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Department of Health and Human Services (HHS)-International Health [1]

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info requested
on 11/1

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Mtg w/ Linda Vogel

24 Oct 95

* Package of materials for Linda Vogel (VN) PCB

Office of PH and Science in the Office of the Secretary

PH Council will mechanism for dialogue across agencies - Dr. Lee will chair this group

- Find out email address for Eric Goosby

1) - OASH

- Dept. was behind curve on this - not included in decision-making

- Driven by USAID/ Dept. of State

- State Dept driven by UN reform

- HHS has numerous agreements of cooperation w/ other countries (Gore Chernomyrdin Commission)

~~DEPT~~ Science Coop w/ Egypt, France, Germany, India, China - vary

INDIA - NIH funded thru Johns Hopkins a PAVE award (PUNHA)

CDC provided TA to WBank to design WBank's loan

NIDA - Northeastern India - substance using popⁿ developing a research studies - carrying out a workshop

USAID is funding a large AIDS prevention program.

HHS can facilitate the process for country agreements for PHS agencies.

→ Get info on countries that are members of PCB

→ Give Linda a copy of PCB participants

2) CDC has a number of activities - 6 regional offices
Have been overshadowed by some agencies
Côte d'Ivoire
Thailand -

✓ AIDS function at CDC will move into New Center from International Health.

* L Vgl will get info to me about this

3) NIH

- PAVE project
- HIVNET

- Fogarty Int. (AIDS Epidemiology Project)
trng in epidemiology

- Evaluation of Teng (Fogarty) is needed

SAUSHA

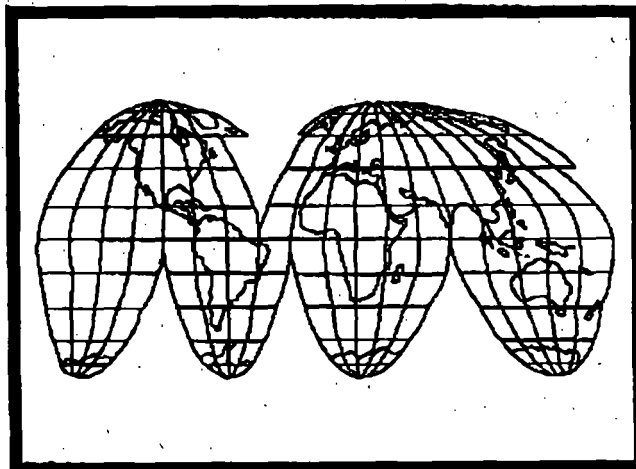
- not ^{really} doing ~~anything~~ / internationally

→ Agreements w/USAID and OIH \$170,000
(LV will get me copies)

o Schedule another mtg w/Linda V.

o Useful to do a mapping exercise on ~~the~~ international
ARDS activities for PHS

o Patry would like to know everything about UGANDA

FACSIMILE TRANSMISSION SHEET**FROM: LINDA A. VOGEL****Director
Office of International and
Refugee Health****Department of Health and Human Services
8600 Fishers Lane
Rockville, Md. 20857
RM.18-75****T : 301-443-1774****FAX: 301-443-6288****E-Mail: LVOGEL@OSOPHS****Internet: LVOGEL@OSOPHS.SSW.DHHS.GOV****OFFICE OF INTERNATIONAL AND REFUGEE HEALTH****TO: Ms. Lahoma Romacki****FAX NUMBER: 202-632-1096****DATE:****11-12-96****NUMBER OF PAGES:****3****(INCLUDING COVER SHEET)**☐ FYI
☐ AS REQUESTED☐ FY ACTION
☐ AS DISCUSSED**MESSAGE:**



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary

Office of Public Health and Science
Office of International and Refugee Health

November 8, 1996

Memorandum

To: Addressees

From: Director
Office of International and Refugee Health

Subject: International Health Representatives Meeting -
November 14, 1996

This is to confirm that the PHS International Health Representatives' Meeting will be held on Thursday, **November 14, 1996**, from 2-4 p.m. in the **Parklawn Building, Room 17-05**. The preliminary agenda is as follows:

**National Council for International Health
Annual Meeting and Conference - June 1997**
Frank Lostumbo, President, NCIH
(20 minutes)

HHS WHO Collaborating Center Task Force
Arlene Fonaroff/Melinda Moore/Linda Vogel
(15 minutes)

Departmental Technical Assistance Initiative
Linda Vogel
(10 minutes)

U.S.-Ukraine S & T Exploratory Visit
Peter Henry
(10 minutes)

UPDATES
U.S.-Japan Common Agenda ERID Initiative
Ken Bart
(10 minutes--including discussion)

U.S.-China S & T Commission Meeting
(NIH presenter)
(10 minutes--including discussion)

U.S.-Macedonia S & T Meeting
(NIH presenter)
(10 minutes--including discussion)

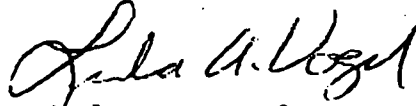
Gore-Chernomyrdin Health Committee

Peter Henry

(10 minutes)

Agency Updates

(15 minutes)



Linda A. Vogel

Addressees

Dr. Jo Ivey Boufford, PDASH
Mr. Norman Prince, PSC
Mrs. Barbara Cohen, OPA/OPHS
Dr. Susan Blumenthal, OWH/OPHS
Mr. Bruce Chelikowsky, IHS
Dr. Mary Cummings, AHCPR
Dr. Melinda Moore, CDC
Mr. George Dines, HRSA
Dr. Philip Schambra, NIH
Ms. Linda Staheli, NIH
Ms. Georgia Buggs, OMH/OPHS
Mr. Stephen Sawmelle, SAMHSA
Dr. Stuart Nightingale, FDA
Mr. Walter Batts, FDA
RADM Beth Mazella, OCN
Dr. Linda Myers, ODPHP/OPHS
Ms. Ellen Shippy, DOS/STH
Dr. Jonathan Davis, DOS/STH
Ms. Nancy Carter-Foster, DOS/STH
Mr. Ronald Lorton, DOS/SCP
Mr. Joseph Baldi, HRSA
Ms. Lahoma Romacki, NACO
Dr. Francis Notzon, NCHS
Mr. David Hohman, OS
Mr. David Oot, AID
Dr. Eric Goosby, AIDS/OHAP
Dr. Elaine Daniels, AIDS/OHAP
Dr. Juan Ramos, NIMH/NIH
Dr. Faye Calhoun, NIAAA/NIH
Dr. Pat Needle, NIDA
Ms. Carol Dabbs, USAID
Dr. Noreen Hynes Carus, Peace Corps
RADM Stephen Corbin, OSG
Dr. Robert Knouss, OEP
Ms. Jocelyn Mendelsohn, OGC
OIH Staff - AID and Parklawn



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary

Office of Public Health and Science
Office of International and Refugee Health

October 8, 1996

Memorandum

To: Addressees

From: Director
Office of International and Refugee Health

Subject: International Health Representatives Meeting -
October 10, 1996

This is to confirm that the PHS International Health Representatives' Meeting will be held on Thursday, October 10, 1996, from 2-4 p.m. in the Parklawn Building, Room 17-05. The agenda is as follows:

Guest Speaker

Wynne Teel, JD
Attorney Adviser
Office of the Assistant Legal Adviser
Treaty Affairs
Department of State

Ms. Teel will speak on international agreements, including such issues as the need for an orderly process, different kinds of instruments that can be used for "formalizing" international programs/relationships, nomenclature issues, and some special situations regarding particular countries and regions. I encourage you to bring others in your agency who are interested in these issues, particularly international agreement planning, negotiation and review.

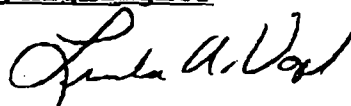
Maryland-WHO 1997 International Conference

Dr. Roscoe Moore

Updates

Refugee Health - Dr. David Smith
U.S.-Mexico Border Activities - Dick Walling
PAHO Directing Council Meeting - Dick Walling
Female Circumcision/FGM Workshop - Linda Vogel

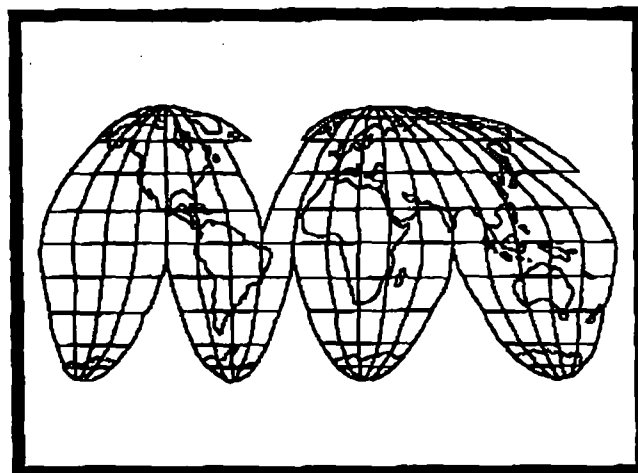
Agency Reports/Highlights


Linda A. Vogel

Page 2 -

Addressees

Dr. Jo Ivey Boufford, PDASH
Mr. Norman Prince, PSC
Mrs. Barbara Cohen, OPA/OPHS
Dr. Susan Blumenthal, OWH/OPHS
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Dr. Mary Cummings, AHCPR
Dr. Melinda Moore, CDC
Mr. George Dines, HRSA
Dr. Philip Schambra, NIH
Ms. Linda Staheli, NIH
Ms. Georgia Buggs, OMH/OPHS
Mr. Stephen Sawmelle, SAMHSA
Dr. Stuart Nightingale, FDA
Mr. Walter Batts, FDA
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Ms. Ellen Shippy, DOS/STH
Dr. Jonathan Davis, DOS/STH
Ms. Nancy Carter-Foster, DOS/STH
Mr. Ronald Lorton, DOS/SCP
Mr. Joseph Baldi, HRSA
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Dr. Elaine Daniels, AIDS/OHAP
Dr. Juan Ramos, NIMH/NIH
Dr. Faye Calhoun, NIAAA/NIH
Dr. Pat Needle, NIDA
Ms. Carol Dabbs, USAID
Dr. Noreen Hynes Carus, Peace Corps
RADM Stephen Corbin, OSG
Dr. Robert Knouss, OEP
Ms. Jocelyn Mendelsohn, OGC
OIH Staff - AID and Parklawn

