MIH
REPORT
1991 and 1992

MAURITIUS INSTITUTE OF HEALTH
PAMPLEMOUSSES
INTRODUCTION

This report covers an important two-year period in the history of the Institute, marked by the implementation of the MIH Act. 1991 saw the appointment of a full-time Executive Director, followed in the middle of the year by the coming into function of the Executive Board. The Board proceeded with the setting up of its Organigram and after consultation with the Ministry of Civil Service Affairs and the Pay Research Bureau, drafted the Schemes of Service for most of the proposed posts; from mid-1992 it proceeded with the actual recruitment, a process which is not yet complete.

A GLIMPSE AT 1989-90

To appreciate better the development of the Institute during the period under report, it is important to look back to the 1989-1990 period.

Some extracts from the Report on the Organisational Structure of the MIH, submitted by a visiting Consultant from Australia in November 1989 give a good idea of the prevailing situation:
- "...Lack of enthusiasm among some of the staff at the MIH"
- "What is noticeably lacking in the present staff of the Institute is team-spirit, an ability to work effectively together"
- "The lack of team-spirit among some of the present staff has to be addressed immediately, if MIH is to set an example in its own contributions to health development. This can be achieved to some extent by training in team-work, but ingrained attitudes are often difficult to change"
- "In the appointment of staff to these positions, the goals of the Institute should not be sacrificed for the interests of individuals"

Furthermore the relations prevailing between the Ministry and one section of the Institute were far from happy during the 1989-90 period, with one of the Directors of the Institute sending a series of letters against his Executive Director/Permanent Secretary of the Ministry of Health, addressed direct to a wide audience, against all established procedure.

When the Director International Training, wanted the services of a Research Assistant to facilitate a Training session in the Fertility Management Course he had to write to his colleague the Director Research and National Training, for his permission, and the latter wrote back, refusing the request! Such was the legacy inherited by the Board and the Management in 1991

BOARD’S RECRUITMENT POLICY

In setting up its staffing structure (Organigram), the Board was guided by the following principles:
(a) the Establishment to be as small as possible, in the interest of cost-effectiveness;
(b) the interests of the Institute to prevail over individual interests;
(c) the Institute to aim as far as possible towards financial self-sufficiency.

The Organigram was further designed to achieve the following:
(a) do away with the previous ‘National’ and ‘International’ divisions, and replace them by ‘Research’ and ‘Training’, in line with functional logic and the recommendations of a visiting Consultant;
(b) reduce the number of tiers or “levels” on the Technical side. A small institution like the MIH had no less than four tiers in each of its two technical sections.

The recruitment exercise by the MIH proceeded “pari passu” with the reversion of Ministry of Health staff to their substantive posts, a process which was accelerated, inter alia, by promotion to

OBJECTS OF THE INSTITUTE

a) to organise the training of local health personnel, as well as overseas participants, in accordance with such programme as may be approved by the Board;
b) to carry out such health systems research as may be approved by the Board;
c) to act as a focal point and resource centre for the production, exchange and promotion of health learning and health information material;
d) to provide advisory services in matters of health care;
e) to perform such other functions not inconsistent with the objects specified above, as the Minister may refer to the Institute;
f) to co-operate with other similar institutions and regional and international organisations in order to promote the objects specified in paragraphs (a), (b) and (c).
a senior post. In any case, all the MOH Staff would have had to revert and be replaced by MIH-recruited staff, a process which was the inevitable outcome of the passing of the MIH Act.

By the end of this period, the Institute seemed to have got over most of its teething problems. A review of the General Conditions of Work, the disciplinary machinery, completion of the recruitment exercise were some of the main issues to be addressed. The transition from the Ministry to the Institute had, on the whole, become an accepted reality. There was marked improvement in team spirit, the new staff integrating very well, the MIH was poised for the take-off.

A Training and Research arm of the Institute cannot operate in a vacuum. It can only, nay, it should only carry out its activities according to the needs felt by the Ministry thus reflecting national rather than institutional interests. The intensity of activity at the MIH, will be directly proportional and will reflect the use made of it by the Ministry. It is fortunate in this respect, that there is a strong in-built representation of the Ministry of Health on the Board to ensure relevance of the Institute’s programme.

HISTORY OF THE INSTITUTE

The Origin of the Institute goes back as far as 1977 when Mr. R. Salas, the Executive Director of UNFPA was looking for a Training Centre for the region of Sub-Saharan Africa. He was impressed with the progress made by Mauritius in reducing its fertility rate through well organised family planning by governmental and non-governmental organisations. Mauritius, situated not far from the African sub-continent, politically stable and bilingual (English & French) was chosen as the ideal location for this Regional Training Centre. In 1980, the building situated near the SSR Hospital in Pamplemousses housing the dormitory for nurses in training was identified as the project site. The infrastructure was modified and converted into a training centre having a modern lecture theatre, library, conference room, printing room offices and catering facilities.

In 1982, teaching activities started with a series of courses in family health given twice a year in English & French for International and National participants. In 1986, a new project was started for provision in fertility management and by the end of 1988 more than 272 participants had been trained in clinical family training with elements of management and IEC. The courses were conducted alternately in English and French. In 1989, another project for fertility management training started but this time the status of the Regional Training Centre was to be changed as the Mauritius Institute of Health was about to be conceived.

