

# THE TAKEMI PROGRAM IN INTERNATIONAL HEALTH



**HARVARD T.H. CHAN**  
SCHOOL OF PUBLIC HEALTH

**TAKEMI PROGRAM**  
IN INTERNATIONAL HEALTH



# A VISION FOR A HEALTHIER WORLD

The Takemi Program in International Health seeks to improve health and health systems around the world by welcoming mid-career health professionals and scholars to the Department of Global Health and Population at the Harvard T.H. Chan School of Public Health to conduct path-breaking research and develop their leadership skills.

Takemi Fellows examine problems of mobilizing, allocating, and managing scarce resources to improve health, and of designing effective strategies for disease control and prevention and health promotion, with a focus on low- and middle-income countries.

Our global network of Fellows provides the collaborative basis for advancing better policies through national and international institutions to support the Takemi Program's vision for a healthier world.



*"In the Program we amplify and focus the energies of our Fellows to sustain a cascade of positive changes. While at Harvard, Takemi Fellows build their capacities through collaborations with our faculty, participation in Program activities, and access to the University's many resources."*

*When Fellows return to their countries or institutions, they bring new ideas and enhanced skills to research, policy, and implementation challenges. They also carry with them the vast strength of our worldwide alumni network. These advantages support their transition to senior leadership roles and international prominence. It is through this process that the Takemi Program advances global health."*

**Jesse B. Bump, PhD, MPH**

Executive Director of the Takemi Program  
Lecturer on Global Health Policy  
Takemi Fellow 2009–2011

# The Fellowship Year

Each year the program recruits a small group of mid-career researchers and professionals to spend an academic year at the Harvard T.H. Chan School of Public Health. The Takemi Program provides participants with the space, time, and flexibility to enhance their capacity for research and leadership.

To do this, Fellows are linked to two key resources: the weekly Takemi Seminar Series, and expert faculty. In addition, Fellows have the opportunity for collaboration throughout the Harvard community, and may elect to deepen their knowledge of theory or practice through relevant coursework. Fellows draw on these resources to produce at least one paper of publishable quality.



*"What was most valuable to me was the opportunity to design a personalized program for the fellowship year and research a topic that would set the stage for the next chapter of my working life. I recall a sensation of delight of being let loose in a gourmet store. So spoil for choice."*

**May Hermanus**

**Takemi Fellow 1998–1999, South Africa**

Former Executive Director of the Natural Resources and Environmental Unit;  
Adjunct Professor at the University of Witwatersrand



*"The distinct feature of the program is the opportunity to acquaint oneself with any subject/ expertise offered within the University. The exposure and interaction in the scholarly environment of the University is perhaps the most rewarding part of being in this Program."*

**Udaya Mishra**

**Takemi Fellow 2003–2004, India**

Professor, Center for Development Studies



*"The Program provided quality time to concentrate on research with access to learning opportunities, faculty, and facilities at Harvard. It is like providing time for academic zen for mid-career professionals. Time to concentrate on research and reflect on one's career."*

**Aya Goto**

**Takemi Fellow 2012–2013, Japan**

Professor of Health Information and Epidemiology, Center for Integrated Science and Humanities, Fukushima Medical University

