



Global Matters

The newsletter of the Office of International Affairs

Volume 19, November—December 2011

Fall 2011 Global Health Lecture Series



12:00 Noon CT
ACB 120

- Wednesday September 21 [Randy Gallaway](#) of [Partners in Development Worldwide](#)
- Wednesday October 5 [Reed Flora, MS II](#) PLFSOM
- Wednesday October 19 [Sergio Alvarado, MD, Resident Instructor, Family Medicine, PLFSOM](#)
- Wednesday November 2 [Bolanie Olaniran, PhD, Professor, Department of Communication Services, TTU](#)
- Wednesday November 16 [Tom McGovern, EdD, Professor, Psychiatry](#)
- Wednesday December 7 [Student National Medical Association \(SNMA\) panel presentation](#)

Presentations with hyperlinks were recorded and can be viewed on the OIA website or checked out from the OIA library.

OIA Hosts Second Annual Beyond Borders, Beyond Measure Photography Exhibit



The Beyond Borders, Beyond Measure Photography Exhibit took place October 7th in the Louise Hopkins Underwood Center for the Arts Icehouse Gallery. The photographs were framed and hung, the night

was warm and welcoming, and one by one the TTUHSC community crossed the threshold in support of international programs. A steady flow of art enthusiasts moved from one intriguing image to the next, attempting to imagine daily life in places like Nicaragua, China, India, and Honduras. The gaunt children in Bangladesh begging at the window of a taxi evoked heartbreak and a feeling of helplessness. The laughing sugar cane vendor in Uganda with his right leg missing overwhelmed us all with wonder. The expressive graffiti that keeps watch over a tattered mattress testifies to the deteriorating economic conditions in Spain.

TTUHSC students who have participated in international programs were invited to submit treasured photos of their trips for the exhibit. Some students were involved in research, some in health education, while others devoted their efforts to providing health care in established and mobile clinics. Over 40 photos were submitted, and the selection process was indeed challenging. The photos chosen, 25 in all, were available for purchase to fund scholarships for students who will participate in international programs in the upcoming year.

Residents of Lubbock and the surrounding communities, who meandered through the Icehouse Gallery, were not



only moved by the photography, but captivated by the students' experiences. Most of the guests visit-

ing the gallery were unaware of the ongoing global contributions TTUHSC students are making in resource poor countries: research on combating diarrhea with zinc, health education to decrease the rate of infant mortality, and providing clean water through the building of wells. Many purchased the student photos in appreciation of their efforts. Of the 25 photos showcased, 17 were purchased.

The Beyond Borders, Beyond Measure photography exhibit was the final event of a week-long focus on international



programs for students. Other International Programs Week activities included a presentation by Reed Flora for the Global Health Lecture Series and a screening of the film Rx for Survival—A Global Health Challenge: Delivering the Goods.

Reed is a second year medical student from the Paul L. Foster School of Medicine (PLFSOM). In June 2011, he traveled to Bangladesh with eight other PLFSOM students. The group conducted research at the International Centre for Diarrhoeal Disease Research (ICDDR,B) in Dhaka, the capital of Bangladesh.



The International Programs Week activities provided students involved in global health efforts an opportunity to share

their passion and their stories with the TTUHSC and Lubbock communities.

We would like to extend our gratitude to the students who submitted photos, shared their experiences, volunteered to assist with the various International Programs Week activities, and were responsible for the success of each event: Katy Britten, Erin Cawley, Jason Chandrapal, Breanna Goodwin, Greg Hannabas, Kourtnee Lindgren, Andrew Matthys, Michelle McClelland, Siobhan Shahan, Chris Trautman, Kristin Harrington, Karen Luk, Shamini Parneswaran, and John Ngo.

Available from the OIA Library

The following resources are available for check-out:

Book

The Emperor of All Maladies—A Biography of Cancer

by Siddhartha Mukherjee

The Emperor of All Maladies is a magnificent, profoundly humane “biography” of cancer—from its first documented appearances thousands of years ago through the epic battles in the twentieth century to cure, control, and conquer it, to a radical new understanding of its essence. The story of cancer is a story of human ingenuity, resilience, and perseverance, but also of hubris, paternalism, and misperception. Mukherjee recounts centuries of discoveries, setbacks, victories, and deaths, told through the eyes of his predecessors and peers, training their wits against an infinitely resourceful adversary.

