

Background: Thousands of global health research projects are conducted every year, with the best of intentions: to improve the quality of healthcare in the poorest countries. However, findings are often not disseminated to those closest to the issues—nationals of the low and middle income countries under study. Rather, they are presented at global health conferences in the higher income countries from which the researchers hail. The aim of the proposed study is to determine the frequency with which global health researchers—particularly students—present their findings in the studied countries. We hypothesize that most global health researchers do not formally present their findings in the very countries in which research was conducted.

Methods: For this survey, we will collect information about the extent to which the principal author of each poster accepted to the 2015 CUGH conference has disseminated his findings. Specifically, authors will be asked whether or not the research presented at CUGH has been or will be formally presented in the country in which it was conducted. Additional questions seek to identify barriers to dissemination. Surveys will be conducted and responses stored using REDCap. Eligible participants consist of principal authors who are presenting research conducted outside of the US and Canada. We estimate that 400 participants will meet our eligibility criteria. A link to the questionnaire will be emailed to each participant at the email address provided at time of submission to CUGH. The methods are pending approval from the Institutional Review Board at Vanderbilt University. The email sent to each author that contains the link to the questionnaire will summarize the purpose of the study, as well as the potential risks and the voluntary nature of participation. A decision to click on the link and complete the questionnaire will be viewed as implied consent. We will report the percentage of authors presenting research in the country under their study, as well as a summary of the subjective responses to the questionnaire.

Findings: We anticipate a survey completion rate of 90%, which will yield a final study sample of 360. Based on previous experience with global health research, particularly that conducted by students, we believe that the majority of researchers will not have distributed their findings in the country in which they conducted research.

Interpretation: If our hypothesis is correct, we as researchers are missing a crucial opportunity to share information with the very people who are in a position to implement the researched changes and programs that can improve health outcomes. The goal of this investigation is to make researchers aware of the need to disseminate their research in the countries they study.

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Maama ne Maama - using community-based digital storytelling to improve maternal health in rural Uganda

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Program/Project Purpose: Maama ne Maama (MnM)—meaning “mother with mother”—is a storytelling platform dedicated to improving maternal health outcomes in Uganda, where lifetime risk of death for pregnant women is 1 in 49. The project is taking place over the course of 18 months, from October 2014 to April 2015. Conventional health campaigns target brains with facts; MnM targets hearts through peer stories to combat mistrust, stigma and access challenges expecting mothers face in rural Uganda. Drawing on the power of storytelling and social communication technologies, MnM

aims to increase the number of mothers seeking skilled care and address access challenges.

Structure/Method/Design: MnM has three main goals, to collect stories from pregnant women and mothers in the rural Mpigi District; to disseminate the stories as videos, writing and photographs to raise awareness of challenges preventing mothers from seeking skilled care during delivery and provide solutions; and to facilitate education and discussion to better inform birth preparations and decisions. The project is led by the USC Institute for Global Health (IGH) and its longtime partner, the community-based Twezimbe Development Foundation (TDF) in Mpigi, Uganda. Through stakeholders meetings and outreach, the partnership recruited women to share their pregnancy and birth stories. Additionally, doctors, midwives, traditional birth attendants and husbands were interviewed. MnM embedded itself in the community by using existing resources and channels. TDF, respected by Mpigi residents, was swift in reaching out to stakeholders, giving the community ownership of the project. The project functions within existing government health centers and for mothers who don't visit the health centers, MnM delivers the stories through film screenings and personal visits using TDF's village health teams.

Outcomes & Evaluation: The project accomplished its first phase—identifying and capturing mothers' and stakeholders' stories while building an online presence. The second phase, currently in progress, involves producing web and media content using collected film and photos. The third phase will disseminate stories in Mpigi and online and evaluate impact. A pre-assessment evaluation to understand mothers' attitudes towards antenatal and delivery care is underway. A post-assessment evaluation will determine if attitudes changed after the mothers see the stories.

Going Forward: This project is innovative and technology-heavy, which led to more training and capacity-building than anticipated. Digital media storage and security are ongoing concerns, as is the slow Internet connection when sharing content with Uganda. Additionally,

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Expanding the access conversation: An edX course on global health quality

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Program/Project Purpose: There is growing recognition that improving population health through universal access to care requires a complementary focus on improving the quality of care delivered. The online Harvard University edX course entitled Improving Global Health: Focusing on Quality and Safety provides a centralized curriculum for the emerging field of global health quality. The course launched in September 2014 and will close in December 2014 with the aim of engaging individuals around the world on issues pertinent to healthcare quality. The course seeks to provide a framework for students to meaningfully question “Access to what?”

Structure/Method/Design: The course is freely accessible through edX and organized into eight modules on the following themes: Burden of Unsafe Medical Care, Measurement, Standards, Quality Improvement, Health Information Technology and Data, Management, Role of