



Global Matters

The newsletter of the Office of Global Health

Volume 25, Fall 2013

Fall 2013 Global Health Lecture Series



12:00 Noon CT
ACB 120

- Wednesday, September 18
Hasanat Alamgir, PhD
[Garment Workers of Bangladesh](#)
- Wednesday, October 2
Brian Engel, PhD
[The Peace Corps & Papua New Guinea](#)
- Wednesday, October 30
Leslie Timmons & Stacy Lambright
[Combating Domestic Minor Sex Trafficking in the South Plains](#)
- Wednesday, November 6
Hope Floeck
[Breedlove: Ending Hunger Around the World](#)
- Wednesday, November 20
TTU Engineers Without Borders
- Wednesday, December 4
Surendra Varma, MD
[Vietnam Revisited](#)

Presentations with hyperlinks were recorded and can be viewed on the [OGH website](#) or checked out from the [OGH library](#).

Disparities and Possibilities: Global Health Immersion in Nicaragua

By Teresa Evan, School of Nursing, MSN/FNP

The morning bustled with activity. The group gathered, not knowing what to expect. A well preserved Blue Bird school bus was loaded quickly with dozens of suitcases and footlockers jammed with medical supplies. As we headed out of town, the view quickly changed from the urban congestion of Managua to a well maintained rural highway flanked by green, lush mountains punctuated by small villages. Many of the buildings we passed were in various stages of completion. Each cinderblock was a testament to progress since families improve their homes as money becomes available, so a house may have half a roof or a wooden wall with large gaps abutting one of solid brick. Finally, we rounded a bend and were greeted by a sprawling town of multi-colored buildings nestled in the valley below.

And so began the week-long journey of an inter-professional group of health care providers and students to Jinotega, Nicaragua in July of this year. The team, led by Dr. Patti Patterson and Dr. Amy Moore, is part of an ongoing effort to impact health and wellness in this mountain city of about 55,000. According to the World Bank, Nicaragua is the second poorest nation in the region after Haiti. Roughly 80% of the population subsists on less than \$2 a day, making all of us relative millionaires as Benny Baker our in-country host explained. Although Nicaragua has been ravaged by war and most recently hurricane Felix in 2007, the country is still managing to make strides. The government is focusing resources in the rural areas where more than two-thirds of the poor and extremely poor reside. They are

trying to stretch scarce government resources by collaborating with organizations, corporations, and international aid agencies. By working in Jinotega, the last outpost before the remote highland regions, Texas Tech Health Sciences Center (TTUHSC) is in a position to truly make a difference.

The conditions contrast sharply with what we are accustomed to in the United States. A visit to the local hospital revealed overcrowding, inadequate facilities, and minimal supplies, including a lack of infection prevention staples such as gloves, paper towels, and

accomplish with so few resources. As for us, we were able to refer a number of children who needed medical attention to the mission clinic for follow-up care, and we provided much needed vitamins and albendazole for the treatment of parasitic worm infestations. Additionally, it was an opportunity to provide some wellness education, encouragement, and kindness to numerous children who have not interacted much with foreigners in this capacity.

On the clinic days, people lined up on the street to be seen by one of the medical providers with roughly 500 seen over a two-day period. Common ailments included degenerative joint disease, fungal infections, abdominal pain, foot pain, and skin infections, and virtually everyone had tooth decay. The scope of the health problem is vast, and even armed with the many resources we had brought from the States there was an obvious feeling of futility at the end of the day. However, our in-country hosts at the mission, in conjunction with other aid groups and the government, do provide an ongoing commitment in the community to which TTUHSC can continue to add and expand.

I am deeply honored to have been included on the team. I left energized about the role of nurse practitioners as primary care providers and preventative care educators, and I look forward to participating in global health initiatives in the future. I am forever changed by this brief immersion into the global health arena, and I am optimistic about the possibility of transforming care both in the United States and abroad.



soap. However, the dedicated nurses took time from their day, which most certainly was a challenge, to participate in an in-service developed by nurse practitioner students covering topics such as CPR, choking, umbilical cord care, family planning, nutrition, and STDs. The nursing director looks forward to working with TTUHSC in determining additional topics to be taught to the hospital staff on subsequent visits.

