



11/1/2018

Annual Report

Global Health Initiative

2017-2018

Mission & Vision



The Global Health Initiative engages OHIO faculty and students in collaborative, multi-disciplinary global health education, research and outreach.

Our vision is to be a global leader in the development of health professionals with the capability to promote health among diverse and underserved populations.

Long Term Outcomes

1. More culturally sensitive and globally informed workforce in the health professions.
2. Strengthening and supporting health systems in the communities where we work.
3. More globally engaged and culturally informed faculty and university.
4. Encouraging more OHIO faculty to engage with health and wellness in a multidisciplinary fashion.
5. More OHIO graduates in the health professions working in underserved areas.
6. Strengthening, clinical, research and practice skills.

Summary

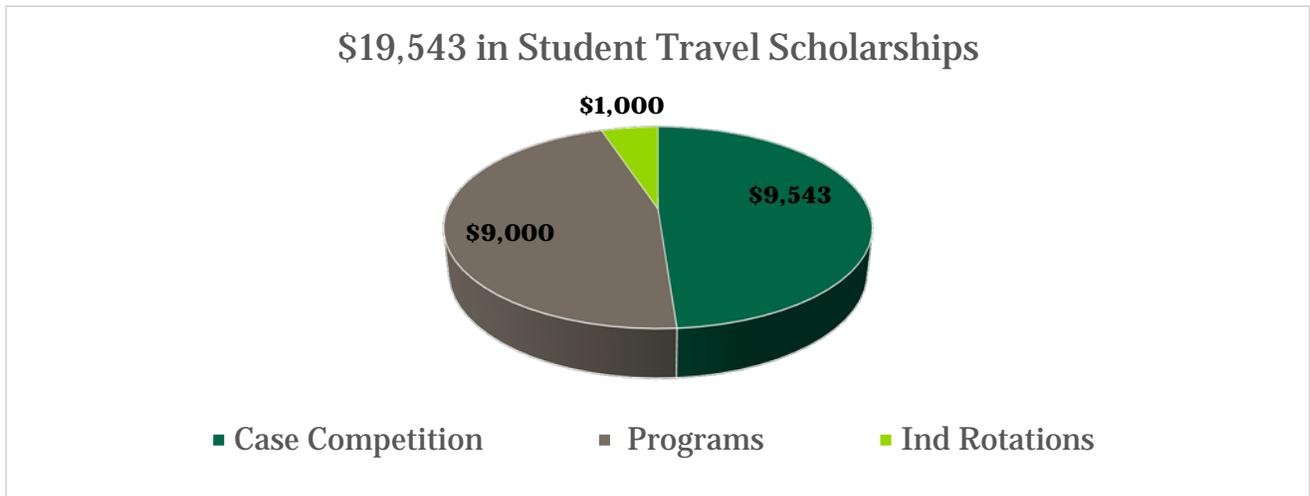
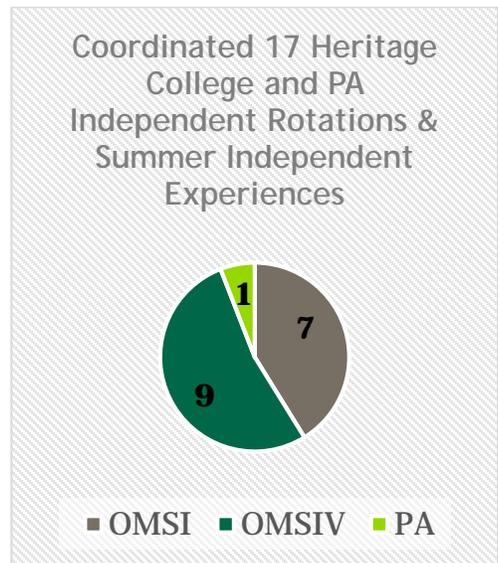
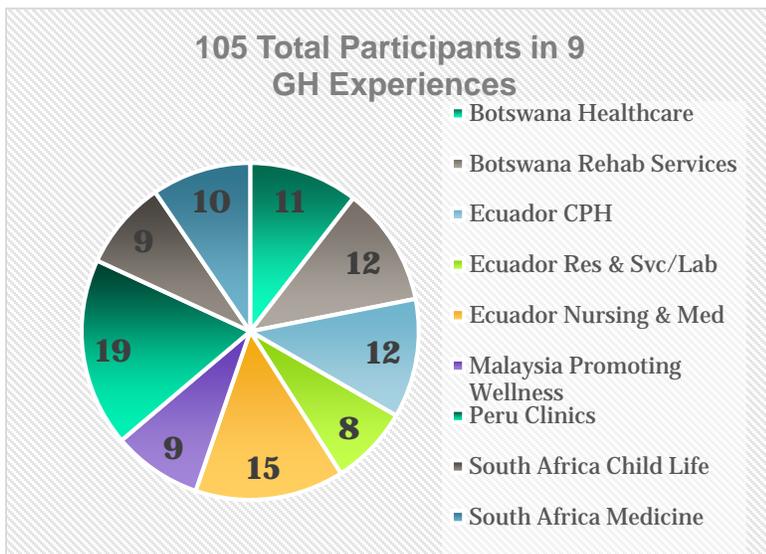
Goals for the sixth year (2017-18) of Ohio University's Global Health Initiative were to:

- Prepare and market for the launch of the Master of Global Health program for Fall 2018
- Expand health system strengthening programs and activities
- Establish program and learning outcome evaluation methods for Global Health opportunities
- Improve and sustain existing partnerships, programming, and curriculum
- Build new partnerships and programs

Some key **highlights** include:

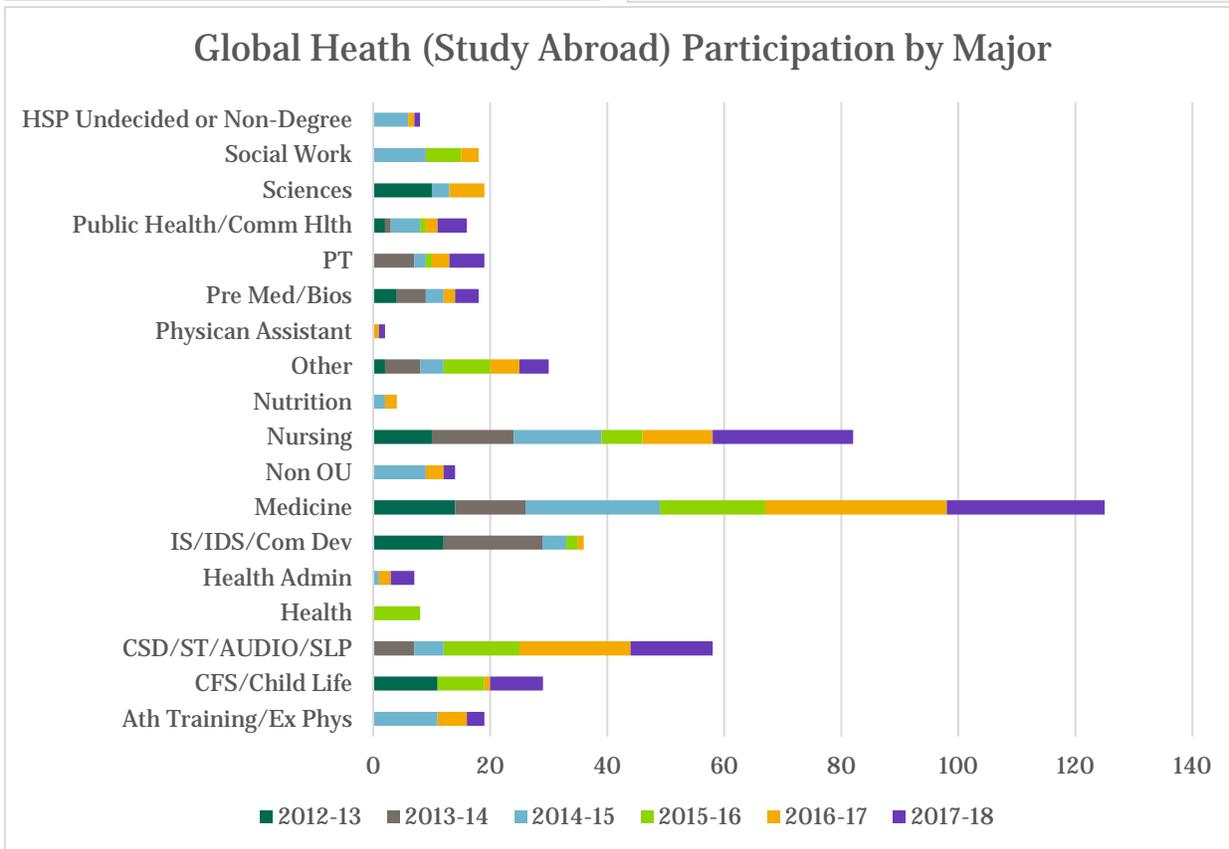
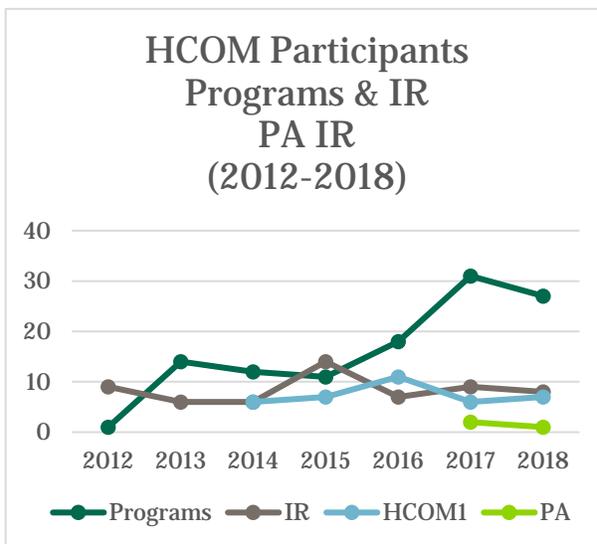
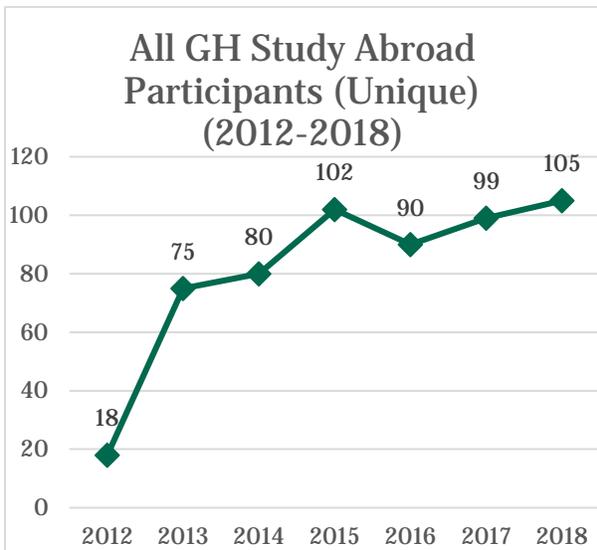
- **Master's Degree marketing developed and applications open** for the first cohort
- Meredith Gartin hired as Visiting Assistant Professor in August 2017 and Megan Massey hired as Program Coordinator in October 2017
- **Fulbright Grant** for training program for junior faculty from Egypt written and received in April 2018
- **1804 Grant for expanding Secondary Data Research** training and curriculum received.
- **Protocol developed and data collected** on program learning outcomes for the 1804 Program Evaluation grant
- **4th Annual Case Competition** held, with the winning team travelling to Hungary in May to explore the viability of their proposal for addressing addiction issues in Budapest
- Development of potential new partnerships in Ethiopia, Hungary, Rwanda, and Swaziland continued