In the early 80s, the Ministry of Health felt that there was a need for the Ministry to provide systematic training and continuing education for its Health Personnel. At the Ministry of Health’s request, Professor Atam Prakash from the All India Institute of Medical Sciences came to Mauritius in October 1980 as a W.H.O. short term consultant to advise on the training needs of the health personnel generally and on how to improve training programmes. He recommended the setting up of an Institute of Health Sciences. In 1983, Prof. B. Osuntokun, another W.H.O. short term consultant also came to Mauritius to advise on training needs for the health personnel and, also recommended the setting up of an Institute of Health Sciences.

Another milestone in the development of the Institute, was reached, subsequent to a study carried out by the Australian International Development (AIDAB) which visited Mauritius to investigate the possibilities of providing Australian assistance to the health care. The AIDAB project recommended the implementation of a project for the operation of a pilot Health Centre where there will be an integrated health delivery system which would pave the way for the setting up of an Institute. AIDAB agreed to the financing of the project and implementation of the 2½ year pilot project started at the Lady Ramgoolam Health Centre in December 1987. One year after the project started, and in the light of progress made with regards to the provision of care, training and research, the Ministry of Health felt in consultation with the Australian Resident Adviser that it was time to proceed with the implementation of Phase II of the Project which would provide for the formal setting up of an Institute of Health which would provide all in-service training and research activities of the Ministry in the field of Primary Health Care.

Negotiation started by the end of 1985 amongst the following organisations:-
1. UNFPA which was already financing training at the Regional Training Centre set up in 1982.
2. WHO which was executing all UNFPA funded training.
3. GOVERNMENT OF AUSTRALIA which had a big input in the pilot project in integrated Primary Health Care and had recommended the setting up of an Institute of Health to provide in-service training and continuing medical education for the health staff. The outcome of the negotiation was positive and the MIH came into being in January 1989 with the appointment of an acting Executive Director and two Programme Directors, one for National Training and Research and the other for International Training. Regional Training
in fertility management funded by UNFPA and executed by WHO continued as before but now as a part of the Institute. Research activities which had already begun as part of Health Systems Research project now also became part of the Institute. National Training activities which previously had been carried out by other units of the Ministry were now assigned to the MIH. In late 1989, the Mauritius Institute of Health Bill was passed in Parliament with the main objects of organizing training of health personnel and carrying out of health systems research. The Bill made provision for the MIH to be managed by a Board consisting of a:

(a) Chairman
(b) Executive Director of the Institute
(c) Nine other members representing various interests.

With the enactment of the Bill, the MIH became a Parastatal body under the umbrella of the Ministry of Health. The new Executive Director appointed by the Prime Minister was in post in January 1991 and the Executive Board was subsequently appointed and met for the first time in July 1991.

SOME HIGHLIGHTS OF 1991, 1992

The period under review saw a continuation of the usual activities of the Institute, which are listed elsewhere. Mention will only be made here of some innovative activities:

(a) "Journée de Réflexion" A full day of discussion and reflection by the MIH staff on the future of the MIH took place in a relaxed environment away from the worksite, to give a chance to staff to look at the organization in its present and future setting.

(b) The Quality Assurance Seminar organized jointly by the Ministry of Health, Mauritius Institute of Health and the National Health Council, which started the campaign to sensitize patients as well as health staff to the need for "quality" of care as opposed to just "treatment".

(c) The Patients' Satisfaction Survey which acknowledged the patients' right to express an opinion on certain aspects of their treatment, and on their right to information.

(d) Communication with Health Personnel In keeping with its responsibility in the field of information, laid down in the Act, the Institute sent a circular letter to all Consultants and Specialists in the Government Service, focussing on the need for them to train their junior Colleagues, and on the importance of Continuing Medical Education. Another letter was later sent to all locally registered doctors inviting them to make good use of the postgraduate lectures given periodically by visiting Professors, specially from Bordeaux University in the context of the France-Mauritius Cooperation. This communication effort will be strengthened in future, leading eventually to a newsletter.

(e) A Computer Training Section was set up, to add an additional but much needed dimension to the training vocation of the Institute. Operating with the freedom and flexibility of a "private" organisation, the Institute was able to get this section to pay for itself, without having to draw upon the MIH budget. This should prove an invaluable asset to the Ministry of Health.

UNIVERSITY OF BORDEAUX - MIH TRAINING PROGRAMMES

1991 saw the second half of the Course leading to "Diplôme en Santé Publique" organised by Bordeaux University with the administrative and logistic support of the Institute. 1992 saw the holding of the one-year course in "Santé Communautaire" with "Graduation" Ceremonies crowning the two courses, held at the University of Mauritius and the Mahatma Gandhi Institute respectively. Simple research projects of great practical value were carried out by the participants as part of their training, and were presented in front of a panel of Jury before the final Ceremony. Some interesting findings emerged, which should prove a useful tool for management.
LIST OF “MÉMOIRES” PRESENTED FOR DIPLOME D’UNIVERSITÉ DE MÉTHODES EN SANTE PUBLIQUE (1991)

1. Analyse comparative de la distribution des facteurs de risque de diabète non insulino-dépendant dans deux populations appariées: malades et non-malades.
2. Épidémiologie des Cancers à Maurice. Analyse rétrospective préalable à la constitution d’un Registre des Tumeurs.
4. Épidémiologie de la Tuberculose pulmonaire à Maurice. Analyse des facteurs de risque en fonction de surincidences géographiques.
5. Evaluation épidémiologique de l’importance des Parasitoses intestinales à Beau Bassin, Île Maurice.
7. Surveillance de la grossesse et de la première enfance. Analyse des données recueillies à Rivièro Noire, dans une zone rurale.
9. Épidémiologie du suicide à Maurice. Étude dans le district de Flacq.
10. Surveillance de la grossesse et de la première enfance. Analyse des données recueillies dans une zone urbaine.
11. Analyse épidémiologique des urgences reçues à l’Hôpital Victoria de Candos.
15. Etude de la faisabilité d’une prise en charge ambulatoire des malades psychiatriques par le système de soins de santé communautaire mis en place à Maurice.