FACSIMILE TRANSMISSION SHEET**FROM: LINDA A. VOGEL****Director
Office of International and
Refugee Health****Department of Health and Human Services
5600 Fishers Lane
Rockville, Md. 20857
RM.18-75****TEL: 301-443-1774
FAX: 301-443-6288****E-Mail: LVOGEL.OSOPHS
Internet: LVOGEL@OSOPHS.SSW.DHHS.GOV****OFFICE OF INTERNATIONAL AND REFUGEE HEALTH**

TO: Ms. Lahoma Romacki **FAX NUMBER: 202-632-1096****DATE: 10-8-96** **NUMBER OF PAGES: 3**
(INCLUDING COVER SHEET)☐ **FYI**
☐ **AS REQUESTED**☐ **FY ACTION**
☐ **AS DISCUSSED****MESSAGE:**

Author: Larry D Huffman at OES_Bureau
Date: 9/6/96 5:08 PM
Priority: Normal
Receipt Requested
CC: Elena Kim
CC: Jonathan Davis
TO: rhickox@usbr.gov at INET
TO: pgenther@banyan.doc.gov at INET
TO: kwashburn@ios.doi.gov at INET
TO: JOHN WIN {4510.1.10502.18756} DAYTON at DOSVSNET
TO: phyllis.davis@postmaster2.dot.gov at INET
TO: tkrohn@fra.dot.gov at INET
TO: bailey.marianne@epamail.epa.gov at INET
TO: kbart@osophs.ssw.dhhs.gov at INET
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TO: William E Dilday
TO: Nancy Carter-Foster
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TO: JEFFREY BELLER at DOSVSNET
TO: mquear@hr.house.gov at INET
TO: olik@uspto.gov at INET
TO: wbolhofer@smtpgate.nws.noaa.gov at INET
TO: myerg@smtpgate.nws.noaa.gov at INET
CC: Ronald D Lorton
CC: Helen Lane
CC: PARKER C SCHOFIELD at DOSVSNET
CC: jlladins@facstaff.wisc.edu at INET
CC: jladins@facstaff.wisc.edu at INET
Subject: Vietnam: IWG report

2R
5 pages

FAX
Addresses on
pages one and
two.

----- Message Contents -----

DATE: September 6, 1996

FROM: Larry D. Huffman, Program Officer, OES/SCP, Room 5806
Phone: (202) 647 4689; Fax: (202) 647 2746 or 647 0773
e-mail: lhuffman@state.gov

U.S. Vietnam S&T Fax List

TO: Name	Agency	Phone	Fax
Zach Hanh	AID	7 4515	7 3517
Victor Barnes	AID	(703)875 4636	875 4716
Paul Delay	AID	(703)875 4616	875 4686

	Loraine West	BUCEN	(703)875 4740	875 4686	
E	Bob Hickox	BUREC	(301)457 1362	457 1539	
	Carolyn Harrison	BUREC	208 5640	208 3394	(35)
E	P. G. Yoshida	DOC/OTP	208 4645	208 3394	(35)
E	Hong-Phong Pho	DOC/ITA	482 1287	482 4826	(02)
	Steve Rosen	DOD	482-3877	482-3316	
	Larry Dewey	DOE/PO	(703)604 8042	602 4774	
	Peter Jodoin	DOE/PO	586 4290	586 1180	(10)
	Tom York	DOE/OER	586 5906	586 1180	(10)
E	Kathy Washburn	DOI/IA	586 4518	586 7719	
E	Phyllis Davis	DOT/OST	208 3048	501 6381	(27)
E	Ted Krohn	DOT/FRA	366 9514	366 7417	(24)
E	Marianne Bailey	EPA	366 0555	366 7688	
E	Kenneth Bart	HHS/OIH	260 5237	260 4470	(08)
E	Amar Bhat	NIH/FIC	(301)443 1774	443 6288	(72)
E	Linda Staheli	NIH/FIC	(301)402 0152	480 3414	(23)
	Don Miller	NASA	(301)496 5903	480 3414	(23)
E	Steve Carpenter	NIST/OIR	358 1651	358 3030	(22)
E	Claire Saundry	NIST	(301)975 4119	975 3530	(06)
	Richard Crouthamel	NOAA/NWS	(301)975 2386	975 3530	(06)
E	William Bolhofer	NOAA	(301)713 0647	587 4524	
	Arthur Paterson	NOAA/INTL	(301)713 1611	713 1255	
	Bob Suettinger	NSC	(202)482 6196	482 4307	(32)
E	Alice Hogan	NSF	(202)456 9251	456 9250	
	Elizabeth Echols	NTIA	(703)306 1704	306 0476	(05)
	Barbara Payne	NTIS	482 3186	482 1865	
	Patsy Fleming	ONAP	(703)487 4675	487 4134	
E	Deanna Behring	OSTP	632 1090	632 1096	
E	Carol Wilson	USDA/FAS	456 6058	456 6028	(01)
E	Anna Lenox	USGS	720 4090	690 0892	(07)
E	Jack Medlin	USGS	(703)648 5053	648 6687	
	Elizabeth Kauffman	USIA	(703)648 6062	648 4227	(11)
	Joe Damond	USTR	619 5837	619 6684	
			395 6813	395 3512	

Attached is the report of the August 15 interagency working group meeting.

Attending the meeting were:

Michael Quear, House Committee on Science
 Claire Saundry, DOC/NIST
 Kay Weston, DOC/NOAA
 Margaret Brown, DOC/TA
 Hong-Phong Pho, DOC/ITA
 Peter Jodoin, DOE
 Robert Hickox, DOI
 Donald Colman, DOS/EAP/BLCTV
 Pat Amenson, DOS/OES/SCP
 Ron Lorton, DOS/OES/SCP
 Winn Dayton, DOS/EAP/BCLTV
 Larry Huffman, DOS/OES/SCP
 Ted Krohn, DOT/FRA
 Marianne Bailey, EPA
 Linda Vogel, HHS
 Linda Staheli, HHS/NIH/FIC
 Amar Bhat, HHS/NIH/FIC
 Don Miller, NASA

Copy of reporting cable sent to Embassy Hanoi on September 6, 1996

"SUBJECT: Solomon Delegation; Working Group meeting 8/15/96

1. SUMMARY On August 15, OES DAS Solomon chaired an interagency working group to plan for an exploratory science and technology mission to Vietnam, tentatively scheduled for October 14-19. She stated that the themes of the visit would be ascertaining the status of S&T in Vietnam and laying the S&T basis for technology and trade relations and pursuing U.S. environmental and health concerns. Briefers gave an overview of bilateral relations, internal political developments, and Vietnamese attitudes on international cooperation. Agencies reported on ongoing and planned projects, and expressed interest in possible areas of future cooperation. The group identified nine probable delegates, with more to be identified later. Ms. Solomon said that we would develop the agenda in consultation with the US mission in Hanoi, based on agency interests. A staffer from the House Committee on Science said that Congressman Brown was interested in the overall progress of S&T cooperation with Vietnam.
END SUMMARY

2. REQUESTED ACTION: Developments since the meeting, and specific suggestions for meetings will follow via septel. Meanwhile we look forward to mission's suggestions regarding itinerary and interlocutors.

3. EAP/VLC characterized relations between the US and Vietnam as broadening and deepening, with trade growing rapidly but from a very low base. The POW/MIA cooperation was going well, and the Vietnamese were very interested in economic normalization with the US. However, AID is in general prohibited from operating in Vietnam by the Foreign Assistance Act, there have been continuing problems with harassment of mission personnel, and diplomatic shipments have been violated. Moreover, samples and data confiscated from a US scientist who had been studying dioxins had yet to be returned, and the case showed no signs of resolution.

4. DAS Solomon asked agencies whether they plan to participate in the exploratory S&T mission to Hanoi and Ho Chi Minh City planned for October 14-19. Following is a summary of responses:

--Department of State, Bureau of Oceans and International Environmental and Scientific Affairs (DOS/OES): Anne K. Solomon, Deputy Assistant Secretary of State for Science, Technology and Health Affairs; Larry Huffman, program officer, Office of Cooperative Programs (OES/SCP);

--Department of Commerce, National Institute of Standards and Technology (DOC/NIST): Dr. B. Stephen Carpenter, Director for International and Scientific Affairs;

--Department of Health and Human Services, National Institutes of Health (HHS/NIH): Dr. Philip Schambra, Director of the Fogarty

Heart, Lung, and Blood Institute;

--Department of the Interior, United States Geological Survey (DOI/USGS): Jack Medlin

--National Science Foundation (NSF): Alice Hogan, program officer, East Asia and Pacific Program;

--House Committee on Science: Michael Quear;

--Executive Office of the President, Office of Science and Technology Policy (EOB/OSTP): Cathy Campbell, program officer;

--Department of Energy: expressed interest in having a delegate, but would have to see if it had sufficient funds;

--Department of Transportation, Federal Railroad Administration (DOT/FRA): Vietnamese railroad delegation is coming to the US at the same time as the Solomon delegation, and they are therefore unable to provide a delegate;

--Environmental Protection Agency (EPA): EPA Deputy Director Hecht will be in Vietnam just prior to the delegation, and cannot delay his trip due to other commitments.

5. DAS Solomon also asked agencies to outline ongoing programs with Vietnam. Their replies included:

--HHS: several ongoing projects; someone affiliated with the Centers for Disease Control will soon take up residence in Vietnam, to work on epidemiology;

--US Department of Agriculture (USDA): rice genetics project between the University of Louisiana and the GOV; two US training sessions on food labeling and marketing;

--DOI: Bureau of Reclamation received a request for technical assistance from the UNDP office in Hanoi;

--DOT/FRA: Vietnam requesting assistance in identifying rail equipment;

--EPA: \$280,000 project cutting CFC emission from mobile sources (i.e. transportation air conditioning systems).

