

2019 Eghi Project Proposals

As of 11/09/18

Brazil (still seeking student in law, Laney, nursing, med or MDP)
Chile (still seeking student in women's studies, sociology/anthropology, or theology)
Ghana
Haiti
India (still seeking student in anthropology/sociology, economics, business, nursing, or PA)
Mexico
Mexico
Rwanda
USA
Various CHAMPS Sites
Zimbabwe (still seeking student in business or law)
Atlanta
Atlanta

BRAZIL

Country/City: Rio de Janeiro, Brazil

Key Terms: Violence against Women, Health Policy, Femicides, Intimate Partner Violence, Law Enforcement, Legislation, Risk Assessment

Faculty Name: Dabney P. Evans, PhD, MPH

Faculty School/Department: Rollins School of Public Health/Hubert Department of Global Health

Contact: dabney.evans@emory.edu; 404-727-3061

Project Name: Brazilian Violence against Women Laws: A comparison of media frames and women's experiences using the legal system

Project Dates: Summer 2019

Language Requirement: Oral and written Portuguese preferred, but not required

Partner Organization(s): 1st Court of Domestic and Family Violence against Women (I CDFVW) in Rio de Janeiro - Brazil.

Project Description: Brazil ranks fifth in the world for female homicides [1] of which more than a third are the result of intimate partner violence (IPV). [2-3] IPV results in significant negative health outcomes and in the case of femicide, mortality. [3] The Maria da Penha (MDP) Law – enacted in 2006 - codified, criminalized and established penalties for Violence against Women (VAW) and established formal support systems for abused women. [4] In 2015, Anti-Femicide legislation was passed further strengthening existing law by criminalizing gender-based killings. [5] However, there is insufficient evidence relating to justice and law enforcement interventions and no data on their effectiveness in preventing or responding to VAW. [6] To address this gap, the proposed study will evaluate women's satisfaction of the implementation of the VAW laws and their case outcomes by relative risk of femicide as measured by local risk assessment protocols and the Danger Assessment tool.

Student Responsibilities:

Law Student: Will work with the staff of the Rio de Janeiro's 1st Court of Domestic and Family Violence to identify women for inclusion in qualitative interviews about their experience seeking and receiving legal support in response to intimate partner violence. Student may also conduct in-depth interviews with women identified for inclusion in the study. Depending on student interest and skill key informant interviews with legal and justice sector professionals may also be considered under this student's scope of work as well as a review of the current processes for the identification and referring system for women at high risk of femicide, known as Projeto Violeta.

Medicine, Nursing or other health sciences: Student will work with the staff of the Rio de Janeiro's 1st Court of Domestic and Family Violence to identify women for inclusion in qualitative interviews about their experience seeking and receiving legal support in response to intimate partner violence. Student may also conduct in-depth interviews with women identified for inclusion in the study. Depending on student interest and skill key informant interviews with health and social support professionals may also be considered under this student's scope of work as well as a review of the current processes for the identification and referring system for women at high risk of femicide, known as Projeto Violeta.

Anthropology or Sociology: Student will work with the staff of the Rio de Janeiro's 1st Court of Domestic and Family Violence to identify women for inclusion in qualitative interviews about their experience seeking and receiving legal support in response to intimate partner violence. Depending on student interest, this student's scope of work may also include a review of the current processes for the identification and referring system for women at high risk of femicide, known as Projeto Violeta. This student may also participate in quantitative data collection related to validation of the Danger Assessment instrument.

Film and Media Studies: Student will work in coordination with Agencia Patricia Galvao to perform a narrative analysis of the representation of femicide and VAW laws in print media between March 2015-March 2018 to determine the frames surrounding VAW victims, perpetrators, and the perceived efficacy of Brazilian VAW laws.

Preferred qualifications:

Oral and written Portuguese preferred
Strong oral and written communication, as well as interpersonal and organizational skills.
Willingness to work on a team in a middle-income country.
The Danger Assessment experience working with quantitative data is preferred

Students from these schools are preferred:

Law, Medicine, Nursing or other health sciences, Anthropology, Sociology, Film and Media Studies

Additional Project Info:

How to apply: Interested candidates should contact Dr. Dabney Evans, dabney.evans@emory.edu to set up a time to meet to discuss the project.