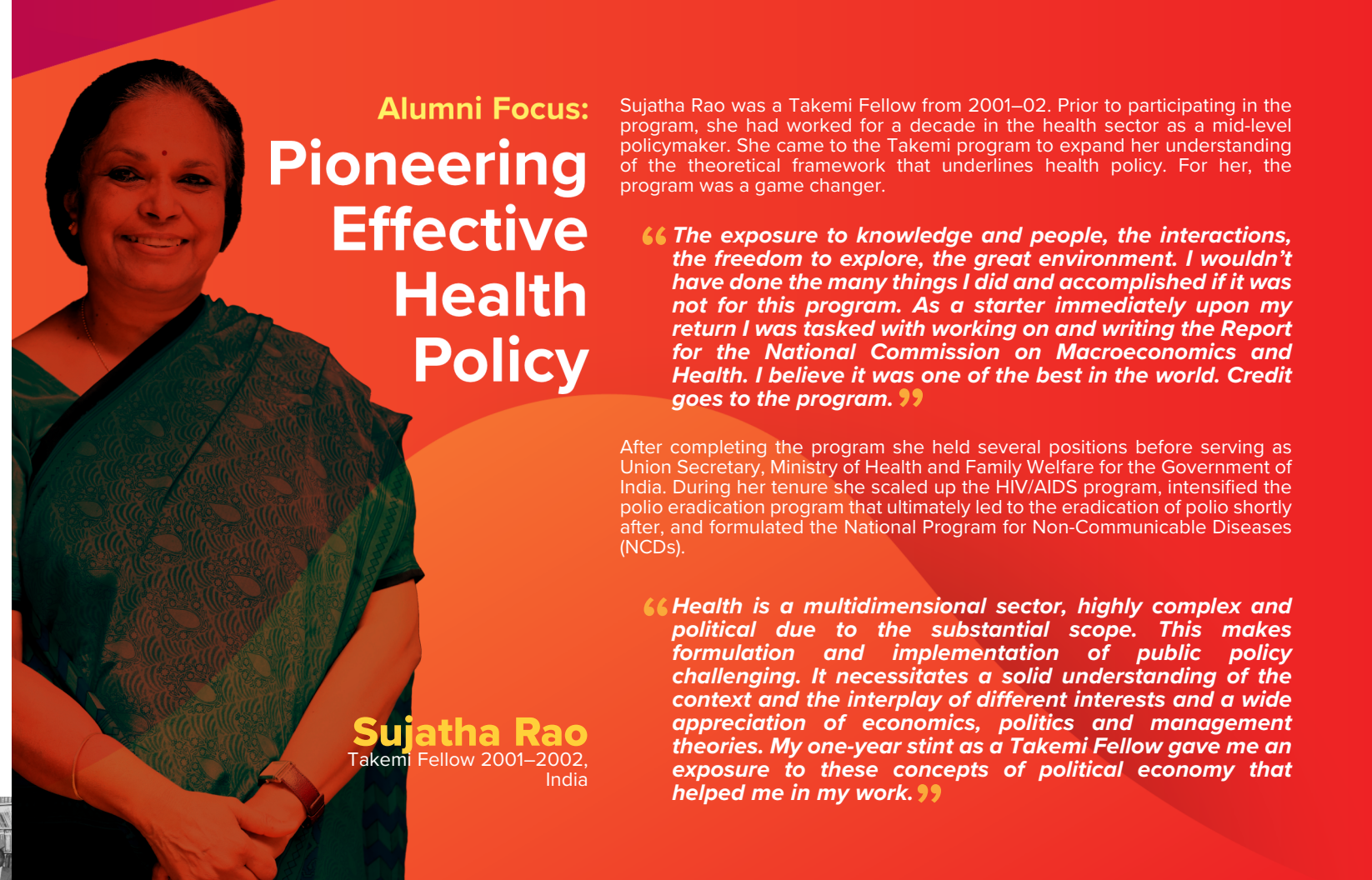


*"The Takemi Program built my confidence in global health and planted new seeds that have grown as my career has evolved. This is one of best programs for mid-career professional development."*

**Masamine Jimba**

**Takemi Fellow 2001–2002, Japan**

Professor, Department of Community and Global Health  
Graduate School of Medicine, The University of Tokyo



**Alumni Focus:**

## Pioneering Effective Health Policy

Sujatha Rao was a Takemi Fellow from 2001–02. Prior to participating in the program, she had worked for a decade in the health sector as a mid-level policymaker. She came to the Takemi program to expand her understanding of the theoretical framework that underlines health policy. For her, the program was a game changer.

*"The exposure to knowledge and people, the interactions, the freedom to explore, the great environment. I wouldn't have done the many things I did and accomplished if it was not for this program. As a starter immediately upon my return I was tasked with working on and writing the Report for the National Commission on Macroeconomics and Health. I believe it was one of the best in the world. Credit goes to the program."*

After completing the program she held several positions before serving as Union Secretary, Ministry of Health and Family Welfare for the Government of India. During her tenure she scaled up the HIV/AIDS program, intensified the polio eradication program that ultimately led to the eradication of polio shortly after, and formulated the National Program for Non-Communicable Diseases (NCDs).

