























Tutorship Master/Training course in Tropical Medicine and Global Health 2015-2016

PUBLIC HEALTH LABORATORY IVO DE CARNERI, PEMBA

18 July – 5 August 2016

Table of contents

able of contentsable of contents	
ecretariats and Lecturers	2
he Organizers	2
he Partners	3
Course introduction	4
COURSE at a Glance	
he Venue	6
Course programme1 Sefore departure: general and health information	7
efore departure: general and health information1	14
artners / Sponsors1	14

Secretariats and Lecturers

Organizing and Scientific Secretariat

Ivo de Carneri Foundation, Dr Claudia Robbiati Viale Monza 44, 20127 Milan - Italy Phone: +39.02.28900393 - Fax: +39.02.28900401 tmtmgh2015@fondazionedecarneri.it

Ivo de Carneri Foundation - Zanzibar Branch Mr Yahya M. Al-Sawafy Mrs Nahya H. Nassor P.O. Box 3773, Zanzibar - Tanzania Phone/fax: +255.(0)24.2452550 ymsawafy@yahoo.co.uk

Lecturers

Khamis Abuu Bakar TB Control Programme, Pemba Marco Albonico Ivo de Carneri Foundation Manager Zanzibar Malaria Control Programme, MoH, Zanzibar Abdullah S. Ali Said M. Ali Director, Public Health Laboratory Ivo de Carneri Suleiman Ali Head of the Health Management Information System (HMIS) Shaali M. Head of Laboratory Services, Public Health Laboratory Ivo de Carneri Ame Yahya Al Sawafy IdCF Representative, Manager of Gombani Maternal and Child Clinic, Pemba Mohammed Dahoma Director of Preventive Services, MoH Zanzibar Environmental Engineer, Zanzibar Water Authority (ZAWA), Pemba Maalim Juma Saleh Juma Manager NTD Control Programme, Pemba Sauda Kassim Doctor in Charge Chake Chake Hospital Fatma Kabole Manager NTD Control Programme, Zanzibar Shaarifa Hamoudi Maternal and Child Health, Pemba Claudia Robbiati Ivo de Carneri Foundation Savioli Lorenzo Global Schistosomiasis Alliance

Head of Environmental Health, Pemba

The Organizers

Khalfan Sha Jamala

Taib

The Ivo de Carneri Foundation was founded in 1994 by the family, colleagues and students of Professor Ivo de Carneri in memory of his life and work. Professor de Carneri was well known for his knowledge and generosity and contributed significantly to the fight against parasitic and infectious diseases through scientific research, field interventions and training young researchers in this area.

Director General of Health Services, MoH Zanzibar

The Ivo de Carneri Foundation mission is "to promote control strategies against parasitic diseases in developing countries and to encourage research in parasitology".

The main objectives are:

- strengthening public health systems in developing countries and training local health care workers;
- encouraging young researchers, from Italy and developing countries, to conduct operational scientific research in the field of parasitic and infectious diseases.

One of the Foundation's first priorities was to create a public health laboratory on Pemba Island (Zanzibar) in order to provide better support for disease control programmes in the area, an idea Professor Ivo de Carneri had expressed in 1988 while on a mission to Pemba for the Italian Ministry of Foreign Affairs to assess the national schistosomiasis control programme. In the same year an Ivo de Carneri Prize was established in collaboration with the Italian Society of Parasitology, to reward young researchers from sub-Saharan Africa.

The Public Health Laboratory was named after Professor Ivo de Carneri in response to the local Ministry of Health's wishes: **Public Health Laboratory – Ivo de Carneri (PHL-IdC)**, and was officially opened on 12 June 2000. The main activities are: operational research, monitoring interventions for public health priorities, and promoting training courses for local and international staff.

Pemba Island was chosen for the following reasons:

- Pemba Island is in one of the areas of the world most hit by parasitic and infectious diseases, the "neglected diseases" that the Foundation deals with.
- Local and international institutions carrying out health interventions and aid projects have often
 neglected Pemba Island. However, it was in Pemba that the Italian Cooperation collaborated with the
 World Health Organization on international projects to control schistosomiasis in the 1980's. At that
 time important international scientific networks were established for control and research on NTDs
 which are still operative today; the PHL-IdC has fostered the development of collaborative networks
 for operational research and training in Zanzibar.
- The results of strategies to control infectious diseases are easily measurable on an island with its natural borders. In the future these strategies may be extended to other countries.

