

be competency-based and up-to-date, 43 faculty enrolled in higher education at the Masters and PhD level, and national standards for nursing education implemented. Tools developed include a “Campus to Clinic” mentorship guide for HIV care, a clinical simulation training program, a webinar series on curriculum development, and an e-learning module on the Option B+ approach to prevention of mother-to-child transmission of HIV. South to south exchanges have fostered regional dialogue and experience sharing.

**Going Forward:** Continued advocacy for and investment in nursing education and training are required to ensure that enough nurses are fit to practice and purpose.

**Funding:** The President’s Emergency Plan for AIDS Relief (PEPFAR), U.S. Health Resources and Services Administration (HRSA), Cooperative agreement #U92HA12772.

**Abstract #:** 02ETC082

### **The importance of clinical accompaniment for VIA/cryotherapy programs in low and middle income countries**

*M.M. Sullivan; Global Health Delivery Online and Partners In Health, Boston, MA/US*

**Program/Project Purpose:** Cervical cancer is one of the leading causes of cancer mortalities for women in low and middle income countries (LMIC). Because most health infrastructures in these countries are inadequate for paps to effectively detect cervical cancer, visual inspection with acetic acid (VIA) and cryotherapy have proven to be effective tools for detection and prevention in LMICs. From January 2011 to present, Partners In Health (PIH) has supported a VIA/cryotherapy program in the Western Highlands of Guatemala. This program targets women most at risk for developing cervical cancer. With the goal of screening and treating 80% of the target population, PIH is hopeful it can contribute to a decrease in the incidence and mortality of cervical cancer in this region. Because VIA/cryotherapy is effective, not cost prohibitive and has an extremely low complication rate, it can be taught to nurses in rural communities. However, as these were new skills for nurses with often limited education, to bolster program quality, the aim was to also provide regular and on-going clinical accompaniment from a US-based volunteer nurse, rather than rely on a single one-time training as is more commonly done.

**Structure/Method/Design:** Program goals included a series of rigorous trainings. Additionally, the US-based nurse traveled twice yearly for three weeks to evaluate technique and reinforce evidence based practices. PIH has a long-standing relationship with the coordinating local NGO. Nurses and one physician self-selected to participate. The protracted training, regular clinical accompaniment and provision of materials (including cryotherapy equipment), will strengthen local capacity sufficient for this program to be self-sustaining.

**Outcomes & Evaluation:** Five nurses and one physician were trained and certified in VIA and three were also certified in cryotherapy. In all, approximately 375 training hours were received. The US-based nurse spent approximately 20 weeks in country providing clinical accompaniment. Clinical confidence and critical thinking skills progressed over time, and surrounding municipalities now refer patients for management of screening and treatment.

**Going Forward:** The primary challenge is beyond the actual provision of training and accompaniment. Due to program funding, there were sufficient resources to treat women diagnosed with cervical cancer, which will now be difficult to access. Seamless collaboration between

**Funding:** Family Foundation grant.

**Abstract #:** 02ETC083

### **The impact evaluation of health promotion on improving rational use of antibiotics among rural children caregiver: A cluster randomized controlled trial in China**

*W. Sun, Q. Sun; Center for health management and policy, Jinan, Shandong Province, CN*

**Program/Project Purpose:** Inappropriate use of antibiotics is a global public health problem. Rural children are the victims of inappropriate use of antibiotics especially in China rural areas. Using drug for children to a large extent depends on the caregivers. The aim of the project is to evaluate the impact of health promotion on improving rational use of antibiotics among rural children caregiver through a cluster randomized controlled trial in China.

**Structure/Method/Design:** We conducted a cluster randomized controlled trial of a 8 month, village-based health promotion intervention to improve children caregivers’ knowledge, attitudes and practices towards antibiotics. One parent or grandparent of children whom was born between 2007 and 2013 in a family was recruited in study. The software of Optimal Design was used to calculate the sample size taking account of the design-effect. We randomly selected 12 villages from a rural town in Yanggu county, Shandong province, and these villages were randomly assigned to either intervention group or control group, with each group contains 6 villages. In each village, about 60 eligible caregivers were recruited. The intervention group received the health promotion program which included three times lectures about rational use of antibiotics, post some posters in the village, and gave them booklets. All the lectures completed by one pediatrician to insure the unification of quality. Surveys of all subjects were carried out by trained interviewers using self-designed questionnaire before and after the intervention. We also completed some individual in-depth interview to help reveal the real effect of the intervention. The percent of anticipate that inappropriate use of antibiotics was defined as the main outcome indicator. Adjusted chi-square and multivariate statistical analysis were used with intention-to-treat.

**Outcomes & Evaluation:** Up to now, we completed the baseline survey and 8 months intervention. We carried out three times lectures with 82.6% participants attended, distributed 363 booklets, posted more than 100 posters, and interviewed 26 individuals. According to these works we find that only 56.1% caregivers know about antibiotic resistance, 20.0% of them believe that the higher price the better antibiotics, 45.2% of them have ever take drugs interruptedly. So far it’s all going smoothly.

**Going Forward:** The final survey will be carried out in November, and we will compare the differences between the two periods and the intervention group vs control group in children caregivers’ knowledge, attitudes and behaviors. We will try our best to make connection w

**Funding:** China Medical Board (CMB).

**Abstract #:** 02ETC084

### **Rwanda, looking to a healthy future**

*B.J. Swann; Cambridge Health Alliance/Harvard School of Dental Medicine, Somerville, MA/US*

**Program/Project Purpose:** The Human Resources for Health Rwanda (HRHR) represents a new model for a country struggling to