Expanding medical and nursing educational experiences in Haiti: A partnership in learning

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Program/Project Purpose: The University of Dr. Aristide Foundation (UNIFA) runs a medical and a nursing school in Haiti. Both schools recruit students from impoverished families residing in the countryside. They are committed to returning to work in underserved communities throughout Haiti. Physicians for Haiti (P4H) is a Boston-based nongovernmental organization, founded in 2010 with a vision of a self-sustaining Haitian medical education system. Because of the physician and nurse shortage in Haiti, there is a lack of teachers for medical and nursing training. P4H and UNIFA created a partnership called the Visiting Professor (VP) Program with the aim of providing enhanced educational experiences for medical and nursing students at UNIFA.

Structure/Method/Design: The VP Program created a database, now with over 80 medical professionals from which UNIFA requests specific content training. P4H coordinates professional matches to teach seminars. The VP Program facilitates scheduling, translates relevant documents and oversees academic planning. UNIFA provides housing, meals and transportation to the campus for the Visiting Professors. Sustainability is emphasized through the financial contributions of all stakeholders: UNIFA, P4H and the Visiting Professors. Students complete evaluations of their medical knowledge before and after training. For each VP a 360 degree evaluation is completed by the students, the VP and leadership of UNIFA and P4H.

Outcomes & Evaluation: The Visiting Professor Program has facilitated seven seminars for 1347 participants at UNIFA. Seminar themes have included qualitative research methodology, social determinants of health, basic life support and first aid, HIV, tuberculosis, health and behavior and approach to the patient with psychological and medical trauma. Teaching techniques have included lecture, small group, discussion, presentations and project-based education. Pre- and post-testing has demonstrated increases in knowledge over the short term with an average 34% increase in scores after seminar completion Learner evaluations have shown that over 95% of students felt the topics were important to practice medicine in Haiti and will improve their ability to do patient care. For P4H, challenges have included availability of Visiting Professors fluent in French or Haitian Creole and those with experiences relevant to a low-resource setting. For UNIFA challenges have included availability of in-person translators fluent in medical French and preparing the professors for the large, lecture based teaching environment and low resource setting.

Going Forward: The partnership between P4H and UniFA has led to medical and nursing students in Haiti having access to content experts not readily available in Haiti. This relationship has the potential to create a cadre of future health professionals who experience an

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One health nicaragua- empowering current and future health workers in Nicaragua and California to address environmental, animal and human health needs

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Program/Project Purpose: One Health Nicaragua is a three year-old partnership between a multidisciplinary team of MPH, MD, DVM and graduate students from the University of California, Davis and community health workers in Sabana Grande, Nicaragua to address the environmental, animal and human health needs of this underserved community. This partnership has two goals; the first is to use education and capacity building to address the community's interrelated animal and human health needs. The second goal is to provide students with training and first-hand experience working as part of a multidisciplinary team to address global health issues.

Structure/Method/Design: Needs assessments and interviews with community health workers identify topics for capacity-building workshops held each year. These workshops focus on information exchange and empowering health workers to better disseminate their own knowledge. Workshops for animal owners enable them to be active participants in their animals' health. For example, surveys indicated chickens were dying from Newcastle Disease, which causes rapid, widespread death in poultry. Seventy percent of households were unaware of Newcastle disease, but identified loss of chicken as a food security concern. In response, UC Davis students developed a workshop on disease prevention. We demonstrated the value of preventative medicine, trained health workers to vaccinate chickens, and connected chicken owners with local sources of vaccines to start a poultry vaccination program. This student-run project allows students to develop skills in grant-writing, international project management, public speaking, education, cultural sensitivity and teamwork. This project brings together students from different disciplines to solve problems and learn from one another.

Outcomes & Evaluation: Baseline data on animal health indices and production levels have been collected, but evaluation of the project's impact in these areas has not yet been completed due to the project's young age. A recent success was a locally led workshop on poultry vaccination and a 300-chicken vaccination campaign. We hope to evaluate the impact of these vaccinations in the future. Student capacity building successes include obtaining funding for yearly student and faculty mentor travel. Students have presented and won awards for this project at various conferences.

Going Forward: We have not yet held workshops in all districts of Sabana Grande but are working with community leaders to expand our community involvement. Additionally, students can only spend a short time in the community each year; therefore, partnering with Nicaragu

Funding: Project funding has come from these sources at UC Davis: Blum Center for Developing Economies, School of Veterinary Medicine, Hemispheric Institute on the Americas, and the University Outreach and International Programs.

