settings (RLS) by extending their educational mission. Teaching hospitals within AMCs represent concentrations of expertise in health professional training that can be directed toward building health sector capacity globally. Over the past 25 years, a U.S.-based Teaching Hospital (TH) has operated a suite of educational programs ("Programs") with the aim of knowledge transfer in pediatric and women's health. Structure/Method/Design: The Programs' goals include: establish a foundation for long-term inter-institutional collaboration with bi-directional benefit in RLS; utilize established relationships as platforms to address healthcare needs in underserved communities. The Programs' include: a four-week, customized visiting scholar immersion for selected physicians to obtain knowledge needed to lead the development of programs in their home institutions; an annual colloquium targeting educational needs of clinical providers in pediatric and maternal health; a team of TH professionals deployed to educational forums in RLS. The primary program beneficiaries are clinical providers with completed/active training in pediatric or women's health. Participants are identified through the network of partner organizations in governmental and non-governmental health service sectors through execution of the Programs. The design of the Programs promotes access to the highest quality educational opportunities with minimal barriers, essential for health professionals in RLS. Long-term sustainability of the Programs and their benefits to RLS is dependent upon the Programs working within and between one another.

Outcomes & Evaluation: TH educational programs for RLS are long-standing, supported by a core team of dedicated healthcare professionals, and serve as a basis for sustained institutional collaboration in RLS. Since 2007, 403 visiting scholars trained in 12 specialties at TH; scholars represented 54 countries, approximately 80% were RLS. The annual colloquium, founded in 1990, is among the longest-standing international educational forums of any pediatric hospital in the U.S. Since 2007, 893 participants, representing 30 countries, received continuing education in pediatric and women's health; 86% of countries represented are RLS. Finally, the team of TH professionals deployed to address educational needs abroad has been solely focused on RLS since its inception in 2007. Last year, the team of TH professionals participated in 16 conferences in 3 RLS countries, reaching 25,000+ learners and partnering with 13 organizations to achieve these outcomes.

Going Forward: Challenges include medical licensing board restrictions on non-U.S. trained clinicians and identification of physicians with necessary language skills to execute the Programs. TH plans to address unmet goals through execution of program growth strategies Funding: TH provides direct support from its operating budget and in-kind support; international partners provide in-kind support for outbound programs.

Abstract #: 02ETC026

Building transdisciplinary university collaboration to strengthen global adolescent health

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Program/Project Purpose: The 2014 WHO Report on Health for the World's Adolescents provides an overview of the current need to focus on global adolescent health. Currently there are over a billion adolescents (10-19 years old), and in 2012 alone there were an estimated 1.3 million adolescent deaths, most of them from causes that could have been prevented or treated. The Center for Global Public Health (CGPH) at the University of California, Berkeley, was created

in 2008 to be a platform to coordinate global health research and education across the entire campus. Global adolescent health is one of its special project areas.

Structure/Method/Design: In 2013, CGPH began to help convene a new transdisciplinary colloquium on global adolescent health. The vision was to harness the latest advances in knowledge and communities to ignite inquiry and innovations that will maximize the successful transition to adulthood for all adolescents. In collaboration with other Centers at UC Berkeley, the goal is to develop a new blueprint for adolescent health that incorporates a trans-disciplinary understanding of the social determinants of adolescent health from experts across the campus in order to inform training, the piloting of innovative interventions, and their dissemination to communities.

Outcomes & Evaluation: The main players of the UC Berkeley's global adolescent health colloquium currently include the Center for Global Public Health, the Human Rights Center, Goldman School of Public Policy, Institute for the Study of Societal Issues, School of Public Health, Bixby Center for Population, Health, and Sustainability, and the Institute for International Studies. As a colloquium, the groups work together to foster innovative research and programs with a global focus. At the core is a collaborative strategic planning process to streamline various goals and research across the University. Frequent meetings and seminars encourage experts to share their work, while small grants help accelerate innovative interventions. Symposia and interactive talks featuring visiting researchers/leaders in the area of global adolescent health connect people, cohere ideas and disseminate information. Other events such as film screenings, dinner discussions, and local youth involvement help engage the broader community.

Going Forward: The key to the successful uptake and promotion of this initiative has been the focus on transdisciplinary interaction, collaborative leadership, the uniting of existing and emerging research/program initiatives, and community involvement. Challenges include ensuring the colloquium is sustainable past its years of funding. This new blueprint for transdisciplinary global adolescent health has far-reaching implications for education and training in the arena of adolescent health worldwide.

Funding: UC Berkeley Institute for International Studies Abstract #: 02ETC027

The MPH global health roundtable series: A forum for developing global health competencies

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Program/Project Purpose: The MPH Global Health Roundtable Series was created in 2010 in response to the growing demand for global health learning opportunities at the Dalla Lana School of Public Health (DLSPH) at the University of Toronto. The Global Health Emphasis program provides students with one avenue to develop fundamental global health competencies. The aim of the MPH Global Health Roundtable Series is to provide an additional learning environment that allows students to further refine and employ these competencies. The series has two main goals: 1) To generate thought provoking discussion on major challenges in global health; and 2) To provide a forum through which students can become exposed to different career paths in global health. By achieving these goals, the Series aims to develop competent global health leaders that are equipped with professional skills relevant to global health.