LIST OF “MÉMOIRES” PRESENTED FOR DIPLOME D’UNIVERSITÉ EN SANTE COMMUNAUTAIRE (1992)

1. Surveillance de la grossesse à Mahébourg Area Health Centre.
2. Épidémiologie des accidents à Bel Air Area Health Centre.
3. Utilisation des antibiotiques chez les enfants de 5 à 12 ans avec infections aigues des voies respiratoires au Centre de Santé Communautaire Eastern.
4. Les blessures oculaires au Subramania Bharati Eye Hospital Juillet à Octobre 92.
7. Etude sur le problème de la ‘gale’ au Centre de Santé Communautaire du Sainte Croix.
8. Absence remarquable pour le vaccin anti-rougeoleux au Centre de Santé Communautaire de Phoenix. Pourquoi?
9. La Planification Familiale à Stanley/Rose Hill. Progrès ou décadence.
10. Étude sur l’environnement de Santé Publique au Centre de Santé Communautaire de Palma.
11. La consultation externe de pédiatrie à l’Hôpital de Flacq.
12. Les personnes âgées et le Centre de Santé Communautaire de Plaine des Roches.
15. Diagnostic de Santé Publique à Goodlands.
16. Étude sur l’environnement de Santé Publique au Centre de Santé Communautaire de Bambous.
17. Analyse des programmes de Santé au Centre de Santé de Triolet.
18. Utilisation des antibiotiques au Centre de Santé de Secteur de Castel.
19. Le Centre de Santé de Secteur Dr. I. Goomany et le diabète.
20. Étude épidémiologique du diabète au Centre de Santé de Belvédère.
22. Degré de satisfaction du malade hospitalisé à l’Hôpital de Flacq.
23. Les problèmes causés par la ‘gale’ au Centre de Santé de Curepipe Road.
"JOURNÉE DE REFLEXION"

A full-day "Journée de Reflexion" was held on Wednesday 8th January 1992 at the Mahatma Gandhi Institute, Moka, away from the work-site to enable the technical staff of the Institute including the International Training Officers to think and plan about the future of the MIH.

The questions which the group was asked to consider related to the organization: its goals, strategies and activities needed in order to achieve the defined goals. In particular they were asked:
(i) What are we here for?
(ii) What are we trying to achieve?
(iii) How shall we achieve it? (strategies)
(iv) What activities does each strategy call for?
(v) What resources shall we need?

A SWOT (Strengths-Weaknesses-Opportunities-Threats) Analysis of our organization revealed the following:

A. **Internal Strengths**
   (i) The MIH's autonomous structure is designed to encourage initiative and creativity, and facilitate decision-making with a minimum of red tape.
   (ii) The composition of the Board ensures relevance of the Institute activities to the needs of the country.
   (iii) The Executive Board's commitment to recruiting high-quality or at least high-potential staff.

B. **Internal Weaknesses**
   (i) A feeling of insecurity leading to poor commitment exists amongst some staff. This was unlikely to improve until substantive appointments were made, and the staff knew where they stood.
   (ii) The MIH was in a transitional period. Even the staff selected for temporary secondment to MIH were still not available.
   (iii) Absence of proper functioning administrative procedures including disciplinary machinery.
   (iv) Difficulty of release of MOH Staff to attend training courses whether as participants or trainers. The system does not reward good performers.

C. **External Opportunities**
   (i) Close links existing with MOH, WHO, UNFPA, UNICEF, etc.
   (ii) Good networking with BordeauxII and University of New South Wales, International Committee on Management of Population Programmes (ICOMP), Commonwealth Regional Health Community Secretariat (CRHCS).

D. **External Threats**
   (i) The emergence of other training centres in Africa, e.g. the WHO Training Centre at Kigali, Rwanda.
   (ii) The relationship with UNICEF as a result of past actions of one or two members of the MIH Staff.

A full report on the "Journée de Reflexion" was published and is available at the M.I.H.

**QUALITY ASSURANCE SEMINAR**

To launch the Quality Assurance concept (as The Road To Better Care), a Seminar was organised jointly by the Mauritius Institute of Health, the Ministry of Health and the National Health Council at the Octave Wiehe Auditorium on the 1st June 1992. A full day seminar was divided into an Inaugural Session presided by the Honourable Dr. P. Nababsing, Deputy Prime Minister and Minister for Health, followed by a tea-break and a morning working session chaired by the Chief Medical Officer, Dr. A.K. Purran on the various aspects of implementation of Quality Assurance. An afternoon session chaired by Dr. C.M. Pillay examined how the Consumers, Managers and Providers can each help improve the Quality of Care.

