implementation of a full national standardized educational curriculum for medical interns by 2020.

Source of Funding: We thank the Botswana-Harvard Partnership and University of Botswana for their support.

Abstract #: 2.031_HHR

Building Interprofessional Global Health Infrastructure at a University and Health System: Navigating Challenges and Scaling Successes

L.B. Pilling¹, J. Bogen², L. Hunter³, N. Leon⁴; ¹Jefferson School of Population Health, Philadelphia, PA, USA, ²Thomas Jefferson University, Philadelphia, USA, ³Thomas Jefferson University, College of Health Professions, Philadelphia, USA, ⁴Thomas Jefferson University, College of Pharmacy, Philadelphia, Pennsylvania, USA

Program/Project Purpose: To describe the challenges faced and progress made over the past seven years to formalize an interprofessional global health initiative at Thomas Jefferson University. For over seven years, faculty and students have built the initial infrastructure of the Global Health Initiatives Committee (GHIC) across six colleges. Our goals are to: 1) develop a global health identity 2) educate and engage students, residents, fellows, faculty, and staff in medical and public health issues that transcend national boundaries 3) promote health equity and embrace diversity 4) create a focused initiative that incorporates global health concepts into education, research and the delivery of health care and community health initiatives.

Structure/Method/Design: Since 2009, GHIC has promoted a culture of global health through consistent and varied mechanisms of engagement. We have cultivated champions within university leadership. Surveys were administered in 2010 and 2015 to assess student interest in and perceptions of how global health will impact their careers. Four proposals were submitted aimed at acquiring funding to coordinate global health communication, education, research and service infrastructure. Each proposed different mechanisms for implementation and levels of funding.

Outcome & Evaluation: Two student surveys indicated an increase in the importance of global health and in the percentage of students who will pursue global health careers. The core group of faculty and students has:

- engaged in 30+ scholarly initiatives, posters and presentations - delivered 20+ seminars promoting global health at the university

- organized 10 student-led forums
- published 7 peer reviewed articles and 4 publications

- developed a series of modules for the interactive Curricula Experience (iCE) Platform & App

The six colleges have over 35 different relationships with organizations in 35 countries. The medical college houses 10 distinct global health-related programs. In 2016, the university hired an Associate Provost for Global Health.

Going Forward: GHIC is committed to developing a focused, funded initiative to provide the university with a structured global health identity that fosters interprofessional innovation and enables students, residents, and fellows to incorporate global health into education, research, community health initiatives, and the delivery of health care.

Source of Funding: None.

Abstract #: 2.032_HHR

International Cancer Expert Corps: Sustainable Mentorship and Transformational Technology for Cancer Disparities Worldwide

D.A. Pistenmaa; International Cancer Expert Corps, New York, New York, USA

Background: Cancer is a rising global problem, especially in developing countries where over 70% of newly diagnosed cancers occur, and in geographically-isolated indigenous populations in developed countries. While addressing all aspects of cancer care, radiotherapy is a critical ICEC focus. Unfortunately, radiation technology in challenging settings, if any, is often mediocre or too complicated for the existing infrastructure. It often utilizes Cobalt-60 which lacks the sophistication for advanced radiation therapy and is of concern for its potential use by terrorist organizations. These problems and the need for over 5,000 linear accelerators in underserved regions provide an opportunity to address both security of radiological material and cancer care.

Methods: ICEC is implementing a sustainable systems solution to this problem consisting of an exceptional workforce, technological innovation and local/regional investment providing a unique model of medically-related mentorship and education. Using newer telemedicine/telecommunications technology, ICEC has the capability to leverage intellectual resources and innovative technologies by partnering with in-country healthcare professionals to improve access to, and the quality of, cancer care services in these underserved regions that often present challenging environments.

ICEC, working with government agencies and non-government organizations, has changed the anti-terrorism focus to "Treatment, not Terror", emphasizing the critical importance of first addressing societal problems. In the first-of-its-kind conference, ICEC, working with the European Organization for Nuclear Research (CERN), the International Atomic Energy Agency (IAEA) and the US Department of Energy, is addressing this issue by bringing together multinational expertise in Geneva in November 2016. The conference aims to develop design characteristics for a high-quality linear accelerator for challenging environments. The conference also will review physical infrastructure challenges, opportunities for sustainable training of personnel in developing countries to insure safe and effective use of new technologies and actions to insure that the recommendations of the conference are implemented.

Findings: To be reported after workshop in November 2016.

Interpretation: In summary, ICEC's network of leading international healthcare professionals is uniquely positioned to expand cancer care capacity and stimulate development of cancer treatment technology to provide cancer care at global standards in developing countries.

Source of Funding: None.

Abstract #: 2.033_HHR