*"Health is a multidimensional sector, highly complex and political due to the substantial scope. This makes formulation and implementation of public policy challenging. It necessitates a solid understanding of the context and the interplay of different interests and a wide appreciation of economics, politics and management theories. My one-year stint as a Takemi Fellow gave me an exposure to these concepts of political economy that helped me in my work."*

**Sujatha Rao**

Takemi Fellow 2001–2002,  
India



# Seminars & Research

Through the seminar series, Fellows are exposed to a wide range of topics and perspectives within the field of global health. The program invites faculty members from the Harvard Chan School, other Harvard Faculties and outside specialists to present to the Fellows each week.

The program helps Fellows bridge the gap between research and practice. They work with their data to transform it into evidence that directly impacts their home contexts. Through faculty mentors and program leadership, Fellows improve their theoretical and subject matter expertise to better tackle their data and the challenges they face in their profession.



*"What I found most valuable was the opportunity to participate in Harvard's quality seminars and to learn from presentations by high profile scholars from diverse disciplines in health."*

*This gave me fantastic exposure, the opportunity to learn so much within the year, enrich my repertoire and ultimately boost my confidence as a researcher."*

**Deborah Atobrah**  
**Takemi Fellow 2015–2016, Ghana**  
Lecturer, Institute of African Studies,  
University of Ghana



*"The program is situated in the wonderfully international, lively, Harvard Chan School. The ongoing work of our Takemi group, endless additional public discussions and debates at the School all reinforced a broad concept of Public Health. The entire experience was unique and valuable."*

**Nafsiah Mboi**  
**Takemi Fellow 1990–1991, Indonesia**  
Former Minister of Health, Indonesia



*"The learnings from the seminar gave us a world view and the need to examine issues with great depth."*

**Sakthivel Selvaraj**  
**Takemi Fellow 2006–2007, India**  
Director, Health Economics, Financing and Policy,  
Public Health Foundation India



## Our Network

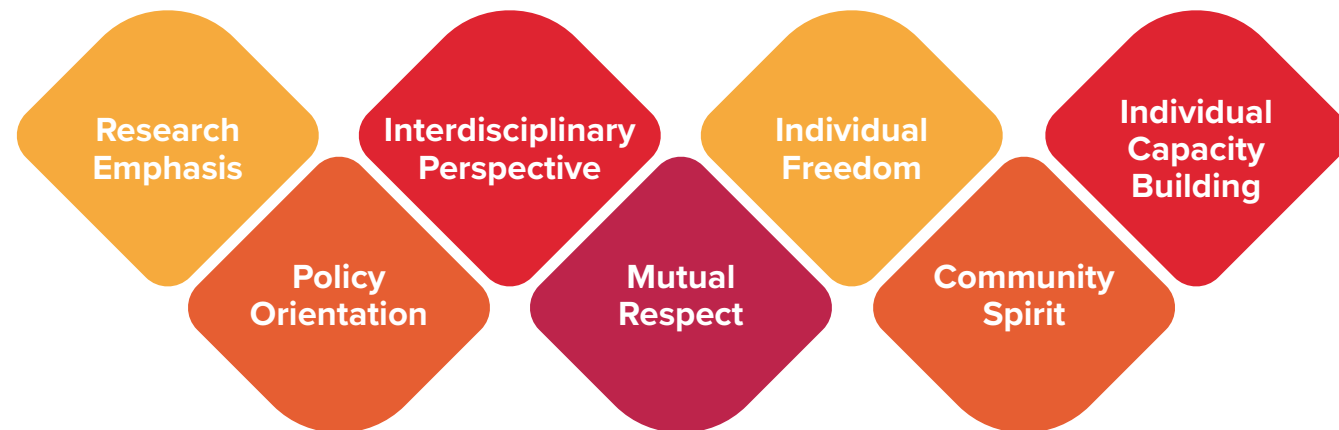
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# Principles of the Takemi Program



## Community Building



2017–2018 Takemi Fellows with former Minister of Health of Afghanistan, Dr. Suraya Dalil.