The school where we completed 750 screening visits was in need of repair and lacked basic sanitation facilities. Despite the conditions, students appeared eager to be there and ready to learn. I was struck by how much the teachers were managing to

Available from the OGH Library

The following resources are available for check-out:

Book

The Road of Lost Innocence
By Somaly Mam

Born in a village deep in the Cambodian forest, Somaly Mam was sold into sexual slavery by her grandfather when she was twelve years old. For the next decade, she was shuttled through the brothels that make up the sprawling sex trade of Southeast Asia. She suffered unspeakable acts of brutality and witnessed horrors that would haunt her for the rest of her life—until, in her early twenties, she managed to escape. Unable to forget the girls she left behind, Mam became a tenacious and brave leader in the fight against human trafficking, rescuing sex workers—some as young as five and six—offering them shelter, rehabilitation, healing, and love, and leading them into new life.

Movie

Black and Blue

When Georgia Tech came to Michigan in 1934, the Wolverines were forced to bench their best player, Will Ward, because he was an African-American. The incident infuriated Ward's best friend on the team, a future U.S. president by the name of Jerry Ford, who threatened to quit the team in response. The friendship that began in the Big House lasted all the way to the White House. This is the story of two schools, two friends, and a game that changed everything.

For more information about the resources available from the OGH library, visit our [website](#).

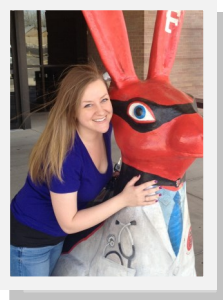
International Medicine Club Officers

It's a new academic year and with that comes a new group of International Medicine Club (IMC) Officers. Here's a look at the 2013-2014 officers.



Andrew Roth
IMC President

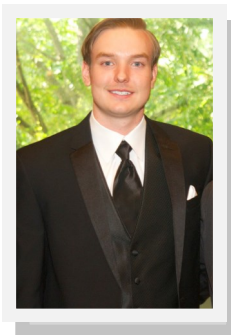
Andrew is a 25-year-old second year medical student from Houston, Texas. He completed his undergraduate degree at Tulane University. His intended area of focus is Internal Medicine. Regarding international medicine, Andrew expressed, "I enjoy learning about other cultures and treating diseases that we do not see in the US." An interesting fact about Andrew: when growing up he lived in three foreign countries, including Saudi Arabia, United Arab Emirates, and England.



Marta Hoes
IMC Vice President

Marta is a 25-year-old from

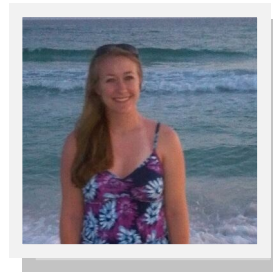
Dallas, Texas. She graduated from Texas Tech University with a major in German. She is a second year student in the dual degree program for medicine and law. Her area of focus is undetermined, but she's leaning toward Pediatrics. She is interested in global health because "International medicine is about so much more than just science — it involves law, politics, economics, and religion. International medicine constantly reminds healthcare workers of the importance of considering each patient's values in providing care. There is such a great need for care in the world around us, and we are in a good place to help others out. But there is also a lot we can learn from how cultures give and receive medical care." Some interesting facts about Marta: she has been to 30 different countries, she has a cat named Paul, and her dad invented the Lunchable.



James Keeton
IMC Secretary

James is a 24-year-old medical student from Bulverde, Texas, a small town north of San Antonio. He earned his undergraduate degree in Biochemistry at Abilene Christian University. His area of interest is Internal Medicine with the possibility of a subspecialization. When

asked why he is interested in international medicine he replied, "I am interested in international medicine/global health because I am interested in educating myself regarding the various ethical and health issues on a global scale. I have also taken an interest in medical missions since participating in one in Nicaragua during undergrad." Something interesting about James: he has been bear hunting in Alaska, although he did not come back to Texas with a bear nor spot one while he was there.