6. In response to DAS Solomon's request to identify areas of possible future cooperation, agencies highlighted:

--DOC/NIST: too early to identify specific areas, but assumes cooperation will grow out of delegation's meetings and conclusions;

--HHS: emerging diseases, hospital improvement, regulatory issues, people with disabilities;

--DOI/USGS: the environment; coastal zone protection;

--NSF: long-term ecological research;

--DOE: rural electrification, fossil fuels technologies.

7. DAS Solomon asked agencies to think about possible delegates from the private sector, such as industry association representatives and people from non-governmental organizations. She said that a specific agenda would be developed in coordination with Embassy Hanoi, based on USG interests as identified by the interagency working group.

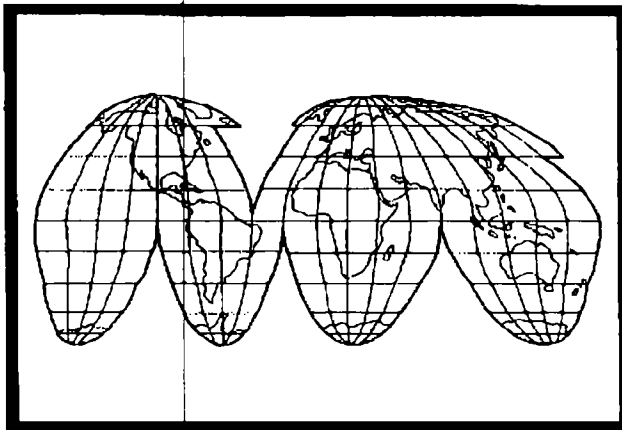
\\

FACSIMILE TRANSMISSION SHEET**FROM:**

ROSCOE MOORE, JR. D.V.M., M.P.H., PH.D.
Assistant Surgeon General, USPHS
Associate Director for Development Support
and African Affairs

5600 Fishers Lane
ROOM 18-87 PARKLAWN BUILDING
ROCKVILLE, MD 20857

TELEPHONE (301) 443-9942
FAX (301) 443-6288



OFFICE OF INTERNATIONAL HEALTH

TO: Laboria Parnachis **FAX NUMBER:** 202-632-1096

DATE: 7/8/96 **NUMBER OF PAGES:** 2

☐ FYI
☐ AS REQUESTED

☒ FY ACTION
☐ AS DISCUSSED

MESSAGE:

Please send any updates and/or any new information regarding the Interagency Gore-Mbeki S&T Committee by COB July 12, 1996.

August 12, 1996

MEMORANDUM FOR LAHOMA

FROM: Jeff 
SUBJECT: International issues briefing for Advisory Council
cc: Patsy

The Presidential Advisory Council on HIV/AIDS has scheduled a briefing for Monday, September 9th from 9-11 a.m. on international issues. This would be for the entire Council.

So as to maximize the use of this time, Bob Fogel (who is the lead person on this) has asked that we prepare a written backgrounder on the scope of the problem -- this could easily come from an already published document or something presented at Vancouver.

In talking with Bob, we agreed to five topics:

- (1) Background on UNAIDS (by Patsy -- since Peter Piot is unavailable)
- (2) USAID -- description of programs, feedback into domestic programs, funding issues, etc. -- Victor Barnes (if he is still on board then),
- (3) US-Mexico-Canada arrangement -- Elaine Daniels from OHAP
- (4) The Rockefeller Foundation vaccine project -- Peggy Johnston (she presented to the research committee but not the full Council -- if there are other private sector initiatives to include on a panel that would be good).
- (5) Constituency groups -- ^{GAAW}GAN (Paul Boneberg), ~~NEH~~, etc.

So....Can you do the following:

- (1) Propose a list of panelists for the above that PF and I can review before she leaves for Tampa tomorrow.
- (2) Handle invitations of these individuals.
- (3) Pull together background materials to be sent in Council packets -- which means they must get to SSS by the end of next week.
- (4) Prepare PF's remarks -- in time for Richard to review the last week of August and PF then to edit when she returns from vacation.

Thanks.

Author: Laura L. Efros at ostp

Date: 7/3/96 4:38 PM

Priority: Normal

TO: carp@micf.nist.gov at internet

TO: gardner@ficod.fic.nih.gov at internet

TO: gmarand@state.gov at internet

TO: joe.maguire@mailgw.er.doe.gov at internet

TO: lechwart@usia.gov at internet

TO: ptsuchit@nsf.gov at internet

TO: staheli@nih.gov at internet

CC: Deanna M. Behring

TO: lhirsch@si.gov at internet

TO: jrousseau@rdc.noaa.gov at internet

BCC: zALL

Subject: South Africa interagency meeting

----- Message Contents -----

We will hold our last interagency meeting to prepare for the July 22 meeting of the Gore-Mbeki S&T Committee meeting on Thursday, July 11, at 2:00 p.m. in room 476 of the Old Executive Office Building. We will discuss the S&T Committee meeting agenda and logistics. For your information, the S&T Committee will meet from 8:30 to 3:00 on July 22 at Stone House on the NIH campus.

We have sent letters from Dr. Gibbons to your principals inviting them to attend a U.S. delegation briefing on Friday, July 19, at 11:00 a.m. We plan to distribute final versions of the briefing book at that meeting.

Please bring the input for the briefing books to the July 11 meeting. We need background papers (as previously discussed), talking points for your principal, and a few talking points for Dr. Gibbons in response your principals' presentations. Please bring both an electronic and a paper version of these materials. We are also missing updated some program assessments from some agencies. We need these materials for the Vice President's briefing package by COB Monday, July 8.

Please rsvp for the July 11 meeting to me by e-mail.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

LR

Office of the Secretary

Memorandum

back
gave to PL
on 5/28/96

Date

December 20, 1995

From

Director

Office of International and Refugee Health

Subject

Office of Public Health and Science

PHS Cooperation with USAID on HIV/AIDS

To

Patricia S. Fleming

National AIDS Policy Director

As you will recall, during our meeting, you expressed interest in knowing about the status of PHS' formal involvement on HIV/AIDS with the Agency for International Development. USAID currently has seven interagency agreements, which provide for support on HIV/AIDS related matters, with PHS agencies. A summary description of the agreements is attached.

The activities supported by USAID is, of course, only one dimension of PHS cooperation on HIV/AIDS internationally. NIH, as you know, has a number of programs which involve other countries. Prominent among these is the Fogarty International Center's HIV/AIDS Training Program which, to date, has reached some 20,000 foreign scientists. The NIAID supported HIVNET project includes sites in Haiti, Brazil, Senegal, India, Zimbabwe, Malawi, Uganda, Kenya, and Thailand. Additionally, there are ongoing NIAID-supported AIDS prevention trials in Uganda, Cameroon, Kenya, Zimbabwe and the Philippine. Moreover, there are countless other relationships (e.g. CDC's agreement with the Ministry of Health of Thailand under which they have six people posted there) as well as a broadly-based working relationship with India.

As we discussed, there would probably be some merit in a "mapping" exercise, such as was done for the U.S.-Mexico Border. This quite literally involved the use of maps and a substantial number of players from involved agencies in which they identified areas and sites of cooperation in an interactive process during a "day away" at a conference site in the area. I have mentioned to Jo Boufford the idea of our working with you to carry out an effort on to HIV/AIDS internationally. I would think it would need to involve all appropriate PHS agencies, USAID (probably the Global Bureau as well as regional bureaus), elements of DOD, and the Department of State. In order to assure that the right participants come to the table, it would be important for you to be the convener and play a prominent role in the event.

Page 2

I would welcome the opportunity to discuss this with you further at your convenience.



Linda A. Vogel

Attachment

cc. Dr. Boufford
Dr. Goosby
Dr. Daniels

International HIV/AIDS Cooperation
PHS Agreements with USAID
(prepared 12/24/95)

Centers for Disease Control and Prevention:

Project Name: STD/AIDS Awareness and Prevention
(Mali)

Time Period: October 1, 1995 - September 30, 2001

Funding: \$596,738 obligated to date

Scope: Provides for long-term technical assistance from CDC to monitor current and develop future child survival activities and to monitor the implementation of the AIDS/STD Prevention and Control Project in Mali. The technical assistance provided for includes, but is not necessarily limited to managing ongoing child survival activities, especially those in the areas of malaria, Guinea worm eradication, AIDS, immunizations and nutrition; managing a new bilateral AIDS and STD Awareness and Prevention Project; assisting the development of a USAID/Mali long term strategy for interventions in child survival; working with NGOs on the design, implementation and evaluation of their child survival and AIDS programs; facilitating the design implementation and evaluation of their child survival and AIDS programs; facilitating the procurement of required commodities, equipment and supplies to support project implementation for AIDS and child survival project; identifying research priorities, developing the documents necessary to conduct such research, monitoring the progress of and disseminating the results of research for AIDS and child survival and providing child survival back stopping to NGOs, as requires.

Project Title: AIDS Communication and Technical Services (Caribbean)

Time Period: September 1, 1992 - September 20, 1995

Funding: \$550,762

Scope: This is a follow-on to an earlier project focused on the control of the spread of HIV/AIDS in the Caribbean, including enhancing Caribbean capacity to sustain earlier gains made. The focus is on institution development, including cost-effective surveillance, information, education and intervention strategies. An objective is the building of a regional capacity of CAREC (the Caribbean Epidemiology Center) and national health

surveillance institutions to development, implement and evaluate cost-effective surveillance, epidemiological and information, education and communication strategies.

Project Title: AIDS/STD Prevention and Control (Jamaica)

Time Period: March 28, 1994 - August 31, 1996

Funding: \$108,220

Scope: This project supports the bilateral AIDS/STD Prevention and Control agreement between USAID/Kingston and the Government of Jamaica. CDC provides technical support to assist: (1) the STD/HIV Program Managers with evaluation of contact investigator prevention/intervention activities; (2) the Ministry of Health with sentinel surveillance development; (3) establishment of an HIV/AIDS computerized case registry; (4) with contact investigator "trainee" training programs.