Global Health Experiences Program Participation



Participants Experienced 12 Different Countries

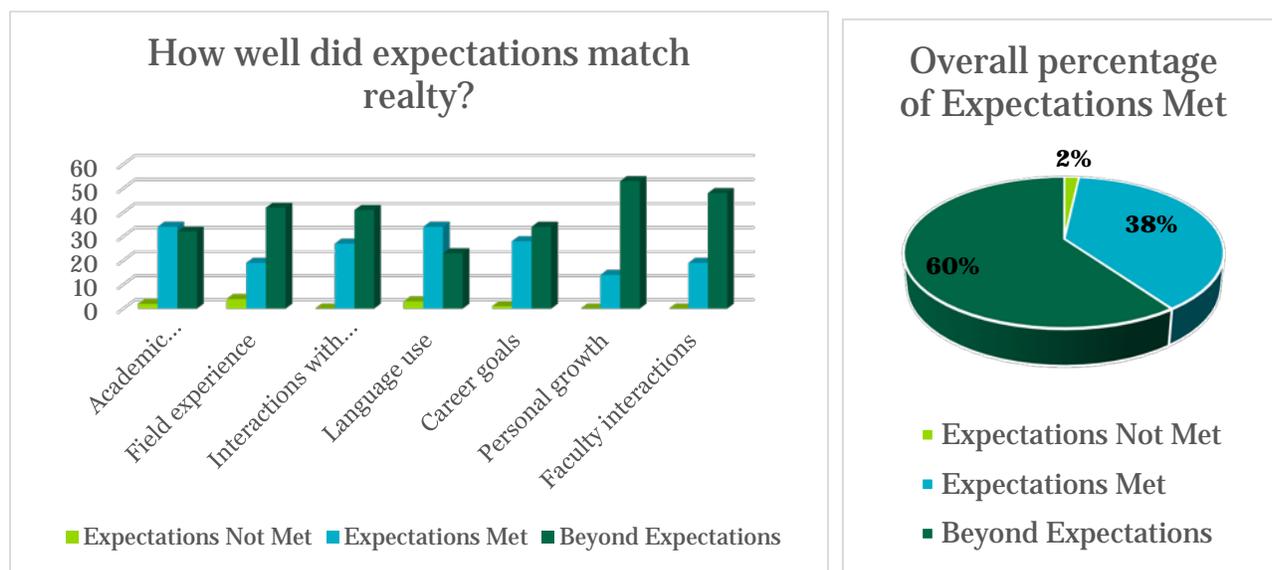




Global Health Experiences Program Evaluation

Seventy-Five students evaluated programs, which is 71% of the total participants in 2018 spring and summer programs. The Botswana Rehabilitation Services (92%), Ecuador Community & Public Health (83%), Ecuador Nursing & Medicine (67%) and Malaysia Promoting Wellness in Older Adults (67%) programs had the best response rates. Program Directors received compiled data for all evaluations and use the data for program improvement. Some overall selected results are presented below.

One evaluation question asked participants to rate how well their expectations matched the reality of several elements of the program. Students rated 4 of 7 program elements as beyond expectations, with the rating of all elements at 51% beyond participant’s expectations, and 43% of students rating the elements overall as meeting program expectations(see charts below).



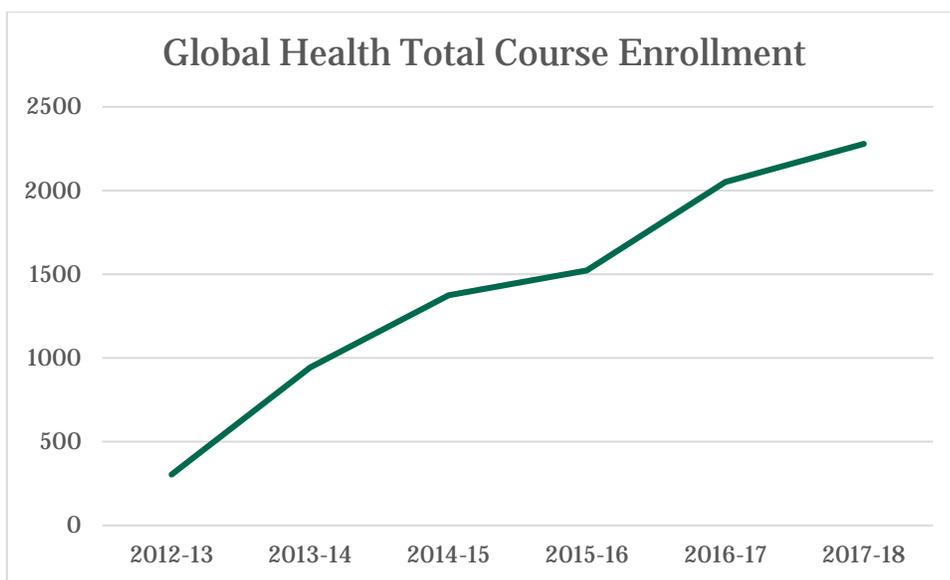
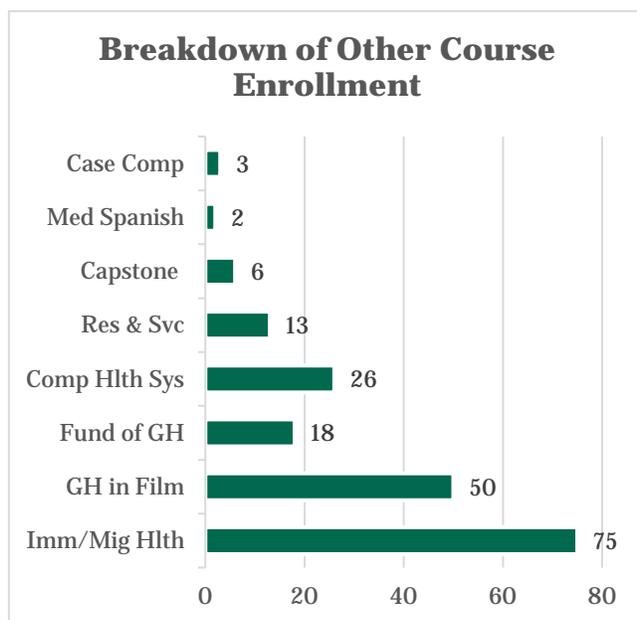
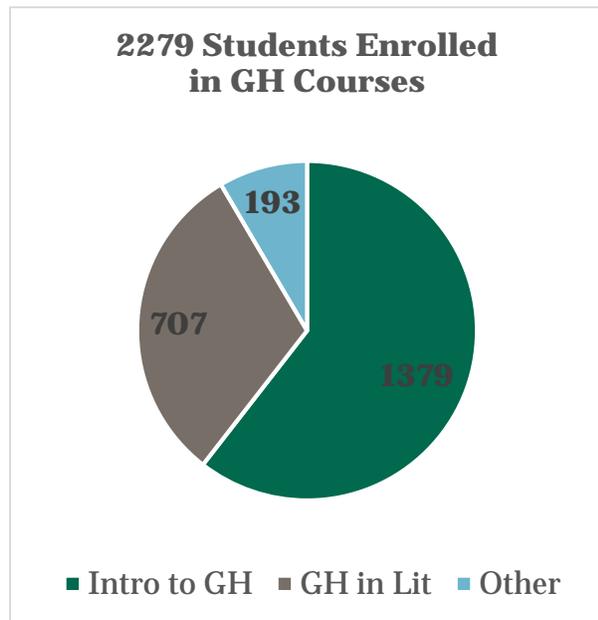
Included in the analysis were a subset of open ended questions asked in the student program evaluations. These questions relate mostly to culture and cultural experiences; however, some questions included programming related issues like factors that helped students decide on a program, student expectations prior to the program start contrasted with the reality, and any changes in the student’s career goals. The table below includes examples of comments in support of achievement of Global Health objectives and outcomes.