Kelsey Brinkley
IMC Treasurer

Kelsey is a 23-year-old from Rowlett, Texas. She is a second year medical student. She was a psychology major at Stephen F. Austin State University. Her area of focus is still undecided, but she's leaning toward Family Practice. Regarding international medicine, Kelsey said, "I'm interested in international medicine because I love learning about other cultures and visiting other countries. As a doctor, I plan on giving back by traveling to other countries to assist with their health needs." Something interesting about Kelsey: she was bitten by a brown recluse and is still terrified of spiders.

U.S. Study Abroad: Leading Destinations

Taken from The Institute of International Education—Open Doors Data

Top 25 Destinations of U.S. Study Abroad Students, 2009/10 – 2010/11					
Rank	Destination	2009/10	2010/11	% of Total	% Change
	World Total	270,604	273,996	100.0	1.3
1	United Kingdom	32,683	33,182	12.1	1.5
2	Italy	27,940	30,361	11.1	8.7
3	Spain	25,411	25,965	9.5	2.2
4	France	17,161	17,019	6.2	-0.8
5	China	13,910	14,596	5.3	4.9
6	Australia	9,962	9,736	3.6	-2.3
7	Germany	8,551	9,018	3.3	5.5
8	Costa Rica	6,262	7,230	2.6	15.5
9	Ireland	6,798	7,007	2.6	3.1
10	Argentina	4,835	4,589	1.7	-5.1
11	India	3,884	4,345	1.6	11.9
12	South Africa	4,313	4,337	1.6	0.6
13	Mexico	7,157	4,167	1.5	-41.8
14	Japan	6,166	4,134	1.5	-33.0
15	Brazil	3,099	3,485	1.3	12.5
16	Israel	3,146	3,441	1.3	9.4
17	Greece	3,700	3,428	1.3	-7.4
18	Czech Republic	3,409	3,291	1.2	-3.5
19	Chile	3,115	3,280	1.2	5.3
20	Ecuador	2,960	3,107	1.1	5.0
21	New Zealand	3,113	2,900	1.1	-6.8
22	Austria	2,701	2,736	1.0	1.3
23	South Korea	2,137	2,487	0.9	16.4
24	Denmark	2,228	2,478	0.9	11.2
25	Netherlands	2,369	2,467	0.9	4.1

Institute of International Education. (2012). "Top 25 Destinations of U.S. Study Abroad Students, 2009/10 - 2010/11." Open Doors Report on International Educational Exchange. Retrieved from <http://www.iie.org/opendoors>

Mark Your Calendar for the Global Perspectives Film Series



You're invited to join the Office of Global Health as we host a screening of one of the many films from our library.

**12:00 Noon
CST
ACB 240**

- Thursday
September 12
- Thursday
October 3
- Thursday
November 14
- Thursday
December 12

November Feature film: *Poor Kids*

These are hard times in the Quad Cities, a great American crossroads along the border of Iowa and Illinois, where the Mississippi River intersects Interstate 80. It's home to John Deere manufacturing and the nation's breadbasket. But it's also an area deeply scarred by the Recession. *FRONTLINE* spent months following three young girls who are growing up against the backdrop of their families' struggles against financial ruin. The result is an intimate portrait of the economic crisis as it's rarely seen, through the eyes of children. At a time when one in five American kids lives below the poverty line, *Poor Kids* is an unflinching and revealing exploration of what poverty means to children, and to the country's future.

Attendees are welcome to bring their own lunch.

Free snacks will be provided!

When in... Hungary

- Exchange a firm handshake with everyone in the group upon arrival; this is optional upon departure.
- If someone has a professional title, it is polite to use it with their last name.
- You should always acknowledge, or even stand up, when an elder enters the room.
- Hungarians are initially wary of foreigners. Friendship and trust are built slowly; over-familiarity is considered superficial and is viewed with distrust.
- *Magyarul*, the Hungarian language, is very difficult, so if you learn and use a few simple phrases it will be much appreciated.
- Hello/Goodbye is *Szia*. Thank you is *Köszönöm*. Yes is *Igen*. No is *Nem*.
- Keep your knife and fork in your right and left hands, respectively, at all times; don't put your knife down to eat with your fork.
- Don't start eating until someone (usually the host) has said, *Jó étvágyat*, an equivalent of *bon appetite*.
- Leave your napkin on the table rather than placing it in your lap. Keep your hands in view and your elbows off the table.
- Alcoholic drinks are usually served after a meal, and it is impolite to refuse.