This Seminar attracted 270 Participants and a full Report was published and is available at the M.I.H.
PATIENTS' SATISFACTION SURVEY

Patients have traditionally been passive recipients of the health care dispensed in the various stations. They have never been given the opportunity to voice their feelings or views on such care, and yet, in their dual capacity as recipients as well as funders of the service, they play the central role in any health system. When the Institute with the Ministry of Health and the National Health Council jointly started the survey, after due consultation with the Regional Hospitals involved, many eyebrows were raised. The survey was looked upon with suspicion if not downright resentment in many circles. However, the survey itself proceeded smoothly enough, and turned out to be a success. One interesting feature was the use of H.S.C. Girls Students for the actual interviewing of the patients who had already been discharged from the wards and who were in a better position to express a free and independent view. The findings relating to the elements of care (information about their conditions, courtesy of staff, cleanliness, meals and other facilities) were on the whole favourable, while pinpointing certain areas where improvement was necessary. A full report was also published and is available at the M.I.H.

A NEW APPROACH TO HSR

(i) A new approach, a new culture has been instilled in HSR during this period. Accent is now placed on simple, inexpensive and relatively quick studies, as illustrated by the Patients' Satisfaction Survey. The "raison d'être" of Health Systems Research being to find solutions to existing problems on the basis of existing data, it is obvious that solutions which are proposed two years later as in the case of the 1989-90 projects may no longer be relevant.

(ii) Whereas the budget for the three 1989-90 projects ran into hundreds of thousands of Rupees, the Patients' Satisfaction Survey, admittedly a simple study, cost no more than Rs. 6,503. of which nearly half went on printing and stationery. Higher School Certificate students acted as interviewers without payment, the Institute only paying a lunch and transport allowance. The Institute has issued Certificates to the participants in appreciation of their help. The unanimous opinion of all MIH staff concerned with the project is that the students proved better interviewers than the Workers who were previously paid for such projects. This practice provided furthermore a unique educational experience for the students.

(iii) Long after the 1989-90 HSR training workshops were completed, a correspondence battle raged between the Ministry and the HSR unit over payments (overtime, allowances and per diem) to some staff of the Ministry and MIH involved in the HSR projects. Other problems had cropped up in the past regarding payment to certain MOH Staff for Data Analysis on behalf of UNICEF. By contrast, in keeping with the new Approach, for the Patients' Satisfaction Survey, the MIH completed the Data Analysis using MIH staff and MIH computers, without any extra payment, without any problem, and in less than a fortnight. The new approach at MIH thus lays stress on motivation, productivity and quality, while discouraging the unhealthy "money" and "allowance" mentality.

IMPLEMENTING THE NEW PHILOSOPHY OF THE PUBLIC SERVICE

The Institute of Health apart from the cost-efficiency and economy approach, has tried to adopt other guidelines laid down by the Ministry of Civil Service Affairs. A small step towards Flexitime was adopted when the staff were consulted and expressed a desire to change the working hours from 9.00 a.m. - 4.00 p.m. to 8.30 a.m. - 3.30 p.m., to allow them to avoid the morning and afternoon traffic bottlenecks through Port Louis.

Similarly great importance was attached to the proper filling of the Attendance Register. With one exception, the staff complied with the instructions from the Ministry of Civil Service Affairs to the Public Service, and by the end of 1992 the problem regarding this exception was on the point of being solved.
THE FERTILITY MANAGEMENT COURSE

The Course in Clinical Family Planning remains the flagship of the Institute, and this over the years proved a success. It trains doctors and nurses for Sub-Saharan African countries in Family Planning (Fertility Management). The accent is now placed on Training of Trainers (rather than training FP Agents simply) so as to create a multiplier effect.

Since 1991, great attention is paid to the social aspects of the Course. Two full day Sunday excursions, to the beaches of the North and East, and South and West respectively. A Séga night in one of the Beach hotels, are arranged to give the participants a chance to get to know Mauritius. The biggest innovation is undoubtedly the Cultural Evening where the participants, the MIH staff and guests to a variety of African dishes, and follow up with their traditional dance and music night. In 1992 this Evening was organized as part of the UN celebrations.

December 1992 marked the end of the contract of the Anglophone International Training Officer, a gynaecologist, which had been renewed on two occasions already. A half-time gynaecologist was recruited locally, from the beginning of September 92. During the last four months of 1992, the two gynaecologists worked together during the Anglophone Course of 1992 and together prepared the first Anglophone Course of 1993. Two Training Officers, one doctor with more than ten years experience in the local Health Service including obstetrics at Regional Hospital and Primary Health Care levels, the other a young lady doctor who worked for some time as Health Educator at the University of Mauritius, and who was an English Scholarship “laureate”, have been closely involved in all the successive Fertility Management Courses since their arrival and their involvement augurs well for the future of the Course.

For the new (1992-1995) Project, the Executive Director acting in close consultation with the Minister, has renegotiated with UNFPA the terms of the Government of Mauritius input. With Mauritius meeting increasing difficulties to meet the escalating costs of health care, specially with the commitment to high technology medicine, and on the other hand with the MIH being expected to become financially autonomous, the Mauritian contribution to the Project could not be maintained at its previous level. UNFPA agreed to refund to the MIH most of its contribution to the Fertility Management Project. A reduced Mauritian contribution is however maintained.