Program Outcomes & Objectives	Typical Exemplars
Recognizing that Global Health is interdisciplinary and requires teamwork and community-based approaches to service and care	<p><i>I feel that I have a better understanding about what it's like to not only work with a team of other professionals and have a better understanding of what they do, but also how to interact with patients of a different community/culture.</i></p> <p><i>In Botswana, there is no electronic medical records. Patients carry all of their medical records with them. This is challenging as a healthcare provider because records are not in a secure place. They can easily be lost or altered and can impact the 'full picture' that one can obtain through EMR. There is lack of communication between healthcare professions as well. I did not fully appreciate the value of having good connections with physicians until that was not an option. I felt that I spent a lot more time trying to interpret the clinical scenario via the patient in situations where I would have rather had a direct conversation with the referring provider</i></p>

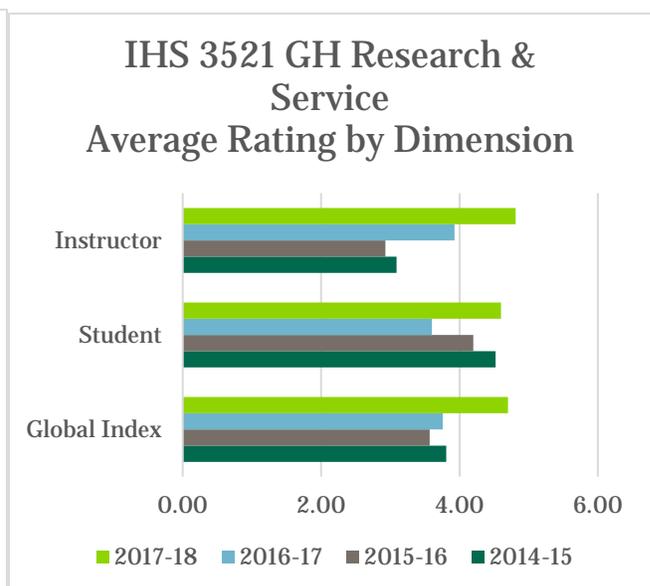
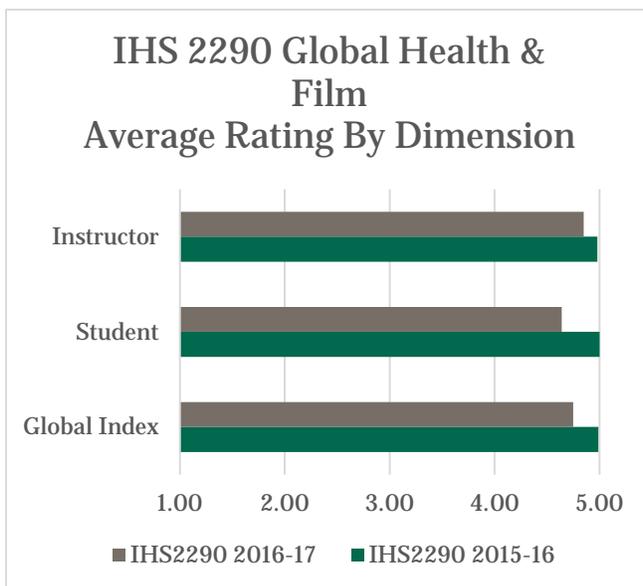
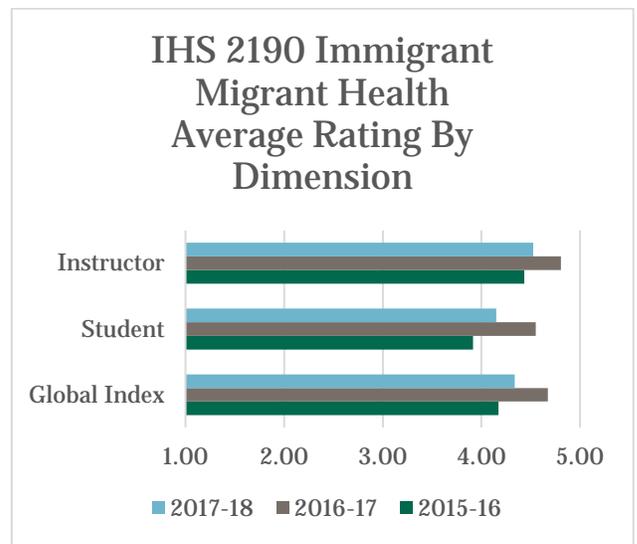
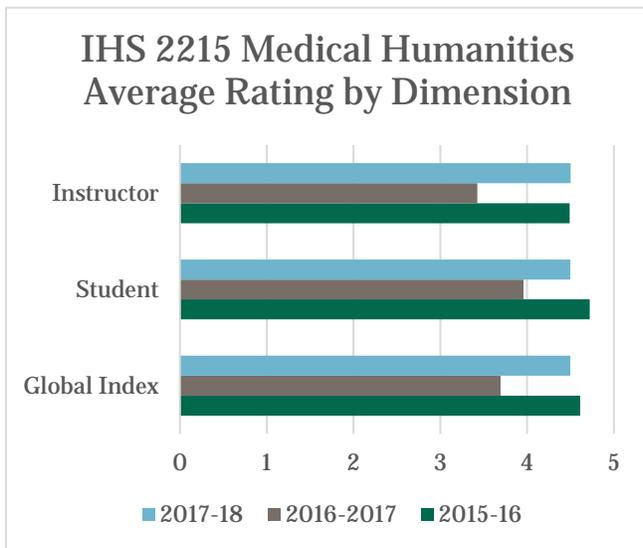
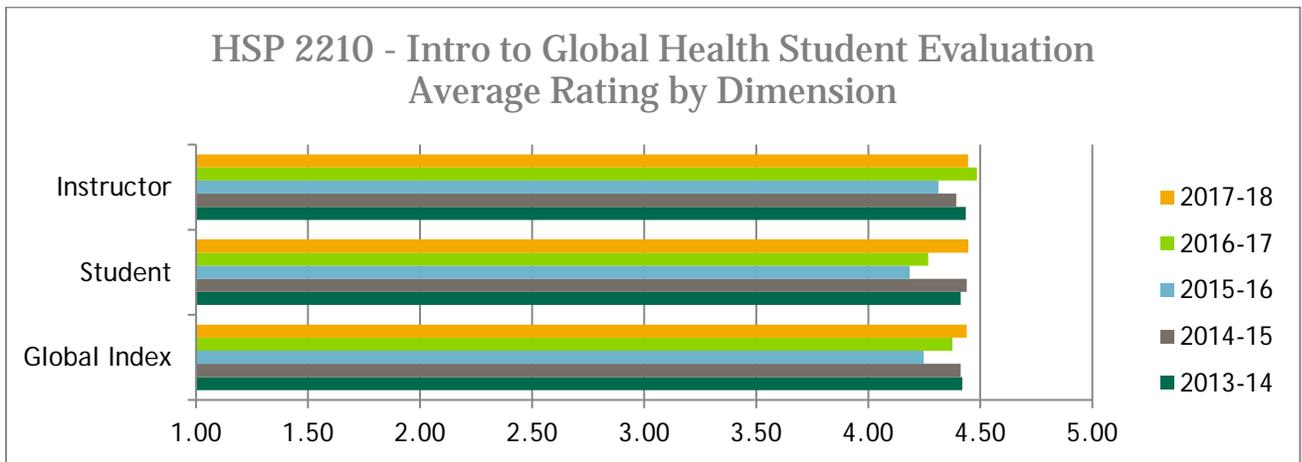
<p>Better understanding of a health-related issues and poverty in the global context, including the burden of disease for people in resource-poor settings</p>	<p><i>In South Africa, only 5-10% of the population pays taxes, but the government provides free healthcare to all people. The government healthcare facilities do a great job to provide the best healthcare that they can with their limited resources to care for a majority of the population. On the other hand, there are private healthcare systems that only the wealthy can utilize by paying out of pocket that use a large amount of government expenditures but only benefit a very small population of the country.</i></p> <p><i>I saw a family who came to the clinic for help getting rid of scabies, of which the whole family had. We gave them some anti-itch cream and told them what medication to get at the pharmacy to get rid of scabies but I don't know how helpful our advice will be because the family does not have running water or electricity to be able to wash their clothes