

2013; Heath et al., 2012; Mina et al., 2012; Gortmaker et al., 2011; WHO, 2010).

Although the interrelation between health and sport (including physical activity) seems to be direct, the contradictions within the current practices possibly indicate further implications for both current processes and outcomes. On the other hand, it also provides the potential for reoriented thinking about major global health issues, towards advancing human well-being beyond what could be achieved through an isolated health- or human rights-based approach, or the combination of the two.

Therefore, the principal aim of this synthesis is to contribute toward defining and advancing human well-being and human rights.

Methods: In order to shed light on an inextricable yet neglected connection between Sports, NCDs and human rights, the presenter draws insights by using a method of integrative literature review on the interdisciplinary connection between sports therapy and sport science, human rights law and public health.

Findings: The synthesis of this paper (1) manifests sport as a human right in itself and defines the meaning of sport through its recognition by numerous international human rights instruments (2) explores the linkage between the Right to sport and the right to the Highest Attainable Standard of health and (3) provides evidence of the inextricable connection between NCDs and the Right to Sport.

Abstract #: 1.083_NEP

Primary care screening methods and outcomes among asylum seekers in New York City

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Background: The number of asylum seekers in the US has risen dramatically over the past 10 years. This study aimed to measure the prevalence of selected infectious, non-communicable and psychiatric illnesses within this population and to evaluate the success of a program for asylum seekers in screening for these conditions.

Methods: Two hundred ten new clients from 51 countries, plus Tibet, who were accepted into an urban hospital-based program for asylum seekers from 2012-2014 were included. Screening rates and outcomes for infectious, non-communicable, and mental illnesses were evaluated based on intake data and review of the medical record. Informed written consent was obtained during the intake process.

Findings: 71% percent of patients screened positive for depression (n=144 positive/204 total screened) and 55% screened positive for PTSD (n=111/193), followed by latent tuberculosis (41%, n=65/159), hypertension (10%, n=21/210), hepatitis B (9.4%, n=19/202), and HIV (0.8%, n=1/124). Rates of completed screenings were highest for PTSD, depression, hepatitis B and latent tuberculosis.

Interpretation: This population is at very high risk of PTSD, depression, and latent tuberculosis, and at increased risk of hepatitis B. Screening rates for these diseases were high at this dedicated program for asylum seekers. Point of care testing was more effective than testing that required repeat visits. These findings call for special attention to the primary care needs for asylum seekers in the US.

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Exploring perceptions of short-term international volunteers about best training practices to prevent unintentional harm of participants and recipients: a qualitative study

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Background: Global health short-term volunteerism is growing worldwide and has received both praise and criticism. If non-career international volunteers are improperly trained prior to departure, harm may ensue to both themselves and their recipients. The purpose of this research was to thoroughly investigate preparatory training processes of short-term nurse educator volunteers. The research goal and specific aims of the study were to identify successful global strategies as well as characterize processes which can be used by sending institutions and organizations to: (a) reduce unintentional harm among host communities and volunteers, (b) enhance job performance, and (c) reduce stress and anxiety among short-term volunteers.

Methods: This retrospective, qualitative study used two assessment tools: (a) a self-administered 15-item background questionnaire and (b) semi-structured, one-on-one interview. Both assessments gathered insight from six volunteers on training they received while participating in the Nursing Assessment Program. All interviews took place between December 2014 and January 2015, were audio-recorded, and transcribed to hard copy for analysis. The Human Subjects Division at the University of Washington approved this study under exempt status.

Analysis: A thematic analysis guided by grounded theory was conducted. Five major categories were created. Within those categories, 15 themes emerged and were subsequently validated through inter-rater reliability until saturation was reached.

Results: Social support emerged as a significant finding in the reduction of reported anxiety and stress while job performance improved.

Conclusion: This study demonstrates that due to a lack of experience, some volunteers will still feel unprepared or underprepared to perform their duties effectively despite having received comprehensive training and preparation. Social support experienced by volunteers emerged as an integral instrument that enabled volunteers to overcome their inexperience, decrease stress levels, and enhance job performance while minimizing the risk of harm on the host community. Further research is needed to fully understand the dynamics of effective training and support for all divergent short-term international volunteers.

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