Movie

Panama Canal: Gateway to the American Century

On August 15, 1914, the Panama Canal opened, connecting the world's two largest oceans and signaling America's emergence as a global superpower. Using an extraordinary archive of photographs and footage, some remarkable interviews with canal workers and firsthand accounts of life in the Canal zone, this **American Experience** film unravels the remarkable story of one of the world's most significant technological achievements.

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



Support International Programs for Students!

click the “Proceed with Selected Funds” button at the bottom of the list. Complete the required payment information to finalize your gift.

Your gift will go towards funding one of the many TTUHSC approved international programs available for students interested in a global health experience.

Thanks to the **Give2Tech** website, now you can support students participating in TTUHSC sponsored international programs.

To make your secure online donation, visit the Office of International Affairs [website](#). Select the **Give2Tech** link on the sidebar or in the quick links box. Then choose the *International Programs Student Travel Assistance* option. Next

Bhutto

A movie review

“My father had a vision of Pakistan as a democratic and progressive nation. My family is committed to his vision of Pakistan. We don't fear anything.”
Benazir Bhutto

I'm embarrassed to admit that I am often guilty of being so self-absorbed that I miss significant events occurring around the world. That is why I was intrigued when I saw a preview of the documentary **Bhutto**. Who was this Pakistani woman defiantly demanding democracy? Why had I not heard anything about her? How can I be so disconnected from world events that I don't recall her assassination?

Bhutto is the story of Benazir Bhutto, the youngest person and first female to be elected Prime Minister of Pakistan (elected first in 1988 and then again in 1993). The Harvard- and Oxford-educated daughter-turned-politician, whose name means “without comparison,” was the eldest child of Zulfikar Ali Bhutto. Zulfikar Ali Bhutto served as both Prime Minister and President of Pakistan. In 1977, he was overthrown, jailed, and eventually executed.

The film begins with striking images of Pakistan coupled with even more striking statistics. Over the course of its 111 minutes, the film attempts to unravel not only the story of a beloved and controversial woman, but the complicated history of Pakistan

and the Bhutto family's contributions to the country's successes and failures. Through interviews with friends, family members, rivals, authors, and journalists, viewers witness a woman chosen (perhaps even destined) to precariously deliver “the World's most dangerous place” into the twenty-first century.

Viewers are left in awe of a woman whose first acts as Prime Minister were to free all political prisoners, grant greater freedom to the media, initiate measures to end polio, build schools, and create police stations for women. While addressing Congress during her first trip to the U.S. as Prime Minister, she pledged that revenge for her father's death wasn't necessary; “Democracy is the greatest revenge,” she declared.



This documentary includes all the elements of a Shakespearean tragedy: heroic acts of bravery, self-imposed exile, charges of corruption, and ironic twists of fate. Archival footage of Benazir and tearful interviews with long-time supporters draw us into the remarkable life of a woman who managed for a brief time to walk the fine line between

two very different worlds—a quickly-changing modern world and a world steeped in tradition and religion. The tale is so intriguing and the film so well made that those unfamiliar with Benazir Bhutto want to know more and are genuinely saddened by her fate.

The film delivers a delicate balance of hope and suspicion. Viewers want to believe Benazir Bhutto's

International Medicine Club Column

The Challenge of Sustainability

by Katy Britten, School of Medicine, Class of 2014

The hill was overcome. All around me, on plastic chairs and school benches from the nearby orphanage, people crowded, waiting eagerly for their turn to sit before a doctor. The mid-morning sun steadily disappeared above our canopied makeshift clinic while we, a group of about a dozen doctors, physician assistants, and students, treated patient after patient as best we could with our limited medications and equipment. Hours later, over 200 patients had passed through our chairs, and still the hillside was coated with more.

I was overcome. Our team was only in this Ugandan village for a couple of weeks. Even if we were able to temporarily treat a thousand patients, what about the thousand others left waiting as we flew away? In that moment, a concept I had pondered for months prior to my trip was made devastatingly real: if the care we provided was not sustainable, no true improvements in our patients' health would be made.

