

continuous improvements to the MSGH coursework and program design, and to describe the desired student characteristics for admission into graduate degree programs in global health.

Methods: This study examines survey responses from students matriculated in the MSGH program between 2014 and 2015. All active students were invited to complete an online self-assessment with questions related to their global health experience, skills and career goals. Free-text responses were hand-coded using 10 categorical variables. These categories were developed through an inductive process.

Findings: Previous data revealed that students admitted to the MSGH program during this first year were 78% female, with an average age of 36. 57% were working in health science and 11% in government or public administration. Survey text responses from active students during the same time period provide additional information on their backgrounds and goals. Students' previous global health experiences fell overwhelmingly in the medicine and mission/volunteer categories, 45% and 50% respectively. Responses indicating the desired area of future work were spread more evenly across the categories. All professional categories, excluding volunteer and mission work, were represented in at least 2 text responses. The highest response rates were in the categories of medicine and government and policy, 30% and 25% respectively.

Interpretation: The diversity of industries represented by students admitted to the program underscores the interprofessional nature of the field and the workforce. This diversity is encouraging and necessitates pedagogical techniques that can appeal to a wide array of students, including a majority female population. Findings also suggest that career advising will need to adapt to market demands, prioritizing program management in the non-profit/governmental sectors.

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Development of a Global Health Milestones Tool for Emergency Medicine Trainees: A Pilot Project

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Program/Project Purpose: In Graduate Medical Education, increasing numbers of both institutions and learners are participating in global health experiences. Within the context of outcomes-based, competency linked education and assessment methodologies, a standardized assessment tool may prove valuable to all stakeholders. Milestones are now used as the standard for trainee assessment across many specialties in Graduate Medical Education, thus, the development of a similar tool for Global Health was undertaken with learners in Emergency Medicine in mind.

Structure/Method/Design: With inspiration stemming from the Interprofessional Global Health Competencies published by the CUGH Global Health Competency Subcommittee, a group of global health educators with expertise and experience in global

emergency care convened to develop an assessment tool. The expert consensus group was divided into teams to develop individual milestones based on the 11 stated domains, and an iterative review process was implemented.

Outcome & Evaluation: Milestones were developed in each of the 11 domains, with five levels of competency for each domain. Specific resources and suggested evaluation methodologies were identified for each level within each domain. The Global Health EM Milestones Tool is designed for continuous usage by learners and mentors across a career in global health and emergency care.

Going Forward: This Global Health Milestones tool may prove valuable to numerous stakeholders. Next steps include a formalized pilot program for efficacy across programs and stakeholders, accompanied by evaluation of the same.

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Health Worker Text-messaging for Training, Peer Support, and Mentoring in Pediatric and Adolescent HIV/AIDS Care: Lessons Learned in Zimbabwe

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Program/Project Purpose: Global 90-90-90 targets necessitate strengthening HIV related counseling services among children, adolescents and their families. Innovative, cost-effective approaches are needed, as Zimbabwe's resources for training and mentoring are limited. Blended learning incorporates electronic media and discussion groups using the mobile phone text messaging application, WhatsApp. This study assessed the use of the text-messaging component of the program, to build skills, knowledge and confidence of primary counsellors to care for children and adolescents with HIV.

Structure/Method/Design: Forty-three health care workers completed the blended learning course "HIV Testing Services for Children and Adolescents" between August–October 2016. Participants used *WhatsApp* as a forum for peer-to-peer learning and support. Two evaluators reviewed the messaging activity and entries. At the end of five weeks, two follow-up discussions were conducted to assess lessons learned.

Outcome & Evaluation: Participants strongly endorsed using *WhatsApp* groups as part of the training. They generated over 300 entries and continued discussions after all course assignments were complete. Communication categories tracked included greetings and social contacts, inquiries, comments, and responses about course assignments, participants' own case consultations, feedback, and encouragement. Case discussions were complex, including patient history, symptoms, medications, and psychosocial issues - child abuse, adherence, and disclosure. Two "spin-off" text messaging