Pharmacy Group Performs Mission Work in Peru

Taken from the TTUSCH School of Pharmacy Dean's Desk Newsletter

In May, a team of TTUHSC pharmacy students and faculty members spent a week providing health care services and companionship to children in Huancayo, Peru.

The students included Dallas P3s Olga Shvarts and Michelle Sterrett; Lubbock P3s Michelle Castelli, Chris Figert and Holly Molloy; Amarillo P2s Cody Frausto and Cassandra Sheldon; and Abilene P2 Adriana Oviedo. Faculty members Dr. Jamie McCarrell and Dr. Cindy Raehl accompanied the students, who are all members of TTUHSC's Foundation for International Medical Relief of Children (FIMRC) chapter.

FIMRC is a nonprofit organization dedicated to improving pediatric and maternal health in the local community and throughout the developing world by implementing innovative and self-sustainable health improvement programs.

McCarrell said the national FIMRC office, in conjunction with field operators in Peru, determined the mission location. He said the decision to go to Huancayo was based upon the needs of the community and the available opportunities for volunteers traveling to Peru.

"The main purpose of the mission was to provide health care and health education to the underprivileged children in Peru," McCarrell said. "We were also able to spend a significant amount of time with a group of Peruvian orphans that was not necessarily health care focused. This allowed our volunteers and these children to engage in natural

relationship-building activities such as group games, personal conversations and the basic human contact that the children crave so much."



Frausto said the group was introduced to the country's health care system by visiting local hospitals, accompanying doctors as they made their rounds, observing surgeries and births, and interacting



with patients. They also attended a presentation about the Peruvian health care system given by local medical school students.

"We spent an afternoon visiting a local elementary school where we gave oral fluoride treatments to around 200 children," Frausto said. "A big problem for the children in Huancayo is cavities due to the poor water system, low resources and a general lack of knowledge about dental hygiene."

Castelli said she became interested in the FIMRC mission trips during her first year in pharmacy school, but never thought she'd get the opportunity to participate.

Now, as the chapter's president-elect, she was the person most responsible for planning the 2013 trip. "I am so glad the opportunity presented itself for me to not only help plan the trip but also to be able to attend," Castelli said. "It was such a great experience being with

students and professors from school, working with them in an environment that is totally different than the normal classroom set-up and combining service and health care into one trip."

Castelli said the volunteers observed C-section and natural births in a neonatal ICU unit. At another facility they sat in on complicated surgeries such as a leg amputation and a hysterectomy. They were also taught how to perform surgical sutures.

"Many of these experiences can't be watched or performed directly in the United States, so it was definitely a unique and unforgettable experience," she added.

McCarrell said the mission is a valuable experience for the student volunteers for several reasons. First, it introduces them to a health care system other than their own where much of the care is suboptimal or non-existent for many citizens.



Continued on the top of page 5.

Pharmacy Group Performs Mission Work in Peru Cont.

Second, the students get to participate in activities that allow them to develop personal experiences with underprivileged children. He said this fosters a better spirit of sympathy and empathy when working with similar patient groups within the U.S.

"The children at the El Rosario Orphanage in Huancayo loved every minute of spending time with our volunteers," McCarrell said. "We were also able to provide the orphanage with some basic goods such as towels and supplies for their vocational training programs. The emotional and physical impact of our presence there will likely be long-lasting and enhanced by future volunteers."

Castelli said there was no real plan for the mission beforehand other than helping people who were in need of health care. She said the country's outdated surgical stand-

ards and medical technology and equipment gave her and her fellow volunteers an appreciation of the American health care system.