Further information can be found at the Ivo de Carneri Foundation website: www.fondazionedecarneri.org and at the PHL-IdC web site: www.phlidc.org.

The Partners

University of Florence, Department of Infectious and Tropical Diseases

The Department is engaged in i) Health care (SOD Malattie infettive e Tropicali, AOU Careggi) ii) Training (Scuola di Scienze della Salute Umana, corso di specializzazione in malattie infettive, corso di perfezionamento in *Medicina Tropicale e Cooperazione Sanitaria*, Master in *Medicina Tropicale e Salute Globale*) iii) Research (Italy, Bolivia, Peru) iv) Health cooperation (Bolivia, Peru). The University holds a convention with University of Brescia and Fondazione Don Giovanni Calabria for Tropical Diseases of the Hospital Sacro Cuore (Negrar, Italy) for the organization of the Master in Tropical Medicine and Global Health. In 28/12/2012 a convention for 10 years has been stipulated with the Fondazione Ivo de Carneri, for the support and collaboration in training, research and development for health cooperation in resource-limited countries. The Fondazione Ivo de Carneri contributes to the training programme of the inter-Universities Master of first level in Tropical Medicine and Global Health, coordinated since 2013 by the University of Florence, Department of Infectious Diseases, in collaboration with the University of Brescia and the Fondazione Don Giovanni Calabria. The Fondazione Ivo de Carneri organizes every year an International residential course of advanced training in tropical medicine in Pemba Island, Tanzania, that is included in the Master as Tutorship stage.

Azienda Ospedaliera Universitaria Meyer, Center for Global Health, Tuscany Region

The aim and objectives of the AOU Meyer are summarised in its mission: to take care of children utilizing modern technologies and treatments including the ethic and human aspects that should characterise the relation among the sick child, his/her family, and the health operator. Beyond health care activities, AOU Meyer is largely committed in health promotion and international relations in health, and has created a specific organizational structure. Sectors: Primary Health Care, AIDS, paediatric care, support to paediatric hospitals, joint research. Mediterranean and East Europe countries were the first traditional beneficiaries form the activities of health cooperation carried out by Meyer outside national borders. The organizational structure of the Hospital was shaped in mid 90's when Meyer and the paediatric hospital of Scutari, Albania, made an agreement for a project of clinical intervention and training. In 1997, the regional referral centre for infant diabetes of Meyer received the request to intervene in Bielorussia, at short distance from Cernobyl disaster, due to the increase of cases of juvenile diabetes. In 1998, training activities and assistance to launch a paediatric hospital in Palestine has started. In 1999 a task force of Meyer intervened again for two months in Albania to give technical assistance on laboratory services. At present, cooperation projects are ongoing in in Libia, Ethiopia, Kenya, China, Uganda and Burkina Faso. AOU Meyer co-supports this Course for the participants to the Master and is responsible for the dissemination of the outcome and results.

Italian Association Carlo Urbani

The Italian Association Carlo Urbani (AICU) is a non-profit organization founded in July 2003 with the aim to continue the extraordinary humanitarian work of Carlo Urbani, a Doctor Without Borders who died of SARS, a disease that he himself had first identified. The main aim of the AICU is to remember and honour the role of Dr. Carlo Urbani from a human, professional and scientific point of view, through the conduct of activities in one or more areas covered by art. 10 of the Legislative Decree 4th December 1997, n.460, exclusively focused on charitable purposes. The association aims to continue the work begun by Dr. Carlo Urbani pursuing the following targets:

- To raise funds for the acquisition of medicines called essentials, to be allocated to institutions and associations engaged in the care and prevention of infectious and parasitic diseases that affect the populations of developing countries, especially children.
- To promote and finance courses to be held in Italy and abroad, in the field of infectious and parasitic diseases, aimed at doctors and workers resident in developing countries. Since 2005 AICU is co-funding this residential training course in Pemba island.
- o To promote, organize and finance events, exhibitions, conferences, meetings and more, in order to improve access to essential medicines and care for the poorest populations.
- To influence, as much as possible, the decisions of pharmaceutical companies and, consequently, their willingness to finalise research on essential medicines and supply them to populations and villages recommended by the Association.
- o To award grants, prizes and scholarships named after Dr. Carlo Urbani, dedicated to the study of the prevention and treatment of infectious and parasitic diseases.
- To promote and encourage initiatives, projects and aid of particular humanitarian interest in developing countries.

