Structure/Method/Design: We conducted a study to characterize the experiences of HIC students conducting research in LMICs. We invited current and former undergraduate and graduate/health professional students from Yale University who had conducted research in an LMIC in 2009-2013 to participate in an online questionnaire focusing on predeparture preparation, relationship with advisors and host communities, research ethics, dissemination, and impact on the student.

Results (Scientific Abstract)/Collaborative Partners (Programmatic Abstract): Among the 89 respondents, 53.9% were undergraduate, 46.1% were graduate students, 67.4% were female and the mean age was 22 years. Less than half (40.4%) of the respondents reported that LMIC partners or community representatives had been involved in defining the research objectives; 74.2% of respondents had received some form of research ethics training prior to their trip; and 59.0% submitted their research protocol to the local IRB when one existed (compared with 70.9% who submitted to the Yale IRB). While 67.4% of respondents stated that they planned to disseminate results to their host institution, community, or in a local publication, only 27.0% had done so. In bivariate analysis, students who sought LMIC partner involvement in the definition of research objectives reported feeling that their Yale advisor was not enthusiastic about their research (41.2% vs. 11.5% among those that did not involve partners in defining objectives, \( P = 0.001 \)), communicated less frequently with their Yale advisor before their research experiences (Mann-Whitney U test \( P = 0.001 \)), and felt less prepared to deal with ethical dilemmas in the conduct of their research (Mann-Whitney U test \( P = 0.013 \)). Those students who had disseminated results locally were more likely to have communicated with students who had previously visited the site (84.2% vs 55.6% of those who did not disseminate locally, \( P = 0.029 \)) and to feel that they would have benefited significantly from a post-experience debriefing with experienced faculty or students (50.0% vs 23.0%, \( P = 0.012 \)).

Summary/Conclusion: According to student reports from a sample of undergraduate and graduate students, guidelines for global health research are not being uniformly applied. Support and mentoring by faculty advisors and peers should be further explored to ensure best practices and are being applied and that students receive appropriate training and guidance prior to undertaking research projects in LMIC settings.

Health systems service learning in Shanghai—Lessons from an undergraduate experiential learning program in China

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Background: After Hurricane Katrina, 80% of New Orleans, including both of Tulane’s Uptown and Downtown campuses were under water. When classes resumed in January 2006, Tulane students, faculty, and staff returned to a city in ruins, but they returned to a university committed to rebuilding both the school and New Orleans. A major focus of Tulane University’s rebuilding plan became the creation of a service-learning requirement for all undergraduate students, regardless of major. As New Orleans’ largest employer, Tulane University first directed students and their projects toward helping the areas and organizations within the city and the metro area. However, as the city of New Orleans emerged from the post-Katrina devastation, Tulane began to widen the reach of this program to other parts of the state, the nation, and eventually internationally.

Structure/Method/Design: In 2011, Tulane partnered with Fudan University in Shanghai and Shandong University in Jinan to create one of the first international service-learning opportunities to be made available to Tulane undergraduates. Now entering its fourth year, the program continues to expand its number of students, relationships with Shanghai health care institutions, and opportunities for young scholars to make a difference in local communities.

Exploring perceptions and experiences with research ethics in Bolivia

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Background: In Bolivia, there is increasing interest in the necessity of incorporating research ethics into study designs and procedures, but there is minimal data on the perceptions and experiences of Bolivian health science faculty, researchers, and national health administrators on research ethics. The Touro University California (TUC) Public Health Program is partnering with Bolivian universities to develop a comprehensive Research Education Ethics Program. In 2013, the Universidad Mayor de San Andrés received a National Institute of Health/Fogarty International Center Planning Grant award to develop the program. The two central aims of this program needs assessment are to describe the perceptions of and experiences with research ethics among study participants and to assess the relationship between participants’ professional roles and their perceptions and knowledge of research ethics. Participants’ perceptions of the functions of Research Ethics Committees (protecting human subjects rights, ensuring the social and scientific value of research, etc) and study participants’ ideas for educational/learning needs were also described. The study has been implemented, data collection completed, and data analysis in process. Preliminary results show an immediate need and interest for research ethics capacity building and education in Bolivia.

Structure/Method/Design: This is a cross-sectional study using an online survey completed by approximately 200 Bolivian health science faculty, researchers, residents, and health administrators. Survey domains include demographics, perceptions and experiences related to research ethics and the function of research ethics committees, and knowledge of research ethics including course levels, content, and teaching methodologies. Descriptive statistics were used to describe