"They don't even have doctors of pharmacy in Peru, much less all the medicinal knowledge and options



that we have here," Castelli said. "It made me want to give my future patients the best care possible because we are definitely blessed to have the information and technology that we do. It also drives my passion for helping others, especially the

unfortunate. You get the feeling that you are doing something good, serving those that can't serve themselves, and that is our ultimate goal as pharmacists."

Frausto agreed and said mission trips like those made possible through FIMRC are a blessing for the patients and for those who volunteer.

"The feeling you get when you're doing something like this is just unbelievable and unforgettable, and I know God put the desires in my heart to do missions like this for a reason," Frausto said. "It allows us to utilize the skills and abilities we have acquired in pharmacy school to help others that are in need and to glorify God every step of the way."

When in... Hungary Cont.

- Hungarians have a unique aversion to clinking glasses during a toast, in tribute to the 13 Hungarian generals who were arrested and jailed during the revolution of 1848. Their harsh Austrian captors used to clink glasses, so the Hungarians vowed to avoid this custom for the next 150 years. Even though the protest was officially fulfilled by 1998, it is often upheld.
- Bus tickets are bought from a ticket booth on the street and then validated with a machine on board; if you wait and pay the driver, the ticket is more expensive.
- Many trains are divided into compartments and it is polite to ask those already occupying them if it is okay to sit down before you join them.
- It is possible to hail a taxi, but is more common to phone or go to a taxi stand.
- When visiting a Hungarian home, bring flowers or candy for the host and small gifts for any children.
- Tipping is widespread for everything from restaurants (15 to 20 percent) and taxi drivers (10 percent) to hairdressers, gas station attendants, and even doctors and dentists. If you don't leave a tip, it is a sign that you were dissatisfied with the service.

Taken from **Behave Yourself!** By Michael Powell

Country Close-up* *every issue OGH will select another country to feature

Macau

Macau, a Special Administrative Region of the People's Republic of China, has a population of approximately 583,003. Located in Eastern Asia, Macau includes the peninsula of Macau and the islands of Taipa and Coloane.



The Portuguese colonized Macau in the 16th century, making it the first European settlement in the Far East. Cantonese is spoken by the majority; however, Mandarin,

English, and Portuguese are also spoken. Fifty percent of the population is Buddhist and fifteen percent of the population is Roman Catholic.

Macau's economy is heavily reliant on the casino industry. It is one of the world's largest gaming centers. In 2006, Macau's gaming revenue surpassed that of the Las Vegas strip. Macau's currency is the pataca, closely tied to the Hong Kong dollar. As of September 11, 2013, 1 MOP (Macau Pataca) is equal to \$0.13 USD.

According to the CIA's World Factbook, the life expectancy at birth for males is eighty-one years, while for females it is eighty-seven years. The World Health Organization (WHO) reports the leading causes of death to be hypertension, lung infections, diabetes, ischaemic heart disease, and other chronic obstructive pulmonary diseases.



International Flavor



Dinich Wot

(Ethiopian Potato Stew)
 recipe provided by
 Vivian Giles, MPH,
 School of Medicine,
 Class of 2017

Ingredients:

- 1 tbsp. olive oil
- 1 large onion
- 4-6 cloves of garlic
- 1 tbsp. turmeric
- 2 pounds potatoes, diced
- 1 pound carrots, diced
- 4 cups water or broth

Instructions:

- Sauté diced onion and minced garlic in olive oil over medium heat.
- Cook until onions are translucent.
- Add potatoes and carrots.
- Sprinkle turmeric over the top and stir until potatoes are well-coated.
- Add the liquid.
- Cover and reduce heat.
- Simmer until potatoes are tender.

Himalayan Health Exchange

by Ryan Thomas, School of Medicine, Class of 2016

My days in the Indo-Tibetan borderlands begin and end with chai. Infused with the countless spices of a people hidden among countless mountains, I prepare, learn, and reflect, sipping this carefully drawn brew.