Conversation on Congenital Syphilis in Latin America with Dr. Marcia Castro, Dr. Jesse Bump, former Minister of Health of Peru Patricia Garcia, and Dr. Antonio Silva Lima Neto in 2018.



2018–2019 Takemi Fellows social outing to the Boston Ballet production of the Nutcracker.



Dr. Akanni Akinyemi and Dr. Antonio Silva Lima Neto celebrating the end of the 2019 fellowship year.



Welcome reception for the 2019–2020 fellowship year.



Dr. Uche Amazigo and Dr. Lola Dare at the “Girls in the SDG Era” Symposium cosponsored by the Takemi Program and the Institute for African Studies at the University of Ghana in Accra in 2019.



Dr. Nkechi Onyeneho, Dr. Jesse Bump, Dr. Gina Oduro, and Dr. Deborah Atobrah after presenting at the “Girls in the SDG Era” Symposium.



2019–2020 Takemi Fellows with Amb. Samantha Power after the Takemi co-sponsored event “An Open Dialogue with Amb. Power.”

In 2012, Takemi Fellow Dr. Uche Amazigo received the Prince Mahidol Award in Public Health for her research on Onchocerciasis and on community-directed treatment. As Chief of Sustainable Drug Distribution Unit (2001–2005) and later Director of the African Programme for Onchocerciasis (2005–2011), she was instrumental in scaling up community-directed treatment. It is estimated that this strategy resulted in the treatment of over 112.4 million people for onchocerciasis (in 146,000 communities in 19 countries in Sub-Saharan Africa), creating a network of over 1 million Community Drug Distributors (CDDs).

Community-directed treatment strategy has been adapted to also address treatment for other infectious diseases. Prior to joining the Takemi program, Dr. Amazigo was a Senior Lecturer at the University of Nigeria where she taught medical parasitology and public health. After having witnessed the devastating effects of onchocerciasis she concentrated her research on this disease. She came to the program to 1991.

**“My participation in the program hugely shaped my professional life. While at the Takemi Program, at the request of WHO/TDR Geneva, a summary of my research was presented to the World Health Assembly.”**

*“I prepared a report of my pioneering work on the consequences of onchocercal skin disease on adolescent girls and women in Nigeria.*

*A few years later, I was invited to join the World Health Organization African Programme for Onchocerciasis Control (WHO/APOC).”*

### **Alumni Focus:**

## **Fighting Neglected Tropical Diseases on a Global Scale**



*“The Takemi program was about bringing health services to the poor in all countries. Interactive sessions with Fellows (at individual level) or as a group with the Director were often on how best to extend health services to the poorest populations. The APOC partnership had one objective: to put in place a delivery system that ensures access to ivermectin by all eligible persons in all endemic communities including the poorest in difficult to reach settings. The entire staff of the APOC Management worked 24/7 like the military with the endemic countries to institutionalize a strategy designed by communities: Community-directed treatment. As Chief of Sustainable drug distribution unit this was my main task. Those interactive sessions and guidance from the Director of the Program, were extremely helpful during my early days at WHO/APOC.*

*The Community-Directed Treatment (CDT) strategy has been widely adopted for the control and elimination of onchocerciasis (river blindness), the elimination of lymphatic filariasis (LF) and other Neglected Tropical Diseases (NTD). This is what I consider my legacy. That hundreds of thousands of community members—the drug distributors—are the ‘foot soldiers’ in the fight against the neglected tropical diseases in Africa; that communities have been accepted by health care providers as indispensable partner is an outcome of our collective effort. I contributed to this achievement. At the University of Nigeria, I began working with and for poor women in rural Nigeria; I cultivated trust and from then on believed we could learn more about how to improve the lives of the poorest populations if health professionals would listen to them and allow the poor to be part of the solution to their problems.*