Though this concern is not unique to short-term medical trips, the issue of sustainability in developing healthcare programs is often more noticeable when one's time for action within a community is so limited. And given that the majority of outreach trips taken by non-career medical missionaries are short-term, the focus of one's work during a trip must expand beyond that of providing medical care. In order to promote self reliance and to foster ongoing quality health care, culturally competent health edu-



cation must be implemented. This approach is often difficult to execute, and subsequently, too often dismissed. However, if actively pursued, such health education programs can revolutionize healthcare in a developing community.

Culturally competent health education adds the focus of preventative care to the traditional curative approach, targeting community leaders and volunteers in its training. One of the greatest challenges in sustaining care in these communities lies in the lack of resources: of medications, healthcare access, variable diets, etc. However, if adequate research about the culture is done beforehand, preventative care methods can be developed to fit a developing community's way of life without making them solely dependent on outside sources. When visiting healthcare professionals purposefully implement education into their mission trip, whether an adjunct to basic physical exams of patients or a stand-alone training program for locals, the foundation for sustainable care is laid. The details of such programs and their implementation vary from culture to culture and so cannot be summed in so brief a space, but an abundant amount of resources (literature, internet, personal experience, and engaged community members) is available for their development.

Though the imagery of the Ugandan hillside is one I will likely see again in future medical outreach trips, I have hope in the potential of health education and aim to implement it well in my own medical practice, even in my limited outreach now as a student. With a culturally competent health education system actively reaching a community and providing sustainable healthcare to its inhabitants, long-term improvements to health can be realized. And in time, the global health crisis at hand can be overcome.

Bhutto cont.

motives and intentions were worthy. Her pledge to restore "the sanctity of vote over bullet" elicits a surge of emotion. But we are also left wondering, doubting. Because of the numerous allegations of corruption surrounding the Bhutto family, one can't help but question if under the enrapturing façade laid nothing more than fear and a hunger for power.

And that may be the true appeal of this film—the questions it can't answer and the truth it will never be able to reveal. Did Benazir Bhutto represent

hope or did she only represent more of the same unpredictable relationship we have come to associate with Pakistan? Was she a woman before her time or was she only a pawn in a game and a sacrifice for democracy? What was really lost when her life was taken? What will be her ultimate legacy?

Because of her assassination in 2007, these questions may never be answered. All one can do is grapple with fact and fiction, never quite certain which is which. Regardless of the questions and the uncertainties, Bhutto portrays the life of a remarkable woman gone too soon, a woman who undeniably lived up to the meaning of her name.

Mark Your Calendar for the OIA Film Series



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

**12:00 Noon
CST
ACB 250**

- Thursday September 8
- Thursday October 6
- Thursday November 10
- Thursday December 1

December feature film:

Occupied Minds

The story of two journalists, a Palestinian-American and an Israeli, who journey to Jerusalem, their mutual birthplace, to explore new solutions and offer unique insights into the divisive Israeli-Palestinian conflict.

Attendees are welcome to bring their own lunch.

Free snacks will be provided!

New Data Reveals Economic Impact of International Students

NAFSA: Association of International Educators recently released their annual [Economic Impact Statements](#). The data reveals that international students and their dependents contributed an impressive \$20.23 billion to the U.S. economy during the 2010-2011 academic year. This is nearly a \$1.5 billion increase from the previous year.

In [Texas](#), the numbers breakdown as follows:

- Contribution from tuition and fees to state economy = \$845,292,000
- Contribution from living expenses = \$968,619,000
- Net contribution to state economy by foreign students and their families (minus U.S. support of 26.0% - \$471,945,000 - plus dependents' living expenses - \$25,982,000) = \$1,367,948,000

The state report includes a breakdown by congressional district.

The data sets used for these reports come from two sources: The Institute of International Education's [Open Doors 2011](#) report, funded by the U.S. Department of State, which provides enrollment data, and [Wintergreen Orchard House](#), which provides tuition and living-expense data. Colleges and universities that do not provide information to the Institute of International Education are not represented.

