

## Profile

### Patricia Garcia: promoting public health research in Peru

Patricia Garcia, Peru's most prominent expert on sexually transmitted diseases (STDs), acknowledges that years ago, she would get flustered when the topic came up. "Some friends say 'I remember you getting red when talking about sex'", Garcia recalls with a smile. That was back in the 1980s, when she was a young clinician and the first cases of HIV/AIDS were emerging in Peru. Two decades later, Garcia doesn't blush anymore. She recently finished a 2.5 year stint as Chief of Peru's National Health Institutes—she was the first woman to hold the job—and, as a professor at the School of Public Health at Cayetano Heredia University in Lima, she is part of the multidisciplinary Global Health Demonstration Program and the new Andean Global Health Informatics Research and Training Center, which bolster the contribution of Peruvian public health researchers to the global health agenda.

Garcia's early experience working on STDs, and her subsequent work in the USA and Peru, convinced her that such research was sorely lacking in Peru, which like many other middle-income countries straddles an awkward line in the world of global health. Now, Garcia is trying to create a cadre of public health investigators and researchers within Peru, and "make people understand the importance of field research, having the bridges between research and policy".

Born and raised in Lima, where she graduated from medical school at Cayetano Heredia University in 1988, Garcia is the daughter of a journalist and a housewife. Her maternal grandmother hailed from the mountains: "She was very Andean", Garcia says, noting that she even learned a bit of traditional medicine from her. In the mid-1990s, Garcia moved to Seattle with her husband, an epidemiologist, and became chief resident in internal medicine, focusing on infectious diseases, at the University of Washington. "I never thought I was going to end up in research or public health", she says. "I wanted to be a great clinician."

But under the tutelage of King Holmes, now the Director of the University of Washington Center for AIDS and STD, Garcia's focus soon gravitated towards research and public health. In her first study, she investigated where people with STDs went to get treated in developing countries and found that many people in Latin America were seeking treatment directly from pharmacies. So Garcia surveyed pharmacy technicians to find out whether pharmacy workers could be trained to do better. On a trip home, Garcia researched women's reproductive priorities in rural Peru, taking boats deep into the jungle for the work. "She showed an incredible ability to organise these research teams", Holmes says.

Garcia says that her mind was never far from Peru, and after completing her masters in public health she headed back to Lima in 1997, where she worked at the Peruvian National STD/HIV Program developing guidelines for

management of patients with these diseases. In 1999, she became head of the Epidemiology, STD, and HIV Unit and Vice Dean of Research at Cayetano Heredia University. 7 years later, in 2006, Garcia was appointed Chief of the Peruvian National Institutes of Health, where she started a national programme on STDs, focusing on guidelines and prevalence. During her term, which ended in 2008, Garcia put neglected diseases such as human bartonellosis and hydatid disease on the national health research agenda, as well as health-related issues such as traffic accidents—a major source of injury and death in Peru. She also helped institute NETLAB, a web-based laboratory information system that won critical acclaim.

With colleagues at Cayetano Heredia University, Garcia helped establish the Global Health Demonstration Program in 2006, which is funded by the Frameworks for Global Health of the Fogarty International Center-US NIH. "In training a new generation of health scholars at Cayetano Heredia University, we want to strengthen the translation of research into health policies and practices, and enhance the contribution and participation of developing-country researchers to the global health agenda", she explains.

Alongside furthering research into STDs in Peru with a public health graduate programme, Garcia wants to encourage budding Peruvian public health professionals to see their country as a place where they can thrive: "We need to build capacity and create a critical mass of trained people, offering them an enabling environment, so they can stay and help with the development of our country." One of the challenges in Peru is getting grants, notes Garcia, who is involved in other internationally funded research and investigation efforts. It's a task made harder by the fact that Peru, a country of about 28 million people, is neither a very poor country nor a wealthy one. Instead, Garcia notes, Peru has wealthy cities and suburbs and poor rural villages with varying health systems and facilities. "What does it mean to be a middle-income country?" Garcia says, noting the disparities within her country and the fact that they don't always register on the global agenda. "Within Peru, we have Africa, but we may have a New York or Sweden. I don't think classifications are good", she says. Garcia argues that Peru and countries like it have plenty of expertise to share. The challenge, she says, is ramping up research programmes so that Peruvians can offer that knowledge to others: "Global health is not only a duty of developing countries, as professionals from the south we have a lot to share and we should promote collaborations globally—south to south, north to south, and even south to north."



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