### FERTILITY MANAGEMENT COURSE PARTICIPANTS BY COUNTRY 1991, 1992

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<th>ANGLOPHONE</th>
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<th>FRANCOPHONE</th>
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Sub-total 56  80

Total Countries 30
Total Participants 136
**Word Processing**

The MIH has a long history of computer utilization. In fact, the computer made its entry as early as 1986 through the utilization of VOLKSWRITER, a Word Processing Programme by the Project Secretary. Computer equipment was donated by the UNFPA through the Project, by AIDAB and by French Cooperation. ICOMP having already donated a computer the previous year, offered us our first laser printer in 1991.

**Data Analysis**

In 1991, Data Analysis for the Patients’ Satisfaction Survey was carried out, as already mentioned, by the Staff of the Mauritius Institute of Health using EPI INFO Programmes. For the previous ISR Projects and for previous studies commissioned by UNICEF and carried out by MIH, the Data Analysis had been contracted out. The participants in the Bordeaux Course in Santé Publique did their own data analysis on the MIH Computer donated by the French Cooperation, using the EPI INFO programme.

**Computer Training Room**

In 1992, the MIH purchased 10 computers and hosted a Computer Update Course commissioned by UNICEF for its staff from different African stations. The MIH now have a fully equipped Computer Training Room, with special equipment for overhead projection.

A couple of general courses were organized to introduce all the MIH Staff to Disk Operation System, Norton Commander, Word 5.5, Excel, Lotus 1-2-3, Database III.

Contacts have been established with the Ministry of Civil Service Affairs and Sitrac. It is expected that the MIH Computer Training facilities will be utilized fully for some of the training requirements of the Ministry of Health.

**Desktop Publisher**

At the end of 1992, the MIH was poised to set up a Desktop Publishing Unit. Desktop Publishing is the use of a system based on microcomputer technology for the purpose of producing high quality printed matter which may include text, lines and graphic images. This report is being published by our Desktop Publishing Unit. The Institute has arranged for Desktop Publishing training to be provided to a Clerical Assistant and will gradually expose more personnel to such training.
MARKETING

The absence of a serious marketing effort from the MIH has been noted in the past, in the context of the Fertility Management Course. Two activities have been recently completed in this sector. A video cassette has been commissioned by the Mauritius Institute of Health focussing on the Fertility Management Course. This is intended to be circulated amongst the relevant international agencies and the Ministries and NGOs concerned. Brochures on the Mauritius Institute of Health focussing on the marketing of the Fertility Management Course have been prepared. English and French versions are available. With the newly recruited professional staff not joining the Institute until September 1992, it was not possible to produce a Newsletter. This should be the priority of the Institute in future.

TRAINING OF STAFF

The staff is the Institute’s most important asset. Any effort to upgrade the quality of the staff is a worthwhile investment. A large number of training courses, workshops and seminars had been provided in the past, under AIDAB, the Joint Project WHO, Commonwealth Regional Health Community Secretariat and other agencies. Most of these sources have however dried out, the Institute has nevertheless been doing its best to provide training to its staff. The Staff of the Institute has been exposed to all visiting professors and have on the whole who derived invaluable benefit from these sessions.

Training Workshop in Family Planning Programme. Mrs. Soobraty who was selected and earmarked to come to the Mauritius Institute of Health temporarily as Training Officer, attended this workshop in Kuala Lumpur in January 1992. Staff earmarked for temporary posting at the Mauritius Institute of Health as well as staff appointed were given the opportunity to be exposed to and gradually assist Dr. R. Bandaranayake in his EDUCATIONAL METHODOLOGY module of the Fertility Management Course, thus giving them precious on-the-job training.

TRAINING OF TRAINERS IN HSR.

Dr. Manraz, Pathologist, Messrs. Ameerbeg, Mahadoo, Research Assistants MIH, Miss How, Nutritionist and Mr. Ramsamy, Statistician MIE, (personally invited by the Organizers) attended a Training of Trainers in Health Systems Research methodology.

FINANCE

The Financial System is a very complex one, with the following elements intertwined:

(1) the transition from a part of the MOH towards an MIH budget;
(2) a MOH input into the MIH budget in the form of grant.
(3) a Fertility Management Project input into the MIH budget, with its own separate accounting and auditing. Any unspent sum under this Project cannot be utilized for any other purpose.
(4) an input of the MIH/Government of Mauritius into the Fertility Management Course. For example for the last Fertility Management Project Agreement covering the years 1989-91, the UNFPA Finance Rs. 25,029,000 and the Government of Mauritius input was Rs. 3,437,600.
(5) the difference in the Financial years (July-Jan for the MOH/MIH, and Calendar year for UNFPA).
(6) revenues accruing from MIH activities as a result of Research Projects or Training Courses commissioned by other agencies.
(7) a donation from the Australian Government (under the AIDAB Project, which is destined for spending on books and other training material, library, encyclopedias). This should have been spent by mid 1991 but an extension of the dateline has been granted. It has been fully utilized earlier in the year.
(8) The MIH as the Executive Agency for the courses organised by Bordeaux University in the context of the Franco-Mauritian Cooperation, spends money on the conduct of those courses and then claims refund which is usually effected at the end of the one-year course. The MIH is financed from two main sources:

(a) A grant from the Government through the Ministry of Health. The financial year is from July to June.

(b) A UNFPA input, a major contribution to the running of the Fertility Management Project.