Student National Medical Association Column

SNMA: Committed to Excellence, Competence, & Diversity

by Cynthia Sirri, School of Medicine, Class of 2014

The Student National Medical Association (SNMA) is one of the nation's oldest and largest independent student-run organizations focused on the needs and concerns of culturally diverse medical students. Membership includes over 8,000 pre-medical and medical students, residents, and physicians from across the nation. SNMA is committed to supporting medical students from minority groups, addressing the needs of underserved communities, and increasing the number of clinically excellent, culturally competent, and socially conscious physicians.

The SNMA chapter at Texas Tech University Health Sciences Center School of Medicine has a very active presence on the TTUHSC campus and I am proud to be one of the officers of the organization. Our main goal is to promote diversity in each cohort thereby celebrating our individual cultures. Some of the ways we do so are by offering several scholarships to first-year medical students and hosting events and activities that foster cultural education and awareness in our medical school. Our two biggest events each year are the Multicultural Scholarship Banquet and the Health Fair.

The Annual Health Fair is a major event in the spring semester; it is one of the ways through which

we are able to give back to our community. The Health Fair is usually held on a Saturday. The purpose of the fair is to educate the public on relevant health issues like hypertension, diabetes, obesity, breast cancer, hospice, and end of life care, issues that are pertinent to everyday life and overall health.

The most significant event we host in the fall is the annual Multicultural Scholarship Banquet. All the funds raised from the banquet go toward scholarships for first-year minority medical students. Over the past two years, we have successfully raised over \$40,000. As a result, we have been able to award six scholarships.



It is rewarding to be a part of something you feel passionate about. Being an officer of the TTUHSC chapter of SNMA is a responsibility I enthusiastically embrace. I have been a member of SNMA for four years. As an active member, I know firsthand the huge impact the organization has made. SNMA has played an integral role in my education. As an enthusiastic undergraduate student and aspiring physician, I

have been privileged to meet inspirational SNMA members and leaders who steered me in the direction I needed to go in order to become a physician. As a recipient of an SNMA scholarship in 2010, I understand the impact the scholarship can have in the life of a student. As an ambitious college graduate applying to medical school, I was focused more on completing my medical education and less on how I was going to finance it. For me, receiving an SNMA scholarship upon acceptance to medical school was an affirmation of my ability to become a physician. My story is an example of the impact SNMA has on individuals.

Join us for
A Celebration of
INDEPENDENCE



Lebanon



Morocco



Poland



Cambodia



Barbados

Wednesday, November 30
11:30—1:00
2nd floor ACB Lobby

Come taste the cuisine of 5 nations who celebrate their independence in November

Preparing TTUHSC Students for the Interconnected World

by Keino McWhinney, M.P.P.
Special Assistant to the President

Global interconnectedness exerts such significant influence on our lives that today's academic health centers must consider how to best equip students and faculty for a globalized world. In 2005, Thomas L. Freidman's book *The World is Flat: A Brief History of the Twenty-first Century* helped reignite the conversation on the implications of the interconnected global market place and the flow of economic, social, and political ideas. Though it can be argued that the world is not uniformly "flat," it has become increasingly difficult to advocate pure isolationism. The global financial crisis of 2008 and its widespread effects on world markets have served to remind us of the decided interconnectedness of the twenty-first century, the profound impact of globalization, and the associated interdependence of world markets and peoples. Globalization is not a new phenomenon. A brief exploration of world history illustrates the breadth and reach of past empires and the myriad interactions of diverse peoples through trade, conquest, and curiosity. However, never before has the speed and complexity of the impact of globalization been so transformative and inevitable - a reality driven by the accelerated growth in technology in just about every aspect of daily life.

The world's economies are now so meticulously intertwined that recent financial hiccups in relatively "small" countries such as Greece and Ireland have profoundly impacted countries geographically far removed, yet due to the intricacies of complex financial institutions, they share common economic fates. Furthermore, the increased demand for energy resources by developing countries such as China and India has directly impacted the price of gasoline in all corners of the world. Much can also be said of the cross-pollination of language, culture, and social values in the age of Facebook, Twitter, and Skype. Yes, the world has maintained its physical scale, but the scope of each country's sphere of influence has grown and overlaps like concentric circles, each creating its own ripple effect on the other.

The health care field is not exempt from the reality of the globalized world. If the 2009 H1N1 influenza pandemic is any indication, we do live in a world where health care considerations are not limited

solely to domestic concerns or threats. The U.S. Department of Health and Human Services, aware of the challenges associated with global health care risks, works closely with groups such as the World Health Organization and their corresponding International Health Regulations (IHRs).