*A number of colleagues, especially those in the TDR Onchocerciasis Operational Taskforce joined and together (with empirical data) we convinced APOC partners on the value partnering with the rural poor, oncho-endemic communities. I remained steadfast in this fight until the adoption of CDT by APOC partnership and until my retirement.”*

**“I must say, the Takemi Program encouraged me in this direction and when I joined APOC in 1996 I was able to defend communities’ willingness and capability/competency at all APOC meetings.”**

**Uche Amazigo**

Takemi Fellow 1991–1992, Nigeria



# Our global network spans professions and disciplines

Just over half of our alumni are in academic positions, including research centers. Around 40% are policy makers, medical practitioners (MDs), NGO/IO workers, or work in foundations. The rest work in the private sector, primarily at pharmaceutical companies.

Fellows come from a wide range of disciplines including epidemiology, economics, parasitology, entomology, obstetrics, gynecology, kinesiology, sociology, and anthropology. Many have come from health policy and management backgrounds. In addition to the diversity of professions and disciplines, 42% of all Takemi Fellows are females, 58% are males.



*"We had the opportunity to work with people from all around the world. In addition to the intellectual exchange that we had, we also had the chance to exchange culture. The facilities to do your research, the mentorship, the brownbag sessions... it was all amazing."*

Coming from Nigeria where there are lots of training gaps to Harvard to work with these people was tremendous and impactful."

**Adebola Adedimeji**  
Takemi Fellow 2004–2005, Nigeria

Research Associate Professor, Department of Epidemiology and Population Health, Albert Einstein College of Medicine



*"The breadth of knowledge of the other fellows was amazing. We were already at Harvard where the knowledge is immense but interacting with diverse people and perspectives was for me a wonderful experience."*

It was not as if we were all doctors or community health physicians. The diversity of the Fellows meant that when you presented your work or you had coffee, you saw firsthand how diverse health can be and how innovation can be achieved across disciplines."

**Lola Dare**  
Takemi Fellow 1999–2000, Nigeria  
CEO, CHESTRAD



*"The Takemi Program has created an unique and powerful network for a healthier world. Once a Takemi Fellow, always a Takemi Fellow. I look forward to meeting and working with other Fellows in the years to come."*

**Mika Kunieda**  
Takemi Fellow 2017–2018, Japan

Assistant Professor, Faculty of Policy Management, Keio University



*"The Takemi Program helped me create an excellent academic health-related interdisciplinary network. It made me think not only about working in academia but about broader professional opportunities such as contributing to international and non-profit organizations."*

**Miwako Hosoda**  
Takemi Fellow 2008–2010, Japan  
Vice President of Seisa University



## Alumni Focus:

# Sustainable impact in Reproductive Health

Dr. Friday Okonofua is a Professor of Gynecology and Obstetrics and currently the Vice Chancellor of the University of Medical Sciences in Ondo City, Nigeria. He is also the founder of the Women Health and Action Research Centre (WHARC), a leading not-for-profit focused on reproductive health research. When he took part in the Takemi Program in 1991, he was an Associate Professor in Obstetrics and Gynecology at the Obafemi Awolowo University, Ile-Ife, Nigeria. Dr. Okonofua was initially drawn to the Takemi Program "because of its international fervor. I felt I had the opportunity to take my work in public health to the global stage by participating in the program. We were able to interact with key players in global health from around the world."

For Dr. Okonofua, the Takemi Program helped him "to chart a new pattern for essential research and programming in the field of reproductive health. This has assisted me in making significant contributions to the field not only within the context of my country, Nigeria, but also in the African continent in general."

*"The many seminars in which I participated stimulated my thoughts on many public health issues and gave me the stimulus and made me think about how to use the results to transform the health system of my country."*

Dr. Okonofua received funding from the Ford Foundation shortly after completing the Program. This funding led to the establishment of the Women's Health and Action Research Centre and the African Journal of Reproductive Health, two institutions that have made and are still making impactful and significant contributions to the field of reproductive health.