For the last Fertility Management Project Agreement covering the years 1989-91, for example, the UNFPA input was Rs. 25,029,000 and the Government of Mauritius input Rs. 3,437,600. During the period covered by that Project the Institute was still part of the Ministry, but under the new Project to cover 1992-1995, the MIH, as an autonomous body, was meant to aim at financial autonomy. Government/MIH input at the previous level was no longer possible. The new Project provides therefore for the reimbursement to the MIH of most of what it contributes towards the running of the Fertility Management Training Programme. The Mauritius Government, however, keen to maintain its participation in the Project will maintain an input though at a lower rate, in the new Project.

Apart from the above inputs, the MIH expects to generate some income from its activities, commissioned by external agencies. The MIH hopes thus to raise at least one third of its recurrent budget expenditure by the end of 1993. The grant to be awarded to the Institute by the Central Government will correspondingly be reduced. This fraction is expected to become more important with time.
ORGANIGRAM AND STAFFING SITUATION AS AT 1st MAY 1993
These budget proposals are on an "ideal basis", i.e. on the assumption that all the organigram posts are filled.

### A. PERSONAL EMOLUMENT

<table>
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<th>NO.</th>
<th>DETAILS</th>
<th>92/93</th>
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<tr>
<td>1</td>
<td>Executive Director</td>
<td>180,000.00</td>
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<td>1</td>
<td>Assistant Director</td>
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<td>2</td>
<td>Senior Training/Research Officers</td>
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<td>1</td>
<td>Training Officer Midwife/Tutor</td>
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<td>6</td>
<td>National Training/Research Officers</td>
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<td>3</td>
<td>Research Assistants</td>
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<td>3</td>
<td>Typist/Stenographers/Confidential</td>
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<td></td>
<td>Assistants</td>
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<td>2,106,000.00</td>
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### B. EXECUTIVE AND CLERICAL CLASS

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<td>1</td>
<td>Administrative Secretary</td>
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<td>1</td>
<td>Establishment Officer</td>
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<td>Finance Officer</td>
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<td>1</td>
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<td>Documentalist</td>
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<td>Gratuity for Executive Director</td>
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<td>Overtime</td>
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<td>Pensions (25%)</td>
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<td>2,631,720.00</td>
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</table>

### C. OTHER CHARGES

- Travelling and Transport of Staff: 1,025,200.00
- Incidental and Office Expenses: 100,000.00
- Electrical Energy: 82,200.00
- Supplies: 250,000.00
- Books and Periodicals: 40,000.00
- Seminars and Training Courses: 240,000.00
- Telephone Bills, Telex, Telefax: 101,460.00
- Fuel, Oil and Spares: 72,000.00
- Maintenance - Vehicles: 180,000.00
  - Building: 120,000.00
  - Equipment: 55,000.00
- Uniforms: 6,000.00
- Laundry: 9,600.00
- Water Rates: 12,000.00
- Licences - Vehicles:
  - Insurance: 85,000.00
  - Licences: 12,000.00
  - Equipment: 97,000.00
  - Building: 45,000.00
- Report and Printing Costs: 180,000.00
- Sundry: 250,000.00

### D. CAPITAL EXPENDITURE

- Furniture: 90,000.00
- 7,693,180.00
A
806,100 US$ Over 4 years or 3,022,875 MR per year
PART OF PROJECT FUNDED BY UNFPA
Equipment Fellowship Resource Persons

B
MR 1,350,100 PART OF PROJECT FUNDED BY G.M
Part of staff, Utilities Vehicles maint. Fueling Rental

C
NON-PROJECT ACTIVITIES OF MIH 2,649,900 RUPEES FUNDED BY GM
National Training Research Administration

PROJECT: SUPPORT FOR TRAINING TRAINING IN FAMILY HEALTH

MAURITIUS INSTITUTE OF HEALTH

(B) PART OF PROJECT FUNDED BY GM FOR 1992 ESTIMATED AT 1,350,100 MR.
(C) NON-PROJECT ACTIVITIES OF MIH LIKELY TO BE 2,649,900
TOTAL LIKELY BUDGET (with many posts unfilled) 4,000,000
SUMMARY OF MIH ACTIVITIES: 1991 - MID 1992

TRAINING

1. A Course in Fertility Management organized in Rodrigues for Nurses/Midwives, followed by an Evaluation and Award of Certificates

   7 Jan. - 1 Feb 1991

2. Public Health Course (Bordeaux):
   Module "Épidémiologie Expérimentale"
   as part of the Course leading to the "Diplôme en Santé Publique"
   organized by Bordeaux University and the MIH in the context of the Franco-Mauritanian Cooperation.

   23 - 29 Jan. 1991

3. Public Health Course (Bordeaux):
   Module "Démographie"

   5 - 8 Feb. 1991

4. 17th Fertility Management Course (English Version)
   for health professionals engaged in FP, from the countries of Sub-Saharan Africa.

   11 Feb. - 5 Apr. 1991

5. Orientation Course for Doctors Newly Recruited
   by the Ministry of Health, to introduce them to the realities of the Mauritian situation, including the disease pattern, and the administrative set-up.

   25 - 29 March 1991

6. Public Health Course (Bordeaux):
   Module "Épidémiologie Approfondie"

   27 Mar. - 3 Apr. 1991

7. Norplant Introduction Seminar

   12 April 1991

   The Norplant is an implantable contraception with a five-year duration of action. Representatives of the profession and various interests as well as relevant NGOs were invited.