To be certain, there continues to be vast local and national differences in the challenges and approaches to healthcare systems around the world. The consequences of how these challenges are addressed (or not addressed) now have the ability to affect the global community in ways that were previously unthought-of or limited in scope. Furthermore, members of our local health care workforce are exposed to patients and coworkers of diverse backgrounds who bring with them cultural values and norms that impact how they respond to care. This increased infusion of diversity into the local population complicates the delivery of health care—even in rural West Texas.



As an academic health center, Texas Tech University Health Sciences Center is not only a repository of health related knowledge, but also a microcosm of the interconnected world in which we live. The goals of TTUHSC are to educate health professionals, to improve the health of our communities, and to make a very real difference in the world. In our quest, the most well rounded educational experience should include opportunities for preparation in dealing with global interconnectedness and the diversity in current and future patient populations that exists beyond our classroom

walls. In our academic setting, we have a truly unique opportunity to expand the consciousness of global health issues and tap into benefits derived from the exchange of knowledge and ideas through communities at TTUHSC campuses and through participation in international programs.

The TTUHSC Office of International Affairs (OIA) is committed to working with the component schools and their students to identify and develop rich opportunities that will equip our students and faculty to work in the globalized world. In the summer of 2011, over 45 students participated in international programs that broadened their understanding of global health challenges and the roles they will play as health care professionals. Through the expansion of our international programs and the development of new relationships, the OIA will continue to support and encourage students and faculty in becoming globally competent health care providers. For more information on international programs for students, please read HSC OP 10.29 or contact the TTUHSC Office of International Affairs at 806-743-2900.

International Flavor



Ka'ak Cookies a recipe from Lebanon*

Makes about 36 cookies
Ingredients:

- 1 cup sugar
- 1 cup oil (or butter)
- 2 eggs
- 3 cups flour, or enough to make dough firm
- 1 cup milk
- 1 Tbl ground mahlab (or substitute with ground cinnamon)
- 3 tsp baking powder

Instructions:

- Mix all the ingredients in a bowl and let chill in the refrigerator for at least 1 hour.
- Preheat oven to 350 degrees.
- Roll out the dough until it is about 1/4-inch thick.
- Cut into circles and bake for 10 to 15 minutes.

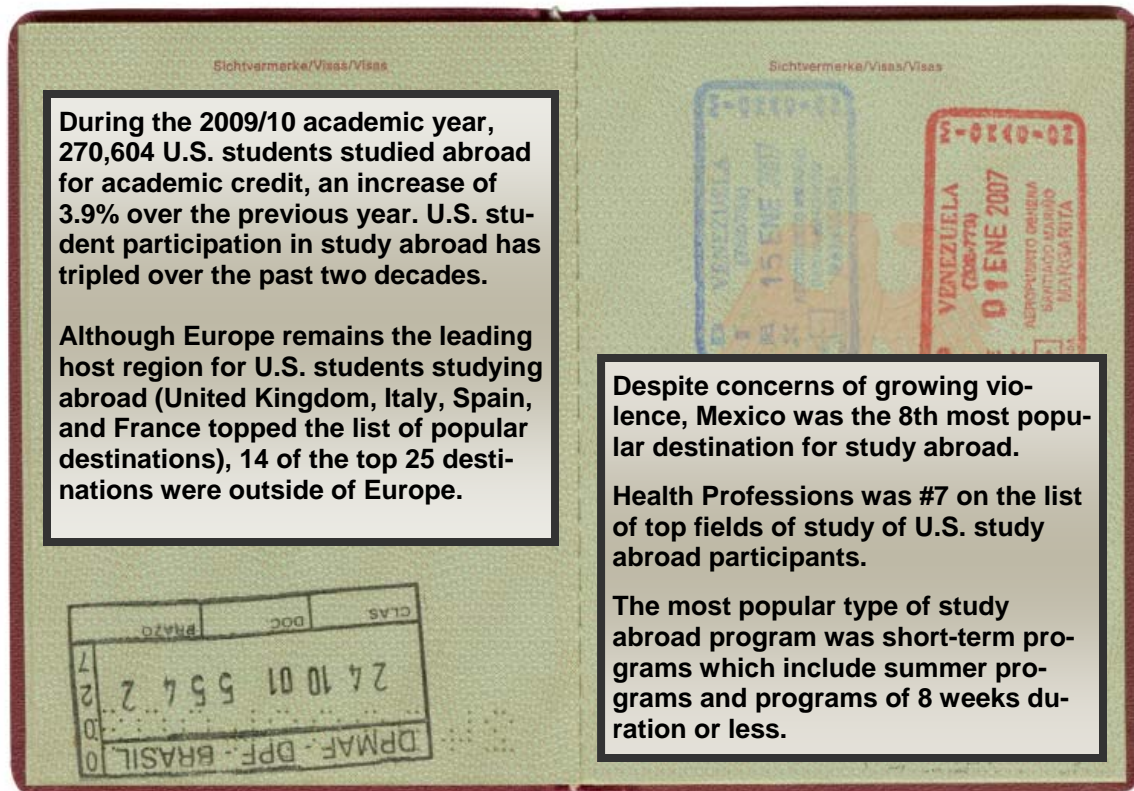
Ka'ak can also be rolled into ropes and formed into rings topped with sesame seeds.

