100 years as we face new concerns.”

Dr. Li advocates reforming university curricula, the style of teaching, and the structure of medical institutions. The goal is to improve the environment for innovative research in China, so that the country’s health professionals can better develop biomedical and clinical tools to promote health and save lives. China has already enhanced the teaching and research capabilities of its medical faculty, he finds, but structural problems limit opportunities for innovation. “A big demand for new doctors and financial needs of medical universities and schools motivate many institutions to enroll large numbers of medical students,” he points out. “But the ratio of faculty to students is a concern, because it limits the development of innovative work.”

CMB has been playing a constructive role, he says, by fostering a two-way dialogue between Chinese medical universities and the central government. International exchanges and collaboration can also be catalysts for reform. Reform of medical education is an area where China should seek a leadership role, Dr. Li believes. “China has the biggest population and the greatest number of doctors in the world, so it should make a greater contribution to global health.”

Sun Yat-sen University has received CMB support for its work on faculty capacity building and the development of a joint MD-MPH degree.
Health Education Reform in Asia: Launching the Dialogue

Asia is responding to the call from an independent commission of 20 academic leaders from around the world to undertake comprehensive reform in the training of health care professionals.

November 30 – December 1 2010
Commission Report launched at Harvard School of Public Health. (Photos: Commission Co-chairs Lincoln Chen, top, and Julio Frenk, bottom)

December 2010

January 2011
Commission Report featured in presentations and discussions at World Bank-Atlantic Philanthropies seminar in Hanoi on January 19 and at the annual Prince Mahidol Award Conference in Bangkok on January 28. (Photo: Lincoln Chen presents report to HRH Princess Maha Chakri Sirindhorn)
February 2011
Commission Report launched in Bangladesh and India.

April 2011
China, Thailand, Vietnam, Bangladesh, and India form 5-C Network to promote regional exchange. (Photo: Hanoi SPH Dean Le Vu Anh and Minister of Health Nguyen Thi Kim Tien)

May 2011
China Commission formed to consider implications of Commission’s recommendations for China’s health education institutions. (Photo: Dong Zhe, coordinator of the China Commission)

August 2011
Commission Report launched in Japan.

September 2011
5-C Network adopts a common survey instrument for conducting national situation analysis.

CMB
Through its medical education programs, CMB continues to support implementation of the Commission’s recommendations.
Southeast Asia
东南亚项目

Strengthening health professional education and health policy work in the 5 countries of the Mekong region.
Strengthening Networks for Sharing Expertise

CMB programs in this region reflect the different stages of development in 5 Southeast Asian countries—Cambodia, Laos, Myanmar, Thailand, and Vietnam—and in their health policies and capacities. Cambodia and Laos are setting up the infrastructure that will enable them to improve delivery of health services, including institutions to train health professionals. Myanmar is opening its door and beginning to solicit expertise from sources outside its border, which could help to strengthen its fragile health infrastructure. Vietnam, given its rapid economic development, has a window of opportunity to make major gains in health. And Thailand is becoming a base for broader capacity building, as its universities offer training to health professionals from the region and host international conferences.

A single approach to improving health delivery will not fit all these countries, yet all can benefit from a flow of knowledge across their borders. This is true for developing human resources for health professions and ensuring access to health care, key areas of CMB’s program support in Southeast Asia.

Bui Thi Thu Ha is clear-eyed about the best direction for medical education reform in Vietnam. “We need to consider greater flexibility in the health service delivery model and train and use new types of health workers.” But she and her colleagues are equally perceptive about the challenges of incorporating accurate information about health needs into Vietnam’s medical education system. “In Vietnam, the lack of a comprehensive strategy for human resource development makes it difficult for training institutions to estimate how many students for each category will be needed for the country, according to our Ministry of Health’s 2009 Joint Annual Health Report.” There are data gaps in other areas as well. “There are still are no uniform competency standards for graduates of medical schools, which could serve as the basis for developing training programs and implementing the licensing system.”

Cooperating with peers in other Asian countries can open up new ideas and possibilities. “Participating in the 5-C Network will help Vietnam to review and assess its health system on a large scale, which has never been done before. We can exchange experiences and learn from the training policies and human resource development of other countries in the network. We can share with other countries Vietnam’s face-to-face data collection approach and the results of our providers-graduates-employers survey.”

Bui Thi Thu Ha and colleagues are participating in the 5-C Network to address reform of medical education.
Health in Southeast Asia

Scientists from 10 countries in Southeast Asia mapped the health conditions of their region in a special *Lancet* series, *Health in Southeast Asia*. The contributors found that different socio-political dynamics, paths of economic development, and cultural and religious practices within the region have catalyzed a range of health achievements and responses to new health challenges. Their papers addressed some of the major themes for health in Southeast Asia, including health care systems; maternal, neonatal, and child health; emerging infectious diseases; noncommunicable diseases; human resources for health; and health financing reforms.