8. 18th Fertility Management Course (French Version)

   15 Apr. - 7 Jun. 1991

9. Public Health Course (Bordeaux):
   Module "Economie et Développement et Aide à la Décision"

   15 - 22 May 1991

10. Fertility Management Course organized by staff from the MIH in Madagascar itself, making use of local resources wherever possible. [FISA]

    9 - 26 June 1991

11. Organizing the UNFPA/WHO Evaluation Mission of the Fertility Management Project by Drs. Vêkéman, and Maruping,
 the object being to help prepare the next Project in the light of evaluation of the Project ending in Dec. 1991.

    3 - 14 June 1991

12. IEC Course - MOH/MIH/UNFPA (DR. Johnston)

    UNFPA, Nairobi

    Course in Information, Educational Communication, for the benefit of professionals of the Health Sector.

    1 - 4 July 1991

13. World Population Day Seminar, MIH

    11 July 1991

14. Public Health Course (Bordeaux):
   Module "Information"

    22 - 27 July 1991

15. Commonwealth Regional Health Community Secretariat Training of Interviewers Course (Mr. S. Ameerbeg)
    In preparation for a multi-centre study in the Prevalence of Contraception methods.


16. 19th Fertility Management Course (English Version)

17. Meetings of Task Force convened to set up Guidelines for Management of Diabetic Patients, MIH in association with NCD Unit of MOH as part of the implementation process of an HSR study carried out in 1988.

18. HSR Meeting (Report on Botswana Training of Trainers Course) 11 October 1991


All the Health Inspectors of the Ministry were exposed, in two batches, to a part-time Upgrade and Update course on the various aspects of the Health Inspectorate duties.


A team of French Gynaecologists from Bordeaux discussed and should experience with their local counterparts.


24. "Diplôme en Santé Publique" - "Présentation de mémoires" in the MIE Lecture Theatre followed by "remise des diplômes" at the Burrenchobay Hall, University of Mauritius.

25. "Diplôme Universitaire de Méthodes en Santé Communautaire" (Bordeaux) 17 - 21 Feb. 1992

Module "Informatique et Statistique"

26. "Diplôme Universitaire de Méthodes en Santé Communautaire" (Bordeaux) 4 - 9 March 1992

Module "Épidémiologie, Formation de Base"

27. Organizing a Community Health Workers Course in Rodrigues (UNICEF); 3 Facilitators from MIH, supplemented by locally based health personnel.

28. 21st Fertility Management Course (French Version) 6 Apr. - 15 May. 1992


Communautaire (Bordeaux): Module "Médicaments Essentiels"

30. "Diplôme Universitaire de Méthodes en Santé Communautaire" (Bordeaux) 18 - 22 May 1992

Module "Documentation"

31. Health Inspectors Course (2nd Batch) 11 May - 10 Jun. 1992

32. Orientation Course for newly recruited Medical Officers at MIH and evaluation.

33. Quality Assurance Seminar at the Octave Wiehe Auditorium (jointly with MOH and National Health Council) 1 June 1992

34. "Diplôme Universitaire de Méthodes en Santé Communautaire" (Bordeaux) 15 - 19 June 1992

Module "Recherches Épidémiologiques en Neurologie et Psychopathologie"


36. Accidents and Emergencies - Refresher Course for Medical Officers Prepared and submitted to MOH

37. Workshop on Contraceptive Technology for Doctors (organized by the Institute but held in Maseru, Lesotho) 28 Sep. - 1 Oct. 1992
38. 23rd Fertility Management Course (French Version) 5 Oct. - 14 Nov. 1992
Anglophone countries of the Region
40. "Diplôme Universitaire de Méthodes en Santé 9 - 13 November 1992
Communautaire" (Bordeaux)
Module "Accidentologie, Handicap, Vieillissement"
41. Seminar on Hazardous Substance Abuse 9 - 27 Novembre 1992
in conjunction with the Occupational Health Unit
of the Ministry of Health.
Facilitators from WHO (Euro)
42. Training Course "a la carte"in Family Planning 16 - 27 Novembre 1992
for 3 senior Tanzanian Health Officials
(funded by Population Council)
43. Seminar on Health and Lifestyle of Youth 26 November 1992
in conjunction with Nutrition Unit of the
Ministry of Health.
44. "Diplôme Universitaire de Méthodes en Santé 30 Nov. - 4 Dec. 1992
Communautaire" (Bordeaux)
Module "Vaccinologie et Pédiatrie"
45. "Cours de formation en système de Gestion de la 30 Nov. - 4 Dec. 1992
de Logistique pour 3 haut cadres des services de
planning familial de Madagascar."
46. Orientation Course for Newly Recruited Medical 14 -18 December 1992
Officers
47. Training Course for Community Health Worker October 1992 (one full day Training, weekly during 9 months)

RESEARCH
1. Finalizing, Printing and Publication of Reports August 1991
on 3 HSR Projects, arising from 1989 - 1990 Training Courses.
Dissemination of these Reports, followed by three Dissemination
Meetings where the Reports were discussed.
2. Birth Asphyxia Survey - All Births for 3 months May - July 1991
at SSRNH
3. Evaluation of MOH's NCD Programmes July - November 1991
4. Patterns of Contraceptive Use - Multicentric Study August - September 1991
in five African Countries with Commonwealth Regional
Health Community Secretariat
5. Paper on Government International Vaccination Centre 1992
6. Collection of Baseline Data on Breastfeeding for UNICEF
Jan. - Feb. 1992
7. Patient Satisfaction Survey in 4 Regional Hospitals March - May 1992