*"The mentorship aspect of the program whereby the program managers continue to support the program participants in working on health issues in their various countries and regions is unsurpassable by any of its kind that I know."*

**Friday Okonofua**  
Takemi Fellow 1991–1992, Nigeria

# Fellows have directly contributed to *saving lives* through *research and action*

*"The Takemi Program has boosted my academic work and my professional experience. After returning to Brazil, I was appointed as secretary of health in the municipality of Pelotas."*

**Luiz Facchini**

Takemi Fellow 1996–1997, Brazil

*"The Takemi Program made me very curious. I learned that working in a silo was never going to solve any problems. It broadened my thinking beyond just the well-being of people as a clinical issue. The Program made it so that siloed thinking was impossible. I have integrated this framework into my professional life with Chestrad Intl."*

**Lola Dare**

Takemi Fellow 1999–2000, Nigeria

*"The program was very instrumental in enabling me to find my footing in the public health arena. Upon completing the Program, I went on to establish myself in the field. The professional experiences and opportunities I have had, I owe to my participation in the Takemi Program. It has been a tremendous experience. I would not be where I am today if I hadn't participate in the Takemi Program."*

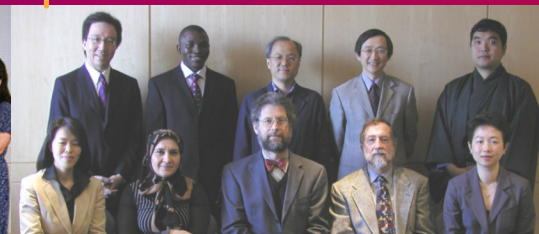
**Adebola Adedimeji**

Takemi Fellow 2004–2005, Nigeria

*"My participation in the program broadened my world view. It equipped me for my present work in the United Nations."*

**Joseph Okeibunor**

Takemi Fellow 2010–2011, Nigeria



*"The Takemi Program afforded me the time and flexibility to reflect on an early phase of my career, to reconcile the theory and practice of public health with my own experience and unique insights as a public health practitioner and manager, and to crystallize my perspective on global health."*

**Nii Ayite Coleman**

Takemi Fellow 1996–1997, Ghana

*"It totally changed my professional life from being a faculty of a reputed institution to practitioner of livelihood improvements through solar technologies in India and other countries."*

**Ranganayakulu Bodavala**

Takemi Fellow 1999–2000, India

*"It qualified me as a researcher, as a result now I am a well-known researcher with 143 international papers and main investigator of several national and international projects."*

**Fahimeh Ramezani**

Takemi Fellow 2004–2005, Iran

*"The opening of doors to consult with the best in my field and debate with scholars from different parts of the world and presenting my research for valuable critical appraisal."*

**El Faitih El Samani**

Takemi Fellow 1985–1986; 2014–2015, Sudan



# Takemi Papers and Related Publications



**Tuba Agartan**  
Takemi Fellow  
2016–2018,  
Turkey

## Professor of Health Policy and Management, Providence College, USA

**Research Tags:** Global health, health systems, UHC, health workforce, public policy.

- **Agartan, T. I.** (2020). Politics of Success Stories in the Path Towards Universal Health Coverage: The Case of Turkey. Development Policy Review. 10.1111/dpr.12489
- **Agartan, T. I.** (2019). Conceptualizing Professional and Public Interest in the Context of Turkey's Health Care Reforms. International Journal of Sociology and Social Policy. 10.1108/IJSSP-03-2019-0054N
- **Agartan, T. I.** and Kuhlmann, E. (2019). New Public Management, Physicians and Populism: The Case of Turkey. Sociology of Health & Illness. 10.1111/1467-9566.12956
- Pavolini, E., Kuhlmann, E., **Agartan, T.I.**, Burau, V., Mannion, R., & Speed, E. (2018). Healthcare Governance, Professions and Populism: Is There a Relationship? An Explorative Comparison of Five European Countries. Health Policy. 10.1016/j.healthpol.2018.08.020
- Elveren, A. and **Agartan, T.I.** (2017). The Turkish Welfare State System: With Special Reference to Human Capital Development, in Aspalter, C. (ed.) The Routledge International Handbook to Welfare State Systems. New York: Routledge.