The series, issued at the January 2011 Prince Mahidol Award Conference in Bangkok, was the capstone of more than a year of research and drafting by regional scientists, undertaken with the support of *The Lancet*, CMB, Atlantic Philanthropies, and Rockefeller Foundation.

ADVISOR
Piya Hanvoravongchai
CMB Southeast Asian Regional Coordinator

With a strong interest in international health policy, Piya Hanvoravongchai sees the value in looking across borders for ideas and models. But in Asia’s health policy and research sectors, he finds, “the linkages and knowledge exchanges across countries and across disciplines are still limited, especially for mid-level or younger health professionals.”

That inspired him to look to social media as a way to build a virtual forum—HealthSpace.Asia—for information sharing. “My idea for HealthSpace.Asia is that an online social platform can promote collaboration and networking among health policymakers and researchers in the region, with a particular focus on building the capacity of younger professionals. It lets us quickly and easily share information—such as an interesting blog post on a current health issue, or news about jobs or an upcoming conference—and start a conversation with our peers.”

Social media is a new tool, but Dr. Hanvoravongchai sensed that health professionals in the region would make use of the new platform. “We know people in Asia are receptive to social media—China alone has almost 400 million users of Chinese social media sites, such as Sina and Tencent weibo.” In fact, HealthSpace.Asia draws people beyond Asia as well. “HealthSpace.Asia now has over 1000 members from 50 countries. Members come from various disciplines but have a common interest in improving health in the region. Our frequently visited pages include health-related events, research funding opportunities, calls for papers, job opportunities, and blogs.”

The community is open to all. “We invite people to visit HealthSpace.Asia at http://healthspace.asia/,” he said, to join in the discussion.

*In addition to his work with CMB, Dr. Piya Hanvoravongchai serves as a lecturer at Chulalongkorn University in Bangkok. He also has conducted research at the World Health Organization and the Global Health Equity Initiative at Harvard University.*
Health in Southeast Asia…By the Numbers

10 ASEAN Countries

**DIVERSITY**

There is great diversity among the 10 ASEAN countries in terms of population:

- 243 Million in Indonesia
- 0.4 Million in Brunei

**and in life expectancy:**

- 56 years in Myanmar
- 67 years in Laos
- 81 years in Singapore

5 Mekong Countries

**Countries are making health progress but expenditures for health are still low:**

- $286 per capita
  - Thailand at US PPP equivalent

**All Mekong countries are striving to strengthen human resources for health.**

- Doctors + nurses per 1,000 population range from
  - 1.1 in Cambodia
  - 2.7 in Thailand
  (compared with the WHO threshold of 2.3 doctors-nurses per 1,000 population for achieving Millenium Development Goals)

**CMB**

**CMB AND SOUTHEAST ASIA**

CMB has awarded more than $4.8 million in grants since 2008 to help Mekong countries build institutional capacity, reform health professional education, and strengthen regional networks.
CMB Grants

CMB made 87 program grants for Health Policy and Systems Sciences, Medical Education, and Southeast Asia during Fiscal Year 2011 and Fiscal Year 2012. The 69 major grants are described below.

HEALTH POLICY AND SYSTEMS SCIENCES

Sun Yat-sen University
Center for Migrant Health Policy: Collaborative Research and Policy Building (10-009)
$616,632
January 1, 2011 – December 31, 2012
A collaborative effort between Sun Yat-sen University and UNRISD will produce a set of conceptual and empirical papers on demographic, socioeconomic, occupational, mobility, and health care aspects of migration.

Huazhong University of Science and Technology
Faculty Development in HPSS (10-010)
$208,550
January 1, 2011 – December 31, 2013
Multiple activities to strengthen the capacity of young HPSS researchers include fellowships for study abroad, funds for attending international conferences, seed research projects, and other academic exchange activities.

Emory University
U.S. Westlake Conference: Promoting China-U.S. Collaboration (10-012)
$616,632
January 1, 2011 – December 31, 2012
This accompanying, parallel grant to Grant 10-011 provides travel support to Chinese participants to the Westlake Conference at Emory University.

Zhejiang University School of Medicine
Investigating an Obesity Intervention Program in China (10-014)
$300,000
January 1, 2011 – December 31, 2015
This project will establish a database on obesity and its related chronic diseases, estimate the expected health care cost reductions, and offer recommendations to the government for obesity prevention strategies.

Peking University Health Science Center
Building Chinese Leadership in Global Health (10-013)
$340,000
January 1, 2011 – December 31, 2012
Twenty of the next generation of Chinese health leaders will be exposed to the major challenges of global health policy-making and then participate as observers in the World Health Assembly, with both preparatory and follow-up training sessions.

Peking Union Medical College
Developing a National Birth Defect Surveillance System (10-015)
$180,000
January 1, 2011 – December 31, 2012
This project proposes a framework to classify 45 different kinds of birth defects and monitor them in 10 pilot areas, as the first steps toward developing a national surveillance system.

Zhejiang University School of Medicine
HPSS Grants for Young Faculty Partnerships (11-043)
$305,000
Zhejiang University will provide seed grants on a competitive basis for young Chinese faculty to undertake international partnerships, so as to upgrade their capacities in research and education in the field of HPSS.