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From Dartmouth to Haiti: Videoconferencing to facilitate educational cooperation among medical residents in two distinct settings

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Program/Project Purpose: After the January 2010 earthquake in Haiti left unimaginable devastation, a widespread global response

occurred, but much was left unresolved. Physicians there still struggle with a lack of adequate resources and an abundance of patients in need; all this is further complicated by a struggling economy and massive physician shortage. The Dartmouth Haiti Response was formed in response to the earthquake, and involved several specialized support teams traveling to the island to offer healthcare services. This began the start of a joint project that would aim to mutually benefit physicians-in-training in two very different medical settings.

Structure/Method/Design: "Haiti Report" is a monthly resident's morning report that involves videoconferencing between internal medicine residents at the Dartmouth-Hitchcock Medical Center and residents from Hôpital Universitaire de Mirebalais and Université d'Etat de Haiti. At each report, a presenter will share an interesting patient case that is open for both groups of residents to discuss and work through.

Outcomes & Evaluation: In this setting, Haitian residents can learn about the diagnostic and therapeutic process in patients who have often been referred from outside hospitals for higher level tertiary care. During the Haiti resident cases, Dartmouth-Hitchcock residents can learn the value of more basic investigative practices and what the best diagnostic and treatment strategies are when resources are scarce. Both parties can learn a great deal from each other in recognizing the vast differences in medical systems and how geo-political and socioeconomical factors play large roles in healthcare delivery. However, perhaps one of the most valuable lessons gained from these conferences is that despite so many differences in our backgrounds and resources, there are countless aspects of good patient care that are universal to all healthcare providers.

Going Forward: This pilot project has had to withstand several challenges in its early years of development. The language barrier between residents was an initial concern and hindered the free flow of discussion between groups. Having bilingual presentation slides and a
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Primary care development in Southeast Asia: Building an essential foundation for health systems

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Program/Project Purpose: Many improvement efforts in global health are consistently hampered by insufficient and unprepared health systems lacking a sufficient primary care workforce and delivery system. Whether managing infectious outbreaks or the increasing burden of chronic disease, there is an acute need to address inequities in health by shifting global health efforts towards a stronger focus on primary care development. We share our approach to primary care systems strengthening over nearly 20 years in countries of southeast Asia that are early on the continuum of development. Our aim has been to develop systems to effectively train, support and integrate competent primary care physicians for health systems as part of an effort to address human resource development of the primary care workforce.

Structure/Method/Design: Primary efforts have targeted capacity building through training of a competent primary care workforce, initially focused on developing formal specialist training for primary care physicians. We have applied this approach in Vietnam with over 600 family physicians trained, and are currently working with the MInistry of Health on further scale-up and policy supports. We have completed a similar pilot program in Laos, and are in the early stages of supporting similar programs in Cambodia and Myanmar. Key to the sustainability of this approach has been the engagement of local stakeholders for policy integration coupled with implementation performed exclusively by local partner universities to train and support primary care physicians.

Outcomes & Evaluation: The success and sustainability of the training programs in Vietnam is evident now with over 600 family physician graduates and continued training at most universities. Quantitiative evaluation results have shown that knowledge and confidence of physicians are improved in multiple clinical areas, and measured observations of clinical practice indicate improvements. Similar results were seen in our pilot program in Laos, with qualitative results identifying far-ranging improvements in practice, especially in community and maternal health. Most importantly, Ministries of Health and local health authorities are highly supportive of these programs and continue to seek enrollment of their health staff in these programs.

Going Forward: Maintaining training capacity and carrying out national-level scale-up remain the biggest challenges. The World Bank has recently entered into a $126 million Health Professionals Education and Training for Health System Reforms Project with Vietnam to imp
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Fostering institutional collaboration: Building global virtual partners

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Program/Project Purpose: International student exchange experiences are increasingly popular, particularly in developing countries. The Global Education in Medicine Exchange (GEMxSM) was developed to facilitate multilateral partners among schools by committing to shared values that transcend differences in culture, curricula, resources, and local health care needs. GEMx is comprised of three components: a web-based system, a Charter, and regular virtual meetings. The Charter outlined school roles and responsibilities and defined activities that would be undertaken by home schools (those sponsoring students) and host schools (those receiving students). GEMx promoted development of the partner school network through face-to-face and virtual meetings. The use of collaborative technology is increasing because it can reduce expense and can be effective, particularly for information sharing (1). However, the virtual environment can be void of contextual cues that promote trust, and can leave participants feeling isolated (2). The purpose of this investigation was to evaluate the extent to which new collaborations between schools could be developed through the GEMx partnership.

Structure/Method/Design: In 2013, partners at 20 medical schools were recruited. GEMx hosted three face-to-face meetings with representatives from eight of the 20 schools and six virtual meetings (webinars, conference calls) to promote multilateral partnerships. In October 2014, representatives of partner schools were