circumstances, greater empowerment is associated with greater tobacco use by women. Using Integrated Demographic and Health Series (IDHS) survey data, we investigate this relationship in India 2005 and Uganda 2011. We also explore how women’s literacy impacts the relationship between empowerment and smoking behavior, hypothesizing that empowerment/tobacco links will be weaker among literate women.

**Methods:** We analyze IDHS survey data for cross-sectional samples of women aged 15–49 in India 2005 (n = 108,455) and Uganda 2011 (n = 8,665). We employ tabular methods, generalized linear models and latent class analysis to assess relationships between tobacco use and indicators of women’s empowerment, including employment, house or land ownership, household decision-making power, attitudes opposing domestic violence, and attitudes supporting sexual autonomy. Using interaction effects, we assess how literacy moderates the relationships between tobacco use and these empowerment indicators.

**Findings:** Our preliminary findings indicate that tobacco use risk is higher among women with greater household decision-making power, and among women who disapprove of domestic violence in various contexts. In some settings, these relationships are stronger for illiterate women. For both literate and illiterate women, approval of sexual autonomy associates with lower tobacco use. Our final results will reveal how different combinations of women’s empowerment are associated with tobacco use.

**Interpretation:** Our preliminary findings for India and Uganda support the hypotheses that some components of women’s empowerment are associated with greater tobacco use, and that literacy moderates these associations under some circumstances. These observational and cross-sectional data analyses can identify associations but not causality. Our results support the need for future research on how measureable indicators of women’s empowerment may interact to affect health-related behaviors and risks, which could inform programs that enable both empowerment and healthful behaviors.

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### Assessing contraceptive use in Nicaragua: a cross-sectional survey comparing social attitudes, access, education, and modern contraceptive use in women of reproductive age in rural and urban clinics

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**Background:** Family planning in Nicaragua has improved substantially since 2000. However, current statistics regarding family planning in Nicaragua are unclear. We compared current social attitudes, access, education, and use of modern contraceptives of female patients in urban and rural clinics. We hypothesized that women living in urban settings would report more accepting social attitudes, access, education, and use of modern contraceptives.

**Methods:** We conducted a cross-sectional study comparing social attitudes, access, education, and modern contraceptive use in

### Fostering future global nurse leaders to work toward meeting Millennium Development Goals (MDGs) and Sustainable Development Goals (SDGs): a global health intern program at Johns Hopkins University School of Nursing

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**Program/Project Purpose:** Globally, nurses represent the largest component of health care systems. The care provided by nurses is essential for meeting the Millennium Development Goals (MDGs) as well as the Sustainable Development Goals (SDGs) to deliver quality, effective, and safe care. With global demand for healthcare outpacing the growth in the health care workforce and the current human resources for health crisis (HRH), nurses are an important part of the solution. Focusing on creating robust nursing school curriculums is integral to fostering future global nursing leaders to fill this gap. In 2015, Johns Hopkins University School of Nursing (JHSON) implemented an intern program for students to engage in global initiatives through the Center for Global Initiatives (CGI). This program is ongoing and will continue with each new cohort of nursing students at JHSON.

**Structure/Method/Design:** Seven students were selected and take part in the Johns Hopkins University Pan American Health Organization (PAHO) and World Health Organization (WHO) Collaborating Center (CC) for Nursing Knowledge, Information Management and Sharing, coordinating all functions. This program is designed to integrate leadership opportunities as well as global nursing into the student’s nursing education program. Through their immersion in activities with the CC students have been able to participate in enriching learning activities to increase their knowledge of global health issues, develop skills essential for global leadership as well as provide them with experiences consistent with the Recife Declaration (2013) dedicated to equity and universal health care coverage.

**Outcome & Evaluation:** Students have enhanced their competencies in various arenas including applying evidence-based practice to inform their own education and disseminate these findings to the nursing membership of the Global Alliance for Nursing and Midwifery (GANM) and by employing innovative approaches to the use of technology to increase knowledge and improve health directly through the GANM blog site piloted by the interns to create a forum for a health knowledge exchange.

**Going Forward:** These experiences have been integral to prepare students to become practitioners sensitive to the complex interplay of social, political and economic factors that influence people’s health. This unique program is an important addition to traditional classroom learning opportunities and prepares students to enter the workforce with knowledge and skills to ultimately work toward universal health care coverage.

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