One such evening, I find myself in Tabo, an ancient village in Spiti Valley and home to the oldest continually maintained monastery in the Himalayas. As I analyze a diagram outlining the proportions of Buddha, my friend Norbu greets me in Bhoti, one of many languages I've been grappling with during my month-long medical excursion. Norbu is native to India and one of many new faces that I've come to see as family among the diverse assortment of medical students, doctors, cooks, drivers, and translators that I caravan with.



I respond saying *Jullay*, the standard Bhoti greeting, and take another sip of my chai. As my eyes travel across pictures of some of the region's highest mountain peaks, I stumble upon an inscription that I had only heard up until then- *Om Mani Padme Hum*. Norbu begins explaining the meaning behind this ancient mantra, but for me to really understand, he must recount the story of Prince Siddhartha

and his *four sights*.

Prince Siddhartha lived a life of luxury and pleasure in the royal palace, sheltered from the reality of the world that existed outside the court grounds. His father intended to steer his son's destiny away

from a prediction that he would abandon his royal obligation. One day, while his father was away, the young prince seized an opportunity to venture outside of the castle walls. On his carriage ride, Siddhartha experienced four sights in succession that would change his life forever- an old man, a sick man, a corpse, and a sage.

The suffering Siddhartha witnessed from the first three

sights drove him mad, a never ending cycle of torment he couldn't bear to experience with each reincarnation of his life. However, he found solace in the last sight, a solution to the raw pain of the human condition he had just witnessed. So Siddhartha abandoned his worldly life,

became a monk, and sought enlightenment to overcome the pestilences of old age, sickness, and death.

I was fascinated by the story because it was so familiar. Healthcare providers immerse themselves in the art of healing, devoting their lives to the ability to conquer the same sights that gripped Siddhartha.

My perspective is that of a pre-clinical medical student, who throughout first year, found it easy to get weighed



down by lectures and books, forgetting these sights that initially sparked an interest in medicine. While there are many ways to realign oneself during the grueling pursuit of medical education, an opportunity to go abroad is one of the best options, and Himalayan Health Exchange offered a truly unique path. From meditating



with monks to playing cricket with village kids, experiencing the daily lives of people who are generally

walled off from the rest of the world provided a per-

Continued on the top of page 7.

Himalayan Health Exchange cont.

fect backdrop from which to regain focus.

Receiving special permission to traverse through mountain passes that remain closed most of the year due to snow and ice, our team saw over 1,000 patients in the three weeks we were in the region. We worked from medical tents set up in breathtaking valleys and within some of the highest altitude human civilizations in the world. We were free to explore and hike the diverse terrain of the Trans-Himalayas, ranging from pine forests to arid deserts, and we ended our days with campfires and candlelight. Along the way, we met some of the most selfless and



kindhearted monks and villagers who live their lives reciting the mantra *Om Mani Padme Hum*.

As Norbu would explain, the mantra has no singular translation but rather contains in itself all the teachings of Prince Siddhartha, who upon reaching enlightenment became the Buddha. What he discovered and what the mantra ultimately signifies is a

call for compassion. The Buddha saw compassion and selflessness as the most powerful methods to overcoming suffering in the world, an idea that is echoed in medicine and, ironically, cannot be learned from a textbook.

Service, especially abroad, offers students a chance to completely leave their comfort zones, freely enter worlds with different perspectives, and better understand the human condition.