Project Title: Community Outreach and Leadership Development - HIV/AIDS Prevention (South Africa)

Time Period: June 10, 1992 - December 31, 1998

Funding: \$3,580,676

Scope: This agreement provides for a long-term technical advisor on HIV/AIDS to work in South Africa. The incumbent in this position provides project management and technical guidance to the USAID Mission in Pretoria in the design, management and evaluation of USAID-supported HIV/AIDS prevention and education project support by USAID. It also provides for short-term technical assistance from CDC directed toward improving community-based HIV/AIDS/STD education and services. The goal of this component is to assist in the design, implementation and evaluation of a combined community-and-facility-based STD/HIV intervention program targeting black African residents in one township in the Transvaal Province. Other elements are to support participatory program monitoring and evaluation by community AIDS workers, a school-based peer education programs, and HIV/AIDS counseling, education and testing.

Project Title: AIDS/STDS Prevention and Control (Bolivia)

Time Period: December 1, 1991 - March 31, 1998

Funding: \$1,029,000

Project Title: AIDS Technical Support Project - Worldwide

Scope: The agreement provides for long- and short-term technical assistance to implement the AIDS/STD Prevention Control Project in Bolivia. TA includes but is not limited to: procurement of required laboratory and clinic commodities, equipment and supplies to support laboratory/clinic capability, conducting research studies on AIDS/STDs, designing and Managing MOH training and outreach programs, designing and managing NGO sub-projects, staffing and operating a local project implementation office in La Paz, providing back-stopping as required.

Time Period: September 30, 1992 - September 29, 1997

Funding: \$600,000

Scope: This agreement established a mechanism through which CDC could provide technical support on AIDS prevention and control and to provide USAID Mission with limited short-term access to CDC technical assistance.

National Institutes of Health:

Project Title: AIDS Technical Support Project (NIAID)

Time Period: September 30, 1988 - September 30, 1995

Funding: \$540,000

Scope: The National Institute of Allergy and Infectious Diseases manages, on behalf of USAID, a seed-grant program to encourage international HIV intervention research with ongoing HIV/AIDS research programs currently supported by NIAID or USAID. This includes solicitation of proposals from institutions that have ongoing HIV/AIDS research projects supported by NIH or USAID in countries designated as priorities by USAID and technical review of the proposal.

5/24/96

Patsy,

I know that things have
not calmed down, however
I did want to put
this back on your radar
screen for discussion.

I suggest an ^{INTERNATIONAL} interagency
mtg post-Chicago but
pre-Vancouver.

Lattoma

Please LHR
hold +
raise when
things calm
down! Thanks



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Office of the Secretary

Memorandum

Date .
December 20, 1995

From Director *Linda Vogel*
Office of International and Refugee Health
Office of Public Health and Science

Subject PHS Cooperation with USAID on HIV/AIDS

To Patricia S. Fleming
National AIDS Policy Director

As you will recall, during our meeting, you expressed interest in knowing about the status of PHS' formal involvement on HIV/AIDS with the Agency for International Development. USAID currently has seven interagency agreements, which provide for support on HIV/AIDS related matters, with PHS agencies. A summary description of the agreements is attached.

The activities supported by USAID is, of course, only one dimension of PHS cooperation on HIV/AIDS internationally. NIH, as you know, has a number of programs which involve other countries. Prominent among these is the Fogarty International Center's HIV/AIDS Training Program which, to date, has reached some 20,000 foreign scientists. The NIAID supported HIVNET project includes sites in Haiti, Brazil, Senegal, India, Zimbabwe, Malawi, Uganda, Kenya, and Thailand. Additionally, there are ongoing NIAID-supported AIDS prevention trials in Uganda, Cameroon, Kenya, Zimbabwe and the Philippines. Moreover, there are countless other relationships (e.g. CDC's agreement with the Ministry of Health of Thailand under which they have six people posted there) as well as a broadly-based working relationship with India.

As we discussed, there would probably be some merit in a "mapping" exercise, such as was done for the U.S.-Mexico Border. This quite literally involved the use of maps and a substantial number of players from involved agencies in which they identified areas and sites of cooperation in an interactive process during a "day away" at a conference site in the area. I have mentioned to Jo Boufford the idea of our working with you to carry out an effort on to HIV/AIDS internationally. I would think it would need to involve all appropriate PHS agencies, USAID (probably the Global Bureau as well as regional bureaus), elements of DOD, and the Department of State. In order to assure that the right participants come to the table, it would be important for you to be the convener and play a prominent role in the event.

Page 2

I would welcome the opportunity to discuss this with you further at your convenience.

A handwritten signature in cursive script, appearing to read 'Linda'.

Linda A. Vogel

Attachment

cc. Dr. Boufford
Dr. Goosby
Dr. Daniels

International HIV/AIDS Cooperation
PHS Agreements with USAID
(prepared 12/24/95)

Centers for Disease Control and Prevention:

Project Name: STD/AIDS Awareness and Prevention
(Mali)

Time Period: October 1, 1995 - September 30, 2001

Funding: \$596,738 obligated to date

Scope: Provides for long-term technical assistance from CDC to monitor current and develop future child survival activities and to monitor the implementation of the AIDS/STD Prevention and Control Project in Mali. The technical assistance provided for includes, but is not necessarily limited to managing ongoing child survival activities, especially those in the areas of malaria, Guinea worm eradication, AIDS, immunizations and nutrition; managing a new bilateral AIDS and STD Awareness and Prevention Project; assisting the development of a USAID/Mali long term strategy for interventions in child survival; working with NGOs on the design, implementation and evaluation of their child survival and AIDS programs; facilitating the design implementation and evaluation of their child survival and AIDS programs; facilitating the procurement of required commodities, equipment and supplies to support project implementation for AIDS and child survival project; identifying research priorities, developing the documents necessary to conduct such research, monitoring the progress of and disseminating the results of research for AIDS and child survival and providing child survival back stopping to NGOs, as requires.

Project Title: AIDS Communication and Technical Services (Caribbean)

Time Period: September 1, 1992 - September 20, 1995

Funding: \$550,762

Scope: This is a follow-on to an earlier project focused on the control of the spread of HIV/AIDS in the Caribbean, including enhancing Caribbean capacity to sustain earlier gains made. The focus is on institution development, including cost-effective surveillance, information, education and intervention strategies. An objective is the building of a regional capacity of CAREC (the Caribbean Epidemiology Center) and national health

surveillance institutions to development, implement and evaluate cost-effective surveillance, epidemiological and information, education and communication strategies.

Project Title: AIDS/STD Prevention and Control (Jamaica)

Time Period: March 28, 1994 - August 31, 1996

Funding: \$108,220

Scope: This project supports the bilateral AIDS/STD Prevention and Control agreement between USAID/Kingston and the Government of Jamaica. CDC provides technical support to assist: (1) the STD/HIV Program Managers with evaluation of contact investigator prevention/intervention activities; (2) the Ministry of Health with sentinel surveillance development; (3) establishment of an HIV/AIDS computerized case registry; (4) with contact investigator "trainee" training programs.

Project Title: Community Outreach and Leadership Development - HIV/AIDS Prevention (South Africa)

Time Period: June 10, 1992 - December 31, 1998

Funding: \$3,580,676

Scope: This agreement provides for a long-term technical advisor on HIV/AIDS to work in South Africa. The incumbent in this position provides project management and technical guidance to the USAID Mission in Pretoria in the design, management and evaluation of USAID-supported HIV/AIDS prevention and education project support by USAID. It also provides for short-term technical assistance from CDC directed toward improving community-based HIV/AIDS/STD education and services. The goal of this component is to assist in the design, implementation and evaluation of a combined community-and-facility-based STD/HIV intervention program targeting black African residents in one township in the Transvaal Province. Other elements are to support participatory program monitoring and evaluation by community AIDS workers, a school-based peer education programs, and HIV/AIDS counseling, education and testing.

Project Title: AIDS/STDS Prevention and Control (Bolivia)

Time Period: December 1, 1991 - March 31, 1998

Funding: \$1,029,000

Project Title: AIDS Technical Support Project - Worldwide

Scope: The agreement provides for long- and short-term technical assistance to implement the AIDS/STD Prevention Control Project in Bolivia. TA includes but is not limited to: procurement of required laboratory and clinic commodities, equipment and supplies to support laboratory/clinic capability, conducting research studies on AIDS/STDs, designing and Managing MOH training and outreach programs, designing and managing NGO sub-projects, staffing and operating a local project implementation office in La Paz, providing back-stopping as required.

Time Period: September 30, 1992 - September 29, 1997

Funding: \$600,000

Scope: This agreement established a mechanism through which CDC could provide technical support on AIDS prevention and control and to provide USAID Mission with limited short-term access to CDC technical assistance.

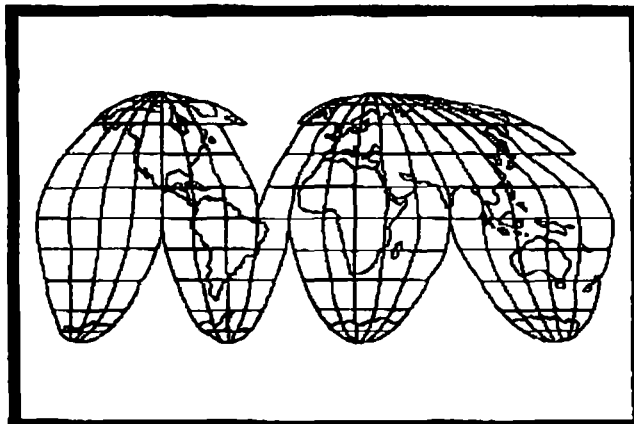
National Institutes of Health:

Project Title: AIDS Technical Support Project (NIAID)

Time Period: September 30, 1988 - September 30, 1995

Funding: \$540,000

Scope: The National Institute of Allergy and Infectious Diseases manages, on behalf of USAID, a seed-grant program to encourage international HIV intervention research with ongoing HIV/AIDS research programs currently supported by NIAID or USAID. This includes solicitation of proposals from institutions that have ongoing HIV/AIDS research projects supported by NIH or USAID in countries designated as priorities by USAID and technical review of the proposal.

