

**Going Forward:** Fostering a learning environment that promotes scholarship and professional development of medical educators will not only build capacity but also improve the overall quality of health care in the Lao PDR.

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### Factors Affecting the Implementation of a Mental Health Training Program in Tunisia: Perspectives of Trainers and Tutors

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**Background:** Due to a shortage and an uneven distribution of mental health specialists in Tunisia, general practitioners (GPs) receive between 30–40% of mental health consultations. However, it is not uncommon for them to lack knowledge and skills to adequately address mental illness. To address this gap, a mental health training based on the World Health Organization (WHO) Mental Health Gap Action Programme (mhGAP) Intervention Guide (IG) was implemented in the Greater Tunis Area of Tunisia. This initiative follows international efforts which seek to build the mental health capacity of non-specialists. We aim to describe emerging factors affecting the implementation of this training, from the perspectives of psychiatrist-trainers and GPs responsible for continuing medical education (tutors).

**Methods:** Semi-structured group interviews were conducted with the psychiatrist-trainers (3) and tutors (5) after the completion of the training. Interviews were audio-recorded, transcribed verbatim, and analyzed using thematic analysis based on Chaudoir et al. (2013)'s implementation model.

**Findings:** Four implementation factors emerged from the data, and were identified as enablers or challenges to implementation. First, enabling *structural factors* include support during the training from the Ministry of Health, the WHO and regional directors. Challenges include the continual presence of mental health stigma. Second, enabling *organizational factors* include strong infrastructure for continuing medical education. Challenges include lack of resources (ex., psychotropic medication) in primary healthcare clinics. Third, both enabling and challenging *provider factors* include the level of GPs' personal motivation to ensure that mental health is integrated in clinical practice. Last, enabling *innovative factors* include the practicality of the training; challenges include scheduling.

**Interpretation:** Factors influencing the implementation of the training helped us understand particularities about the local primary healthcare setting; the perception of mental health in primary care; and issues that may arise when scaling up or sustaining this training.

In addition, these findings will be used to explain the results of an effectiveness trial, which aims to evaluate the impact of the training on GPs' clinical practice.

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### Evaluating Residents' Perceptions of Post-Graduate Training Programs at St Paul's Hospital Millennium Medical College (Addis Ababa, Ethiopia)

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**Program/Project Purpose:** Physician migration remains a limiting factor in healthcare delivery throughout Ethiopia despite efforts to increase the number of physicians. University of Michigan Health System (UMHS) efforts in Ghana have provided a highly effective model for physician retention through postgraduate training programs. In 2012, a similar partnership was launched with St. Paul's Hospital Millennium Medical College (SPHMMC) in Ethiopia.

**Structure/Method/Design:** The purpose of this study was to assess perceptions and effectiveness of postgraduate training programs at SPHMMC, defined in terms of ensuring retention and adequately preparing physicians for satisfying national careers. Surveys would also evaluate for what types of in-country opportunities would increase desire to continue practicing in Ethiopia. Anonymous surveys were distributed to residents in the departments of Internal Medicine (IM), Pediatrics, Obstetrics and Gynecology, and Surgery at SPHMMC. Thematic data analysis was completed in Qualtrics.

**Outcome & Evaluation:** Compared to 40% medical students surveyed in their final year of training, no residents of the 39 surveyed (50% response rate) had plans to leave Ethiopia. While some were unsure (N=10, 26%), most planned to stay for their whole career (N=29, 74%) to improve healthcare delivery, serve as role models, and stay near family. Those unsure ranked higher salaries equally with opportunity to utilize unavailable technologies, followed by desire for specialty training. Many cited UMHS partnership as a reason to train at SPHMMC (N=15, 40%), and agreed or strongly agreed that their training would offer a satisfying career (N=25, 64%). A majority of those who did not agree were IM residents, with only one agreeing (N=11, 9%). Of the other programs, 24 residents agreed (N=28, 86%). Overall, residents were unsatisfied with research (N=23, 59%) and leadership training sessions (N=33, 94%), as well as other learning resources including simulation centers, computers, and reference material.

**Going Forward:** In order to ensure that physicians are equipped with the skills necessary for a satisfying career in Ethiopia, the partnership should be expanded to include additional research and leadership trainings. Efforts should also focus on improving the existing learning resources, and continuing to develop subspecialty training