Peking University Health Sciences Center
Second Global Symposium on Health Systems Research (11-044)
$500,000
July 1, 2011 – December 31, 2013
This global symposium would increase the visibility and stature of HPSS in China, provide a platform for CMB’s HPSS grantees to present their research, and attract more Chinese researchers to the HPSS field.
Peking Union Medical College
New Voluntary System of Organ Donations in China (11-045)
$500,000
July 1, 2011 – June 30, 2016
The project’s goal is to establish a national system that promotes voluntary donations tracked by a registry system of potential recipients and organ allocation algorithms; procedural guidelines for care of the donor and donor’s family; and a platform for communications between Chinese transplant professionals and the international community.

Central South University
CMB-Collaborating Program in Mental Health Policy (11-058)
$300,000
January 2012 – December 2014
To develop China’s first research program for mental health policy, Central South University will develop a resource website, pilot demonstrative projects in 3-6 localities, train a core group of 20 young researchers and policy makers, and formulate a policy evaluation framework and tools.

Peking Union Medical College
CMB-Collaborating Program in Non-Communicable Diseases (11-059)
$300,000
January 2012 – December 2014
PUMC will develop a repository for NCD research and experts; pilot small-scale, community-medical center partnership in NCD prevention and control; promote multi-center collaborations; develop a China NCDs Report; and provide trainings and seminars in social determinants, epidemiology, and biomedicine related to NCDs.

Fudan University
CMB-Collaborating Program in Pharmaceutical and Economic Policy (11-060)
$300,000
January 2012 – December 2014
Scholars from Fudan’s Schools of Pharmacy, Law, Business, and Public Health will evaluate the impact of drug bidding, zero price mark-up, and global budget; develop a value-based drug pricing system; train 60 policy makers; and conduct 2 academic symposiums.

NEXT GENERATION FELLOW
Li Changle
Teaching Assistant, College of Health Management
Inner Mongolia Medical University

Ensuring access to quality health care is a shared concern for public health professionals across Asia. As a CMB Next Generation Fellow, Li Changle wanted to compare his understanding of China’s health delivery system, acquired through his work at Inner Mongolia Medical University, with innovations in other countries. “I think we need to learn from other countries’ experience so that we can enhance our own health care system,” he said in an interview.

The months he spent as a Next Generation Fellow at Chulalongkorn University in Bangkok gave him that opportunity. “I learned about the development and improvement of Thailand’s health care system during my studies there,” he said about his placement as a Next Generation Fellow, “and when Chulalongkorn University hosted the course on ‘Strategies for Private Sector Engagement and Public-Private Partnership in Health,’ I was able to meet people from all over the world who work in the health sector.”

Dr. Li learned about models that might have relevance for China. “For example, we can gain knowledge from Thailand’s experience in building their universal coverage scheme, which is known as the ‘30 baht scheme,’” a program that expanded insurance coverage with a low co-payment of 30 bahts, making it more affordable for people seeking treatment.

Dr. Li expects his recent experience at Chulalongkorn University will have a long-term impact. “Now the challenges for me are to master the knowledge that I learned in the past year and to put theory into practice on how to improve China’s health system and health insurance system.”

As a 2010 CMB Next Generation Fellow, Li Changle studied at Chulalongkorn University.

Village health clinic in Xinjiang.
Shanghai Health Development Research Center (SHDRC)  
**CMB-Collaborating Program in Evidence-based Health Policy-making (11-061)**  
$300,000  
January 2012 – December 2014  
This project will train 600 policy makers in health management in order to strengthen research translation and further develop SHDRC as a CMB Collaborating Program.

Ningxia Medical University  
**Mental Health Intervention in Western Rural China (11-063)**  
$151,447  
March 1, 2012 - February 28, 2015  
This project plans to add a mental health component to an ongoing experiment on health system reform in 5 mountainous counties in Ningxia.

Peking University Health Science Center  
**School-based Intervention against Childhood Obesity (11-064)**  
$149,860  
March 1, 2012 - February 28, 2015  
This project is a cluster-randomized trial in 12 primary schools in urban areas of Beijing for a school-based policy intervention aimed at promoting a healthy diet and increased physical activity.

Sichuan University  
**Promoting Pregnant Women’s Health (11-065)**  
$150,000  
March 1, 2012 - February 28, 2015  
This project intends to develop a nationally representative, real-time monitoring system for serious obstetric events that can be used to improve obstetric quality and promote relevant policies.

Zhejiang University  
**Insurance for Occupational Diseases and Accidents (11-066)**  
$150,000  
March 1, 2012 - February 28, 2015  
This study aims to assess the perceived willingness of workers and employers in industries with high rates of occupational diseases or accidents to change from the current industry-based health insurance scheme to a community-based insurance scheme.