Course introduction

This training stage is unique in the panorama of tropical diseases and international public health training. It is designed as a practical tool to provide health staff scientific knowledge and skills to tackle the great challenges which are affecting billion of people, especially in developing countries. Malaria is still number one killer among parasitic diseases: despite the world-wide efforts of prevention and control through combination therapy, 90% of the present 700,000 malaria deaths occur in Africa, especially in children from Sub-Saharan Africa. Intestinal parasitic infections, filariasis, schistosomiasis and other neglected tropical diseases (NTDs) carry a major burden on children and adolescents, affecting their health at a crucial step of development. Innovative strategies have been designed for NTDs integrated control.

The AIDS epidemic, with its devastating consequence on economy and on the fate of million of orphanage, is knocking down the African continent and other affected countries and access to ARV therapy is a challenge. Tuberculosis is a global threat, associated with HIV, especially for MDR-TB and XDR-TB, and it is re-emerging in developed countries. New and old outbreaks continue to occur in pockets with the risk of spreading rapidly around the world. Cholera still hits hundreds of thousand people and the surveillance and control of epidemics too often relies on external intervention. Curative services are understaffed and sometimes weakened by lack of resources and poor management. Health planners and health managers should be prepared to tackle endemic and epidemic diseases with appropriate and effective strategies, strengthening the activities of the national health system, with special focus on sub-Saharan Africa and low-income countries.

The initiative of planning training courses for health workers coming both from developed and developing countries is based on the strategy of exchanging resources between North and South. Training of international level carried out in an African Institution reduces costs and maximizes training opportunities for health personnel from Sub-Saharan Africa. The opportunity for health cadres from European countries of having an experience "in the field", i.e. in countries where tropical diseases are endemic, is extremely important for better understanding the reality, the epidemiological scenario and the health challenges of a developing country.

Presentations of control programmes for diseases of public health importance - as they are implemented in endemic countries, laboratory practical sessions on communicable diseases, visits to transmission sites of vector borne diseases, schools, hospitals and dispensaries will offer to participants a unique insight of the health challenges and their possible solutions in an endemic country. Participants will be also guided through group-works to design a project for a public health priority of their choice and will have the chance to be attached to curative services in hospital ward and dispensaries in daily activities.

COURSE at a Glance

Organizing Institution	Ivo de Carneri Foundation, Milan (Italy) www.fondazionedecarneri.it
Partners	 University of Florence, Department of Infectious and Tropical Diseases Azienda Ospedaliera Universitaria Meyer Center for Global Heath, Toscana Region Italian Association Carlo Urbani
Local Counterpart	- Public Health Laboratory Ivo de Carneri - Ministry of Health of Zanzibar
Where	Pemba Island – Zanzibar (United Republic of Tanzania)
When	July 18 – August 5 2016

Course goal

The overall goal is to have an overlook of public health challenges, to understand the role of Public Health Laboratory, and to have a first hand experience in health care in a low-resource country from Sub-Saharan Africa.

Content

First and second week:

- Examples from Control programmes (NTD, TB, Malaria, HIV)
- Maternal and child health
- Safe Water
- Control of epidemicsProject management
- Practical in the laboratory
- Field visits

Third week (optional)

- Clinical work in hospital/dispensary
- How to write a project proposals (group work)

Participants

Twenty (20) participants are allowed to participate in the training. Ten (10) applications are reserved for participants from Italy and industrialised countries and other 10 posts are reserved for African applicants.

Qualifications required for admission

- Degree in Medicine, Biology, Pharmacy, Nursing, Diploma/Certificate in health-related subjects.
- Good knowledge of written and spoken English, with excellent level of listening and comprehension

Cost: Euro 1.500

Cost of course includes: Tuition Fee, Full Board Accommodation, Transfer by charter flight from Zanzibar to Pemba.

<u>Cost of course not includes</u>: international flight from the participant's country of origin, Visa, airport taxes, insurance, personal expenses.

A caution deposit of Euro 250 must be anticipated by the selected participants beneficiaries of full scholarship within 30th May 2016. Full payment by the other participants is due before 30th May 2016.