*Lebanon celebrates its independence on November 22. It is a national day celebrated in remembrance of the liberation from the French Mandate which granted control of Lebanon to France following the collapse of the Ottoman Empire after World War I.

When in... Spain

- In business, initial greetings are formal, with handshakes and direct eye contact while saying "Buenos dias/tardes/ noches" for "Good morning/ afternoon/ evening or night." Shaking hands upon departure is popular, though not essential.
- Spain has one of the most flexible attitudes toward time in the world. Trains and buses seem to write their own timetables, and it is common to arrive half an hour late for social events. Spanish bureaucracy—in fact, anything involving documentation—is always infuriatingly prolonged. However, if you want to enjoy your visit, go with the flow rather than fighting this slow pace of life, because you'll never change it.
- Conversation is often loud and very animated, with numerous hand gestures that a visitor might mistakenly interpret as signs of anger. Good-natured banter is okay as long as you don't insult Spanish culture or highlight racial stereotypes.
- Familiarize yourself with the concept of *mañana*, which means "tomorrow" and is a habitual response to questions that require a definite answer. If you want to know when your car will be fixed, it will always be *mañana*. This can seem like laziness, but actually Spaniards never like to be seen as trying too hard.

2009/10 Study Abroad Facts and Figures



During the 2009/10 academic year, 270,604 U.S. students studied abroad for academic credit, an increase of 3.9% over the previous year. U.S. student participation in study abroad has tripled over the past two decades.

Although Europe remains the leading host region for U.S. students studying abroad (United Kingdom, Italy, Spain, and France topped the list of popular destinations), 14 of the top 25 destinations were outside of Europe.

Despite concerns of growing violence, Mexico was the 8th most popular destination for study abroad.

Health Professions was #7 on the list of top fields of study of U.S. study abroad participants.

The most popular type of study abroad program was short-term programs which include summer programs and programs of 8 weeks duration or less.

All figures provided by The Institute of International Education (IIE) Open Doors "Fast Facts." For more data and information, please visit them online at www.iie.org/opendoors.

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

Belize

Belize, located along the southern border of Mexico next to Guatemala, is the most sparsely populated country in Central America. Slightly larger than Massachusetts, Belize has a population of approximately 313,000, more than half of which live in rural areas. Being a former British colony, English is the official language, making it the only English-speaking country in Central America.

Archeological sites suggest the Mayan civilization spread into the area of Belize as early as 1500 BC. European contact began in 1502 when Columbus sailed along the coast. The first European settlements were recorded in 1638. In 1840, the country was formally termed the "Colony of British Honduras." It became a crown colony in 1862. The official name of the territory was changed from British Honduras to Belize in June 1973, and full independence was granted on September 21, 1981.

Because of its history, most Belizeans are of multiracial descent. A little over 40% of the population is "mestizo," of mixed Mayan and European

descent. Almost 30% of the population is of Creole ancestry (African and Afro-European). Eleven percent are Mayan and 6% are Garifuna or Afro-Amerindian.