In the News, Around the World

- [Your Brain on Study Abroad: The Experience Changes Lives, and Neurons, a Scholar Says](#)
Ask anyone who has ever studied abroad about the experience, and they'll say it changed their life. Turns out, international study actually changes student's brains.
- [Making a Medicine as Easy to Find as a Can of Coke](#)
While visiting a village in Ethiopia last year, Annie Lennox was told that the nearest pharmacy was three hours away by foot. But around the corner, a tiny provisions shop was stocked with soft drinks and potato chips.
- [Rich With Water But Little To Drink In Tajikistan](#)
The Central Asian nation of Tajikistan has huge rivers. They begin atop some of the world's highest mountains and then flow west through the country's lush, green valleys. Yet for many Tajik families, getting enough water each day is a struggle.
- [Trekking Through the Mud, Rivers, and Jungle to Provide Free Medical Care](#)
Dr. Georges Bwelle is bringing free health care to rural villages in Cameroon. Bwelle and his team spend almost every weekend seeing hundreds of patients. There is just one doctor for every 5,000 people in the west African country.
- [Best Use of a Billboard I Have Ever Seen](#)
The lack of clean water is one of the leading causes of life-threatening conditions like diarrhea. The University of Engineering and Technology located in Peru built the first billboard that produces drinking water out of air.
- [India's Pink-Sari Vigilantes](#)
Amana Fontanelia-Khan's new book, *Pink Sari Revolution*, delves into the astounding success of India's fearless women who have taken it upon themselves to protect the poor and call out the country's most corrupt officials.
- [Alfredo Moser: Bottle Light Inventor Proud to be Poor](#)
Alfredo Moser's invention is lighting up the world. In 2002, the Brazilian mechanic had a light-bulb moment and came up with a way of illuminating his house during the day without electricity—using nothing more than plastic bottles filled with water and a tiny bit of bleach.
- [Building Sustainable Programs Abroad](#)
A management professor's experience in Ghana offers lessons in how to turn a personal project into an institutional one.
- [Majority of Millennial Kids in U.S. Generous To Charities](#)
Nearly 9 in 10 millennial kids donated some of their own money to a church or nonprofit during a two-year period, a study found. What makes a child more likely to be generous with their money? Parents talking to their kids about the value of philanthropy.

September

05—Jewish New Year; Israel
06—Lusaka Peace Agreement Day; Mozambique
11—Ethiopian New Year; Ethiopia
16—Respect for the Aged Day; Japan
19— Moon Festival; Taiwan
21—Peace Day; International
24—Heritage Day; South Africa
25—National Youth Day; Nauru
27—Culture Day; Marshall Islands
30—Agricultural Reform Day; Sao Tome and Principe

October

01—Day of Teachers and Instructors; Uzbekistan
02—Mahatma Gandhi's Birthday; India
07—Thanksgiving Day; Saint Lucia
12—Columbus Day; Costa Rica
14—Commonwealth Cultural Day; Northern Mariana Islands
19—Mother Theresa Day; Albania
24—International Human Rights Day; Turks and Caicos Islands
25—Thanksgiving Day; Grenada
26—Day of Fulfillment; Nauru

November

01—All Saint's Day; International
03—Diwali (Festival of Lights); India
05—Islamic New Year; Indonesia
11—Remembrance Day; Bermuda
15—National Peace Day; Côte d'Ivoire
16—Water Festival; Cambodia
17—Freedom and Democracy Day; Czech Republic
19—Puerto Rico Discovery Day; Puerto Rico
20—Repentance Day; Germany
29—National Unity Day; Vanuatu

International Holidays and Celebrations

Language Lesson: Excuse Me!

Afrikaans	Verskoon my!
Catalan	Dispensi!
Chamarro	Dispensa yo!
Corsican	Scusatemi
Croatian	Oprostite!
Dutch	Neem me niet kwalijk
Estonian	Vabandage!
French	Excusez-moi!
Friulian	Us domandi perdon
German	Entschuldigung!
Hawaiian	E kala mai ia'u!
Hungarian	Elnézést!
Indonesian	Maafkan saya
Italian	Permesso
Latin	Me excusa
Limburgish	Verekskezeer!
Malay	Tumpang lalu
Polish	Przepraszam!
Somali	Iga raali ahow
Spanish	¡Perdón!
Wolof	Baal ma!
Zulu	Uxolo!

Diwali

Join the
Office of Global Health
for a celebration of **Diwali,**
India's Festival of Light

Thursday, November 7
11:00 - 1:00 CT, come & go
ACB 1st Floor Lobby

- ◆ **The Story of Diwali**
- ◆ **Sari Tutorial and Photo Booth**
- ◆ **Indian Health care and HSC**
International Programs in India
- ◆ **Cultural Indian Dances**
- ◆ **Traditional Indian Cuisine**
(food served at noon)
- ◆ **The History and Art of Rangoli**
- ◆ **Henna Tattoos**