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# Compendium On India Epidemic Intelligence Service (EIS) Programme



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## Executive Summary

The India Epidemic Intelligence Service (EIS) training programme model was approved at the second meeting of the Ministry of Health and Family Welfare-Global Disease Detection (MOHFW-GDD) Steering Committee on 18 July, 2011. The India EIS training programme is a 2-year programme in applied epidemiology, in which trainee officers develop skills while working with various Indian public health agencies/programmes. On 2-3 September 2011, the National Center for Disease Control (NCDC) convened a stakeholders meeting to review the proposal and make recommendations. Stakeholders were extremely supportive of the commencement/launch of an India EIS programme and were very engaged in discussions around details of the programme. The stakeholders discussed and developed recommendations for intake, qualifications, type of placements, mentors, core competencies that will be attained by the trainee officers, certification, and potential career path. This document contains the operational guidelines for the India EIS Programme and recommendations from the Stakeholders Meeting.

The programme trains medical doctors in applied epidemiology. State and central public health agencies (or equivalent local autonomous bodies) forward the application of their employees interested in this programme for consideration. If selected by the training programme, the state/central agencies excuse their public health employees from their duties for 2 years to undergo the training. Individual candidates can also apply as self-sponsored candidates. Selection is through a highly competitive process by a committee of experts. EIS officers, as the selected applicants are referred to, are assigned to a state/central public health agency for two years under the supervision of a mentor. EIS officers complete a set of assignments – the Core Activities of Learning (CALs) – to acquire skills of field epidemiologist. The CALs include; investigation of disease outbreak, evaluation of a surveillance system, in-depth epidemiologic data analysis, both oral and written scientific communication, and service to the agency where the EIS officer receives training. While the EIS officers spend most of their time working at their placement sites, short courses, seminars, and an annual conference to supplement learning are conducted at NCDC. Completion of all CALs is required for successful completion of the programme. Officers are obligated to work in public health for a prescribed period of time after completion of the two-year training.

At the Stakeholders Meeting all participants agreed that the India EIS training programme must be of highest quality, building a workforce of epidemiologists who can address the pressing public health needs of the nation. The programme's success depends on recruitment of the best candidates, assigned to the best placement sites, guided by the best mentors and supervisors.

## Background

The Government of India is committed to improving the health of its people. In support of this commitment, the Government established public health capacity development as a priority. After an outbreak of plague in 1994, the Government constituted a technical committee to suggest measures to prevent recurrence of such outbreaks. The Central Council of Health and Family Welfare (CCHFV) is the apex political and policy formulating body comprised of the Union Minister of Health and Family Welfare (as chairperson) and health ministers from all the states and union territories as members. In 1995, the council recommended establishment of epidemiology units in states and districts to revitalize the disease outbreak identification and reporting by the primary health care facilities. In the same year, an expert committee on revamping the public health system affirmed the need to strengthen the public health system for effective implementation and evaluation of national health programmes and to prevent outbreaks that can have national and international implications. In 1996, the National Apical Advisory Committee for National Disease Surveillance and Response System (NAAC) was created.

These initiatives and policy level decisions led to the establishment of the National Surveillance Programme on Communicable Diseases (NSPCD) in 1997. In 1999, the Government of India constituted a technical advisory group on diseases of international public health importance. Following a detailed appraisal of the NSPCD, the Integrated Disease Surveillance Project (IDSP) was established in 2004 and is being implemented in the country.

A detailed review of IDSP was done by a team of experts from the US Centers for Disease Control and Prevention (CDC) following an invitation from the Government of India in 2007. The review pointed out that the project had been able to demonstrate success in terms of detection and reporting of outbreaks, but the quality of detection and response needed improvement. One identified constraint was inadequate human capacity in States and the Centre. During the last 4 years, the outbreak detection capability of IDSP has improved considerably. In 2008, IDSP reported and responded to 553 outbreaks of epidemic prone diseases, over the years reporting and response gradually accelerated (799 outbreaks in 2009; 990 outbreaks in 2010; 1675 outbreaks in 2011; 1550 upto 16 December 2012).