FACSIMILE TRANSMISSION SHEET**FROM: LINDA A. VOGEL****Director
Office of International and
Refugee Health****Department of Health and Human Services
5800 Fishers Lane
Rockville, Md. 20857
RM.18-75****TEL: 301-443-1774
FAX: 301-443-6288****E-Mail: LVOGEL@OSOPHS
Internet: LVOGEL@OSOPHS.SSW.DHHS.GOV****OFFICE OF INTERNATIONAL AND REFUGEE HEALTH****TO: Ms. Lahoma Romacki** **FAX NUMBER: 202-632-1096****DATE: July 9, 1996** **NUMBER OF PAGES: 2**
(INCLUDING COVER SHEET)☐ FYI
☐ AS REQUESTED☐ FY ACTION
☐ AS DISCUSSED**MESSAGE:**



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary

Office of Public Health and Science
Office of International and Refugee Health

JUL - 7 1996

Memorandum

To: Addressees

From: Director
Office of International and Refugee Health

Subject: Designation of Acting Director During Official Absence from
Office

I will be in Moscow, Russia from July 10 through July 19, 1996. The purpose of the meeting is to participate in the 4th Meeting of Gore-Chernomyrdin Health Committee, GC7, and Health Policy Round Table.

Dr. Kenneth Bart, Associate Director for Medical and Scientific Affairs, will serve as Acting Director, Office of International and Refugee Health during this period.


Linda A. Vogel

Addressees
Dr. Lee
Dr. Boufford
Mr. Thompson
OIRH Staff
PHS Agency International
Health Representatives



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary

Office of Public Health and Science
Office of International and Refugee Health

June 11, 1996

Memorandum

To: Addressees

From: Director
Office of International and Refugee Health

Subject: International Travel - Official Department of State
Notification Cables

Issue:

The Department of State has sent us recommendations (attached) to help facilitate the processing and transmittal of official Department of State (DOS) cables to advise U.S. Embassies and other DOS posts of travel by HHS personnel. These recommendations are directed toward helping to assure that HHS travelers receive country clearance on a timely basis and to assure that, when a traveler needs assistance from a U.S. post, it will be provided.

DOS has also recommended that, when there is emergency travel, an informal "heads-up" be sent to the post via FAX, e-mail or telephone. This does not, however, eliminate the need for an official notification cable.

Please distribute this memo and the attached guidance within your office and agency, as appropriate. If you have any questions, please do not hesitate to contact Amal Thomas or Lee Crane at (301) 443-1774.

FOR OPHS STAFF OFFICES AND INDIAN HEALTH SERVICE: The Office of International and Refugee Health, OPHS, will continue to prepare your cables for you. We will, however, need to receive your International Travel Notifications at least two weeks before travel begins.

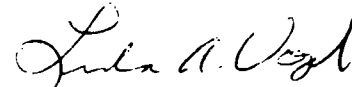
Background:

A National Security Council directive requires that U.S. embassies abroad be notified of official travel by U.S. Government employees. This is normally done through an official Department of State cable, which is originated by the traveler's employing agency.

Official cables for HHS travelers are usually transmitted to the Bureau of Oceans and International Environmental and Scientific Affairs, Department of State, where they are processed; i.e., cleared with the appropriate country desk or other office(s), and then transmitted through the DOS communications facility to the appropriate U.S. Embassy or other DOS mission. PHS reimburses the Department of State for the salary of a secretary (LaVeta Jackson) for the specific purpose of processing our cable traffic.

Because of the high volume of HHS travelers and our other cable communications requirements, it is sometimes difficult for the DOS staff to get our cables out on a timely basis. Moreover, agencies frequently initiate the cables late. The suggestions in the attached memorandum are directed toward improving the performance.

Additionally, we will be meeting with DOS staff, including the principal secretary, LaVeta Jackson, who handles our cables, in order to identify additional ways that the processing of cables can be facilitated.


Linda A. Vogel

Attachment

Addressees:

PHS International Health Representatives
OPHS Office Directors
OIRH Parklawn Staff

cc. David Hohman
Bud Rock

N:\linda\cables.trv



United States Department of State

*Bureau of Oceans and International
Environmental and Scientific Affairs*

Washington, D.C. 20520

May 3, 1996

TO: DHHS/PHS - Linda Vogel

FROM: OES/S - Anne K. Solomon *AKS*

SUBJECT: Country Clearances

I am writing to ask for your agency's cooperation in the country clearance process to ensure timely handling of such requests with a minimum of red tape. As you know, U.S. government officials traveling abroad do so as authorized by the U.S. ambassador or chief of mission whose authority is derived directly from the President of the United States. By law and Presidential directive, the chief of mission has full responsibility for the direction, coordination, and supervision of all executive branch personnel in country, except for personnel under the command of a U.S. area military commander. Moreover, it is often the case that embassy or consulate officials can assist your travelers to accomplish their mission and take advantage of their presence to further U.S. interests.

The country clearance process serves to notify the appropriate American embassy that U.S. government officials will be traveling in the host country. Even if the need for embassy assistance is not anticipated, it is essential to inform the appropriate post of the intended travel.

OES/S coordinates the clearance and transmittal of many country clearance cables relating to travel on science, technology, and health matters. We are working on streamlining procedures to speed the transmittal of information to the posts and save work for everyone. In the meantime, I would like to offer some suggestions for using the current country clearance process to better advantage for all concerned.

Timing is the key: Addressee agencies often send us eleventh-hour notifications. We have even received draft cables after the official traveler has departed the U.S. The number of cables apologizing for late notification has been on the rise. Recently a new trend has appeared: cables stating that the agency "realizes that country clearance will not be received by departure date."

Let me assure you that I fully understand the burdens placed on you in the country clearance process and that we are working vigorously to craft alternatives. I appreciate your cooperation and would certainly welcome any suggestions you may have.

Recommendations:

1. Please submit your draft cable at least two weeks before intended arrival in country. This lead time is needed for obtaining clearances and additional information prior to telegram transmittal, and to allow for granting of country clearance by post.

We realize there are occasional emergencies, and are prepared to help. These should be the rare exceptions, however.

2. Send an informal heads-up to posts as soon as travel plans are made, noting that a formal country clearance cable will follow. Send the alert via fax, e-mail, or telephone-- whichever channel is most effective.

3. Country clearance requests that include visits in cities with an American Consulate should be addressed to those consulates as well as the relevant embassy, e.g., Amembassy Beijing, Amconsul Shanghai.

4. Provide all the needed information in your cable draft, including:

- name and position of traveler
- purpose of travel
- proposed itinerary
- embassy assistance (please state that if it is not required, or specify the assistance needed)
- name and phone/fax/e-mail of your contact(s) at your destination(s)

5. As a general rule, use the formula "country clearance will be assumed if no reply is received in seven calendar days from receipt of cable." In some exceptional cases (e.g., Russia), country clearance must be granted via a cable from the post. If you are not sure whether the general rule applies, you may consult the appropriate OES country-clearance coordinator (listed on page 3).

If you have questions or need assistance, please contact:

(DOE, EPA cables): Pam Hargrow, OES/SCP
phone: (202) 647-3634, fax: (202) 647-0773
e-mail: phargrow@state.gov

(HHS cables): LaVeta Jackson, OES/STH
phone: (202) 647-4824, fax: (202) 736-7336
e-mail: ljackson@osophs.ssw.dhhs.gov

(NASA cables): Dorietha Jackson, OES/STH
phone (202) 647-2433, fax: (202) 736-7336
e-mail: djackson@state.gov

Thank you for your assistance.



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary

Office of Public Health and Science
Office of International and Refugee Health

June 10, 1996

Memorandum

To: Addressees

From: Director
Office of International and Refugee Health

Subject: International Health Representatives Meeting - June 13,
1996

This is to confirm that the PHS International Health Representatives' Meeting will be held on Thursday, June 13, 1996, from 2-4 p.m. in the Parklawn Building, Third Floor, Conference Room H.

The preliminary agenda is as follows:

- World Health Assembly - Summary Debriefing
- Department of State (OES) Health Function Issue

Due to resource reduction, OES/State plans to reduce the number of positions focused on health; i.e., Bud Rock's position will not be filled following his departure. The possibility of PHS' seconding a person to OES has been suggested by DOS. The implications for PHS of the change at DOS merits discussion.
- Bilateral Issues - Brief Updates
 - Bilateral discussions during World Health Assembly
 - Russia (Gore-Chernomyrdin)
 - Mexico
 - Japan
 - U.S.-EU Transatlantic Alliance
- Agency Reports (Items we would like to have shared are indicated)
 - HRSA -- Conference on Children with Special Needs
 - NIH -- Malaria Initiative
 - Other Agencies

- Other

Linda A. Vogel
Linda A. Vogel

Dr. Jo Ivey Boufford, PDASH
Mr. Norman Prince, PSC
Mrs. Barbara Cohen, OPA/OPHS
Dr. Susan Blumenthal, OWH/OPHS
Mr. Bruce Chelikowsky, IHS
Dr. Mary Cummings, AHCPR
Dr. Joe Davis, CDC
Mr. George Dines, HRSA
Dr. Philip Schambra, NIH
Ms. Linda Staheli, NIH
Ms. Georgia Buggs, OMH/OPHS
Mr. Stephen Sawmelle, SAMHSA
Ms. Sharon Smith Holston, FDA
Dr. Stuart Nightingale, FDA
Mr. Walter Batts, FDA
Dr. Linda Myers, ODPHP/OPHS
Ms. Ellen Shippy, DOS/STH
Mr. Anthony Rock, DOS/STH
Dr. Jonathan Davis, DOS/STH
Mr. Ronald Lorton, DOS/SCP
Mr. Joseph Baldi, HRSA
Ms. Lahoma Romacki, NACO
Dr. Francis Notzon, NCHS
Mr. David Hohman, OS
Mr. David Oot, AID
Dr. Eric Goosby, AIDS/OHAP
Dr. Elaine Daniels, AIDS/OHAP
Dr. Juan Ramos, NIMH/NIH
Dr. Faye Calhoun, NIAAA/NIH
Dr. Pat Needle, NIDA
Ms. Carol Dabbs, USAID
Dr. Noreen Hynes Carus, Peace Corps
RADM Stephen Corbin, OSG
QIH Staff - AID and Parklawn