Scholarships

Two full board scholarships will be offered from AICU to two winners of the Carlo Urbani's Award (only for candidates from Marche Health Institutions, for details see www.aicu.it). In addition, based on availability of sponsors, 10 full scholarships will be offered to African applicants for coverage of all course's expenses, except the international flight from the participant's country of origin to Zanzibar, Visa, airport taxes, insurance, and personal expenses. In order to avoid late cancellation, a caution deposit of 250 Euros must be anticipated by candidates selected for full scholarships within 30th May 2016. The caution will be retained in case of cancellation after that date, or it will be refunded to the candidates with full scholarship at their arrival in Pemba.

Application

Application request should be sent between 15th April and 10th May 2016. Candidates should fill in and send the Application Form (to be downloaded from the website www.fondazionedecarneri.it), Curriculum Vitae (maximum 5 pages) and a passport scan, to the following email address: tmtmgh2015@fondazionedecarneri.it. Candidates will be informed of the selection outcome by the 20th May 2016.

The Venue





The course venue is the **Public Health Laboratory Ivo de Carneri (PHL-IdC)** in Pemba Island (Zanzibar, Tanzania), an advanced Scientific Institution equipped with modern equipment and training facilities. PHL-IdC is located in Wawi, Chake-Chake, Pemba Island. The main building, of 800 m², is divided into several sections: Laboratory (Parasitology, Bacteriology, Virology), Finance and Administration, Training. The conference room can accommodate up to 50 people and is equipped with training facilities (slides and overhead projector, computer link, library). Wireless internet service is available and 24 hours electricity is guaranteed by solar panels and a supply generator. A canteen will take care of the participants with local food. Participants will be accommodated in the PHL-IdC guest house, 2 km away from the PHL-IdC premises, and in nearby hotels; the local staff will be in charge of daily transportation to the venue.

Course programme

FIRST WEEK: PUBLIC HEALTH AND LABORATORY

Monday	Day 1: Introduction	
9.00	Opening of the Course JAMALA TAHIB, DG, Ministry of Health Zanzibar	
9.30	Introduction to the Course Introduction of Participants SAID M Ali	
10.00	PRE-TEST	
10.30	Coffee Break	
	First Session	
11.00	Health system and public health priorities in Zanzibar JAMALA TAHIB / SAID M. ALI	Case study
12.00	Global Health priorities and challenges LORENZO SAVIOLI	Front lecture with plenary discussion
13.00	Lunch Break	
	Second Session	
14.15	Research, training and control activities of the PHL-IdC SHAALI AME / SAID M Ali	Case study
15.30	Break	
16.00	Orientation and guided tour of PHL-IdC SHAALI AME	

Tuesday	Day 2: Surveillance System	
	First session	
9.00	Use and interpretation of data from health management information system (HMIS) SULEIMAN ALI	Front lecture with plenary discussion
	Practical use of surveillance system and HMIS SULEIMAN ALI	Group Work
10.45	Coffee Break	
11.15	Digital mapping and use of GIS AMOUR TAJO / SULEIMAN ALI	Case Study
13.00	Lunch Break	
	Second session	
14.15	Project cycle management: how to write a project proposal MARCO ALBONICO/ CLAUDIA ROBBIATI	Front lecture with plenary discussion

	Break	
16.00	Writing project proposals on Public Health Priorities MARCO ALBONICO / CLAUDIA ROBBIATI	Group Work

Wednesday	Day 3: HIV/AIDS Epidemic	
	First Session	
9.00	HIV/AIDS Control Programme in Zanzibar: Epidemiology, access to ARV therapy, Prevention of Mother to Child Transmission, counselling and surveillance MOHAMMED DAHOMA	Front lecture with plenary discussion
10.45	Coffee Break	
11.15	VISIT TO VCT and STI CLINIC SITI MAKAME	Case study
13.00	Lunch Break	
	Second Session	
14.15	HIV cultural barriers and their management ZAFA (NGO)	Role play
	Break	
16.15	HIV cultural barriers and their management ZAFA (NGO	Focus group discussion