To establish and enhance epidemiology capacity in the country, the key public health agency has undergone several transformations over time. The Central Malaria Bureau was established at the Central Research Institute, Kasauli, and Himachal Pradesh in 1909. Subsequently, it was expanded and renamed as the Malaria Survey of India in 1927. In 1938, it was moved to Delhi and renamed as the Malaria Institute of India. The institute became the National Institute of Communicable Diseases (NICD) in 1963 with the mandate to function as a national centre of excellence for infectious disease control. In 1997, NICD was tasked to implement NSPCD and in 2005 it started implementation of IDSP. In 2009, NICD was renamed the National Centre for Disease Control (NCDC). An ambitious programme to upgrade NCDC to become a national center for excellence was approved by the Planning Commission of India in 2010. NCDC has been mandated to develop and provide

epidemiology expertise to the country and is the leading agency for the implementation of the International Health Regulations.

#### Existing Short-Course Epidemiology Programmes

NCDC has been conducting continuing education training courses in field epidemiology for public health managers in India. A 9 month field epidemiology programme was conducted during 1992-93 in collaboration with USAID. Since 1996, the institute has been a WHO Collaborating Centre for Epidemiology and Training for South East Asian countries to strengthen the epidemiological support services. The centre conducts a 3 month course in field epidemiology training for medical/health officers and one month course for paramedical personnel. A number of training activities for medical and paramedical personnel in various health programmes and laboratory services are carried out annually.

Epidemiology training is in the curriculum of MD (Public Health/Preventive and Social Medicine/Community Medicine) and Diploma in Public Health in different medical colleges but there is no exclusive university post-graduate programme for epidemiology. The National Institute of Epidemiology (NIE), Chennai, conducts a 2-year Masters' programme in applied epidemiology.

NCDC developed and expanded the 2-year field epidemiology training programme to train the Integrated Disease Surveillance Programme (IDSP) epidemiologists and surveillance officers. NCDC partnered with premier health institutions in India to enhance epidemiology capacity for outbreak detection and response. During the last decade various other initiatives have been undertaken by NCDC, states, non-government organizations, and public-private partnerships but none of these efforts have adequately addressed the ever expanding need for quality epidemiological capacity like that available in the US or Europe.

Epidemiology training available in the country is primarily modeled on classroom teaching. Some training is rather academic in nature like the various public health degrees awarded by different Medical Universities across the country, including the Doctor of Medicine (MD) in Preventive and Social Medicine, Social and Preventive Medicine, Community Medicine, Community Health Administration. These generally have similar course content and a style of imparting education with three-year degree programmes that qualify for Medical Council of India Degree. Some universities offer a compressed two-year programme that leads to a Diploma in Public Health (DPH). This DPH was originally designed to cater to the needs of practicing public health physicians without a Post Graduate Degree in Public Health working in different sectors to orient them in public health concepts and practices.

The Masters' of Applied Epidemiology by the National Institute of Epidemiology, Chennai and the Masters' of Public Health Field Epidemiology (MPH-FE) by the National Institute of Communicable Disease (now NCDC) are recognized as 2-year full-time field epidemiology training programmes (FETP) by the Training Programmes in Epidemiology and Public Health Interventions Training Network (TEPHINET).

The MPH-(FE programme was improved by NCDC to better respond to the needs of public health training in India and the field assignments time was increased. It transformed into an outstanding training and gave trainees a good overview and skill sets for effective public health practice. A mentor-based training where participants learned and practiced public health competencies under the mentorship of a trained public health practitioner remained a gap.

Over the past few years, the country has established a fully functional integrated disease surveillance programme and outbreak investigation database. IDSP is compatible with other surveillance systems such as malaria surveillance system of the National Vector-Borne Diseases; HIV sentinel surveillance of the National AIDS Control Organization; health management information system of the Revised National Tuberculosis Control Programme; and the surveillance management system of the National Polio Surveillance Programme. Though not dedicated to disease surveillance, the Health Management Information System of the National Health Mission documents disease and health event trends in the country. This consolidation of capacity provides an opportunity to establish a high quality mentor-based India EIS programme that is very different from the classroom teaching models. This programme will provide not only epidemiologic services during the training, but will also build nation's capacity and produce future leaders in epidemiology and public health practice.

#### HOW CAN A STATE BENEFIT FROM PARTICIPATING IN THE INDIA EIS PROGRAMME?

- The India EIS programme is an example of centre-state partnership
- States benefit by the world-class training that equips their candidates with fundamental epidemiological skills and capacity
- EIS officers return to their states, after two years, as highly skilled epidemiologists who can contribute to public health
- An investment that yields rich dividends in terms of improving the state's public health system

## The India Epidemic Intelligence Service (EIS) Programme

In India, there is a dedicated cadre of public health professionals in some states but majority of states lack applied epidemiological capacity validating the need for the EIS programme. To address this need, NCDC launched the India EIS programme on October 4, 2012. The Global Disease Detection India Centre of the US CDC is committed to partner with NCDC to strengthen practical and applied epidemiology training. US CDC and NCDC designed the India EIS Programme which is modeled on the EIS Programme in the United States. The 2 year programme in the US focuses on hands-on training in epidemiologic service for public health professionals. Trainees, called EIS Officers, engage in outbreak investigations, design and analyses of epidemiological studies, analysis and evaluation of surveillance data, scientific communication, and other activities in preparation for their careers as field epidemiologists.