Fudan University  
**Health Technology Assessment and Policy Making (11-067)**  
$150,000  
March 1, 2012 - February 28, 2015  
This study will use qualitative and quantitative methods to assess enabling and impeding factors that affect the translation of evidence from Health Technology Assessment (HTA) into health policy.

Shandong University  
**Rational Antibiotics Use in Rural China (11-068)**  
$149,800  
March 1, 2012 - February 28, 2015  
This project will assess antibiotic usage that includes a survey of residents, in-depth interviews with health care providers, and an analysis of prescription data in rural Shandong.

Huazhong University of Science and Technology  
**Integrated Rural Health Care Services (11-069)**  
$150,000  
March 1, 2012 - February 28, 2015  
This quasi-experimental study conducted in 4 rural townships in Chongqing Municipality aims to develop and test 2 interventions aimed at improving the integration and effectiveness of rural health care services.

Tibet University Medical College  
**Tibet Health Survey (11-086)**  
$474,099  
January 1, 2012 – December 31, 2014  
This project supports an unprecedented health survey of the Tibet Autonomous Region to advance understanding of unique health conditions among people living in this high altitude geography.

Peking University Health Science Center  
**Peking University China Center for Health Development Studies (12-094)**  
$600,000  
July 1, 2012 - June 30, 2014  
This grant continues support to the Center, primarily through augmenting professor salaries and international engagement of the Center’s board and leadership.

Sichuan University  
**CMB-Collaborating Program in Evidence-Based Policy (12-095)**  
$100,000  
July 1, 2012 – June 30, 2015  
This grant will orient the Center for Evidence-Based Medicine of Sichuan University to become a CMB Collaborating Program, broadening the Center’s work from clinical medicine to health policy and systems.

Fudan University  
**Westlake Forum IV and CMB President’s Council (12-096)**  
$285,615  
July 1, 2012 - June 30, 2013  
Westlake Forum 2012 will examine the critical relationship between Chinese medical universities and their affiliated hospitals and community centers to conduct integrated education, research, and services.
FACULTY DEVELOPMENT
Ma Zhenyu
Lecturer in Public Health
Guangxi Medical University

“Nowadays, public health education in China needs further development and the specialization of lecturers,” states Ma Zhenyu, a lecturer at Guangxi Medical University. That’s one reason why CMB’s Faculty Development Awards appealed to her. She also wanted to broaden her vision of public health through study abroad. “Experts, especially in social medicine and public health, should think globally, have an international horizon, and keep track of the latest developments in health policy.” With the support of a CMB Faculty Development Award, she spent several months alongside American colleagues at the State University of New York, Buffalo, where she developed a wealth of knowledge and teaching skills.

Now in Guangxi, she is already finding ways to share her international experiences with students. “Back home, I have developed two courses. The first one, ‘Research Methods,’ is taught primarily to undergraduate students. Following the way my professor taught me, I incorporated my own research project into the classroom curriculum and encouraged my students to combine theory with practice. In the second course, ‘Social Medicine,’ I will integrate the latest progress and research trends of public health and social medicine, which I garnered from international conferences.”

The months in Buffalo also added a new dimension to Ma Zhenyu’s work outside the classroom. “I have engaged myself in research that allows me to employ the skills I learned while studying in the United States. For example, I have conducted the quantitative research in our CMB-funded project on management of rural health care in Guangxi.” In this way, global knowledge for health can find its way to lesser developed regions of China.

Ma Zhenyu received a 2010 Faculty Development Award for advanced studies at the State University of New York, Buffalo.

Peking University Health Science Center
Youth Participants for Second Health Systems Research Symposium and 5-C Network Workshop on Health Professional Education (12-097)
$144,000
July 1, 2012 – December 31, 2012
With CMB support, up to 100 young Chinese and 4 Myanmar scholars will attend the Second Symposium on Health Systems Research in Beijing from October 31 to November 3, 2012.

London School of Hygiene and Tropical Medicine
Concentrated Master Training in Selected Chinese Schools (12-104)
$884,228
July 1, 2012 – June 30, 2014
This grant supports training in HPSS-related subjects for up to 14 young faculty and outstanding undergraduate and Master’s degree graduates of CMB-supported institutions.

MEDICAL EDUCATION

China Medical University
Capacity Building in Medical Education in China (10-016)
$297,895
January 1, 2011 – December 31, 2015
A collaboration between CMU and FAIMER (Foundation for the Advancement of International Medical Education and Research) will develop the leadership capacity of 40 health professions medical faculty.

Central South University
Consortium for Enhancing Community Medicine in Medical Education (10-017)
$276,960
January 1, 2011 – December 31, 2014
The university’s Xiangya Medical School will foster community and public health education in China’s leading medical schools by assessing curricular content, propose curricular improvements, and share curricular approaches.
PARTNER
Wanicha Chuenkongkaew
Faculty of Medicine, Siriraj Hospital
Mahidol University

“We invite all stakeholders to join us in a much needed rethinking of reforms,” wrote co-chairs Julio Frenk and Lincoln Chen in the foreward to the report of the Commission on Health Professional Education for the 21st Century. Stakeholders in China, Thailand, Vietnam, Bangladesh, and India accepted that invitation and established a collaborative dialogue, the 5-C Network, to consider ways to introduce reforms in their respective countries.