and get rid of the parasites. This was hard for me because there was nothing we could do to help them and their economic situation made it impossible to get rid of the scabies</i></p> <p><i>There was a mother with her infant child. The child was very sick. We saw her child in the clinic. We recommended that she go to the emergency room immediately for resources that we couldn't give her at our clinic. She took our written note for prescribing care with her but left the clinic site to head home. We asked her why she wasn't going to the emergency room if she had an insurance card. The mother said her insurance card wasn't accepted in this specific community's hospital and she couldn't afford to drive or take a taxi to the other community's hospital.</i></p>
<p>Learning about a culture different from their own to gain cultural humility that can be applied in both the social and medical fields</p>	<p><i>The day centers that we visited which were run all by older adults and mainly all the same religion so as the danced, did karaoke, did some arts and crafts, and played traditional games they all talked about their social and cultural societies. The way they used this really helped them keep moving and holding onto their fellow older adults.</i></p> <p><i>A firsthand experience I had while in Ecuador with the impact of culture on health is that in many of the communities they believe in natural medicine using plants and cleansings to treat people. They only practice western medicine when it becomes the last option.</i></p> <p><i>At one of the houses, the group I was placed in for the day was able to experience the face of Chagas disease. We saw an elderly man, who lived by himself, who was awaiting the return of his wife from a hospital in Loja, which is over 3 hours away. He had no idea when she would return if she would. Upon searching the house, the entomological team found over thirty chinchuros, a scorpion, and cockroaches in the man's bed. Additionally, outside in his yard were nests of chinchuros that the team had to burn. Not only was this man suffering from old age and lack of travel means to see his wife, he was at a very high risk for Chagas Disease if he hadn't already contracted it. This was just on example I witnessed of the impact that cultural and social structure has on health and healthcare.</i></p>