It is imperative that the India EIS Programme be of the highest quality, producing epidemiologists who can address the pressing public health needs of the nation. India EIS is a 2 year programme in *applied epidemiology* in which the trainee officers develop skills while working with various public health agencies/programmes in the country. Therefore, the programme trains only extremely keen, enthusiastic medical doctors with an aptitude for public health and with at least two years of public health experience. Selection is through a highly competitive process by a committee of experts. The selected EIS officers are assigned to a placement site for two years under the technical supervision of an experienced mentor. The officers who complete the programme benefit in terms of career opportunities and playing a leadership role in country's public health operations.

Although there is a dedicated cadre of public health professionals in the Central Health Service (CHS) and in some states, most of the States lack applied epidemiological capacity and hence the need for such training programme.

## Selection of Officers

Extremely keen and enthusiastic candidates with an aptitude for public health are preferred. To select candidates, a request along with a brochure outlining the IndiaEIS Programme is sent to the state health ministries and relevant government institutions. Meetings and briefings with the state health administrators are scheduled to discuss the programme and potential candidates in detail. Websites of MOHFW and NCDC provide programme information, application process, and timelines for selection process. Additionally, media advertisements and announcements at national public health meetings and journals are placed to encourage applications.

## Solicitation of candidates

1. A letter along with a brochure outlining the objectives of the India EIS Programme is distributed to all state health ministries, and relevant governmental institutions that sponsor potential candidates.
2. Meetings and briefings with state health administrators are held to encourage participation in the programme. Suitable advocacy brochures are available for these meetings.
3. Details of the programme, the application process and timelines for the selection process are mentioned on the websites of the MOHFW and NCDC.
4. Regular media advertisements and announcements are made at national public health meetings and through other means, including publications, and advertisements in medical and public health journals.

## Eligibility Criteria

Regular employees of central/state health service or equivalent (local autonomous bodies) as well as self-sponsored candidates. The minimum essential qualifications are:

1. MD (Public Health/Preventive and Social Medicine/Community Medicine)  
OR  
MD (Clinical or Para-Clinical) with 2 years' experience (service)  
OR  
MBBS with Postgraduate Diploma in Clinical, Para-clinical, or Public Health and 3 years of public health experience from any recognized institution  
OR  
MBBS from any recognized institution with five years' minimum work experience in public health
2. Age: Not exceeding 45 years as of the last date of application
3. Government sponsored candidates should be presently working in central/state government/PSUs like the E---S---I---, railways, / state or municipal corporations/local bodies/defence/para-military forces/ autonomous bodies.

#### WHY SHOULD I APPLY FOR THE INDIA EIS PROGRAMME?

- It is an on-the-job competency-based training programme designed to provide guidance through individual mentoring
- The officers obtain hands-on experience related to outbreak investigations, designing/analyzing epidemiological studies, evaluating surveillance system and data, and developing scientific communications
- Many of the graduates of the US-EIS, on which the India EIS Programme is modelled, have become public health leaders at CDC, WHO, schools of public health, and other reputed agencies and institutions

### Forwarding of Application

Subsequent to the announcement of the course by NCDC, candidates will prepare and submit their application in prescribed format (application form) available on NCDC website. Applicants working for state or central agencies need to include a 'No Objection Certificate (NOC)' from their employer with the application. Failure to include the NOC will prevent consideration for the India EIS Programme. State and central government agencies will recommend and forward the employee's application with the agreement to release the employee to NCDC for the 2-year programme in case the employee is selected. The nominating agencies are requested to nominate only those employees who are enthusiastic and can be released for the period of training. Salary during the training period will be borne by the sponsoring authority. Self-sponsored candidates, on selection, will be paid a stipend by NCDC. Central/state agency must also guarantee placement of the trainee after completion of the programme into a position suitable for someone who has acquired competencies in applied epidemiology.

Nomination does not automatically guarantee selection for the programme. The decision to select candidates will rest with NCDC through a highly competitive process.