A first step is recognizing the nuances of each country's system. Dr. Wanicha Chuenkongkaew of Mahidol University highlights some of Thailand's concerns: “We see a lack of communication between the medical educational system (producers) and the health system (users). This inevitably leads to a mismatch of medical graduate competencies to patient and population needs. In our classrooms, we find too much teaching and not enough learning, and in practice, there is a tendency for professions to act in isolation or even in competition.”

Despite differences in national structures, members of the 5-C Network welcome the cross-border insights. “We can learn the current situation in other member countries, pool our expertise, share intervention strategies to improve medical curricula, and exchange our success stories,” Dr. Chuenkongkaew says. This collaboration can add strength to their own initiatives and, in turn, bring fresh experience to the broader reform movement.

As Dr. Wanicha and her colleagues in the 5-C Network have found, “We become part of a collective movement to reform human resources for health education.”

Wanicha Chuenkongkaew and her colleagues at Siriraj Hospital's Faculty of Medicine host the Secretariat for the 5-C Network.

Peking University Health Science Center
Building Capacity for Doctoral Nursing Education (10-018)
$350,000
January 1, 2011 – December 31, 2013
This joint PUHSC-Fudan University initiative comprises curriculum development bolstered by advanced training abroad of key faculty members at 2 of China’s premier nursing schools.

Fudan University
Building Capacity in Doctoral Nursing Education (10-019)
$200,000
January 1, 2011 – December 31, 2013
Fudan University and PUHSC will pursue curriculum development, faculty preparation, and doctoral course offerings in nursing.

Peking Union Medical College
Nursing Faculty and Research Development (10-020)
$501,905
January 1, 2011 – December 31, 2013
Through this grant, PUMC’s nursing faculty will continue its doctoral-level training program partnership with Johns Hopkins University and establish a nursing faculty research fund.

Sun Yat-sen University
Advanced Nursing Education, Research, and Networking (10-021)
$330,000
January 1, 2011 – December 31, 2014
This project aims to strengthen nursing faculty, foster policy research, and provide research and website support to the 8-school CMB nursing network.

Xi’an Jiaotong University
Innovative Education-Practice Models in Community Nursing in China (10-022)
$115,274
January 1, 2011 – December 31, 2011
Four schools, coordinated by Xi’an Jiaotong University, will review published materials and then organize a study tour overseas to examine innovative models of professional nursing roles in community clinics.
Xi’an Jiaotong University
Planning a New Doctor of Public Health Degree Program (10-023)
$110,000
January 1, 2011 – December 31, 2011
Xi’an Jiaotong University will develop a doctorate of public health program that trains candidates to be research leaders, public health policymakers, and public health practitioners.

Sun Yat-sen University
Modernization of Public Health Education (10-024)
$200,000
January 1, 2011 – December 31, 2014
This project will introduce a new 7-year program that combines the bachelor’s of medicine and master’s of public health degrees.

Sichuan University
Modernization of the Master of Public Health Degree Program (10-025)
$200,000
January 1, 2011 – December 31, 2013
The goal of this project is to bring China’s master’s of public health program to world class standards through improved core curriculum, teaching approaches, and curricular materials.

Peking Union Medical College
Public Health Education Field Site for Chronic Diseases (10-026)
$104,512
January 1, 2011 – December 31, 2013
A multilevel partnership between PUMC and a practical field site will strengthen education in the prevention of chronic diseases.

Huazhong University of Science and Technology (Tongji)
Developing Practical Field Training in Environmental Public Health (10-027)
$100,000
January 1, 2011 – December 31, 2013
This project aims to develop field training in public health education to improve students’ practical competencies to meet new needs in China, with a special focus on environmental and occupational challenges.

Fudan University
Integrating Global Health into Medical and Public Health Education (10-028)
$100,500
January 1, 2011 – December 31, 2013
Fudan University will pilot the development of multidisciplinary global health curricula for students of different levels, followed by training of faculty from other universities for wider dissemination in China.

Xi’an Jiaotong University
Appraisal of Human Resources Policies for Rural Health in Western China: Joint Project of 11 Medical Universities (10-029)
$881,773
January 1, 2011 – December 31, 2013
This multi-school collaboration will assess government policies in attracting and retaining health workers for ensuring access to primary care among rural populations in Western China.

Qinghai University
Integrating Township-Village Rural Health Services in 3 Western China Provinces (10-030)
$951,200
January 1, 2011 – December 31, 2013
Three provincial medical universities will undertake a literature review, mapping of village-township health services linkages, pilot testing of improved linkages, and evaluating pilot experiments in order to improve rural health services.

Jiujiang University Medical Center
Developing 3-Year Curriculum for Rural Doctors (10-031)
$600,000
January 1, 2011 – December 31, 2015
This project will engage 10 3-year medical schools in different regions of China to identify rural health problems and formulate the scope of knowledge and skills for rural doctors.