Thursday	Day 4: Tuberculosis	
	First session	
9.00	Tuberculosis Control Programme in Sub-saharan Africa: DOTS strategy, drug access and standard regimens, multidrug-resistant strains KHAMIS ABUU BAKAR	Front lecture with plenary discussion
10.45	Coffee Break	
11.15	Leprosy management challenges in Pemba HASNU FAKI	Community visit and focus discussion
13.00	Lunch Break	diedudeier.
	Second Session	
14.15	TB diagnosis and culture, quality control SHAALI AME / HAJI SAIDI	Laboratory session
	Break	
16.15	TB diagnosis and culture, quality control SHAALI AME / HAJI SAIDI	Laboratory session

Friday	Day 5: Malaria	
	First session	
9.00	The success story of Malaria Control in Zanzibar: combination therapy, IPT, ITN, IRS, Vector control ABDULLAH S. ALI	Case study
10.45	Coffee Break	
11.15	Towards malaria elimination and challenges of sustaining effective surveillance ABDULLAH ALI	Case study
13.00	Lunch Break	
	Second session	
14.15	Laboratory diagnosis of malaria and quality assurance at district level SHAALI AME and Lab staff	Laboratory Session
	Break	
16.15	Laboratory diagnosis of malaria and quality assurance at district level SHAALI AME and Lab staff	Laboratory Session

SECOND WEEK: PUBLIC HEALTH AND LABORATORY

Monday	Day 6: Helminth infections	
	First session	
9.00	STH and Schistosomiasis control in Zanzibar: learning from the past LORENZO SAVIOLI / SHAALI AME	Case study
10.00	Elimination of Lymphatic Filariasis in Zanzibar: a success story? FATMA KABOLE	Case study
10.45	Coffee Break	
11.15	Progress towards Schistosomiasis elimination and challenges for Intestinal Helminthiasis Control in Zanzibar FATMA KABOLE / SHAALI AME	Case study
13.00	Lunch Break	
	Second Session	
14.15	Field techniques for the diagnosis of urinary schistosomiasis, intestinal helminthiasis and lymphatic filariasis SHAALI AME and Lab staff	Laboratory Session
	Break	
16.15	Field techniques for the diagnosis of urinary schistosomiasis, intestinal helminthiasis and lymphatic filariasis SHAALI AME and Lab staff	Laboratory Session

Tuesday	Day 7: Field visits	
	First session	
9.00	Visit to a Primary School SALEH JUMA/AMOUR KHAMIS	Field Visit
10.45	Coffee Break	
11.15	Schisto and intestinal helminths transmission sites SALEH JUMA/AMOUR KHAMIS	Field Visit
13.00	Lunch Break	
	Second Session	
14.15	Traditional Medicine OMAR KHAMIS FUNDI / TRADITIONAL HEALERS ASSOCIATION	Case Study
	Break	
16.15	DNA –based methods for diagnosis on NTDs: a potential tool also for low-income countries TO BE CONFIRMED	Laboratory Session

Wednesday	Day 8: Epidemics and Safe Water supply	
	First session	
9.00	Cholera: the global picture MARCO ALBONICO / SHAALI AME	Front lecture with plenary discussion
10.00	Surveillance of epidemics in Zanzibar SHAALI AME	Case study
10.45	Coffee Break	
11.15	Routine monitoring of water supply in Pemba island MAALIM JUMA	Case study
12.00	Access to safe water in Chake Chake district and dumping site MAALIM JUMA / KHALFAN SHAA	Field Visit
13.00	Lunch Break	
	Second session	
14.15	Water test quality in the laboratory FAKI BAKARI / SHAALI AME	Laboratory Session
	Break	
16.15	Water test quality in the laboratory FAKI BAKARI / SHAALI AME	Laboratory Session

Thursday	Day 9: Other infectious diseases	
	First session	
9.00	Dengue fever, typhoid and other febrile illnesses TO BE CONFIRMED	Front lecture with plenary discussion
10.00	Visit to improved sanitation project (Chake/Kojani) KHALFAN SHAA	Field Visit
10.45	Coffee Break	
13.00	Lunch Break	
	Second session	
14.15	Urine and blood culture and bacteriology practical SHAALI AME/CLAUDIA ROBBIATI	Laboratory session
	Break	
16.15	Urine and blood culture and bacteriology practical SHAALI AME/CLAUDIA ROBBIATI	Laboratory session