The applicant needs to submit the application with curriculum vitae, NOC, copies of previous academic transcripts, and a brief essay describing their interest in or reason for applying to the India EIS Programme.

Applications will be screened to ensure they meet the eligibility criteria. Those who meet the eligibility criteria will be invited for interviews by the selection committee. Applicants invited for interviews will be required to provide letters of recommendation and other documents as prescribed. The letter of recommendation from their employer shall specify that if they are selected they will be relieved for the 2-year training during which they will continue to remain their employees and will serve with the Government/sponsoring organization for at least 5 years after

the completion of the training in an appropriate position. Failure to submit this letter will disqualify the candidate for the interview.

## **Selection Process**

An independent selection committee, with representation from NCDC experts, CDC-GGDIC experts, and external experts, oversees the selection process.

All applicants, both state-sponsored and self-sponsored, undergo a stringent competitive selection process. The candidates will attend an Epidemiology Workshop and will be interviewed by two separate panels. Sponsorship/nomination do not automatically guarantee selection. The nominating agencies will recommend and forward the application of employee with the agreement to release the employee to NCDC for the two-year duration of the programme, in case of his/ her selection to the course. The decision of the selection committee is reviewed and approved by the Director-NCDC.

### **Desirable qualifications can include but are not limited to:**

- Strong commitment to public health/epidemiology in India
- public health experiences
- Prior publications of scientific work in reputed journals/interest in scientific writing and publication
- Public health research/project management experience
- Flexibility, willingness to work in various programmes, in various places, under challenging conditions; suitability to work in austere conditions
- Comfortable using a computer and modern techniques of information and communications
- Professional maturity, capacity to learn and work independently, and respond to supervision

The selection process will be based on merit. Reasonable efforts will be made to have equitable selection with representation of candidates from the Empowered Action Group (EAG) states.

## **Intake**

There are 25 seats of which 20 seats are set-aside for the government-sponsored candidates and 5 for the self-sponsored candidates. In case self-sponsored candidates are not available these 5 seats will be open to government-sponsored candidates. Government-sponsored candidates shall be paid full salary and other admissible allowances for the two year training period by their sponsoring authority.

## **2-Year Programme Schedule**

The India EIS training programme includes:

1. Classroom instruction through periodic didactic sessions and lectures to prepare the officers for their field duties

- Month 1: Introductory course
  - Month 4: One week workshop where EIS Officers present the findings of their surveillance system assignment and a didactic session on scientific writing,
  - Month 13-15: One week leadership workshop
  - Month 15: One week workshop on an advanced topic
2. Field assignment at a central/state agency with guidance and direction from supervisor and mentor
    - Assessment of a surveillance system
    - Outbreak investigation
    - Analytical in-depth public health research study
  3. Tuesday seminars to provide a forum for additional instructions, practice presentation of an investigation or study, and team building

All officers will be given a monthly allowance of Rs. 20,000 for housing, Rs. 2000 for internet use and Rs. 5000 for local travel. The officers will also be given an annual allowance up to Rs.20,000 for procuring text books, scientific journals, and course materials. Laptops with internet connectivity are provided. The self-sponsored officers are in addition provided a monthly allowance of Rs.45,000.

During the 2-year training, officers will be placed in field assignments suitable to fulfill prescribed core activities of learning (CALs). This will be under the supervision of the officer's identified mentor and periodic contact courses in NCDC:

In the second year of the training each officer will be encouraged to submit an abstract to an international conference such as the US EIS Conference, TEPHINET Conference, or other appropriate conferences. Officers whose abstracts are accepted for presentation will be supported to attend that conference.

A summary of the 2-year calendar is as follows:

Month 1: Introductory Course (4 weeks) — orientation to the programme, basic epidemiology, basic biostatistics, basic computer skills, discussion of surveillance project. Instruction will focus on practical skills rather than theory, and instructional methods will include lectures, exercises, case studies, and other hands-on methods.