**Ro-Ting Lin**  
Takemi Fellow  
2015–2016,  
Taiwan

## Assistant Professor, College of Public Health, China Medical University, Taiwan

**Research Tags:** Environmental health; occupational health; industrial development; high-tech industry; petrochemical industrial complexes; overwork; cardiovascular diseases

- Lin, C. K., Hsu, Y. T., Christiani, D. C., Hung, H. Y., & **Lin, R. T.** (2018). Risks and Burden of Lung Cancer Incidence for Residential Petrochemical Industrial Complexes: A Meta-Analysis and Application. Environment International. 10.1016/j.envint.2018.09.018
- **Lin, R. T.**, Chien, L. C., & Kawachi, I. (2018). Nonlinear Associations Between Working Hours and Overwork-Related Cerebrovascular and Cardiovascular Diseases (CCVD). Scientific Reports. 10.1038/s41598-018-28141-2
- Lin, C. K., Hung, H. Y., Christiani, D. C., Forastiere, F., & **Lin, R. T.** (2017). Lung Cancer Mortality of Residents Living Near Petrochemical Industrial Complexes: A Meta-Analysis. Environmental Health. 10.1186/s12940-017-0309-2.
- **Lin, R. T.**, Lin, C. K., Christiani, D. C., Kawachi, I., Cheng, Y., Verguet, S., & Jong, S. (2017). The Impact of the Introduction of New Recognition Criteria for Overwork-Related Cardiovascular and Cerebrovascular Diseases: A Cross-Country Comparison. Scientific Reports. doi.org/10.1038/s41598-017-00198-5.



**Solomon  
Tessema Memirie**  
Takemi Fellow  
2016–2017,  
Ethiopia

## Senior Researcher, Disease Control Priorities-Ethiopia, University of Bergen, Norway

**Research Tags:** NCDs, Cancer, epidemiology.

- **Memirie, S.** (2018). Estimates of Cancer Incidence in Ethiopia in 2015 Using Population-Based Registry Data. Journal of Global Oncology. 10.1200/JGO.17.00175.
- **Memirie, S.**, Tolla, M. T., Desalegn, D., Hailemariam, M., Norheim, O., Verguet, S. & Johansson, K. (2019). A Cost-Effectiveness Analysis of Maternal and Neonatal Health Interventions in Ethiopia. Health Policy and Planning. 10.1093/heapol/czz034.
- Norheim, O., Ottersen, T., Tolla, M.T., **Memirie, S.**, & Johansson, K. (2019). Incorporating Distributional Concerns into Practical Tools for Priority-Setting, in Norheim, O., Emanuel, E., and Millum, J. (eds) Global Health Priority-Setting: Beyond Cost Effectiveness. Oxford, England: Oxford University Press.
- Eregata, G. T., Hailu, A., **Memirie, S.**, & Norheim, O. (2019). Measuring Progress Towards Universal Health Coverage: National and Subnational Analysis in Ethiopia. BMJ Global Health. 10.1136/bmjgh-2019-001843.



**José Irineu  
Rangel Rigotti**  
Takemi Fellow  
2017–2018,  
Brazil

## Associate Professor of Demography, Universidade Federal de Minas Gerais, Brazil

**Research Tags:** Brazilian Demographic Trends, Educational System, Spatial and Educational Inequalities, Big Longitudinal Database, Brazilian Internal Migration, Students Mobility, Academic Achievement, Educational Statistics, Demographic Statistics.

- **Rigotti, J.I.R.**, Hadad, R.M. (2018). An Analysis of the Relationship Between Internal Migration and Education in Brazil. Paris, France: UNESCO.
- **Rigotti, J.I.R.**, Castro, M, Hadad, RM (2020). 'A New Demographic Tool for the Analysis of Educational Systems', under review.
- **Rigotti, J.I.R.**, Castro, M, Hadad, RM (2020). 'Education-gain and Education-drain: The Role of Internal Migration in Education Trajectories in Brazil', under review.