Belize is a member of the Commonwealth. Queen Elizabeth II serves as head of state and is represented in the country by a governor general. A prime minister serves as head of government. Belize has a National Assembly which consists of a House of Representatives and a Senate. Members of the House are popularly elected while the governor general appoints members of the Senate.

Issues currently of concern in Belize are unsustainable foreign debt, high unemployment, growing involvement in the South American drug trade, high crime rates, and increasing incidents of HIV/AIDS.

According to World Health Organization (WHO) statistics, the life expectancy at birth is 71 years for males and 76 years for females. The leading causes of death are ischaemic heart disease, perinatal conditions, cerebrovascular disease, lower respiratory infections, road traffic accidents, hypertensive heart disease, diabetes mellitus, nephritis and nephrosis, tuberculosis, and protein-energy malnutrition.



Views of the World: in the news & on the web

- **A Doctor's Touch**
Modern medicine is in danger of losing a powerful, old-fashioned tool: human touch. Physician and writer Abraham Verghese describes our strange new world where patients are merely data points, and calls for a return to the traditional one-on-one physical exam.
- **India's Internet Surfing and Shopping Boom**
India could become one of the world's top ten hubs for e-commerce by 2015.
- **Scottish Football 'more than 500 years old'**
"Organized" football was being played in castle courtyards in Scotland more than 500 years ago, experts have found.
- **Selling Condoms in the Congo**
HIV is a serious problem in the DR Congo, and aid agencies have flooded the country with free and cheap condoms. But few people are using them. Why? "Reformed marketer" Amy Lockwood offers a surprising answer that upends a traditional model of philanthropy.
- **Tunisians Vote in a Milestone of Arab Change**
Millions of Tunisians cast votes for an assembly to draft a constitution and shape a new government, in a burst of pride and hope that after inspiring uprisings across the Arab world, their small country could now lead the way to democracy.
- **Spain's Stolen Babies and the Families Who Lived a Lie**
Spanish society has been shaken by allegations of the theft and trafficking of thousands of babies by nuns, priests and doctors, which started under Franco and continued up to the 1990s.
- **Learning from a Barefoot Movement**
In Rajasthan, India, an extraordinary school teaches rural women and men—many of them illiterate—to become solar engineers, artisans, dentists and doctors in their own villages. It's called the Barefoot College, and its founder, Bunker Roy, explains how it works.
- **Till Death Do Us Part**
The Philippines is one of the last countries where divorce is banned, but is that about to change?
- **Song and Dance in India Over Bollywood Baby**
Excitement sweeps country after actor son and daughter-in-law of superstar Amitabh Bachchan announce daughter's arrival.
- **Yemen is Experiencing Two Revolutions, Says Female Activist**
Afrah Nasser, a Yemeni blogger and activist, reports on the growing number of female protesters involved in the uprising in Yemen.
- **Genocide Survivor to Sit on Holocaust Museum Board**
Rawandan refugee Clemantine Wamariya, now an American, was picked for the board by President Obama.

When in... Spain cont.

- When dining out in the evening, Spaniards socialize and eat late, and they bring their children with them. It is not uncommon to book a table for 10 p.m., and many of the bars and clubs don't even open until midnight.
- To make a toast, raise your glass and say "Salud."
- Clear your plate; leaving food is considered wasteful.
- To beckon someone in Spain, extend your arm with your palm downwards and wriggle your fingers toward yourself.
- Yawning or stretching in public is rude.
- Spaniards love taking walks, and there is a tradition of taking a stroll (*paseo*) before dinner. The streets are full of people of all ages casually working up an appetite.
- The *mantilla* is a traditional black lightweight lace or silk scarf worn over the head and shoulder by older Spanish women on special occasions, along with a rigid headpiece call a *peineta*.
- If you are invited to a Spanish home, bring a small gift, such as chocolates or flowers.
- Restaurant bills include a service charge by law, but you may leave an extra tip of between 5 and 10 percent for excellent service.

Spend your lunch
hour with us!



