**Going Forward:** Fostering a learning environment that promotes scholarship and professional development of medical educators will not only build capacity but also improve the overall quality of health care in the Lao PDR.

## Source of Funding: None.

**Abstract #:** *2.056\_HHR* 

# Factors Affecting the Implementation of a Mental Health Training Program in Tunisia: Perspectives of Trainers and Tutors

J.M.V. Spagnolo<sup>1</sup>, F. Champagne<sup>1</sup>, N. Leduc<sup>1</sup>, M. Piat<sup>2</sup>, A.-L. Guisset<sup>3</sup>, W. Melki<sup>4</sup>, F. Charfi<sup>5</sup>, I. Guesmi<sup>6</sup>, N. Bram<sup>4</sup>, M. Laporta<sup>7</sup>; <sup>1</sup>School of Public Health, University of Montreal, Montreal, Canada, <sup>2</sup>Douglas Mental Health University Institute; McGill University, Montreal, Canada, <sup>3</sup>World Health Organization, Geneva, Switzerland, <sup>4</sup>Razi Hospital; University of Tunis El-Manar, Tunis, Tunisia, <sup>5</sup>Mongi-Slim Hospital; University Tunis El-Manar, Tunis, Tunisia, <sup>6</sup>Manouba University Health Center, Tunis, Tunisia, <sup>7</sup>McGill University; Montreal WHO-PAHO Collaborating Center for Research and Training in Mental Health, Montreal, Canada

**Background:** Due to a shortage and an uneven distribution of mental health specialists in Tunisia, general practitioners (GPs) receive between 30-40% of mental health consultations. However, it is not uncommon for them to lack knowledge and skills to adequately address mental illness. To address this gap, a mental health training based on the World Health Organization (WHO) Mental Health Gap Action Programme (mhGAP) Intervention Guide (IG) was implemented in the Greater Tunis Area of Tunisia. This initiative follows international efforts which seek to build the mental health capacity of non-specialists. We aim to describe emerging factors affecting the implementation of this training, from the perspectives of psychiatrist-trainers and GPs responsible for continuing medical education (tutors).

**Methods:** Semi-structured group interviews were conducted with the psychiatrist-trainers (3) and tutors (5) after the completion of the training. Interviews were audio-recorded, transcribed verbatim, and analyzed using thematic analysis based on Chaudoir et al. (2013)'s implementation model.

**Findings:** Four implementation factors emerged from the data, and were identified as enablers or challenges to implementation. First, enabling *structural factors* include support during the training from the Ministry of Health, the WHO and regional directors. Challenges include the continual presence of mental health stigma. Second, enabling *organizational factors* include strong infrastructure for continuing medical education. Challenges include lack of resources (ex., psychotropic medication) in primary healthcare clinics. Third, both enabling and challenging *provider factors* include the level of GPs' personal motivation to ensure that mental health is integrated in clinical practice. Last, enabling *innovative factors* include the practicality of the training; challenges include scheduling.

**Interpretation:** Factors influencing the implementation of the training helped us understand particularities about the local primary healthcare setting; the perception of mental health in primary care; and issues that may arise when scaling up or sustaining this training.

In addition, these findings will be used to explain the results of an effectiveness trial, which aims to evaluate the impact of the training on GPs' clinical practice.

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# Abstract #: 2.057\_HHR

# Evaluating Residents' Perceptions of Post-Graduate Training Programs at St Paul's Hospital Millennium Medical College (Addis Ababa, Ethiopia)

**K.E.** Steenbergh<sup>1</sup>, S. Weinberg<sup>2</sup>, L. Gebremedhin<sup>1</sup>, G. Sandhu<sup>1</sup>; <sup>1</sup>University of Michigan, Ann Arbor, USA, <sup>2</sup>University of North Carolina, Chapel Hill, USA

**Program/Project Purpose:** Physician migration remains a limiting factor in healthcare delivery throughout Ethiopia despite efforts to increase the number of physicians. University of Michigan Health System (UMHS) efforts in Ghana have provided a highly effective model for physician retention through postgraduate training programs. In 2012, a similar partnership was launched with St. Paul's Hospital Millennium Medical College (SPHMMC) in Ethiopia.

**Structure/Method/Design:** The purpose of this study was to assess perceptions and effectiveness of postgraduate training programs at SPHMMC, defined in terms of ensuring retention and adequately preparing physicians for satisfying national careers. Surveys would also evaluate for what types of in-country opportunities would increase desire to continue practicing in Ethiopia. Anonymous surveys were distributed to residents in the departments of Internal Medicine (IM), Pediatrics, Obstetrics and Gynecology, and Surgery at SPHMMC. Thematic data analysis was completed in Qualtrics.

Outcome & Evaluation: Compared to 40% medical students surveyed in their final year of training, no residents of the 39 surveyed (50% response rate) had plans to leave Ethiopia. While some were unsure (N=10, 26%), most planned to stay for their whole career (N=29, 74%) to improve healthcare delivery, serve as role models, and stay near family. Those unsure ranked higher salaries equally with opportunity to utilize unavailable technologies, followed by desire for specialty training. Many cited UMHS partnership as a reason to train at SPHMMC (N=15, 40%), and agreed or strongly agreed that their training would offer a satisfying career (N=25, 64%). A majority of those who did not agree were IM residents, with only one agreeing (N=11, 9%). Of the other programs, 24 residents agreed (N=28, 86%). Overall, residents were unsatisfied with research (N=23, 59%) and leadership training sessions (N=33, 94%), as well as other learning resources including simulation centers, computers, and reference material.