Kunming Medical University
Comparative Study of Rural Human Health Resources in China’s Yunnan Province and Thailand’s Songkhla Province (10-032)
$293,950
January 1, 2011 – December 31, 2015
This project will compare the differences between human resources for rural health in China and Thailand and explore the feasibility of adopting an undergraduate medical education incentive system to attract graduates for practice at the township level in rural Yunnan.

Guangxi Medical University
Policy Study on Human Resources in Rural Mental Health Care in Guangxi (10-033)
$122,285
January 1, 2011 – December 31, 2013
The goal of this project is to assess the feasibility, effectiveness, and requirements for an experimental primary care-community hospital model of psychiatric care in rural Guangxi.
Health Sciences University of Mongolia
Network for Rural Medical Education in Mongolia (10-035)
$199,795
January 1, 2011 – December 31, 2013
This project will support information technology infrastructure, faculty strengthening, and curriculum development at the Health Sciences University in Ulaan Baatar and its 3 rural campuses in Dornogobi, Darkhan, and Gobi-Altai.

Peking University Health Science Center
The China Commission: Health Professional Education for China in the 21st Century (11-046)
$285,000
July 1, 2011 – December 31, 2013
PUHSC will examine 4 dimensions of health professional education: the changing needs of health professionals, changes in health systems reform, the mismatch of medical school graduates and the health system workforce, and future financing of health professional education.

China Medical University
$235,000
July 1, 2011 – June 30, 2015
The goal of this project is to spark reform of medical education in China by launching investigations and pilot studies toward a third generation of health educational reforms.

Central South University
Training Rural Physicians on Mental Depression (11-070)
$148,842
This project aims to improve the outcome of training rural physicians about mental depression by adding a 2-hour behavioral rehearsal component to the standard 6-hour didactic course.

Peking Union Medical College
General Practitioners for China: Training of Trainers (11-075)
$350,000
December 2011 – December 2013
PUMC will establish a multiprofessional center and use a network approach to draft curriculum, evaluate standards, and run 5 training courses within the next 3 years.

Guangzhou Medical University
General Practitioner Training Model: Developing 5+2+1 (11-076)
$200,000
January 2012 – January 2016
This project will introduce a master’s-level general practitioner (GP) training model and textbook series, train 18 GP tutors overseas, and give 60 master’s candidates practical experience at local community service centers.

China Medical University
Standardizing Competency-based Residency Training (11-077)
$200,000
January 2012 – December 2016
CMU faculty will draw on the Global Commission report, especially its recommendations for institutional and instructional innovations, to define residency training with an emphasis on clinical competencies.

Jiujiang University Medical Center
3 Universities’ Joint Rural Medical Curricula Development (11-079)
$100,000
January 2012 – December 2014
Jiujiang University Medical Center and 2 other medical colleges in Jiangxi province will develop a customized curriculum for the newly launched, government-sponsored Rurally Oriented and Tuition-Waived Medical Students program.

Ningxia Medical University
Training of Rural Nursing Managers (11-080)
$200,000
January 2012 – December 2014
This project will develop a teaching model and evaluation system that strengthens the core management competencies of rural nursing managers.

Shanghai Jiaotong University
University-CDC Joint Case-based Public Health Curriculum Development (11-081)
$150,000
July 2011 – June 2014
After landscaping competency levels and training needs, Shanghai Jiaotong University will strengthen the current teaching system to equip public health graduates with new core competencies required for public health work.

Sichuan University
Establishing Allied Health Professions Degree Systems (11-082)
$197,000
January 2012 – December 2014
A multiprofessional expert committee will investigate the current AHP education system in China and abroad and draft general guidelines, degree system criteria, and curriculum of 8 secondary disciplines and some tertiary disciplines.
Peking University Health Science Center
Studies of Medical Education: Graduates and Financing (11-083)
$319,500
January 2012 – December 2016
PUHSC will conduct a survey of medical students’ attitudes toward professionalism career preferences, and viewpoints on the quality of medical education; a second component will study the financing mechanisms of higher medical education institutions, assess the unit cost of medical education, and explore ways to improve the financial aid system for disadvantaged students.

Xi’an Jiaotong University
Joint Piloting of Community Nursing in China (11-085)
$800,000
January 1, 2012 – December 31, 2014
A partnership of 4 schools, led by Xi’an Jiaotong University, will develop and evaluate an innovative community nursing model.

Guangxi Medical University
CMB Western Rural Health Network (12-098)
$342,550
July 1, 2012 – June 30, 2013
Grant funds will support the 2013 network meeting, establishment of a network website, and overseas study tours by presidents and key faculty of 12 member schools.

Kunming Medical University
Consolidation of 2 Rural Human Resources for Health Projects (12-099)
$100,000
February 1, 2012 – September 30, 2015
The grant intends to integrate, build upon, and extend 2 previous CMB grants to Kunming on training rural doctors and China-Thailand comparative studies on rural human resources, by developing an online training platform and an evaluative system to assess capacity of rural doctors.

