Background: Disparity exists in access and quality of gynecologic care for impoverished Dominican and Haitian women in the rural Dominican Republic. Although international efforts are present, a need for long-term, community-based intervention to sustainably address women’s preventive health and surgical needs exists. In spite of reformation of the Dominican healthcare system in 2001, only 5.5% of the Dominican GDP contributes to health care; a mere 33.9% of this funding addresses the public sector. Most practitioners reside in urban areas, creating additional barriers for poor and rural populations.

Methods: In 2010, Creighton University School of Medicine collaborated with the Creighton University Institute for Latin American Concern (ILAC), Dominican medical providers, and Dominican rural community members to identify the greatest needs in rural women’s health. Goals were defined to address the identified needs through treatment, accessibility, communication, and education in the setting of a Jesuit medical education program. Through the ILAC partnership, community health workers, called cooperadores, were trained to strengthen education and health care access to women in rural campos.

Findings: ILAC currently trains 130 cooperadores to serve 130 rural communities. The CUSOM collaboration educated, empowered and facilitated the cooperadores’ community needs assessment which found women’s concerns to be urinary incontinence, pelvic organ prolapse, menorrhagia with anemia, and menopause. From 2010 until present, the collaboration has improved access to care through identification of at-risk women, transportation to medical facilities, and follow-up care coordination. From 2012-2016, this collaboration has completed 1063 patient visits, with the majority of the visits occurring within the campos themselves. One hundred thirty-five outpatient and inpatient surgeries have been completed either at the ILAC campus surgical center or in partnership with local Dominican OB/GYNs at city hospitals.

Interpretation: Work with local health care providers and community members allows specific need identification and delivery of context-appropriate care. Collaboration between American and foreign medical institutions enables enhanced delivery of tangible resources for health care intervention.

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Prevalence of Anemia in Schoolchildren Living in the Interior of Multi-ethnic Suriname: the Influence of Age, Sex and Ethnicity
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Background: Anemia in early life may lead to poor motor development and impaired cognitive function. The current prevalence of anemia in schoolchildren living in the interior of multi-ethnic Suriname, South America, is unknown. The Medical Mission Primary Health Care Suriname (MM) provides healthcare in this region, and has implemented school screening in their annual program. Objective of this study is to investigate the prevalence of anemia among these schoolchildren and to determine the influence of age, sex and ethnicity.

Methods: MM 2014-2015 school screening data from children aged 4-14 years, living throughout Suriname’s interior, were used. Anemia was defined according to WHO guidelines corrected for age and classified by severity. Determinants of anemia were assessed using logistic regression analysis.

Findings: Of the 4236 schoolchildren that were included, 51% were young (4-8 years), 49% were older (9-14 years), 52% were male, and 79%, 17% and 4% were of Maroon, Amerindian, and Mixed ethnicity respectively. Overall prevalence of anemia was 59.7%, sub classified in mild (17.6%), moderate (39.5%) and severe (2.6%). Multivariable logistic regression analysis showed that younger age (OR = 1.66; 95% CI 1.46-1.88), male sex (OR 1.17; 95%CI 1.03-1.32) and Maroon ethnicity (OR = 2.07; 95% CI 1.50-2.85) were independently associated with anemia.

Interpretation: Over half of Suriname’s interior schoolchildren are anemic, mainly affecting younger children, boys, and children of Maroon descent. These results call for future studies to determine specific causes and may help implement targeted MM programs aimed to reduce the burden of anemia.

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