MISSIONS ABROAD
(Dr. C. Mhango, Mrs. K. Ba and Mr. P. Jadunundun)
2. Third Intercountry Workshop on HSR - Lesotho 22 - 26 April 1991
(Dr. C.M. Pillay)
Lesotho (Dr. C. Mhango)
4. Conducting a Fertility Management Course (FISA) - 12 - 28 June 1991
Madagascar (Dr. C.N. Pouillé, Mrs. K. Ba)
5. Meeting of Deans of Medical Schools and Directors of Institute (CRHCS) - Nairobi (Dr. C.M. Pillay) 9 - 13 Sept. 1991
6. Training of Trainers Course in HSR (WHO) Botswana (Mr. S. Ameerbeg, Mr. I. Mahadoo,
   Dr. S. Manraj, Mr. M. Ramsamy and Miss U. Haw) 18 - 28 Sep. 1991
7. Visits to FP Training Centres in Singapore and Sydney, Australia (Dr. C.M. Pillay) 21 Oct. - 2 Nov. 1991
8. Training Course in Fertility Management - Seychelles (Dr. C. Mhango, Dr. R. Sungkur) 18 - 29 Nov. 1991
10. Data Analysis Workshop (CRHCS) - Nairobi - Kenya (Mr. S. Ameerbeg) 3 - 9 May 1992
11. Report Writing - Multi-Centre Study (CRHCS) - Lesotho (Mr. S. Ameerbeg) 10 -18 Aug. 1992
13. First Annual Meeting of Technical Advisory Committee of the Joint HSR Project, Zimbabwe (Dr. O. Awotar) 2 - 3 November 1992
14. "Colloque sur Technologie, Santé, Développement." France (Dr. C.M. Pillay) 2 - 4 December 1992
LIST OF MIH STAFF (as at time of publication)

PROFESSIONAL STAFF

Dr. C.M. Pillay - Executive Director
F.R.C.S(ophth) M.B.Bch, B.A.O(Belfast)
B.A.(Lond), D.O( Lond)
Diploma in Health Administration

TRAINING

Dr. G. Ramdenee - Part-time Gynaecologist/Obstetrician
M.B.B.S , Bombay University, India
M.D. Gynaecology/Obstetrics, Institute of Medical Services, Benares, India

Dr. K. Luchmaya - Training Officer
Diplôme d’État de Docteur en Médecine, France
Diplôme de Méthodes en Santé Publique, Bordeaux II, France

Dr. G. Daby - Training Officer
Higher School Certificate Laureate
MB,ChB, University of Sheffield, U.K.

RESEARCH

Dr. S. Sivapragasam - Medical Research Officer
Sivasubramania
Diplôme d’État de Docteur en Médecine, Bordeaux II University, France
MSc Occupational Medicine, National University of Singapore

Mr. P. Burhoo - Research Officer
BA (Hons) in Statistics, University of Bombay, India

Mr. S.A.G Ameerbeg - Research Officer
BA (Hons) in Sociology, University of Baroda, India

ADMINISTRATIVE STAFF

Mr. H.K. Bhunjoo - Executive Officer
Mrs. M. Cheung - Secretary
Mrs. B.F. Sookun - Clerical Officer
Mr. S. Mogaul - Clerical Assistant
Mr. S. Pillai - Clerical Assistant
Mr. S. Sohabul - Clerical Assistant
Mr. V. Ghurburrun - Clerical Assistant
Miss P. Bissessur - Clerical Assistant
Mrs. I. Bholah - Typist
Miss I. Joysury - Typist
Miss S. Ramjee - Typist
Miss V. Marden - Typist
Mr. T. Teeluck - Office Attendant
Mr. H. Dookheea - Office Attendant
Mr. P. Sookdharry - Office Attendant
INTERNATIONAL STAFF

The services of Dr. Christophe Lanièce, Ph.D. (Tulane, N. Orleans), Master P.H (Paris VI) Epidemiologist, have been made available to the Ministry of Health and to the Mauritius Institute of Health by the French Government, and assumed duty in Mauritius in November 1992.

Dr. Chisale Mhango, M.R.C.O.G, the Anglophone International Training Officer, whose services were made available to the Mauritius Institute of Health by the UNFPA in the context of the Fertility Management course, had his contract extended on two occasions and left Mauritius at the end of 1992.

Mrs. Khady Ba, the Francophone International Training Officer, had her contract extended to June 1994.

VISITING CONSULTANTS

Prof. R. Bandannayake  - Director of Academic Programmes, University of New South Wales, Australia
Prof. M. Bah Diawo  - Gynaecologist/Obstetrician, University of Dakar, Sénégal
Dr. A. Busine  - Gynaecologist/Obstetrician, Hôpital de Braine l'Alleud- Waterloo, Belgium
Mr. Da Costa Carvalho  - Formerly UNFPA Country Director, Madagascar
Mrs Joy Crosby  - Macmillan Research Fellow, Centre for Medical Education, University of Dundee
Dr. D. Kadjaka  - Formateur, Centre Régional OMS de Lomé, Togo
Mr. Sorgho Moussa  - Formateur, Centre de Formation des Personnels du Développement Social Sanitaire, Burkina Faso