Laos University of Health Sciences
Capacity Building in Professional Education for Primary Care in Laos (11-049)
$308,450
July 1, 2011 – June 30, 2015
This project aims to strengthen the competencies of graduates of public health, nursing, and primary medicine in Laos in order to improve primary care and public health in rural areas.

Mahidol University
Asian Participants to Prince Mahidol Award Conference 2013-2015 (11-050)
$150,000
July 1, 2011 – June 30, 2015
CMB will support Asian participation in the Prince Mahidol Award Conference, one of the premier global health forums for sharing of experiences, policy developments, and the strengthening of social commitment to global health equity.

Mahidol University
Thailand National Health Professional Education Initiative and Prince Mahidol Award Conference 2014 (11-087)
$500,000
January 1, 2012 – December 31, 2014
This project supports a national Thai initiative to promote innovations in health professional education following the recommendations of the Lancet Global Comission report “Health Professionals for a New Century.”
Hanoi School of Public Health
Situation Analysis of Health Professional Education in Vietnam (11-089)
$200,000
January 1, 2012-December 31, 2012
Hanoi School of Public Health will operate as the secretariat for this multi-institutional study led by the Ministry of Health and engaging Hanoi Medical University and professional schools of medicine, nursing, and public health in the 5 major geographic regions of Vietnam.

Mahidol University
5-country Network on Health Professional Education Reforms (12-100)
$230,000
July 1, 2012 - December 31, 2014
A 5-country Asian regional network, comprised of teams from Bangladesh, China, India, Thailand, and Vietnam, will make joint efforts in reforming health professional education.

Prince of Songkla University, Thailand
PhD Training in Community Epidemiology of Chinese Faculty (12-101)
$268,740
July 1, 2012 – June 30, 2016
This project will provide opportunities for faculties from selected schools of the CMB Western Rural Network to pursue PhD studies in epidemiology in relation to rural health policy and systems.

Mahidol University
Myanmar Regional Fellowship for Faculty Development (12-102)
$434,560
July 1, 2012 – June 30, 2017
This project will support master degree training of 15 Myanmar faculty members in biomedical sciences and public health through fully funded fellowships at Mahidol University, Thailand.
Financial Report

China Medical Board Inc.
Condensed Audited Financial Information
For the Years Ended June 30, 2012 and 2011

Statement of Financial Position

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
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<tbody>
<tr>
<td>Assets</td>
<td>$210,597,713</td>
<td>$221,714,546</td>
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<tr>
<td>Liabilities</td>
<td>$5,969,667</td>
<td>$5,324,170</td>
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<tr>
<td>Net Assets</td>
<td>$204,628,046</td>
<td>$216,390,376</td>
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<tr>
<td>Total Liabilities and Net Assets</td>
<td>$210,597,713</td>
<td>$221,714,546</td>
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Statement of Activities

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<thead>
<tr>
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<th>2012</th>
<th>2011</th>
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<tbody>
<tr>
<td>Revenue</td>
<td>$8,750,112</td>
<td>$9,720,783</td>
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<tr>
<td>Grants and Other Expenses</td>
<td>$12,804,893</td>
<td>$13,864,728</td>
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<tr>
<td>Investment Management</td>
<td>$51,759</td>
<td>$90,881</td>
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<tr>
<td>Payments to Retired Employees</td>
<td>$91,795</td>
<td>$100,098</td>
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<tr>
<td>Federal Excise Tax and Unrelated Business Income Tax (Refund)</td>
<td>$420,318</td>
<td>$(131,682)</td>
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<td>Total Expenses</td>
<td>$13,368,765</td>
<td>$13,924,025</td>
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<tr>
<td>Change in Net Assets before Other Additions (Deductions)</td>
<td>$(4,618,653)</td>
<td>$(4,203,242)</td>
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</table>

Other Additions (Deductions)

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
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<tbody>
<tr>
<td>Net Realized Gain</td>
<td>$164,097</td>
<td>$1,877,264</td>
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<tr>
<td>Change in Unrealized Gain (Loss)</td>
<td>$(6,662,277)</td>
<td>$15,484,795</td>
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<tr>
<td>Unpaid Grants</td>
<td>$(5,969,667)</td>
<td>$(5,197,200)</td>
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<tr>
<td>Other Adjustments</td>
<td>$126,970</td>
<td>$8,579</td>
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<tr>
<td>Net Assets at Beginning of Year</td>
<td>$221,587,576</td>
<td>$208,420,180</td>
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<tr>
<td>Net Assets at End of Year</td>
<td>$204,628,046</td>
<td>$216,390,376</td>
</tr>
</tbody>
</table>

CMB's financial statements have been audited by Condon O'Meara McGinty & Donnelly LLP
The auditors’ report for 2012 is subject to approval by CMB’s Board of Trustees.
CMB Staff

Lincoln C. Chen
President

CAMBRIDGE, MA

Sally Paquet
Director of Finance and Operations

Cheng Chen
Accounting Manager

Sarah Wood
Executive Assistant to the President

Roman (Dong) Xu
Director of Beijing Office

Linda (Na) Zhou
Grants Manager

Echo (Huiying) Zong
Office Manager

BEIJING, CHINA

Jennifer Ryan
Research Fellow

Mariel Reed
Project Coordinator

Tracy (Xiaochuan) Wang
Administrative Assistant
CMB opened the doors of its Beijing office in January 2009. Grants Manager Linda Zhou highlights some of the ways that this step has enabled CMB to strengthen its partnerships with grantees and deepen staff understanding of the context in which these health professionals work.

