

Evaluation of an International Trainee Exchange Program Developed by the Global Health Initiative at Henry Ford Health System

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Program/Project Purpose: The Global Health Initiative (GHI) at Henry Ford Health System (HFHS) in Detroit, Michigan is committed to improving health outcomes and infrastructure in resource-limited countries through collaborative capacity-building models. In collaboration with our international partners, GHI developed a medical education and research exchange program whereby international trainees (medical and public health students, residents, and faculty) conduct a one- to two-month observation at HFHS including clinical rotations and lectures, laboratory experience, and engagement in structured global health research training.

Structure/Method/Design: In the published literature, there are few articles that report on the evaluation of similar international exchange programs, and even fewer that include an evaluation of both mentors and trainees, or that focus on multi-country exchange programs. GHI developed surveys to evaluate the experiences of trainees and supervising mentors. The trainee survey includes questions on demographics, prior education, experience and perceptions of the HFHS observation, research training, housing, culture, and logistics. Quantitative and qualitative questions also ask how this experience will have long-term impact on their career and community (i.e. “I feel better equipped to serve the people in my own community”; “How has this experience shaped your educational and career goals?”; “How will you use this new information when you return to your home country?”). The mentor survey includes questions on observation activities, observer strengths and weaknesses, satisfaction with GHI coordination, and how the mentor’s department benefitted from the exchange program.

Outcome & Evaluation: To date, GHI has hosted 14 medical and public health students/residents and 5 faculty members from 6 countries (Colombia, Guatemala, Haiti, India, Myanmar and Nepal). Trainees conducted observations in Infectious Diseases, Pathology, Allergy, Nephrology, Dermatology, Neurosurgery, Women’s Health, School-Based and Community Health, and Global Health. Evaluation results from trainee and mentor surveys will be presented.

Going Forward: GHI will use these evaluation data to improve the clinical and research capacity training program, enhance mentor experiences, and strengthen collaborative relationships between HFHS and international partners. In the long-term, the exchange program will contribute to the development of global health service providers and improved health outcomes in low-resource settings.

Source of Funding: Internal.

Abstract #: 2.034_HHR

Strengthened Local Voluntary Membership Networks: Stronger Health Sectors

S.E.P. Post; Management Sciences for Health, Arlington, VA, USA

Program/Project Purpose: Recognizing the critical role local voluntary membership networks play in the health sectors in low

resourced countries, the newly developed and piloted Network Strengthening Program (NSP) is designed specifically for the managers (Board members, Secretariat staff, and actively engaged members) of country-level networks to strengthen their management in five key areas: Membership, Distributed Leadership, Governance, Financial Sustainability, and Communications for Resource Mobilization.

Structure/Method/Design: Implemented over 6 - 12 months, the NSP comprises (1) pre-launch submission of network documents and self-assessment, (2) 2 workshops (3) a results presentation with preparation session, (4) development of short and long term action plans, implementation of one or more short term plans, and (5) development of a network strengthening plan to be implemented in the 12 months following the end of the program.

The NSP supports participating networks to achieve results during the program and develop a road map for further network strengthening in the future. It is based on participatory and experiential as well as adult learning principles and offers practical information and tools.

Outcome & Evaluation: Program evaluation focused on the implementation of action plans and obtaining results, and completing network strengthening plans.

In two pilot offerings of the program in Malawi, the networks achieved short term results related in one case to the composition and criteria for membership, desired and core benefits, and reasonable member contributions and in the other related to mobilizing significant new funding. One of the two networks completed writing a network strengthening plan while the other prepared an elaborated outline.

Since the end of the program, one of the networks has reported increasing its visibility and influence for advocacy among national and international donors (e. g. Global Fund, PEPFAR, World Bank, etc.) by using communications tools offered in the program.

Going Forward: Both networks plan to continue strengthening their networks based on the outcomes of the program and will implement their plans over the next year.

The NSP curriculum is currently being prepared for publication and will be available in early 2017.

Source of Funding: The development and piloting of the program was funded by the United States Agency for International Development through the Leadership, Management and Governance Project managed by Management Sciences for Health.

Abstract #: 2.035_HHR

Lessons Learned Live: 35 Years’ Preparing North American Clinicians for Global & Resource-Limited Settings

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Program/Project Purpose: Before the burgeoning of global health [GH] interest among USA clinicians and students, we identified in 1980 only one US medical school course with a clinical preparation [parasitology] course. Recognizing this need, multidisciplinary Arizona Health Sciences Center faculty in Tucson with “on