Months 2–24: Field placement

Month 4: 1-week workshop for surveillance presentations and scientific writing

Month 7: A workshop on scientific writing

Month 13: 1 week leadership workshop

Month 15: 1-week course / workshop on a topic as needed

Month 15: Annual India EIS Conference (each EIS officer attends twice)

Month 13-23: International conference, if abstract accepted

Month 13-23: CDC Atlanta EIS Conference, if abstract accepted

Month 24: Graduation ceremony

Months 6, 12, 18, 24: 6-month evaluation

## Core Activities of Learning

The core activities of learning (CALs) provide opportunities for the officer to develop proficiency in important epidemiologic competencies. The required set of skills includes:

1. Conduct or participate in a field investigation of a potentially serious public health problem that requires a timely response
2. Design, conduct, and interpret an epidemiological analysis
3. Evaluate a public health surveillance system
4. Give a public health talk on the officer's original work.
5. Write and submit, as first author, a scientific manuscript and an abstract for a peer-reviewed journal or conference that is cleared for publication by NCDC
6. Write and submit, as first author, a report or brief for lay audience and media

Provide service to the institute and/or to public health as requested by the central/state agency. In addition to these CALs, the officer is expected to:

- Demonstrate proficiency in using computer applications such as internet, databases like Microsoft Access and Excel, EpiInfo, etc.

- Be conversant with the role of the laboratory in epidemiology, including knowledge and skills for collection, transport, storage of clinical specimens, interpretation of laboratory reports, and use of laboratory information
- Be able to identify a public health emergency of international concern and adhere to the IHR requirements

**Criteria for successful completion of these CALs will be developed by the EIS Advisor and the India EIS Programme staff. Successful completion will be judged by the Mentor/Placement Supervisor, EIS Advisors and Director NCDC.**

## Potential Placements and Assignments

Each officer will be placed with a public health programme or project for two years. The officer will work closely with his/her mentor and placement supervisor to develop work plans, complete the CALs, and acquire the skills. Placement sites can be any central or state health office in India. While the officer is placed with these institutes, he/she will remain affiliated with NCDC.

EIS Advisors, along with mentors, will determine the training plan for each officer to complete the CALs.

Potential placement sites are identified for each cohort. Criteria for assignments include: (i) available resources for an officer to complete the CALs, (ii) access to surveillance and programme data, (iii) a mentor who has time and expertise as well as an understanding of the goals of the India EIS Programme, and (iv) an enabling environment with adequate administrative support. Placement sites will be selected by the EIS Advisor in consultation with the NCDC Director or designated NCDC staff.

Placement sites include national health programmes such as IDSP, relevant divisions of NCDC, RNTCP, the National AIDS Control Programme (NACP), NPSP, National Vector Borne Disease Control Programme (NVBDCP), National Programme for Prevention of Cancer, Diabetes, Cardiovascular diseases, and Stroke (NPCDCS), other international organizations including International Clinical Epidemiology Network (INCLIN), International Union Against Tuberculosis and Lung Diseases (IUATLD), and partner institutions like WHO and UNICEF.

The officer will not be placed in the state or programme from which he or she originates (i.e. to the sponsoring institution). NCDC will make institutional arrangements with placement sites to provide opportunities to officers to meet the requirements of this programme. The officer will have an opportunity to participate in all major activities at his/her placement site.

While an officer may be assigned to a programme at NCDC or another central agency, the officer will also spend time in states investigating outbreaks, reviewing surveillance data, or conducting other EIS activities.

## **Why mentorship?**

The best way for officers to learn field epidemiology skills is under the supervision of an experienced mentor while they conduct epidemiologic investigations and research in a public health setting. Each officer will have a mentor responsible for guiding him/her in completing CALs and a placement supervisor who is usually the chief of the programme/institute where the officer is placed. At times, the mentor and the placement supervisor will be the same person. Some EIS graduates are also assigned mentoring responsibilities by the programme. Ideally, the mentor is a person with EIS or equivalent training (MD PSM or Community Medicine) and is a practicing field epidemiologist.

The role of mentors is critical for the training of the officers. Mentors facilitate provision of a favorable environment for the officer to fulfill prescribed CALs and keep track of their progress. The mentor is responsible for providing overall direction and guidance to the officer. The placement supervisor is expected to provide logistical requirements necessary for training as per the CALs. Mentors and placement supervisors may also utilize the officer's service in times of emergency, disaster, outbreak or major public health event. NCDC conducts mentorship development programmes for EIS mentors to update their education and skills through national/international conferences/workshops.

## **Annual EIS Conference**

The India EIS Programme will sponsor a conference or session at a conference each year. This conference provides a forum for officers to present their projects in standard scientific format, i.e., either posters or 10-minute oral presentations followed by questions and answers. This presentation satisfies one of the CALs. The India EIS Conference is an opportunity to showcase the achievements of the officers to broader public health community.

Attendance at the conference is required for all officers. Attendance by supervisors/mentors is strongly encouraged. Others to be invited include officials from sponsoring and participating programmes, state health departments, medical schools, and other government agencies, incoming officers, faculty and students from other FETP and MPH programmes, and others interested in epidemiology and public health.