FACSIMILE TRANSMISSION SHEET

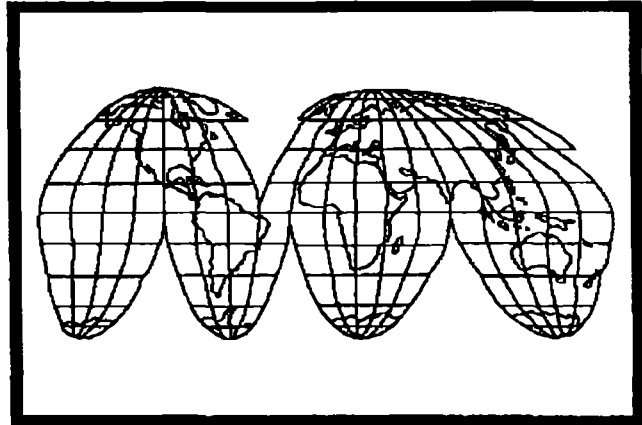
FROM: LINDA A. VOGEL

**Director
Office of International and
Refugee Health**

**Department of Health and Human Services
5600 Fishers Lane
Rockville, Md. 20857
RM.18-75**

TEL: 301-443-1774
FAX: 301-443-8288

E-Mail: LVOGELOSOPHS
Internet: LVOGEL@OSOPHS.SSW.DHHS.GOV



OFFICE OF INTERNATIONAL AND REFUGEE HEALTH

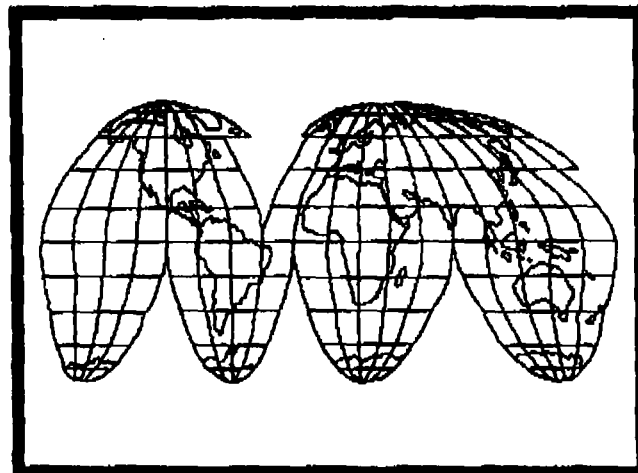
TO: Ms. Lahoma Romacki FAX NUMBER: 202-632-1096

DATE: JUN 11 1996 NUMBER OF PAGES:
(INCLUDING COVER SHEET)

☐ FYI
☐ AS REQUESTED

☐ FY ACTION
☐ AS DISCUSSED

MESSAGE:

FACSIMILE TRANSMISSION SHEET**FROM: LINDA A. VOGEL****Director
Office of International and
Refugee Health****Department of Health and Human Services
5600 Fishers Lane
Rockville, Md. 20857
RM.18-75****TEL: 301-443-1774****FAX: 301-443-6288****E-Mail: LVOGEL@OSOPHS****Internet: LVOGEL@OSOPHS.SSW.DHHS.GOV****OFFICE OF INTERNATIONAL AND REFUGEE HEALTH****TO: Ms. Lahoma Romacki** **FAX NUMBER: 202-632-1096****DATE: 5/16/96** **NUMBER OF PAGES: 2**
(INCLUDING COVER SHEET)☐ **FYI**
☐ **AS REQUESTED**☐ **FY ACTION**
☐ **AS DISCUSSED****MESSAGE:**



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary

Office of Public Health and Science
Office of International and Refugee Health

Memorandum

To: May 13, 1996
Addressees

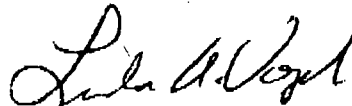
From: Director
Office of International and Refugee Health (OIRH)

Subject: Designation of Acting Director During Official Absence from
Office

I will be in Geneva, Switzerland for the World Health Assembly from May 15 through May 30, 1996.

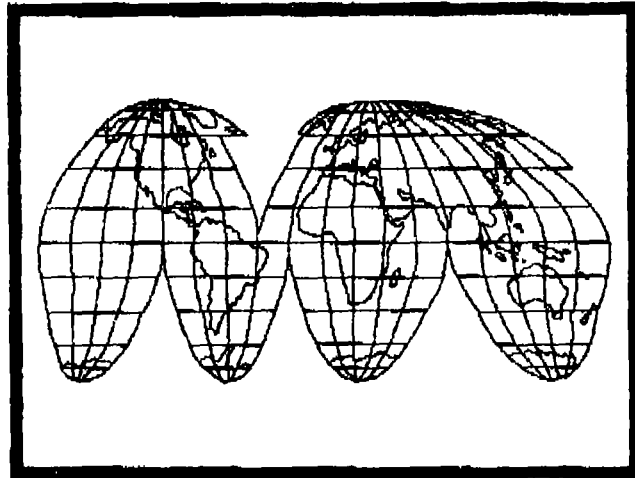
Dr. Roscoe Moore, Associate Director for African Affairs and Development Support, will serve as Acting Director, OIRH, during the period May 15 through 21.

Dr. Kenneth Bart, Associate Director for Medical and Scientific Affairs will serve as Acting Director, OIRH, during the period May 22 through May 30.


Linda A. Vogel

Addressees

Dr. Lee
Dr. Boufford
OIH Staff
PHS Agency International Health Representatives

FACSIMILE TRANSMISSION SHEET**FROM: LINDA A. VOGEL****Director
Office of International and
Refugee Health****Department of Health and Human Services
5800 Fishers Lane
Rockville, Md. 20857
RM.18-75****TEL: 301-443-1774
FAX: 301-443-6288****E-Mail: LVOGEL.OSOPHS
Internet: LVOGEL@OSOPHS.SSW.DHHS.GOV****OFFICE OF INTERNATIONAL AND REFUGEE HEALTH**

TO: Ms. Lahoma Romacki **FAX NUMBER: 202-632-1096****DATE: 4/24/96** **NUMBER OF PAGES: 3**
(INCLUDING COVER SHEET)☐ **FYI**
☐ **AS REQUESTED**☐ **FY ACTION**
☐ **AS DISCUSSED****MESSAGE:**



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary

Office of Public Health and Science
Office of International and Refugee Health

Memorandum

To: Addressees

April 23, 1999

From: Director
Office of International and Refugee Health

Subject: International Health Representatives Meeting - **May 9, 1996**

The next PHS International Health Representatives' Meeting will be held on Thursday, **May 9, 1996**, from 2:00-4:00 p.m. in the **Parklawn Building, Room 17-05**.

We welcome participation of others in your agencies/offices who are interested in the following agenda items:

DRAFT AGENDA

- World Health Assembly
- Bilateral Programs for Health Related Events
 - Gore-Chernomyrdin (Russia)
 - Mexico Bilateral Commission
 - Other bilateral developments
- OES/S&T Agreement Study
- Agency Reports

Linda A. Vogel

Page 2

Addressees

Dr. Jo Ivey Boufford, PDASH
Mrs. Barbara Cohen, OPA/OPHS
Dr. Susan Blumenthal, OWH/OPHS
Mr. Bruce Chelikowsky, IHS
Dr. Mary Cummings, AHCPR
Dr. Joe Davis, CDC
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Dr. Faye Calhoun, NIAAA/NIH
Dr. Pat Needle, NIDA
Ms. Carol Dabbs, USAID
Dr. Noreen Hynes Carus, Peace Corps
RADM Stephen Corbin, OSG
OIH Staff - AID and Parklawn



Memorandum

Date December 28, 1995

From Director
Office of International and Refugee Health

Subject Follow up on December 14, 1995, International Health
Representatives Meeting

To PHS International Health Representatives

Although, due to weather and a variety of conflicts, participation in the December 14 International Health Representatives was relatively few in numbers but it was high in quality. The agenda (attached) included: "year in review and looking forward to 1996." The idea was that agencies would discuss what they saw as the most important issues/activities from their perspective. I felt that this was a very useful agenda item and wanted to share with you my notes (attached) on what the agencies, which participated, felt was particularly important to them in international health over the past year.

Other handouts from the meeting are also attached.


Linda A. Vogel

Attachments

Memorandum

Date . December 11, 1995

From Director
Office of International Health

Subject International Health Representatives Meeting - December 14,
1995

To Addressees

The next PHS International Health Representatives' Meeting will be held on Thursday, December 14, 1995, from 2:00-4:00 p.m. in the Parklawn Building, in room 17-09.

As we reach the close of this year, I felt it might be useful for us to have a brief look at the last year (what were the most important initiatives/activities internationally for each agency) and look forward to 1996 (what are the most important activities that we should be focusing on during 1996?). We are asking each agency/office to come prepared to briefly address these two questions.

DRAFT AGENDA FOR MEETING

- ◆ Year in Review and Looking Forward to 1996
(Agencies/offices are being asked to speak briefly, from their agency's/office's perspective, on the three most important activities/initiatives in 1995 and on the three highest priorities for 1996. These may be issue specific or program specific.
- ◆ Bilateral Programs
 - Planning for Gore-Chernomyrdin VI, Jan. 1996
 - Gore-Mbeki Commission Meeting and Secretary's Trip to Africa
 - Mexico - Secretary's Trip
 - Other
- ◆ Agency Reports

Linda A. Vogel
Linda A. Vogel

Addressees

Dr. Jo Ivey Boufford, PDASH
Mrs. Barbara Cohen, OPA/OPHS
Dr. Susan Blumenthal, OWH/OPHS
Mr. Bruce Chelikowsky, IHS
Dr. Mary Cummings, AHCPR
Dr. Joe Davis, CDC
Mr. George Dines, HRSA
Ms. Julia Plotnick, HRSA
Dr. Philip Schambra, NIH
Ms. Linda Staheli, NIH
Ms. Georgia Buggs, OMH/OPHS
Mr. Stephen Sawmelle, SAMHSA
Dr. George Coelho, SAMHSA
Ms. Sharon Smith Holston, FDA
Dr. Stuart Nightingale, FDA
Mr. Walter Batts, FDA
Mr. James Harrell, ODPHP/OPHS
Dr. Linda Myers, ODPHP/OPHS
Dr. Frank Young, OEP/OPHS
Ms. Ellen Shippe, DOS/STH
Mr. Anthony Rock, DOS/STH
Mr. Joseph Baldi, HRSA
Ms. Lahoma Romacki, NAPO
Dr. Robert Hartford, NCHS
Mr. David Hohman, OS
Mr. Ronald Lorton, DOS/SCP
Mr. David Oot, AID
Dr. Eric Goosby, AIDS
Dr. Elaine Daniels, NAPS
Dr. Juan Ramos, NIMH/NIH
Dr. Faye Calhoun, NIAAA/NIH
Dr. Pat Needle, NIDA
Dr. Glen Post, USAID
Ms. Carol Dabbs, USAID
Dr. Noreen Hynes Carus, Peace Corps
RADM Stephen Corbin, OSG
OIH Staff - AID and Parklawn

Summary Notes on Discussion at December 14, 1995
International Health Representatives Meeting

Comment: The following is based on Linda Vogel's notes. Any misinterpretations by Mrs. Vogel are absolutely unintended.