Structure/Method/Design: The Series is a student-led initiative that employs a distinct pedagogical approach to global health

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education. Each session is structured to be an informal, interactive learning environment. Invited speakers and student moderators co-facilitate sessions to foster collaborative learning for those in attendance. Sessions are open to all interested students, professionals, and academics. Thus, the Series promotion and recruitment efforts are aimed at multiple global health organizations and universities to bring diverse, multidisciplinary perspectives to the table. To ensure the Series remains a viable source for informal global health learning, new speakers and topics are presented each year. Popular sessions have been offered two years consecutively. Furthermore, session attendees play a significant role in shaping topic selection and session content. The goal is to create a global health community of actively networking and collaborating professionals.

Outcomes & Evaluation: Ongoing evaluations of the Series are conducted for each session through post-session surveys sent to attendees. In addition to asking questions about overall satisfaction, we assess how well the Series is highlighting key global health competencies and which skills/attributes attendees would like to develop through participation. Preliminary results from the 2014-2015 evaluations indicate that the Series effectively addresses the following competencies: socio-cultural/political awareness and health equity/ social justice. Additionally, increase professional knowledge on a specific topic, develop a tangible skill set that can be applied in practical settings, networking with other professionals, and collaborating with academics from other disciplines, are the most frequently cited skills/attributes attendees seek to develop through participation. Going Forward: On-going challenges include: low recruitment/ attendance of students and professionals outside of UofT and lack of funding to bring in speakers outside of those available locally. Attendee feedback in the evaluations has also indicated a need for more professional development sessions so we will be collaborating with professional organizations to run global health skills development sessions.

Funding: No funding. **Abstract #:** 02ETC028

An interprofessional (IPE) educational collaboration across borders with measurable outcomes: A case report

L.B. Glickman; U of MD, Baltimore, MD/US

Program/Project Purpose: The purpose of this presentation is to describe an innovative project. The project is built on a collaborative partnership between leaders from the Kachere Rehabilitation Centre (Kachere), in the less-resourced country of Malawi and an Interprofessional (IPE) team of US-based graduate professional students and faculty from the University of Maryland, Baltimore. Through initial collaborations and ongoing discussions, a multi-purposed activity was developed and executed with sustainable activities that met the research-based and educational needs of the partners. The project was built on existing frameworks, experiences, research-based evidence, campus direction, student/faculty needs, in-country supports, and concrete expectations. The project period started summer 2013, was actively implemented in 2014, with ongoing sustainability plans through 2015, and beyond.

Structure/Method/Design: This project had several purposes, based on structured and unstructured activities, reflective practices, extensive formal and informal communication means, and featured several deliverables. The innovative aspect of this project was the "pairing" of research, education, cultural competence development, sustainability, and IPE collaborations with successful outcomes. Student and faculty participants were selected through a "call" for grant

submissions and a competitive application process in 2013. The basis for this project's sustainability and capacity building is the collaborative partnership begun in 2013 and actively implemented in 2014, with continuing discussions and future planning.

Outcomes & Evaluation: This project's global IPE experience had a significant impact on US and Malawian partners beyond the initial project expectations. IPE students described how the experience would transform their cultural perspectives/sensitivities and career as a healthcare provider. Kachere staff are using the provided visitor team's educational materials to modify practice applications and for future educational supports. Research study results provided the evidence and incentive for small successful changes, both as a staff motivator and generator of new ideas. There is also a good possibility of integrating the study findings into the Centre's long and short-term goals, objectives, and strategies. Lessons learned from this project included the importance of partnerships, collaborations, sustainability, communications, flexibility, patience, adaptability, and cultural sensitivity.

Going Forward: Ongoing challenges include the need for culturally-sensitive planning and communications to both respect cultural differences between the professionals in two diverse countries, yet facilitate the implementation of change activities, the need for project funding to sustain ongoing collaborations, and on-the-ground regular funding streams for program implementation beyond the "great" ideas and realistic expectations. To date, there are no unmet short-term goals. Long-term unmet goals are the need for continued collaborations to brainstorm sustainable implementation ideas brought to the surface in 2014.

Funding: University of Maryland, Baltimore, Center for Global Health Education Initiatives

Abstract #: 02ETC029

Cervical cancer screening education in Ethiopia: Challenges and opportunities

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Program/Project Purpose: Cervical cancer is the second most common cancer and the second leading cause of cancer deaths among women 15 to 44 years of age in Ethiopia. Estimated 27 million women over the age of 15 years are at risk for cervical cancer with 7,095 cervical cancer cases and 4,732 cervical cancer deaths occurring annually in Ethiopia. However, only 0.6% of women ages 18 to 69 years obtain cervical cancer screening due to lack of awareness, resources, screening tests and trained health care professionals. Single visit (see and treat) approach using visual inspection with acetic acid (VIA) has proven effective in low-resource countries like Ethiopia. The purpose of this study was to assess knowledge and clinical skills of cervical cancer screening coupled with an educational intervention among medical students in Ethiopia. This project was conducted over one month period in October of 2013.

Structure/Method/Design: This study consisted of pretest, posttest, video of power point presentation on cervical cancer screening, and speculum examination on a pelvic model. Pretest and posttest surveys assessed knowledge and clinical skills of cervical cancer screening. The post test survey consisted of open ended questions about cervical cancer screening guidelines and education provided. Subjects were medical students in clinical years 4 through 6 at St Paul's Hospital Millennium Medical College in Ethiopia. The study was announced to students during their regular didactic session and participation solicited. Participation was voluntary. Analysis consisted of calculation of pretest and posttest scores and identification of themes from open ended questions.