“CMB’s presence in China reconfirms its mission and determination to continue advancing health in China and Asia. It also strengthens the linkage between our past (in developing Peking Union Medical College in the early 20th century) and the future (most of our program funding is spent in China).

“CMB’s funding capacity is relatively small in the context of China and Southeast Asia’s socioeconomic growth. To maximize the impact of our limited funding, we need to develop an in-depth diagnosis of the problems and design targeted prescriptions; to monitor and evaluate our programs; and to leverage non-monetary resources, such as our staff’s professional network and the CMB brand.

“Having a physical presence in China and a team of China-based staff helps us to meet these objectives. Beijing staff is in close liaison with the central government; university leadership, researchers, and administrators at our grantee institutions; and local and international partners. The local knowledge and bilingual capacity of CMB Beijing’s staff not only facilitates better communication with our Chinese partner universities making for improved coordination and support for project implementation, it also helps CMB formulate strategies to meet China’s demands.”

CMB completed the registration of its Beijing office in 2011, a significant milestone in its efforts to more deeply engage with its Chinese partners. CMB continues to advance more direct communication with stakeholders in China: its Beijing staff is fully bilingual, its Sina Weibo account (新浪微博: ChinaMedicalBoard) updates Chinese readers on recent CMB activities, and its forthcoming Chinese-language website will open another avenue for dialogue with health professionals.

CMB Chair Mary Bullock (second row, center), Linda Zhou (second row, far right), Office Manager Echo Zong (second row, second from right), and Project Coordinator Mari Reed (front row, far left) working with CMB’s book translation project team. The books will be published in 2014, CMB’s centennial year.
CMB Trustees

Mary Brown Bullock
Chair, China Medical Board
Executive Vice Chancellor
Duke Kunshan University

Lincoln C. Chen
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China Medical Board

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Harvard Kennedy School

Jeffrey R. Williams
Executive Director
Harvard Center Shanghai

William Y. Yun
Executive Vice President and Head of Alternative Investments
Franklin Resources, Inc.
Learning from History: CMB Centennial Book Projects

CMB centennial book projects, scheduled for publication in 2014, will share knowledge about the history of medicine in China and Southeast Asia and of medical philanthropy in China. They also are building an international community of scholars with shared interests and strengthening the capacity of young researchers from these regions. Author meetings provide occasions for them to present their research to senior specialists and to their peers from other countries, giving them new perspectives on their own work and insights into how Chinese and Southeast Asian experiences fit into the global context.

Emma Rothschild, far left, one of the leaders of the Transnational History of Health in Southeast Asia book project, and CMB Trustee Harvey Fineberg, with 2 of the contributing scholars at the May 2011 authors’ meeting.

CMB Recognition

Lincoln Chen received the People’s Republic of China Friendship Award, the highest honor that China confers upon foreigners, from Vice Premier Zhang Dejiang on September 29, 2010, for CMB’s work to strengthen the capacity of Chinese medical universities. More recently, on September 19, 2012, he was awarded an honorary doctorate from Peking Union Medical College on the occasion of its 95th anniversary.

CMB notes on weibo

Chinese readers can follow CMB on weibo.

Cross-border exchange: Chinese delegates from CMB’s Rural Network visit Thailand during October 2012 on a study tour. The tour facilitated cross-country exchange and collaboration on rural health service delivery and education.
In 2014 CMB will complete a century of health philanthropy in China, which began when the Rockefeller Foundation established CMB to help build Peking Union Medical College. Several major projects are underway to mark the centennial:

- CMB-commissioned research by teams of Asian and international scholars, resulting in 3 new volumes, scheduled for publication in 2014: *Medical Transitions in Twentieth-Century China*, *Transnational History of Health in Southeast Asia*, and *Philanthropy for Health in China*.

- CMB Chinese language book series, which will comprise a total of 7 books. These are translations of 4 previously published books on health and philanthropy: *China Medical Board and Peking Union Medical College*, *Western Medicine in a Chinese Palace: Peking Union Medical College, 1917–1951*, *An American Transplant: The Rockefeller Foundation and Peking Union Medical College*; and *The Oil Prince’s Legacy: Rockefeller Philanthropy in China*; and translations of the three above-named volumes.

- Communication about CMB’s mission, history, and strategic plans for the future, through a documentary film and an interactive website.
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