Presentations at the conference will be primarily by the officers currently in the India EIS Programme. However, others, such as alumni of the India EIS Programme, participants of the India FETP-MPH programmes, US EIS officers who have conducted investigations in India or relevant to public health in India can also submit abstracts. Selection of presentations will be determined by the India EIS Conference selection committee.

## Evaluation

Every 6 months, the mentor and supervisor will conduct a formal evaluation with the officer. The evaluation will assess the officer's progress towards the completion of the CALs, mentor's and supervisor's assessment of the officer's proficiency in epidemiology skills, scientific communication skills, and professionalism. Alongside, the officer will share his/her satisfaction with the training, recommendations for improvement, and goals for the next 6 months.

The mentor, placement supervisor, and the officer will then review their evaluations in a face-to-face meeting. While the evaluation focuses on the previous 6 months, at the meeting the mentor, placement supervisor, and the officer should also discuss plans for the upcoming 6 months — specifically, how to make progress in completing the CALs and other activities.

The evaluations are later shared with the EIS Advisor. Terminal evaluation will be conducted under the aegis of the Advisors for India EIS Programme.

## Certification

A certificate of completion will be awarded to the officers at the end of two years if they successfully complete all the CALs. The certificate is jointly signed by NCDC, India and CDC, USA.

The certificate will be awarded at a ceremony at the end of the 2 years.

## Career Path

Since officers need to continue to hone their newly acquired epidemiology skills, appropriate career opportunities are explored. EIS Officers graduate to serve as mentors to future officers and they play a leadership role in public health operations.

Sponsoring states or programmes decide appropriate placement for the returning officers. Once the officer completes his/her training, the officer is immediately placed in an appropriate position to best utilize epidemiology skills and to further him/her for a future public health leadership role in the state/institution.

## Recognition for DNB (Epidemiology)

The National Board of Examinations (NBE) has confirmed that the two year training period of officers of the India EIS Programme will count towards eligibility to Diplomate of National Board (DNB) in Field Epidemiology.

### Steps for Registration with NBE and Training Completion Certification

1. **Registration-** After completion of the EIS Programme, successful candidates register with NBE by filling the application form (**Registration for DNB- Field Epidemiology (FE) Programme**) and forwarding it through NCDC. After successfully submitting this application the candidates will receive a registration certificate from NBE.

- a. EIS graduates with MD Public Health/PSM/Community Medicine or MD Clinical/Paraclinical may appear for DNB final examination immediately after EIS training.
  - b. EIS graduates with MBBS and PG diploma in Clinical/Paraclinical/Public Health field must complete a dissertation in order to appear for DNB final examination.
2. **Training Completion Certificate-** Registered candidates have to work in relevant public health activities/fields in their respective states/programme. After completion of the two years training the candidates can apply for the Training Completion Certificate (as per NBE format) with NCDC. Based on the evidence provided by the candidates in support of minimum two years work in public health field, NCDC will issue the Training Completion Certificate.
3. **NBE Eligibility Certificate-** After submission of Training Completion Certificate the NBE will issue final Eligibility Certificate to candidates for appearing in DNB- Field Epidemiology Final Examination.
4. Candidates to follow next steps as per the **Information Bulletin & Application Form for Diplomat of National Board, Final Examination – Broad Specialty** issued from time by National Board of Examinations (NBE).

## **EXPERTS SPEAK**

"As EIS programme will help us produce high quality epidemiologists in the country. We should aim at having at least one EIS trained epidemiologist in each state in next 5 years and in each district in 10 years."

ShriB. P Sharma  
Secretary Health  
Ministry of Health & Family Welfare,  
Government of India

"EIS is a landmark in the field of Public Health in India. There is a need to nurture this very carefully by pooling our resources from where ever these are available."

Dr. Jagdish Prasad  
Director General of Health Services,  
Government of India

"I am delighted to learn that the EIS programme is being launched in India. This, I am sure, will benefit the country immensely in responding to the public health challenges"

Dr Keiji Fukuda  
Assistant Director General  
WHO, Geneva

"The India EIS program will train India's next generation of epidemiologists and public health leaders to respond and prevent future health threats in India."

Dr. Thomas R Frieden  
Director, CDC  
Atlanta, USA

"I applaud NCDC's efforts to build strong, effective public health systems in the Nation and States through launching the India EIS. Based on the philosophy of "learning while doing" the prestigious India EIS will have a major impact on the health of India and the world. "

Dr Kayla Laserson  
Director, GDD-IC