<p>Honing skills in participant-observation through experiential learning opportunities that do not allow students to practice outside of their skill level</p>	<p><i>I also have a greater appreciation for palliative care, for it was heavily emphasized at Victoria Hospital, likely due to a limited amount of resources. One of the physicians who specialized in palliative care expressed that all physicians should have some degree of competency in being able to counsel patients and their families on aspects related to end of life care.</i></p> <p><i>When we arrived at Khayelitsha Clinic Site B, you walk in the doors at 7am and the halls and packed with people who will plan to sit there all day and wait to see a physician. I was shadowing Dr. Allerton one day and a lady came in to see him with multiple complaints, and mentioned that she couldn't see. After thorough hands on physical exam due to lack of resources and imaging, he concluded that she had severe cataracts in one eye and worsening in the other. He explained to her what was happening using simple analogies and descriptions to make sure that she knew what was happening with her health. He also arranged hospital consultations and made her aware of everything happening in the future as well. He was an amazing physician and really cared about his patients.</i></p> <p><i>It has made me more aware of small things that physicians can do that make an impact on the patient. I hope to incorporate more hands on physical exams and to think before ordering tests on the outcome of those results. The trip has definitely motivated me to increase my studies and to learn as much as possible this upcoming year.</i></p>
<p>Improving foreign language and communication skills through interaction with local people in both the social and medical contexts</p>	<p><i>One way I saw social structure impact healthcare was in the treatment of an older gentleman who was from a remote village. Because he was from such a remote area, he did not have access to education meaning he did not speak Setswana or English. This made providing care rather difficult and I believe impacted the level of care he was able to receive at the public hospital</i></p> <p><i>Two of the physicians at Victoria Hospital were very good about utilizing healthcare allies such as PT/OT, social work, nutrition, etc. They always took into consideration the full extent of each patient's circumstances as well as the effects on family members. The importance of making an effort to understand the entirety of a patient's story, including meeting him or her where he or she currently is and then working to develop a personalized care plan, cannot be understated and I hope to portray these characteristics as a future physician.</i></p>
<p>Clarifying (or defining) their role in future career goals related to health and health care with underserved populations</p>	<p><i>It has shown me how diverse the field of nursing is and made me excited to start my career. This trip put me out of my comfort zone and gave me the push I needed to execute my nursing skills I know I have.</i></p> <p><i>I think I will be a better medical provider just with the mindfulness that I learned in Botswana</i></p> <p><i>This program has opened my eyes to the world of public health and encourages my drive to pursue medicine in a more holistic way. Participation in this program has strongly enforced my desire to work for policy change in the realm of healthcare and has sparked an interest in pursuing a career outside of the United States.</i></p> <p><i>This program has motivated me to obtain my Masters in Public Health; it allowed me to realize how much I appreciate and enjoy my undergraduate program, in addition to noticing how necessary the field is today.</i></p> <p><i>It increases my awareness of culture differences and being more open to those differences. It created a greater interest for my interest in Gerontology.</i></p> <p><i>I know I would like to travel and after learning about the cultural birth practices in Ecuador I have more interest in possibly becoming a midwife in the future.</i></p>

Global Health Course Participation



Global Health Course Evaluation



Events & Other Activities

Global Health Case Competition

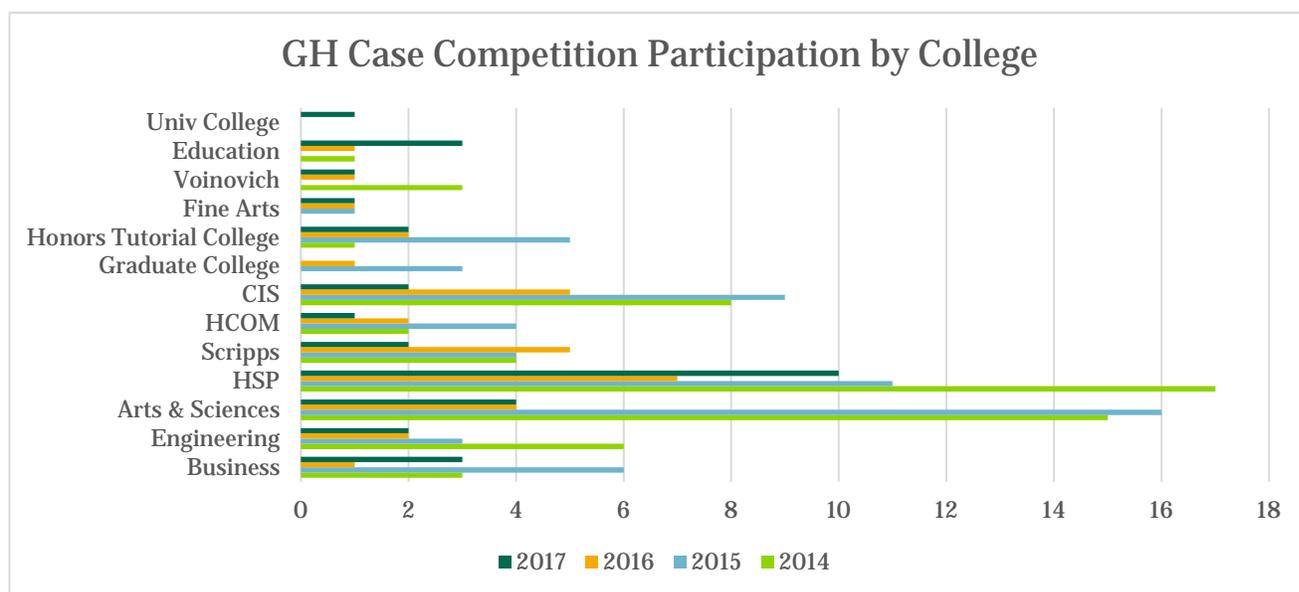


The fourth annual Global Health Case Competition took place on November 14, 2017 during International Education Week. Eight teams, comprised of 8 graduate students and 24 undergraduate students representing 12 colleges, participated in this year's competition. In 2017, teams created a multi-faceted response to Hungary's need for innovative ideas, approaches and strategies to build capacity in dealing with the dual problems of marginalization and addiction.

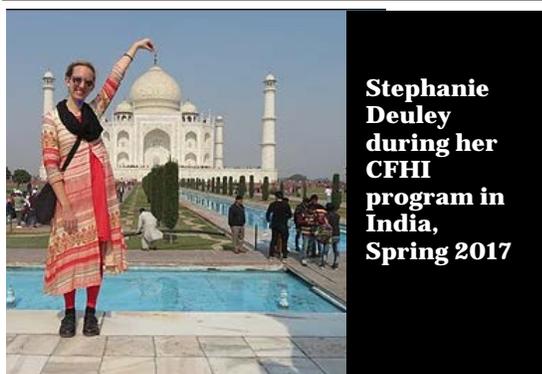
First-place was awarded to Team Egészségredre, which included: Brooke Mauro, Finance & Management, Gabriella

Mayer, Audiology, Emma Harvey, Biology and Dahlia Gordon, Nutrition & Dietetics. Their proposal addressed the rising rates of adolescent drug abuse in District 8 of Budapest by incorporating afterschool activities including healthy coping techniques, drug abuse education and youth empowerment to prevent drug use by building community and providing alternative options to drug use.

