

**Background:** The availability of healthcare services is limited in Paraiso, Dominican Republic with the nearest full-service hospital located 34.1 km away. A local, underutilized clinic was unaware of the needs of this disadvantaged community.

**Method:** Researchers adapted a World Health Organization assessment survey with the goals of determining residents' priority needs and an appraisal of the current clinic capabilities and gaps in services in order to provide the community with relevant healthcare. 106 families were randomly selected in seven separate geographic areas of Paraiso to participate in the self-report assessment. Researchers, along with a community volunteer, conducted interviews utilizing the 63 question instrument. 105 families agreed to participate representing 504 individuals.

**Findings:** The findings highlighted community concerns; depressed economy (54%), health concerns and lack of access to adequate healthcare (63%). Other findings include the presence of communicable disease, disease comorbidity, parasitic infections and the discovery that chikungunya is present (10.5%). Participants indicated a desire for hospital services in the community: full hospital services (48%); women's health (23%); access to medications (38%), all lacking within the present clinic.

**Interpretation:** Results from the assessment will serve as a foundation for the development of strategies to best meet community needs and create a financial and operational sustainability model. The collected data is being utilized in the development of a collaborative plan with a local Dominican, non-governmental organization (Instituto Dominicano de Desarrollo Integral), a hospital network in the U.S. (Western Connecticut Health Network/Danbury Hospital in partnership with University of Vermont College of Medicine) and a College of Nursing in the U.S. (Sacred Heart University in Fairfield, CT) to transform the current clinic into a 35 bed hospital. Other plans include the education and training of a healthcare team, including a lead physician, to provide sustainable healthcare that will match the needs of the community.

**Funding:** Western Connecticut Health Network; Sacred Heart University, College of Nursing; University of Vermont, College of Medicine.

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### **Innovative, but what about sustainability? Lessons learned in nursing and midwifery workforce development**

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**Program/Project Purpose:** Sustainability is a word used in global health to discuss successful projects or interventions, as it is essential for the work to be continued after the initial pilot and development stages. Often this is a challenge in resource-limited settings, especially when funding cycles are finished, donor organizations shift their priorities, or even when there is not sufficient buy-in from stakeholders. Buy-in was never a problem in the development of a continuing and professional development library for nurses and midwives in east, central and southern Africa as the need and interest in having online, mobile-friendly trainings accessible was expressed by leaders in the region. Human resources and infrastructure, however, are the challenges in the sustainability this project. Continued investment by nursing leaders has been underway to make this a lasting resource for the region, as often providers cannot attend in-person trainings in

order to stay updated for relicensure purposes. Sustainability of the continuing and professional development library hosted on the East, Central and Southern Africa College of Nursing (ECSACON) website has been the focus of this project since the beginning; however, after the launch of the website in 2014 information technology challenges persisted and as resources dwindled a partially functioning website was the result. This was the leading barrier in seeking donor support to sustain this nearly completed project.

**Structure/Method/Design:** Creation of a sustainability plan is the priority. Meetings and interviews were held with nursing leaders when funding was completed in July 2015. A stakeholder analysis was conducted and another meeting was held with nursing leaders in Harare, Zimbabwe in November 2015 to develop a sustainability plan.

**Outcome & Evaluation:** To date nursing and midwifery support is still high for this project, and continued buy-in will be generated with global health leaders after the November 2015 African Health Profession Regulatory Collaborative for Nurses and Midwives (ARC) Summative Congress Meeting in Harare, Zimbabwe, resulting in an updated sustainability plan for the library.

**Going Forward:** Sustainability for this program is key in order for this library to be a lasting resource for nurses and midwives in the region.

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### **Asili: Evaluating a novel multi-disciplinary social enterprise intervention on population health in the Democratic Republic of Congo**

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**Program/Project Purpose:** Child mortality in the Democratic Republic of Congo (DRC) occurs at a rate of 108 deaths per 1,000 live births, the 5th highest in the world, with more than 1 in 10 children dying before reaching age 5. The eastern region of DRC, is still recovering from decades of conflict that destroyed infrastructure, ruined livelihoods, and caused massive displacement. Innovative strategies are needed to improve child health. The American Refugee Committee and [Ideo.org](http://Ideo.org) co-created Asili (foundation