Friday	Day 10: Mother and child health	
	First session	
9.00	Experience of the Mother and Child clinic at Gombani and field introduction YAHYA AL SAWAFY	Case study and field visit
10.45	Coffee Break	
11.15	Management of a District hospital SHABAAN / SAUDA KASSIM	Case study
13.00	Lunch Break	
	Second Session	
14.15	Maternal and child malnutrition CLAUDIA ROBBIATI	Case study
	Break	
16.15	Maternal and child health priorities (IMCI) in Pemba SHARIFA HAMOUDI /TBA	Group work/visit to Maternity ward

THIRD WEEK: CLINICAL MEDICINE AND PROJECT PROPOSAL

Monday	Day 11: Clinical work and project proposal	
	First session	
9.00	Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work
10.45	Coffee Break	
11.15	Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work
13.00	Lunch Break	
	Second Session	
14.15	Work on thesis and project proposal	Groupwork
	Break	
16.15	Work on thesis and project proposal	Groupwork

Tuesday	Day 12: Clinical work and project proposal	
	First session	
9.00	Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work
10.45	Coffee Break	
11.15	Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work
13.00	Lunch Break	
	Second Session	
14.15	Work on thesis and project proposal	Groupwork
	Break	
16.15	Work on thesis and project proposal	Groupwork

Wednesday	Day 13: Clinical work and project proposal	
	First session	
9.00	Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work

10.45	Coffee Break		
11.15	Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work	
13.00	Lunch Break		
	Second Session		
14.15	Work on thesis and project proposal	Groupwork	
	Break		
16.15	Work on thesis and project proposal	Groupwork	

Thursday	Day 14: Clinical work and project proposal	
	First session	
9.00	Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work
10.45	Coffee Break	
11.15	Atta Attachment to a MCH Clinic / Chake hospital for internship Dr in Charge	Field work
13.00	Lunch Break	
	Second Session	
14.15	Work on thesis and project proposal	Groupwork

Friday	Day 15: Project proposal presentation	
9.00	Presentations of project proposals ALL PARTICIPANTS	Seminar
10.45	Coffee Break	
11.00	Presentations of project proposals ALL PARTICIPANTS	Seminar
12.30	Final Examination	
13.00	Lunch break	

Before departure: general and health information

Country Data:

Capital: Zanzibar

Population: 1.303.569 (2012 Tanzania Census)

Area: 1.554 km²

Time: + 2 h difference from Italy; + 1 h when in Italy there is legal time.

Languages: Kiswahili and English.

Religion: More than 90% of Zanzibar population are Muslim.

Money: Tanzanian Schilling (TZS)
Phone suffix from abroad: 00255

General Information to enter the country

Passport: a valid passport is needed with validity of at least 6 months at the moment of entering the country.

Entry Visa: need of a TOURIST VISA which can be obtained at Tanzanian Consulate.

Zanzibar is a country with Islamic traditions: to respect local habits it is recommended not to drink alcoholic beverages and dress up with long trousers or skirts and with shoulders covered.

Health Information

Before departure is advisable to consult a travel medicine specialist to be advised about the malaria prophylaxis (in Zanzibar the transmission is very low - less than 5%) and any other vaccinations against endemic diseases. It is advisable to stipulate an health insurance.

In addition, it is recommended to:

- drink bottled water or soft drinks without ice (except in the PHL-IdC were water is tested and drinkable);
- treat the water for alimentary use (boil for 20 minutes and/or filter it);
- avoid raw vegetables and sea food;
- consult a physician if you have any symptoms (fever, diarrhoea, vomiting...).

Vaccination requested: none but yellow fever is asked if coming from endemic areas.

Partners / Sponsors

Azienda Ospedaliera Universitaria Meyer Center for Global Health, Toscana Region







Regione Toscana

University of Florence, Department of Infectious and Tropical Diseases





Under the auspices of the Italian Ministry of Foreign Affairs and International Cooperation



Ministere degli Nffari Esteri e della CoeperazioneInternazionale



associazione italiana carlo urbani

A special mention to the Italian Association Carlo Urbani (AICU) who has supported the Ivo de Carneri Foundation (IdCF) for the implementation of training activities from the very beginning. Our grateful thoughts go to Dr Carlo Urbani, colleague and friend who initiated this training philosophy based on exchange from developed and developing world in collaboration with the IdCF back in 2000 in Macerata (Italy) and who keeps supporting us, by sharing both principles and ideals, through the Association established in his name.