

students on global health rotations each. Since 2012, these rotations have focused on value-adding, mentored scholarly projects, developed with host site collaborators rather than on clinical observation. This change was prompted by the need to find meaningful ways preclinical medical students could engage with international partners while minimizing the supervisory burden on host partners that accompanies preclinical students placed in clinical situations. The mentorship component of this endeavor is critical to successful development, implementation, and appropriate dissemination of the scholarly projects. In 2015 an evaluation of the scholarly training and mentorship component was conducted. This presentation will report the results of the evaluation of the mentorship component, both from the mentors' perspective and the students' perspective and discuss best practices, lessons learned, and future directions.

Structure/Method/Design: The formal evaluation included semi-structured, one-on-one interviews were conducted with mentors and students who participated in the 2015 global health preclinical preceptorship experience. Mentors were asked to describe student preparedness to participate in scholarly activity, challenges faced, and discuss their mentorship experience, both with UTMB medical students and non-UTMB students. Students discussed their thoughts on the mentorship received and asked to provide feedback on changes needed to make the mentorship experience better.

Outcome and Evaluation: Overall, both mentors and students were highly satisfied with the mentorship experience. Mentors suggested additional and new preparation needed for students and outlined challenges to mentoring such as lack of time and student accountability to deadlines. Students reported satisfaction with the opportunity to develop a close relationship with a mentor, both in terms of academic skills and in personal development. The common theme brought up by students was communication. The better the communication, the better the experience. Other students reported that a lack of communication as well as slow response to questions negatively impacted their view of the mentor experience.

Going Forward: Feedback from mentors, students, staff, and host site supervisors has been collated and a revised mentorship plan will be implemented in 2016 to address these challenges.

Funding: None.

Abstract #: 2.064_HRW

Meeting unmet need for family planning in rural Uganda through village health worker distribution of emergency contraception: Assessing attitudes and use

A. Schechter¹, K. Civaldo², G. Paccione¹; ¹Albert Einstein College of Medicine, Bronx, NY, USA, and Doctors for Global Health, ²Boston University School of Medicine, Boston, MA, USA, and Doctors for Global Health

Program/Project Purpose: Doctors for Global Health, in partnership with Kisoro District Hospital, has trained Village Health Workers (VHWs) in Kisoro, Uganda, for 10 years. Once "certified", VHWs serve as primary health providers and educators in their villages, equipped with medications and treatment algorithms. In this rural district, emergency contraceptive pills (EC) are inaccessible. Given our extensive existing

network of VHWs, we assessed their willingness to provide EC to women in their villages and whether this is a feasible way to alleviate the unmet need for family planning in this area.

Structure/Method/Design: We initially introduced EC in lectures at two training days and reinforced the concepts in monthly tutorials in the community. We administered written evaluations before and after each training to evaluate attitudes toward and knowledge about EC and conducted seminars to share experiences, answer questions, and evaluate use of EC. We emphasized that EC is not an abortifacient and the lower effectiveness of EC compared with other contraceptive methods. EC pills (levonorgestrel 1.5 mg tabs) were purchased locally and distributed to VHWs along with a treatment algorithm if they attended the community-based tutorials.

Outcome & Evaluation: Initial familiarity with EC was low and attitudes mixed, with many VHWs stating it is appropriate only for unmarried women or that it could cause fetal harm. However, after tutorials, all acknowledged that "EC is safe for all women", and 36 of 40 reported that they would feel comfortable providing EC to women in their villages. All followed the treatment algorithm correctly. At three months, 9 of 15 VHWs who had received EC supplies reported using it correctly at least once in the village. Clinical supervisors continue to validate use monthly.

Going Forward: VHWs are capable of using antibiotics and anti-malarials, yet their role in family planning has been limited. EC should be an element of a robust family planning system, especially in areas where women are looking for safe and short-acting methods that they can self-administer. Well-trained VHWs are key to overcoming barriers to access and, with adequate education, many are eager to provide this service to their communities.

Abstract #: 2.065_HRW

Development of a global database for health policy and systems research training opportunities

M.J. Schleiff¹, D. Balabanova², T. Tancred², D.H. Peters¹; ¹Johns Hopkins University Bloomberg School of Public Health, Baltimore, USA, ²London School of Hygiene and Tropical Medicine, London

Program/Project Purpose: Capacity-building opportunities need to expand to support the growing field of Health Policy and Systems Research (HPSR). In 2014, the Thematic Working Group (TWG) on Teaching and Learning HPSR in Health Systems Global mapped the existing training opportunities in HPSR around the world. To promote existing training and access to materials, we created an online database of HPSR training, including a repository of open access training materials. This database is a valuable tool for those wishing to participate in, establish, or support HPSR training programs.

Structure/Method/Design: The global mapping study for HPSR training included structured online searches, a global survey of HPSR courses, and key informant interviews with instructors to identify as many existing training opportunities as possible. Building on this study, respondents were asked to provide materials for inclusion into an accessible and easy-to-use online database for students, faculty, institutions, and donors to use in promoting and strengthening their work.