Health Resources and Services Administration

- Cooperation with Central and Eastern Europe countries on children with special needs. This has involved the Maternal and Child Health Bureau and the Georgetown University Child Development Center. They have held three conferences and a fourth International Conference on Serving Children with Special Health Care needs is being planned. This conference is being expanded to include France, Czech Republic, Canada, the U.K. and PAHO. There are hopes, through PAHO, of including Costa Rica, Argentina, Brazil, and Mexico. A planning meeting was held recently.
- Small S&T grants (about \$55,000) each to the Czech and Slovak Republics and Hungary are contemplated. These will be directed toward building teams (parents, State and local officials) in these three countries to address special health care needs of children.
- Mexico border. Dr. Sumaya made an official visit to Mexico in September. While most of HRSA's effort is on the U.S. side of the Border, there is an intent to expand cooperation with Mexico. HRSA's Border Health Task Force, which involves others from PHS, is working on strategic approaches.
- Saudi Arabia - Their contract with the Red Crescent Society, for cooperation on emergency medical services and which was signed in 1985, is doing well. The University of Alaska is to start a physician assistant program. Dr. Sumaya spoke before the U.S. Saudi Economic Commission. There is a U.S. team of 7 in Saudi Arabia working on the project.

Food and Drug Administration

- FDA's domestic tobacco initiative is of proving to be of substantial interest to other countries.

- Seafood safety. There is a new regulation on hazard analysis and critical control point on seafood safety. Pursuant to this, FDA will pursue a number of MOUs with outer countries. DOS approval of an agreement with New Zealand is pending.
- Internal reorganization. The Commissioner signed off on a reorganization package which established the Office of International Affairs of FDA, heretofore the International Affairs Staff.
- EU and mutual recognition agreements. In November an impasse was reached on negotiation on GMPs for pharmaceuticals. The EU sees these proposed mutual recognition agreements as trade; FDA sees them as consumer protection. The issue is being raised to a higher political level. Trade facilitation will be both ways. The EU would like FDA to clearly identify certain manufacturing sites where FDA would cease inspections. FDA wants to look at how these sites do their work. This issue may require the Secretary's attention at some point and involve a secretarial-level approach to her from DOC.
- International Conference on Harmonization (ICH). The ICH is directed toward harmonizing regulatory requirements with Europe and Japan. This has been going on since 1991. Thus far, over 20 guidelines have been harmonized. The effort will continue. There will be a 4th International Conference on Harmonization in Brussels in 1996. FDA briefed the appropriations committee.
- Liberalization of FOIA. There has been improved collaboration between FDA and foreign counterparts in light of the fact that FDA is now allowed to share confidential/commercial information with foreign counterparts without triggering release of this same information to the public. This was achieved by going through a process of publishing in the Federal Register a notice and opportunity to comment on a proposed rulemaking on this issue. It is now possible to share effort on joint reviews of NDAs in order to get products approved sooner and to share information on products at the same time. (Note: The information shared is not trade secret information).

- Technical cooperation with Russia and Israel remains a high priority. Bilateral cooperation with Canada, Mexico, the European Union is also important. A trilateral Memorandum of Cooperation with signed recently with Canada and Mexico
- In 1996, FDA's international function will be organized and they will focus more strongly on international agreements, communications and technical cooperation (workshops).

Office of Disease Prevention and Health Promotion

- High priority is being placed on cooperation with Egypt and Russia.
- The process to develop "Healthy People 2010" has begun. In this edition there will be a section on international lessons learned.

National HIV/AIDS Policy Office, OPHS

- The 11th International Conference on AIDS will be held in Vancouver, Canada. They are working with Canada to develop three satellite conferences. One will be focused on HIV care and HIV rehabilitation which will see AIDS as a chronic disease in which some people spend their lives without symptoms.
- Mexico. They are working with the Mexican Secretariat of Health's HIV unit on TB prophylaxis.

Office of Minority Health, OPHS

- Mexico continues as a high priority. They have participated on the "design team" and in the "mapping exercise." OMH is working on the resource book on border health promotion. Jerry McCammon who is the State Officer in OMH is planning a visit to the PAHO Field Office in El PASO in order to become better acquainted with health issues in communities along the border.

Office of Women's Health, OPHS

- Involved in planning a U.S.-Mexico Border Women's Health Conference, which will be co-sponsored by the University of Texas.

- The U.S.-Canada Women's Health Summit, which will take place March 18-20, 1996, in Ottawa, is a high priority.
- Circumpolar Conference to be held in Alaska in May will have a women's health component. Karen Matusuda in Region X is actively involved.

Agency for International Development

- Reengineering of the organization is ongoing. There is a desire to see greater responsiveness in how AID designs and implements projects.
- The five previously identified strategic areas remain the same--
 - Environment
 - Democratization
 - Population, health and nutrition
 - Economic growth
 - Human resources
- Support for population, health and nutrition amounts to almost one-half of what AID spends for development assistance. Congress is, however, taking down the total of AID's budget.
- There will be a greater focus on integrated projects.
- New thrusts will be on health problems of young adults and quality of care.
- There will be much more effort on performance measures. A high priority is being given to real performance measures. Contracts will be performance based.
- AID is working toward phasing out of its activities in some countries. For example, Indonesia and Morocco are currently developing transition plans. Kenya will follow.
- The Administrator places a high priority on "Lessons without Borders." Note: This is an area for potential cooperation between HHS and AID.



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

FEB 21 1996

Assistant Secretary for Health
Office of Public Health and Science
Washington D.C. 20201

FROM: Principal Deputy Assistant Secretary for Health

SUBJECT: U.S.-Mexico Binational Commission and Health Work Group

TO: Director/Administrator, Public Health Service
Operating Divisions
Assistant Secretary for Aging
Deputy Assistant Secretary for Women's Health
Deputy Assistant Secretary for Population Affairs
Deputy Assistant Secretary for Health
(Disease Prevention and Health Promotion)-
Deputy Assistant Secretary for Minority Health
Director, Office of HIV/AIDS Policy

Thank you for your comments on the draft U.S.-Mexico Memorandum of Cooperation (MOC), which was provided to you in early December. A copy of the proposed MOC, reflecting Agency's/Office's input, is attached. This draft of the MOC has been forwarded to the Department of State for further review and clearance. Secretary Shalala plans to sign the agreement during the U.S.-Mexico Binational Commission meeting, May 6-7, in Mexico City.

The proposed MOC is an outcome of recent discussions between Secretary Shalala and Mexico's Secretary of Health, Dr. Juan Ramon de la Fuente. They agreed to work toward a joint "umbrella agreement" that would provide a framework for fostering bilateral cooperation in public health and related areas.

During their discussions, Secretary Shalala and Secretary de la Fuente agreed to focus initially on four priority areas:

- ◆ smoking prevention, with an emphasis on adolescents,
- ◆ migrant health,
- ◆ immunization, and
- ◆ women's health (including reproductive health)

These four areas will form the basis for discussions of the Health Workgroup in connection with the May meeting of the

Page 2

U.S.-Mexico Binational Commission. Based upon nominations from your Agencies and Offices, interagency core groups for each of the four areas will be formed. For overall project coordination, a lead person will be designated within each core group.

These U.S. core groups will work with their Mexican counterparts to establish communication linkages, identify possible activities for joint collaboration, and develop preliminary plans of action to be discussed during the Commission meeting. A first step might be to look at existing domestic and applicable international activities and determine how they could be built upon for cooperation with Mexico. Any bilateral activities proposed should, however, be based upon existing budgetary capacities, since no new or earmarked funds are expected to be available. It is understood, however, that the Mexican side would be prepared to meet its own expenses, unless other arrangements are agreed upon.

The OPHS Office of International and Refugee Health (OIRH) will be working with me to develop and coordinate this effort on the Secretary's behalf. OIRH staff recently met with Mexico's new Director General for International Affairs, Dr. Federico Ortiz Quesada, regarding Mexico's identification of lead persons for the focus areas. Names will be forwarded to us in the near future.

We need to precede now to identify area leads and core group participants on the U.S. side.

As appropriate for your Agency, please advise the Office of International and Refugee Health of the names of representatives for any or all of the four areas in which your Agency may wish take the lead and/or participate. Please respond to Linda Vogel, Director, OIRH, Parklawn Building, Room 18-75, by COB February 28.

Thank you for your assistance in this matter. If you have any questions, please call Linda at 301/443-1774 or Dick Walling and Lou Valdez of her staff at 301/443-4010.


Jo Ivey Boufford, M.D.