CHILE

Country/City: Santiago, Chile

Faculty Name: Priscilla Hall CNM PhD

Faculty School/Department: Nell Hodgson Woodruff School of Nursing

Contact: pjhall@emory.edu

Project Name: Assessment and Screening for Intimate Partner Violence through the Lens of Midwives in Santiago, Chile

Project Dates: Summer 2019

Language Requirement: Spanish, fluent or nearly fluent

Partner Organization(s): Lorena Binfa MSP PhD; Department of Health Promotion for Women and Newborns, WHO Collaborating Center, University of Chile, Santiago

Project description: This project is a follow up to a previous study, conducted in 2017, to assess the prevalence of intimate partner violence in two primary care sites in the northern sector of the city of Santiago, Chile and to explore the midwives' experience of screening for intimate partner violence in these settings. One significant finding of the study was that few women seek assistance for IPV, despite the availability of resources and referrals. This project will follow up on this finding and investigate the factors contributing to poor follow up. Additionally, this proposed study will identify barriers and facilitators women experience when seeking support for intimate partner violence.

Students from these schools are preferred: Nursing, Public Health, Medicine, Anthropology, Law, and Women's Studies

Student Responsibilities: Qualitative research design, proposal development, data collection, in depth interviews, transcription/translation, qualitative analysis, and dissemination

Preferred qualifications: Qualitative research design, data collection, analysis

Additional Project Info:

Student living quarters and meals during their time on site - Previously, student teams have sought their own accommodations close to the University of Chile via Air Bnb or similar arrangements. The cost for accommodations for the 2017 trip was approximately \$900.00 per student for the 6-week stay.

Transportation - Public transportation to navigate the city while in country in previous years was approximately \$100.00 per student. . The cost of air travel to Chile is approximately \$1,300.00

Immunizations - recommended vaccines per the CDC Travel Advisory Website: measles-mumps-rubella (MMR) vaccine, diphtheria-tetanus-pertussis vaccine, varicella (chickenpox) vaccine, polio vaccine, and flu shot, hepatitis A, hepatitis B typhoid, rabies.

GHANA

Country/City: Cape Coast, Central Region, Ghana

Key Terms: Family planning, postpartum family planning, long acting reversible contraceptives

Faculty Name: Dr. Roger Rochat

Faculty School/Department: Rollins School of Public Health

Contact: rrochat@emory.edu

Project Name: 'Acceptability, access and use of long acting reversible contraceptives (LARC) among postpartum women in Cape Coast Metropolitan Area'.

Project Dates: Summer 2019

Language Requirement: English

Partner Organization(s): National Population Council (NPC), Ghana, Executive Director (ED)

Project description: The project will collect and analyze data on knowledge, access, acceptability and use of long acting reversible contraceptives (LARC) among postpartum women. It will also measure service providers' knowledge and skills level. Lastly, it will examine the preparedness of selected facilities to provide LARC services.

Student Responsibilities: The role of the students will be to interview and observe caregivers and postpartum women during postnatal care. They will be required to interview postpartum women on their knowledge, access, and acceptability of LARC. They will also assess the knowledge of caregivers on family planning and the quality of counseling from both the client and caregiver points of view.

Preferred qualifications: Both under-graduate and graduate students
Students from these schools are preferred: Public health, medicine, nursing, law and business

Additional Project Info: There has been a decline in the duration of postpartum insusceptibility (the period after childbearing when a woman cannot become pregnant because she is not menstruating/ovulating or abstaining from sex) in Ghana over the past years. The reasons for this include changing behavior regarding breastfeeding and abstinence. This places women at the risk of unintended pregnancies.

The project aims to highlight the barriers to the uptake of family planning in the postpartum period, particularly, long acting reversible contraceptives (LARC) for which the unmet need is greater; and the preparedness of service providers and facilities to provide LARC services.

HAITI

Country/City: Blanchard, Port au Prince, Haiti

Key Terms: Medical formulary, database creation, patient tracking

Faculty Name: Tamara New, MD

Faculty School/Department: School and Department at Emory SOM: Pediatrics- Hematology/Oncology

Contact: Tamara.New@choa.org ; 404-785-3634 or 646-286-8496

Project Name: Multi-disciplinary evaluation of the impact of the hypertension, diabetes and sickle cell programs within the medical clinic/community at Partners in Development, Haiti

Project Dates: Summer 2019 (June 3-July 12th)

Language Requirement: English, not required but helpful to have some French/Creole

Partner Organization(s): Partners in Development (PID)

Project description: Partners in Development (PID) is a nonprofit, non-governmental organization based out of Ipswich, MA – they have volunteer programs in Haiti, Guatemala, Mississippi and Peru. At the program in Haiti, a free medical clinic staffed during normal work weekdays -year-long by Haitian workforce. Periodically throughout the year, volunteer groups come and are able to expand the medical services provided. In this clinic in Blanchard, Haiti, they have a hypertension program, a diabetes program and a program for sickle cell. Patients who are identified as having one of these conditions are able to attend educational classes to learn how to take their medicines, watch their diet and are able to obtain their medicines for free or a nominal fee. A Haitian educator reviews their numbers/symptoms and alerts the Haitian physician on duty if the management is not working and needs to adjustment or if the patient has symptoms that may need addressing. The purpose of this project would be to:

- Create a database of the patients in this program
- Track the treatments prescribed
- Help identify a method of tracking when patients are due to be seen (typically they are seen once a month and receive a 30 day supply of medicines)
- Inventory alerts to help the clinic to remain stocked for the patients enrolled in the program as well as for addition of new patients
- Track improvements made based on things learned in the classes or through consultation with the educator or the physician.

Students from these schools are preferred: Medicine, Public Health, and Nursing

Student Responsibilities: Create a tracking mechanism and to assist in updating the hypertension, diabetes and sickle cell/anemia portions of the medical formulary. Creating and updating patient database. Working with the Haitian clinical team to identify barriers to care, adherence, propose culturally/environmentally reasonable approaches to improved participation, and follow up of individuals in these programs.

Preferred qualifications: Basic excel recommended or other database experience.

Additional Project Info:

On-site mentors (only Sandra full time on site – others periodically throughout the year):

Gale Hull, DHL, President and Co-Founder, Partners in Development Email: gale@pidonline.org

Sandra Noel, field director, Partners in Development Email: Sandra@pidonline.org

Tali Marcelin, Assistant Director, Partners in Development Email Tali@pidonline.org

There are living quarters on site with bed, bathroom and meals. Transportation to and from the clinical site is provided. Hepatitis A vaccination recommended and malaria prophylaxis is required.

Benefit to the community – providing the patients in these programs with solutions to barriers and providing the providers caring for these patients tangible ways to track them to monitor the impact of the interventions.

INDIA

Country/City: Karnataka State, India

Faculty Name: Solveig A. Cunningham, PhD

Faculty School/Department: Rollins School of Public Health

Contact: sargese@emory.edu

Project Name: Drivers of Food Choice in the Context of the Nutrition Transition

Project Dates: Summer 2019

Language Requirement: Kannada or Hindi would be useful, but not required

Partner Organization(s): Shailaja Patil, MD; BLDE University Shri B. M. Patil Medical College

Project description: Overweight is emerging globally as a contributor to morbidity and mortality along with underweight. This phenomenon attributed to the “nutrition transition”, which entails changes in food availability with urbanization and economic growth. In India, one of the most rapidly urbanizing nations, under-nutrition continues to exist amid growing over-nutrition, resulting in >30% of the population experiencing one type of unhealthy weight. Understanding food choice in this context of India’s dual burden of underweight and overweight is a priority with relevance for the health of nearly one fifth of the world’s population. This project will explore food choice in a remote, under-developed district in Southern India that globalization is just reaching. We will build on a cohort study that we established, with collaboration from a previous GHI team. The goal is to understand how food availability and food choice change during the nutrition transition.

Students from these schools are preferred: Public Health, Nutrition, Prevention Science, Anthropology, Sociology or Economics, MDP

Student Responsibilities: Public Health, Nutrition, Prevention Science

The student will participate in developing survey instruments and collecting data. The project will include a component focused on young consumers (adolescents) and one focused on local producers (farmers) and team members may decide which component to lead. **Preferred qualifications:** Survey Methodology (GH502) recommended.

Anthropology, Sociology or Economics

The student will participate in developing survey instruments and collecting data. The project will include a component focused on young consumers (adolescents) and one focused on local producers (farmers) and team members may decide which component to lead. **Preferred qualifications:** Training in data collection methods or experience in data analysis recommended.

Business, Economics, Nursing, or Physician's Assistant

The student will contribute to developing an intervention or program for improving the marketing of nutritious and local foods. **Preferred qualifications:** Training or experience in marketing, health education or program development recommended.

Public Health, Business, Sociology, or Economics

The role of this student will be to lead data quality, management, entry, and analysis. **Preferred qualifications:** Training in data collection methods or experience in data analysis recommended.

Additional Project Info:

Living quarters and meals during their time on site? The university includes student housing and other housing options. Students on the previous team rented a house together. Housing and living expenses are quite low in this remote part of India.

Transportation? Local transportation is on foot or by hired car with driver. The driver is cheap.

What tangible benefit will the community receive from this project?

The location of the study is a remote area that is just starting to see a massive inflow of global products, many of them unhealthy but with flashy packages. This project will help identify ways in which local producers can compete with global foods and thereby maintain for the population access to healthier local products.

