Implementing an effective leadership and management training program for clinical and public health laboratory directors and other mid senior-level managers in the Middle East

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Background: A lack of strong and effective leadership is one of the many factors cited for the slow progression toward achieving the health Millennium Development Goals by 2015. Medical laboratories—an essential component in the World Health Organization’s (WHO) Integrated Framework Model for Health System—are critical to ensuring effective health care management and service delivery. This professional certificate program is designed to build the leadership and management capacity of mid-career laboratory directors and other management staff in clinical and public health laboratories in the Middle East. The program utilizes a blended learning approach of in-person workshops and e-learning courses. The graduates of this program are expected to make practical and meaningful improvements to their laboratory’s operations through the completion of a hands-on capstone project.

Structure/Method/Design: Ten near-peer Mount Sinai medical students certified as AHA BCLS Instructors coordinated an educational module for UniQ students focusing on emergency response skills. The program format consisted of 5 to 10 hours of small group instruction in French per day on the UniQ campus spanning 1 week and covering subjects such as approaching the patient and trauma in the field. Senior Haitian medical students also conducted 1 day of instruction teaching American medical students topics on infectious disease and public health. To assess improvements made by UniQ students in clinical knowledge and comfort with the skills taught, a 20-question, 6-point Likert Scale self-efficacy survey as well as a 27-question multiple choice fund of knowledge assessment was distributed pre- and post-intervention.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): Icahn School of Medicine at Mount Sinai

Université Quisqueya

Summary/Conclusion: Results: 75 UniQ students were successfully certified in AHA BCLS. Self-efficacy survey results demonstrated Haitian medical students rated their comfort with basic emergency response skills as significantly higher after the course (post-intervention score of 4.35 vs. pre-intervention score of 2.19, min = 0 max = 5, n = 53, P < 0.005). Students given pre- and post-module fund of knowledge exams also showed statistically significant improvements in scores after the emergency skills module (pre-module score average of 35.19% vs. post-module average of 57.02%, P < 0.005, n = 53). The program was well received and MS4H was invited to run the program for a second year.

Conclusions: We propose this model of near-peer, cross-cultural academic exchange can be a sustainable, reproducible, and mutually beneficial collaboration between North American and Haitian medical students. Future iterations of the program will emphasize increased collaboration between Haitian and American counterparts in curriculum design, implementation of more Haitian medical students as instructors, more rigorous data analysis, and assessing the effect of the program on American participants’ attitudes toward global health.
Information empowerment: Informationist-led training for University of Michigan’s predeparture students

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Background: Since 2009, University of Michigan’s (U-M) Taubman Health Sciences Library (THL) has actively partnered with U-M’s health sciences schools to improve information literacy among our global scholars taking part in global health research, internships abroad, and international collaborations in health. THL’s global health informationist has provided information skills training to U-M students in preparation of their international learning experiences in developing countries. This poster focuses on the global health informationist’s role in information skills training to enhance experiential learning and provides insight into innovations in informatics instruction programs in predeparture training.

Structure/Method/Design: The global health informationist is involved in training predeparture students in searching the international literature, effectively using evidence-based information resources, creating an understanding of global health teaching materials, becoming more aware of country-specific data and epidemiology sources, building awareness of mobile resources for global health, and encouraging the investigation of international news media sources. Approaches used for predeparture training have included curriculum-integrated instruction, demonstrations, individual consultations, lecture series and symposia, predeparture orientations, and the creation of customized online information resource guides.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): Not applicable

Summary/Conclusion: Information skills training has empowered U-M students to develop effective collaborations around the world. Students need to be introduced to multidisciplinary and interdisciplinary information sources which can be overlooked during training in “traditional” health sciences sources. To be successful in their information gathering, students engaged in global health need to fully recognize the interdisciplinary nature of global health. Predeparture training gives the informationist and the library the opportunity to provide awareness of a broader field of global health information resources.

Information skills training has become a significant and necessary aspect of students’ predeparture training. To improve future training, more opportunities for student evaluation both in the predeparture phase and upon their return from global health experiences is required.

Flipping the global health challenge to the classroom

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Background: Much of the debate concerning global health education remains focused on building effective training programs. This paper emphasizes the development of teaching strategies specific to global health education. Inspired by the active learning process of “flipped classrooms” where critical thinking happens in the classroom and fact finding happens outside, this paper describes the experience of bringing the real global health challenge of high maternal mortality in Somaliland directly into the North American classroom in a public health graduate program.

Structure/Method/Design: Individuals working in Somaliland initially proposed the global health challenge that the MPH students and faculty eagerly embraced. MPH students worked as a team that included two African students (one from Somaliland), who acted as cultural brokers. The team utilized ongoing Skype/email communications with staff of Edna Adan University Hospital in Somaliland; personal interviews and discussions with Edna Adan during her fortuitous visit to class; and ongoing audio-recording of the entire process documenting the development of a systematic review for use in Somaliland and other global health settings.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): This project is a novel example of how global health education and social change can all be experienced simultaneously in Somaliland and in a university classroom in Ohio. The systematic review prepared by the students is currently being used to design and pilot a community-based intervention that will provide cell phones (mobile health) to midwives to follow up with women who have undergone fistula surgery at the hospital and returned to their village.

Summary/Conclusion: The plan is to seek funding based on this collaborative pilot. Faculty at Wright State University and one student involved in the classroom global health challenge continue to collaborate with the planning and development of the pilot study. In other words, we were actively engaged in “being there,” while still “being here.”

Teach the teacher: Faculty development for the next generation of Haitian clinician-educators

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Background: Physicians for Haiti (P4H) is a Boston-based nongovernmental organization that supports excellence in Haiti’s medical education system. A priority of the Haitian medical establishment is capacity building through the expansion of training programs. However, needs assessments identified a shortage of faculty with experience as teachers and supervisors. Haitian clinicians expressed a lack of confidence in supervision and evaluation when surveyed, as well as a strong interest in improving these skills. A web search revealed no existing curricula suited to fill this gap. The “Teach the Teacher” curriculum was developed to focus on medical and nursing educators working in low-resource, high-volume settings, with input from education professionals, clinician-educators and faculty at the newly opened University Hospital of Mirebalais (HUM) in Haiti.

Structure/Method/Design: The didactic component of the curriculum comprises a multi-tiered series of lectures and workshops with both introductory and advanced presentations. Feedback, evaluation, effective small-group teaching techniques and strategies for managing teaching rounds are among the initial topics covered. This is joined by a practical component consisting of direct observation of faculty on teaching rounds followed by feedback sessions. The curriculum has been evaluated through surveys and pre-/post-tests of knowledge.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): University Hospital of Mirebalais

Summary/Conclusion: The curriculum was piloted via a series of 11 lectures and workshops delivered to teaching physicians at HUM