Global Health Lecture Series:
every first & third Wednesday
ACB 120

- January 18
- February 1
- February 15
- March 7
- March 21
- April 4
- April 18
- May 2

Free lunch
provided
to the
first 35
attendees

OIA Film Series
one Thursday a month, ACB 240

- January 26
- February 23
- March 22
- April 26
- May 24

Free
snacks
provided

November

01—Guede loa; Haiti
 02—Dia de los Muertos; Mexico
 03—Bunka no Hi; Japan
 04—Arbor Day; Samoa
 05—Guy Fawkes Night; United Kingdom
 06—Tulsi Vivah; Hindu
 07—Revolution Day; Bangladesh
 08—Mitrovdan; Serbia
 09—Berlin Wall Opening Day; Germany
 10—Militsiya Day; Russia
 11—Independence Day; Poland
 12—Constitution Day; Azerbaijan
 14—Eid-e Ghadir Khom; Iran
 15—Proclamation of the Republic; Brazil
 16—Correction Day; Syria
 18—National Day; Latvia
 19—Liberation Day; Mali
 20—Teacher's Day; Vietnam
 22—Independence Day; Lebanon
 23—Rudolph Maister Day; Slovenia
 25—Independence Day; Surinam
 26—Proclamation Day; Mongolia
 28—Bonifacio Day; Philippines
 29—Liberation Day; Albania
 30—Independence Day; Barbados

December

01—Restoration Day; Macao
 02—National Day; United Arab Emirates
 05—Sinterklaas; Netherlands
 06—Independence Day; Finland
 07—St. Ambrose Day; Italy
 08—Bodhi Day; Buddhism
 09—Independence Day; Tanzania
 10—Human Rights Day; UN
 12—Jamhuri; Kenya
 13—Luciadagen; Sweden
 15—Kingdom Day; St. Martin
 16—Bijoy Dibash; Bangladesh
 17—National Day; Bhutan
 18—Republic Day; Niger
 19—St. Nicholas Day; Ukraine
 20—Day of Mourning; Panama
 21—Chanukah; Jewish
 22—Yule; Pagan
 23—Suez Victory Day; Egypt
 24—Independence Day; Libya
 25—Constitution Day; Taiwan
 26—Boxing Day; International
 27—Proclamation Day; Australia
 30—Danza de los Diablitos; Costa Rica
 31—Hogmanay; Scotland



International Holidays and Celebrations



Language Lesson: *It's Greek to Me*

This phrase is used to indicate that something is totally incomprehensible to you. According to [World Wide Words](#), it comes from the Medieval Latin phrase *Graecum est; non potest legi* (It is Greek; it cannot be read). Medieval scribes, who weren't familiar with Greek, apparently wrote this phrase next to any text they came across in that language. The equivalent of this phrase in quite a few languages compares incomprehensible things to an unknown language, particularly Chinese or Greek, while many of the Slavic languages associate Spanish villages with incomprehension. The Chinese themselves compare such things to a 'heavenly script.' The Japanese use a string of nonsense syllables which imitate the sounds of unknown languages, especially Chinese.

taken from [Omniglot.com](#)

Catalan	<i>Això em sona a xinès</i>	(It sounds like Chinese)
Croatian	<i>To mi je špansko selo</i>	(It's a Spanish village to me)
Danish	<i>Det lyder som en by i Rusland for mig</i>	(That sounds like a town in Russia to me)
Dutch	<i>Dat is Chinees voor mij</i>	(That's Chinese for me)
Finnish	<i>Täyttä hepreaa</i>	(It's all Hebrew to me)
French	<i>C'est du chinois pour moi</i>	(It's Chinese to me)
German	<i>Ich verstehe nur Bahnhof</i>	(I understand only railway station)
Hungarian	<i>Ez nekem kínai</i>	(This is Chinese to me)
Italian	<i>Per me è arabo</i>	(It's Arabic to me)
Latvian	<i>Tā ir ķīniešu ābece</i>	(It's the Chinese alphabet)
Norwegian	<i>Det er helt gresk for meg</i>	(It's totally Greek for me)
Portuguese	<i>É grego para min</i>	(It's Greek to me)
Spanish	<i>Me suena como griego</i>	(It sounds Greek to me)
Swedish	<i>Det är rena grekiskan</i>	(It is pure Greek)
Turkish	<i>Olaya Fransız kaldım</i>	(I am French to the conversation)

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