Members of Team Egészségredre, along with Meredith Gartin, PhD, travelled to Hungary in June 2018 to further research the feasibility of their proposed case solution. The team developed a feasibility study that included focus groups, surveys and cultural immersion to get a better insight into the social and cultural norms in the targeted area in Budapest. Through collaboration with local groups, social workers, teachers, students and professionals in the community, the students identified the activities already in place and developed both short term and medium term goals. These included creating job pathways, improving family support systems, increasing understanding between cultures, and providing opportunity rather than punishment. These goals all contribute to the longer term impacts of creating a sense of community and belonging, encouraging healthier lifestyles and creating communities free of harmful influences and temptations. Final recommendation from the team is that OHIO and John Wesley University work together to share this information among organizations in Budapest to improve existing programs and develop new programming. Dr. Gartin is working with Social Work faculty at Ohio University to establish a Global Health Spring Break Program that would continue what team Egészségredre started.



Achievements & Recognition



Stephanie Deuley during her CFHI program in India, Spring 2017

Student Awards

Stephanie Deuley was awarded with the **2018 Heritage College Global Health Award**. This award is given annually to a graduating medical student who has shown a commitment to Global Health through their four year career at the Heritage College.

Stephanie completed two International Rotations, one with CerviCusco in Cusco Peru and one in India with Child Family Health International (CFHI).

Unite for Site Global Health & Innovation Competition



Joelle Hopkins (left) and Victoria Lewis (right), *Photo courtesy of: Ohio University*

Two of the second place team members from the Global Health Case Competition were accepted to participate in the Unite for Sight Global Health and Innovation Prize international competition in April at Yale. CHSP students Victoria Lewis (Public Health) and Joelle Hopkins (Applied Nutrition) took their team's idea for a needle exchange strategy rebranded it and presented

Committees

Gillian Ice, Ph.D. MPH	<ul style="list-style-type: none"> - Chair of the University International Council (UIC) 2016-2018 - Heritage College Executive Committee, 2013-2018 - Advance Studies Advisory Committee, 2013-2016 - Advisor AMSA and IFMSA, 2010-2018 - HCOM Admissions committee 2016-2018 - Global Engagement Awards Committee, 2014-2018 - Public Health Task Force, 2014-2018 - Study Abroad Graduate Travel Award Review Committee, 2012-2018 - Study Abroad Risk Assessment Committee, 2012-2018 - Botswana Relations Task Force, chair, 2013-2018 - Senior International Management Team, 2016-2018 - Global Relations Committee, 2017-2018 - Global Education and Research Committee, 2017-2018 - Judge, Ohio University Expo, 2004-2018 - Ohio Women's Mentoring program 2016-17 - Judge Global Health Case Competition 2016-17 - Human Biology Association Program Committee 2016-2018
Meredith Gartin, Ph.D, MA	<ul style="list-style-type: none"> - Study Abroad Assessment, Global Mobility Committee, Ohio UIC, 2018 - IHS Curriculum Committee Reviewer, 2017-2018 - Judge, Ohio University Expo, 2016-present
Debra McBride, MA	<ul style="list-style-type: none"> - University Service Learning Committee 2016-18 - UIC Mobility Subcommittee 2016-18 - CHSP Diversity & Inclusion Committee 2017-18

Associations

Gillian Ice, Ph.D. MPH	<ul style="list-style-type: none"> - American Association for the Advancement of Science, member - American Journal of Human Biology, 2014-present (editorial board) - American Association of Anthropologists, Member - American Association of Physical Anthropologists, Member - Gerontological Society of America, Fellow - Human Biology Association, Fellow & Secretary Treasurer (2004-2008), Chair Nominations and Elections (2014-2015), Program committee (2017-) - Journal of Cross Cultural Gerontology, 2001 – present. (editorial board) - Society for Applied Anthropology, Fellow - Society for Medical Anthropology, Member - Board Member Factory Street Studio
Meredith Gartin, Ph.D	<ul style="list-style-type: none"> - American Anthropological Association (2006-present) - American Evaluation Association (2017- present) - Global Health Council (2016-present) - Society for Applied Anthropology (2007-present) - NAFSA: Association of International Education (2015-2018)
Debra McBride, MA,	<ul style="list-style-type: none"> - Judge, The Partnership for Excellence, 2015-2018 - Alumni Examiner, Examiner Trainer, Baldrige Performance Excellence Program - National Peace Corps Association
Megan Massey	<ul style="list-style-type: none"> - African Studies Alumni Association

2017-18 Grants

- \$18,300 1804 Grant - Ice, Gillian, McBride, Debra and Machtmes, Krisanna. Global Health Learning Outcomes and Program Evaluation. (2016-2018) (Completed 9/30/18)
- \$52,668 1804 Grant - Ice, Gillian, Haile, Zelalem, Bianco, Joseph, Gartin, Meredith, Johnson, Lesli, Lewis, Marsha, Graham, Dawn, Pittaway, Luke, McBride, Debra, Meyer, Deborah, Rubin, Sarah, Kingori, Caroline, Maposa, Bose, Nottingham, Kelly and Howard, Steve. Transdisciplinary Research Training in Global Health (2018 – 2020).
- \$91,800 Fulbright Grant - Ice, Gillian, Gartin, Meredith, Haile, Zelalem, Bianco, Joe. Egypt@Ohio - Fulbright Junior Faculty Development Program. July-September, 2018.

1804 Grant - GH Program Learning Outcome Evaluation



In 2016, Gillian Ice, Debra McBride and Krisanna Machtmes from the Patton College of Education received an 1804 grant to develop and implement an evaluation program for global health study abroad experiences with the purpose of measuring learning outcomes and improving the educational experience of student participants. Given her background in research, Meredith Gartin joined the project as a co-investigator and corresponding investigator in July 2016.