**Going Forward:** In order to ensure that physicians are equipped with the skills necessary for a satisfying career in Ethiopia, the partnership should be expanded to include additional research and leadership trainings. Efforts should also focus on improving the existing learning resources, and continuing to develop subspecialty training programs. This survey has shown encouraging results for a successful model of partnership.

**Source of Funding:** Summer Biomedical Research Program and Global REACH Program at the University of Michigan.

#### Abstract #: 2.059\_HHR

#### Strengthening Human Resources for Nursing in Haiti— A Qualitative Study of a Cross-Cultural Nursing Faculty Project

**N.W. Street**<sup>1</sup>, L. Mandel<sup>1</sup>, L. Bermudez<sup>2</sup>, L. Man<sup>1</sup>; <sup>1</sup>Regis, Boston, USA, <sup>2</sup>Regis, Orlando, USA

**Background:** In 2007, a US university renowned for nursing endeavored to create a sustainable graduate nursing program. Ultimately, a cadre of up to 40 masters-prepared nurse educators in Haiti will lead baccalaureate education delivery into perpituity. Utilizing an educate-the-educator model, this international partnership includes three consecutive cohorts, spaced two years apart. Now in its sixth year of program delivery, we sought to assess perceived changes in professional role, leadership competency and classroom teaching skills.

**Methods:** Twenty-four semi-structured interviews explored participants' perceptions of program processes and outcomes. Key informants included a purposive sample (cohort participants, faculty, deans, community leaders). A French-speaking researcher traveled to Haiti and asked participants to comment on their own or observed professional responsibilities, leadership skills and teaching practices since program inception. Data were recorded, translated and transcribed verbatim, coded thematically and analyzed using NVivo 11.

**Findings:** Findings were grouped by overall patterns. The most salient include: 1) Increasing instances where cohort members report using their leadership skills in professional settings; 2) Enhanced collegial respect as leaders from allied health professionals, community members, peers and managers, 3) Improved competency around syllabus and curriculum development, and 4) Increasing classroom engagement.

**Interpretation:** Results will inform next steps in prioritizing professional development for nurses, promoting university level graduate and undergraduate education for nurses, and sustaining curriculum development and delivery of the graduate nursing program. Understanding the perceived impact of the program to build leadership, augment professional opportunities in Haiti and boost teaching capacity promotes ownership and self-efficacy among key stakeholders, and helps sustain baccalaureate nursing education in Haiti. Further, this research informs the replication of the model in other low and middle income countries.

Source of Funding: PIH/Ansara Family Foundation/Kaneb Funds Clinton- Bush Haiti Fund W. K.Kellogg Foundation.

Abstract #: 2.060\_HHR

## Developing an Academic Global Health Program for Medical Students: Lessons Learned from our First Year

**R.** Sundararajan, W.-S. Johansson, J. Mandel; University of California, San Diego, San Diego, USA

**Background:** The University of California, San Diego (UCSD) Global Health Academic Concentration (GHAC) was launched in 2015 in response to growing interest in Global Health careers among medical students, and recognition of an increasingly wellconnected global medical community. Having completed one year of administering this program, we reflect on the strategies implemented to translate educational concepts into an effective medical student curriculum, as well as barriers we faced along the way.

**Methods:** GHAC accepts five incoming students per year; students receive financial support for international travel, and have required curricular elements throughout medical school. Our track has four educational goals: 1) prepare students to engage with the global community regarding health disparities; 2) provide experiences/ training in Global Health research; 3) provide field experiences in global healthcare delivery and; 4) gain knowledge regarding social/ structural disparities that propagate health inequities.

Findings: The program seeks to provide a holistic perspective for medical students on challenges and opportunities of research undertaken outside the United States, and in low-resource settins, through a combination of didactics, small group sessions, mentoring with a UCSD Principal Investigator (PI), and international experiences. All GHAC students are required to complete an international summer research experience between their first and second years of medical school, in a project supervised by a UCSD PI. This approach was employed to maximize the students' contribution to research while abroad, and provide close linkage for longitudinal research involvement. We also developed an elective course, held in the Spring Quarter prior to summer research travel, "Introduction to Global Health Research", required for all GHAC students. The course presents common Global Health research methodologies (qualitative, mixed methods, intervention development), explores Global Health research ethics and social determinants of health. We implemented a pre-departure workshop to brief students on country-specific issues (e.g., State Department travel warnings), safe travel practices, and cultural competency.

**Interpretation:** In this presentation we also note numerous issues regarding administration of medical student international programs that may be relevant to other institutions looking to implement similar programs, such as maintaining insurance coverage, establishing legal agreements with foreign institutions, student maintenance of academic standing, ethics training, and funding sources.

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# Open Osmosis: Promoting the Global Diffusion of Open Education Resources

**S. Tackett<sup>1</sup>**, S. Gaglani<sup>1</sup>, K. Slinn<sup>2</sup>, T. Marshall<sup>3</sup>, R. Desai<sup>4</sup>, M.R. Haynes<sup>5</sup>; <sup>1</sup>Johns Hopkins University School of Medicine, Baltimore, MD, USA, <sup>2</sup>Osmosis, Ottawa, Canada, <sup>3</sup>Osmosis, Vancouver, Canada, <sup>4</sup>Stanford University School of Medicine, Stanford, USA, <sup>5</sup>Johns Hopkins University School of Medicine, Richmond, USA

**Program/Project Purpose:** Free educational resources available online can make high quality content available to learners anywhere and may be one way to overcome faculty shortages and curricular