Attachment

cc: Ms. Linda A. Vogel
Mr. David Hohman
Agency International Health Representatives

PRELIMINARY DRAFT (2/96)
FOR DISCUSSION PURPOSES AND INTERNAL REVIEW ONLY

MEMORANDUM OF COOPERATION BETWEEN
THE DEPARTMENT OF HEALTH AND HUMAN SERVICES
OF THE UNITED STATES OF AMERICA
AND
THE SECRETARIAT OF HEALTH OF THE UNITED MEXICAN STATES
FOR COOPERATION IN THE FIELD OF HEALTH

The Department of Health and Human Services of the United States of America and the Secretariat of Health of the United Mexican States,

Realizing the importance of working together to address common health problems and public health issues of mutual concern,

Recognizing the existence of broad, bilateral interests in the control, prevention and amelioration of diseases and the promotion of health,

Recognizing the historical relationship and shared commitment to improving the health status of people along the U.S.-Mexico Border,

Desiring to foster greater understanding and strengthen future public health relationships between the two countries, and where appropriate with other countries,

Intending to strengthen the existing linkages between the public health and scientific communities in both countries, and where appropriate with other countries, and

Wishing to enhance their cooperation, do enter into the following Memorandum:

ARTICLE I

General Principles

The Department of Health and Human Services of the United States of America and the Secretariat of Health of the United Mexican States (hereinafter referred to as the Participants) shall strive to enhance and strengthen cooperative efforts in the field of public health and science in accordance with the following general principles:

- (1) This Memorandum provides a framework to encourage bilateral cooperation in addressing issues and problems of importance for both countries.
- (2) Cooperation under this Memorandum is intended to support and strengthen relationships currently established in the field of public health and science between institutions or individuals of the United States of America and the United Mexican States and would in no way limit such relationships. Rather, the Participants shall work to identify areas for mutually beneficial joint efforts and to promote cooperation through a coordinated approach.

- (3) Joint activities, where possible, should be coordinated with, or be supportive of, the activities and goals of international health bodies, including the World Health Organization and the Pan American Health Organization.

ARTICLE II

Areas of Cooperation

A. The Participants aspire to strengthen cooperation across a broad range of mutual interests. Efforts are intended to be directed at fostering collaboration where areas of mutual interest exist, such as on the U.S.-Mexico border, and including but not limited to:

- (1) Planning of health and human manpower and services at various levels;
- (2) Health and human services research, including evaluation and assessment of health services, health care technologies and delivery systems, health economics, financing of health services, health care cost containment, and long-term care services, including non-institutional alternatives;
- (3) Health and human information systems, including statistical methodologies and information exchange;

- (4) Health related areas concerning regulated products, specifically foods (including dietary supplements), drugs (including biologics), cosmetics, medical devices, radiation-emitting electronic products and related products;
- (5) Other public health areas, including, but not limited to, epidemiology, environmental health, occupational health, maternal and child health, aging, nutrition, and disease prevention and health promotion as well as special issues such as HIV/AIDS and cancer;
- (6) Biomedical research; and
- (7) Health-related concerns of women and special populations such as migrants, older persons, persons with disabilities, adolescents and children, and other vulnerable groups, and border populations.

Other specific areas may be identified from time-to-time by mutual agreement of the Participants.

B. It is not expected that products of commercial value will be generated by activities undertaken pursuant to this Memorandum. If, during the development of an activity, products of commercial value are generated, ANNEX I to this Memorandum will apply.

ANNEX I to this Memorandum is the same as the Annex on

Intellectual Property Rights (IPR) to the Memorandum for Scientific and Technical Cooperation between the United States of America and Mexico of June 15, 1972, as amended by the exchange of diplomatic notes dated August 10, and September 22, 1994.

ARTICLE III

Methods of Cooperation

The cooperation referred to in this Memorandum may consist of, in accordance with the national laws of the Participants, the promotion of: exchanges of technical information; visits of professional specialists; cooperative research, including biomedical and health services research; training activities; and forums such as seminars, workshops, symposia, and conferences, consistent with the missions and ongoing programs of the Participants.

The Participants also intend, as appropriate, to encourage the creation of direct relationships between institutions and individuals in the two countries that are not within the direct jurisdiction of the two Governments and their implementing bodies.

ARTICLE IV

Technology Transfer

A. Both participants agree that no information or equipment requiring protection in the interests of national defense or foreign relations of either participant and classified in accordance with the applicable national laws and regulations will be provided under this Memorandum. In the event that information or equipment which is known or believed to require such protection is identified in the course of cooperative activities undertaken pursuant to this Memorandum, it will be brought immediately to the attention of the appropriate officials and the participants will consult to identify appropriate security measures to be agreed upon by the participants in writing and applied to this information and equipment and will, if appropriate, amend this Memorandum to incorporate such measures.

B. The transfer of unclassified export-controlled information or equipment between the participants will be in accordance with the relevant laws and regulations of each Country. If either participant deems it necessary, detailed provisions for the prevention of unauthorized transfer or retransfer of such information or equipment will be incorporated into the contracts or implementing arrangements.

Export-controlled information will be marked to identify it as export-controlled and identify any restrictions on further use or transfer.

ARTICLE V

Organization of Cooperation

The Secretary for the U.S. Department of Health and Human Services and the Secretary of Health of Mexico are hereby designated as responsible for overseeing implementation of the Memorandum for the respective Participants. The Secretaries will each designate an appropriate office to serve as their respective coordinator for cooperation under this Memorandum. The designated coordinating offices shall facilitate the programs and activities or efforts carried out or strengthened under this Memorandum.

The Health Workgroup of the U.S.-Mexico Binational Commission, which meets approximately annually, will serve as a high-level forum to help fulfill the intent of this Memorandum.

ARTICLE VI

Financing

The Participants agree that the activities provided for in this Memorandum shall be financed from funds allocated in their respective budgets, subject to the availability of such funds and the laws and regulations of each country. Each country will be expected to bear the costs of its own participation, except that alternate funding arrangements for specific activities may be formulated as appropriate.

ARTICLE VII

Other Agreements

This Memorandum does not affect the rights and obligations of the Participants or their governments under other agreements.

ARTICLE VIII

Entry into Force, Termination, and Amendment

The Memorandum shall, upon signature by both Participants, remain in force for five years. It may be extended by mutual written agreement of the Participants. It may be amended by mutual written agreement, and may be terminated at any time by either Party upon ninety (90) days' written notice to the other Party.

PRELIMINARY DRAFT 2/96

In the event of termination of this Memorandum, the validity or duration of ongoing activities shall not be affected.

In witness thereof the undersigned, being duly authorized by their respective governments, have signed this document this _____ day of _____, 19____.

FOR THE DEPARTMENT OF HEALTH
AND HUMAN SERVICES OF THE
UNITED STATES OF AMERICA:

FOR THE SECRETARIAT OF HEALTH
OF THE UNITED MEXICAN STATES:

ANNEX I

INTELLECTUAL PROPERTY

Pursuant to Article II.B. of this Memorandum:

The Participants shall ensure adequate and effective protection of intellectual property created or furnished under this Memorandum and relevant implementing arrangements. The Participants agree to notify one another of any inventions or copyrighted works arising under this Memorandum and to seek protection for such intellectual property in a timely fashion. Rights to such intellectual property shall be allocated as provided in this Annex.

I. SCOPE

A. This Annex is applicable to all cooperative activities undertaken pursuant to this Memorandum except as otherwise specifically agreed by the Participants or their designees.

B. For purposes of this Memorandum, "intellectual property" shall have the meaning found in Article 2 of the Convention Establishing the World Intellectual Property Organization, done at Stockholm, July 14, 1967.

C. This Annex addresses the allocation of rights, interests, and royalties between the Participants. Each Party shall ensure that the other Party can obtain the rights to intellectual property allocated in accordance with the Annex, by obtaining those rights from its own participants through contracts or other legal means, if necessary. This Annex does not otherwise alter or prejudice the allocation between a Party and its nationals, which shall be determined by that Party's laws and practices.

D. Disputes concerning intellectual property arising under this Memorandum should be resolved through discussions between the concerned participating institutions or, if necessary, the Participants or their designees. Upon mutual agreement of the Participants, a dispute shall be submitted to an arbitral tribunal for binding arbitration in accordance with the applicable rules of inter-national law. Unless the Participants or their designees agree otherwise in writing, the arbitration rules of the United Nations Commission on International Trade Law (UNCITRAL) shall govern.

E. Termination or expiration of this Memorandum shall not affect rights or obligations under this Annex.

II. ALLOCATION OF RIGHTS

A. Each Party shall be entitled to a non-exclusive, irrevocable, royalty-free license in all countries to translate, reproduce, and publicly distribute scientific and technical journal articles, reports, and books directly arising from cooperation under this Memorandum. All publicly distributed copies of a copyrighted work prepared under this provision shall indicate the names of the authors of the work unless an author explicitly declines to be named.

B. Rights to all forms of intellectual property, other than those rights described in Section II.A. above, shall be allocated as follows:

1. Visiting researchers, for example, scientists visiting primarily in furtherance of their education, shall receive intellectual property rights in conformity with the legislation of the receiving country and under the policies of the host institution. In addition, each visiting researcher named as an inventor shall be entitled to share in a portion of any royalties earned by the host institution from the licensing of such intellectual property.

2. (a) For intellectual property created during joint research, for example, when the Participants, participating institutions, or participating personnel have agreed in advance on the scope of work, each Party shall be entitled to obtain all rights and interests in its own territory. Rights and interests in third countries will be determined in implementing arrangements. If research is not designated as 'joint research' in the relevant implementing arrangements, rights to intellectual property arising from the research will be allocated in accordance with Paragraph II.B.(1). In addition, each person named as an inventor shall be entitled to share in a portion of any royalties earned by either institution from the licensing of the property.

(b) Notwithstanding Paragraph II.B.2 (a), if a type of intellectual property is protected under the laws of one Party but not the other Party, the Party whose laws provide for this type of protection shall be entitled to all rights and interests worldwide. Persons named as inventors of the property shall nonetheless be entitled to royalties as provided in Paragraph II.B.2 (a).

III. BUSINESS-CONFIDENTIAL INFORMATION

In the event that information identified in a timely fashion as business-confidential is furnished or created under the Memorandum, each Party and its participants shall protect such information in accordance with applicable laws, regulations, and administrative practice. Information may be identified as "business-confidential" if a person having the information may derive an economic benefit from it or may obtain a competitive advantage over those who do not have it, the information is not generally known or publicly available from other sources, and the owner has not previously made the information available without imposing in a timely manner an obligation to keep it confidential."