**Ify Aniebo**  
Takemi Fellow  
2018–2019,  
Nigeria

## Nigeria Senior Research Scientist, Health Strategy and Delivery Foundation, UK

**Research Tags:** Drug resistance, malaria, chemotherapy, surveillance, genomics

- **Aniebo, I.** (2019). Genomic Surveillance Could Make a Big Difference in the Fight Against Malaria. Scientific American.
- **Aniebo, I.** (2018). PfK13-Independent Determinants of Susceptibility of African Plasmodium Falciparum to Artemisinin and Partner Drugs in Vitro. PhD thesis, London School of Hygiene and Tropical Medicine. 10.17037/PUBS.04648781



## Eligibility Requirements



Have completed a graduate degree



Have significant work and research experience, including publications in internationally recognized journals



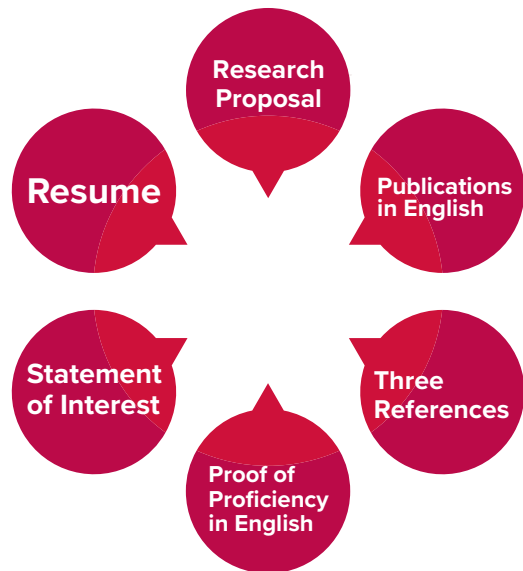
Have demonstrated potential leadership capacity in their home countries



Strong promise and appropriate preparation (including facility in English)

## Application Process

Applicants must complete the online application available at [hsph.harvard.edu/takemi/application-materials](https://hsph.harvard.edu/takemi/application-materials)



*“Takemi Fellows add to our intellectual life at the Harvard T.H. Chan School in so many ways. The Program is recognized at the School and around the world for its capacity to attract future leaders in public health and for its contributions to global health.”*

*Indeed, every global health meeting these days has former Takemi Fellows in attendance.”*

**Michelle A. Williams, ScD, MS**

Dean of the Faculty,  
Harvard T.H. Chan School of Public Health



*"In 2020, the Takemi Program in International Health will complete 37 years of existence and partnership to advance global health policy and equity. This unique program has contributed in many ways to promote individual development, institution strengthening, and health policy analysis around the world.*

*I have been privileged to work with the Program and its many partners since the Program's inception to promote these goals in global health."*

**Michael Reich, PhD, MA**  
Director of the Takemi Program  
Taro Takemi Professor of  
International Health Policy,  
Emeritus



*"My father, Dr. Taro Takemi, believed that interdisciplinary study was necessary to analyze health problems correctly. It is marvelous to see how his vision has come to life through the Takemi Program.*

*The alumni now form a strong global network committed to improving global health."*

**Hon. Keizo Takemi**  
Member of the House  
of Councillors in Japan



**We thank all of  
the donors who  
have supported  
the Takemi  
Program.**



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*"The JMA highly values our longstanding partnership with the Takemi Program at Harvard. The program has an important role in capacity building and scholarly research dedicated to the improvement of health in low- and middle-income countries.*

*Through the JMA's support for the Takemi Program, we are pleased to promote mutual understanding and respect while advancing access to good quality medical care around the world, fostering Universal Health Coverage, and bringing further attention to other important global health challenges."*

**Kichiro Matsumoto, MD**  
President of the Japan Medical Association (JMA)





A close-up portrait of a middle-aged man with short, dark hair, looking directly at the camera. The image is heavily overlaid with a semi-transparent red filter, which is more intense on the right side of the frame. The background is a solid, vibrant red.

# THE TAKEMI PROGRAM IN INTERNATIONAL HEALTH

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