

**Methods:** We gathered background information on the most pressing health concerns of refugees and major barriers to healthcare provision in both Lampedusa and Za'atari. We then developed areas of priority and identified leaders and experts in the fields of international policymaking and refugee health in either Jordan or Italy. Finally, we formulated a set of questions and performed 12 semi-structured interviews with these leaders and experts. The questionnaire and project received IRB approval from the University of Chicago's Biological Sciences Division Institutional Review Board.

**Findings:** Our research identifies numerous unaddressed health needs of refugees in both temporary and long-term settings. While chronic disease management is one of the greatest areas of concern for refugees in Za'atari, infectious disease control and treatment is one of the biggest issues for refugees arriving to Lampedusa. Challenges with coordination among healthcare services severely limit the availability of resources.

**Interpretation:** Using the background research and information gathered through interviews of major stakeholders, we provide a set of recommendations to policymakers and providers involved in refugee healthcare services. Training of healthcare providers, especially in culturally-competent care, is critical for providing high-quality care in these low-resource settings. Screening and treatment of psychiatric disorders must be a priority for healthcare providers working with refugees, as these can greatly impact refugees' integration into new communities and present with other comorbidities. We propose ways for agencies currently working in the refugee health field to coordinate their activities more effectively, and support advocacy by health care providers for global support for refugees.

**Source of Funding:** None.

**Abstract #:** 1.086\_HHR

### Promoting Health Professional Education: Improving the Health System's Response to Epidemic Control

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**Program/Project Purpose:** To address the HIV/AIDS epidemic in Sub-Saharan Africa, health systems need adequate numbers of quality health care workers (HCWs) who are able to provide the full continuum of HIV services. For five years, the President's Emergency Plan for AIDS Relief (PEPFAR) funded Medical Education Partnership Initiative (MEPI) has been one of the flagship programs helping to assure there are adequate numbers of well-trained HCWs who can provide the HIV/AIDS services needed to address the epidemic.

**Structure/Method/Design:** MEPI helped to alleviate the health workforce crisis and contributed to addressing the HIV/AIDS epidemic. Through a combination of interventions, MEPI addressed HCW education issues and assisted in laying the foundation for stronger health care systems. MEPI's accomplishments center on five key programmatic themes: Innovation and Capacity Building, Retention, Research, Communities of Practice, and Sustainability.

**Outcome & Evaluation:** To increase research capacity, MEPI strengthened research governance, support structures, and provided direct training in research methodology. Research support to MEPI schools resulted in 376 research publications.

MEPI piloted innovative eLearning strategies which are now being rolled out more broadly.

Lessons were shared electronically through the MEPI website where forums, webinars, and technical articles were accessed by users in over 192 countries. Monthly website access reached over 3,500 users.

A MEPI Network was created with 13 funded institutions in 12 countries that now fosters partnerships with more than 40 institutions around the world. More than 90% of new staff positions, initially funded by MEPI, will be sustained by local institutions, ministries or other grant funding.

In three countries alone, 54,000 individuals have received HIV-related services supported by MEPI-trained providers.

Under MEPI more than 2,000 non-physician HCWs directly participated in HIV/AIDS care, treatment and prevention training.

**Going Forward:** Students and faculty who participated in MEPI programs are on the frontlines of HIV/AIDS care and are modeling evidence-based practices. MEPI optimized host-country leadership and international collaboration to support medical education. MEPI struck a balance between accessing the technical expertise of high-income countries and grounding programming in locally-defined priority areas. MEPI has strengthening learning at local levels, to build health system resilience and responsiveness. By strengthening pre-service education and research capacity MEPI has helped bring the UNAIDS 90/90/90 goal within reach.

**Source of Funding:** USG.

**Abstract #:** 1.087\_HHR

### Developing Novel Competency-driven Professional Curricula in the US and Globally

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**Program/Project Purpose:** International aid organizations have spent billions of dollars building public health workforce capacity without effective measures of impact. Following trends in other professional workforces, public health training programs have begun to use competency models to guide classroom learning, continued education, and performance improvement.

Competency-based professional training programs expect that graduates demonstrate particular knowledge and skills, and the ability to apply them effectively in various environments. This is shown to support long-term career success by developing stronger self-awareness (ability to improve), better understanding of how they integrate with and serve their environment (ability to adapt to contextual needs), and commitment to ongoing self-assessment and life-long learning.

To better meet public health workforce needs, the public health training accreditation process in North America now requires