

education centered on the social determinants of health for both Ugandan and international health professional students - engages the contentious topic through structured intercultural dialogue. The methodology utilized provides Ugandan and international students alike the opportunity to not only examine the neglected and controversial global health issue but to develop the critical ability to constructively dialogue.

Structure/Method/Design: SocMed's intercultural dialogue on sexual orientation aims to challenge students to engage in effective communication and develop an attitude and skill-set associated with inquiry rather than one that reinforces ideologies. SocMed utilizes Freirian pedagogy to create an innovative learning environment in which students participate as both learners and teachers to advance understanding of social determinants of health, social experience of illness, effective models for intervention, and applicable models for health advocacy. To discuss sexual orientation, SocMed utilizes a structured intercultural dialogue process, in which students develop skills of active-listening, inquiry, social analysis, and respectful articulation of personal beliefs. After defining terms and soliciting anonymous questions, students are broken into small groups with diverse representation. A series of questions are provided that prompt students to reflect on their own experiences of marginalization, their own socialization to sexual orientation, and health-related concerns of LGBTQ persons. Furthermore, in small groups, students are given the text of recent Ugandan legislation on the topic and are asked to read it, discuss it, and explore explanations for why the bill was introduced in Uganda.

Outcomes & Evaluation: To gauge the impact of the sexual orientation dialogue along with other sessions taught in the 4-week immersion course, a formal self-assessment evaluation tool is utilized at the end of the course. Seventy-nine percent of the students stated that they "agreed" or "strongly agreed" that they found the [sexual orientation] section of the course interesting and [they] learned a considerable amount. Given the polarizing indications of students prior to the session, this represents significant impact. Furthermore, ethnographic observation indicates that students continue to effectively dialogue on sexual orientation outside of class.

Going Forward: Creating safe spaces of trust and mutuality are central in SocMed's evolution; it is an essential dimension for sensitive dialogue to be fruitful. An ongoing challenge is SocMed's capacity to measure the impact of the dialogue on students and on their communities to which they return after the course.

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Rural health in a global context: case study of human trafficking

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Program/Project Purpose: The modern university has, among its various responsibilities, the need to prepare students to plan for the effects of globalization on our local communities. Accordingly, the University of Montana prepares its public health students for the public health effects of globalization on rural communities. Rural Health in a Global Context, the final didactic course in the Master of Public Health program at the University of Montana, focuses on the intersection of rural and global health as key to mobilizing a new generation of public health practitioners. In 2014 we added a case study on human trafficking to the course. The 2014 Mansfield

Conference on human trafficking stressed the high prevalence and yet opacity of human trafficking in the global dynamic. Approximately 27 million people worldwide are involved in this modern slavery, and for the U.S. as many as 17,500 people are trafficked each year. Quantitative data for Montana are needed, but are not yet widely available.

Structure/Method/Design: The case study on human trafficking used mixed qualitative-quantitative resources compiled by the staff of Senator Max Baucus of Montana. Materials included a video, "Sex Trafficking in Exploitation in America: Child Welfare's Role in Prevention and Intervention;" a PowerPoint presentation entitled "Sex Trafficking in America: The Process of Developing Policy;" a U.S. Senate Committee on Finance Hearing report on "Sex Trafficking and Exploitation in America;" Senator Max Baucus' statement on "Preventing Sex Trafficking in Foster Care;" Senator Orrin Hatch's statement on "Examining Ways to Prevent Sex Trafficking;" and a statement from Asia Graves, Maryland Program Coordinator and Survivor Advocate FAIR girls.

Outcomes & Evaluation: The study determined that, as part of the global energy economy, the opening of the Bakken Oil Fields (shale oil) in eastern Montana and the Dakotas has created boom town conditions (increased population, increased cost of living, lack of housing, increased crime) and an increase in Domestic Minor Sex Trafficking (DMST). Global conditions have changed the local landscape. Student discussion and reaction to these materials was rich and varied.

Going Forward: This global public health problem bridges both developed and developing worlds. Local public health interventions focusing on awareness, education, legislation and enforcement are now being put in play by the state legislature and agencies in Montana. Ultimately, global change dynamics propel local change at increased velocity, and policymakers need to react to the need for faster response to local events driven by global interconnections. The expansion of the MPH program at the University of Montana to include this case study provides an example of the expanding and changing needs of educational institutions in terms of globalization.

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Impact of on-site training of neonatal resuscitation techniques in shirati district hospitals: Does on-site training improve knowledge, attitude, and practices?

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Program/Project Purpose: In Tanzania, early neonatal mortality remains high despite the country's efforts towards improving health indicators. It's estimated that birth asphyxia is involved in up to 30% of early neonatal deaths in developing countries, and is associated with high neurological morbidity for those who survive. Early interventions targeting birth asphyxia were not successful; likely due to low national priority, limited resources, and targeting limited types of providers. Helping Babies Breathe (HBB) is an evidence-based neonatal resuscitation program designed for resource-limited settings. The program follows a basic intervention approach which emphasizes the importance of skilled attendants at every birth. The HBB program has been successfully implemented at eight sites within Tanzania, and has been endorsed by the Tanzanian National Government. However studies in Tanzania have been carried at referral and teaching hospitals and not at a District hospital. The purpose of this study was to examine the effectiveness of teaching HBB at the level of a District Hospital. The project took place June 2014.

Structure/Method/Design: This is a prospective two-phase program evaluation to assess whether on-site training can improve knowledge,