In the first year of the grant Dr. Gartin and the PIs developed the initial research protocol. A post-trip evaluation was implemented during the 2017 summer programs with data being collected in 2017 and 2018. Dr. Gartin and graduate students working for the Global Health Initiative started qualitative and quantitative analysis during the 2017-18 academic year.

During 2017-18 a protocol for collecting data on site at two summer program sites (Botswana Healthcare and Peru Clinics) was developed. Staff members Debra McBride and Megan Massey travelled to these sites during June and July 2018. While program participants were able to observe the Botswana program, delays in approval of IRB amendments meant that data collection (documentation of observations and student interviews) were not conducted on site. Data was collected in Peru through observation during clinic and interviews of the student participants. Data analysis is in process with the goal of presenting information through conferences and publications. Initial results will be used to edit the existing evaluation and learning outcome measurement tool for the future.

1804 Grant - Transdisciplinary Research Training in Global Health:

Enhancing student and faculty research capacity, program evaluation and research application through global collaborative partnerships

Global health and development employers seek graduates with analytic skills, experience with program evaluation and the ability to apply research to real-life problems in an international setting. Yet, undergraduate and graduate students in the health, population and social sciences at OHIO lack access to real-life research, program evaluation projects, and applied research opportunities. The Global Health Initiative proposed to provides opportunities in research, program evaluation, and policy translation for both undergraduate and graduate students through novel approaches in course design and curriculum development.

The approach integrates real-world data into the development of three courses linked to the Global Health Initiative's (GHI) on-going international partnership activities such as in Botswana. The training model used in Botswana ("education through research") embeds real-world data into the curriculum to train participants how to (a) articulate meaningful research questions, b) analyze and interpret data, and (c) prepare scholarly manuscripts.

This model has yielded five collaborative conference presentations and three scholarly publications in various stages of submission thus far. This proposal will apply the "education through research" model into three courses taught at the undergraduate and graduate level to increase the research capacity of OHIO students and faculty. In the process, we will also sustain and expand the GHI partnerships and strengthen partner health systems by building research capacity.

Egypt@Ohio - Fulbright Junior Faculty Development Program



The Global Health Initiative (GHI) hosted six Egyptian Public Health Junior Scholars this summer from July 8 to September 16. GHI partnered with the College of Health Sciences and Professions, the Office of Global Affairs, The Heritage College of Medicine and the Ohio Program for Intensive English to host the scholars.

The Objectives for the program included:

- learning about U.S. higher education
- sharing knowledge on curriculum, pedagogy and student engagement
- Developing online and blended courses
- Increasing research capacity of the scholars
- Establishing research learning

Ohio Faculty provided training on multiple topics including conducting research, the U.S. Academic system, course design, learning engagement and data analysis. The Scholars also learned about and participated in a Nursing Simulation Lab and were assigned faculty mentors to work on both short- and long-term research goals. Several university and community families served as host families for the scholars and participated with them in cultural events in Athens, Columbus and Marietta. Prior to departure in September, the scholars presented their progress on their identified research projects and their cultural and other learning.

Partnerships

Hungary

Global Health Initiative faculty and staff travelled with Dean Randy Leite to Hungary in October of 2017 to explore partnership opportunities and attend the first meeting of the European American Migration Health Platform in Pécs, Hungary. This visit and the May 2018 Case Competition Team travel to Hungary led to a potential partnership Wesley University in Budapest. Meredith Gartin is working with the Department of Social Work to develop a spring study abroad program in Budapest targeted for Spring 2020.

Current Partnerships (MOUs)

- Botswana Ministry of Health
- Institute for Development Managements (Botswana, Lesotho, iSwantini)
- University of Botswana
- Woldia University, Ethiopia
- University of Rwanda (In process)
- Conservation through Public Health
- Botswana Ministry of Education (in process of renewal)

Partners without MOUS

- Angola: CEML/Dr. Tim Kubacki
- Botswana: Retired Nurses Association, Princess Marina Hospital, Ambrose Academy, Progressive Physio Therapy, Camphill Trust, Stepping Stone International
- Cape Town, South Africa: Connect 123, Child Family Health International
- Egypt: Various institutions (Fulbright Program)
- Ghana: University of Ghana, Child Family Health International
- Various: Child Family Health International

Presentations, Publications and Research

Gast*, J, Z Haile, J Bianco, M Marape, S Maruapula, C Kamanda*, E Harper, T Keakabetse, A Goetsch*, R Onusko*, G. Null*, D. Spaeth-Cook*, G Ice (2018) Activity and body size among Batswana adults. To be presented at the Human Biology Association meetings, April 2018

Ice, GH, G Gast*, JA Bianco, M Marape, S Maruapula, C Kamanda*, E Harper, T Keakabetse, C. Kingori, Z Haile (2018) Body size, body image and chronic disease among Batswana adults. To be presented at the Human Biology Association meetings, April 2018.

Haile, Z, Ice, G, Bianco, J, Kingori, C, Marape, M, Lebotse, S, Rapoo, G, Sechele, P, Montsho, G, Sewane, B and Maifala, M (2017). Association between living arrangement and risky sexual behavior among married and cohabiting individuals in Botswana. To be presented at the American Public Health Association meetings, November 2017.

Kingori, C, Haile, Z, Ice, G, Bianco, J, Kefilwe, N, Letshwenyo-Maruatona, S, Boitshwarelo, T, Madisa, M and Marape, M (2017). Association between HIV/AIDS Knowledge and Level of Stigma towards People Living with HIV/AIDS in Botswana. To be presented at the American Public Health Association meetings, November 2017.

Ice, G.H. (2018) Stress. In Trevathan, W. (Ed). International Encyclopedia of Biological Anthropology. New York: Wiley

Rosinger, AY, Ice, GH (submitted). Secondary data analysis to answer questions in human biology. Human Biology Toolkit Series. *American Journal of Human Biology*

Letshwenyo-Maruatona, S.B., Madisa, M., Boitshwarelo, T., George-Kefilwe, B., Kingori, C., Ice, G.H., Bianco, J.A., Marape, M., Haile, Z. (submitted). Association between HIV/AIDS Knowledge and Stigma toward People Living with HIV/AIDS in Botswana. Submitted to the *African Journal of AIDS Research* (revise and resubmit)