Will the results potentially be publishable in a peer-reviewed journal?

The work is intended to result in publications in peer-reviewed journals. The mentor and the team will work together on manuscripts and co-author articles.

MEXICO

Country/City: Oaxaca, Mexico

Faculty Name: Dr. Roger Rochat

Faculty School/Department: Rollins School of Public Health

Contact: rrochat@emory.edu

Project Name: Empowering Indigenous Adolescent Pregnant Women about Sexual and Reproductive Rights and Gender Equality to Decrease Maternal Mortality Rates.

Project Dates: Summer 2019

Language Requirement: Spanish, basic or intermediate level

Partner Organization(s): Zenaida Martinez Blanco, RN, LCCE; NGO /Maternas Oaxaca A. C

Project description: We are working with indigenous groups in Oaxaca Mexico to address the issues around gender equality, sexual and reproductive rights among adolescents. The prenatal control in these groups is low because the women need empowering, information, evidence about human right, women and newborn rights. In the Sierra Mixe, the women's Cosmo vision and determinants of health (poverty, machismo, discrimination, access to health services) are factors that have influence in adolescent's women health. We are promoting adolescent's indigenous health to decrease maternal mortality rate and unplanned pregnancy issues. We are looking for students and faculty multidisciplinary team interested in developing research, training strategies, and survey data collection with pregnant adolescents who participated in the gender training. The purpose of this opportunity is to build on knowledge from this intervention to future understanding of impact and complete adequate strategies.

Student Responsibilities: To determine basic skills and background. This project has opportunities for research and training interventions, development strategies with communications from team to focus groups and cultural worldwide. Self-motivated, students should be open minded, organized, exhibit culture humility, able to work with indigenous groups or diverse populations.

Preferred qualifications: The project seeks members with backgrounds/training in health education, anthropology, nursing, medicine, and public health

Additional Project Info: Oaxaca is a resource full city. Living expenses average \$ 150 or \$200 dollars rent for one living or apartment per month (include water, electricity, and sometimes internet). Transportation provided to the focus groups and community.

MEXICO

Country/City: Oaxaca, Mexico

Faculty Name: Dr. Roger Rochat

Faculty School/Department: Rollins School of Public Health

Contact: rrochat@emory.edu

Project Name: Educational Technologies and Innovative Pedagogical Methods in the Training of Human Resources in Health to Minimization, Segregation and Recycling hospital Non- risk Waste ² in HRAEO (High Specialty Regional Hospital of Oaxaca—Spanish abbreviation)

2. Non – risk waste is that which is comparable to normal domestic garbage and presents no greater risk, therefore, than waste from a normal home i.e. Paper - Packaging - Food Waste.

Project Dates: Summer 2019

Language Requirement: Spanish, basic or intermediate level

Partner Organization(s): Erick Azamar, DSP; Zenaida Martínez, RN,GHc; Veronica Olvera Sumano, MD, MPH - Secretariat of health (Mexico). Institution: High Specialty Regional Hospital of Oaxaca

Project description: A public environmental health crisis, hospitals generate significant environmental health impacts both upstream and downstream from service delivery, through the natural resources and products they consume, as well as through the waste they generate, HRAEO is not an exception. Mexico needs to address this issue in most hospitals. Join a multidisciplinary team for a green and healthy hospital in Oaxaca, Mexico. We are interested in developing a dynamic cross-discipline team to conduct the management programs a training with educational technologies and innovate pedagogical methods all the human resources in health to minimization, segregation, and recycling hospital non-risk waste to be a steward of its surrounding communities.

Preferred disciplines: Public/global health, Infectious Disease, Environmental Health, Behavioral Sciences and Health Education, Business, Nursing, and Chemistry

Additional Project Info: Oaxaca is a resource full city. Living expenses average \$ 150 or \$200 dollars rent for one living or apartment per month (include water, electricity, and sometimes internet). Transportation provided to the focus groups and community.

RWANDA

Country/City: Gasabo District, Rwanda

Faculty Name: Patricia Moreland RN, CPNP, PhD

Faculty School/Department: Nell Hodgson Woodruff School of Nursing, Lillian Carter Center for Global Health and Social Responsibility

Contact: patricia.jean.moreland@emory.edu

Project Name: Determinants of delayed first presentation to antenatal care in rural Rwanda.

Project Dates: Summer 2019

Language Requirement: English or French

Partner Organization(s): Etienne Nsereko, MSc Nursing, MSc Epidemiology; University of Rwanda School of Public Health

Project description: Maternal mortality is a major global health issue. Rwanda has been identified as one of the sub-Saharan African countries with maternal mortality rates among the highest in the world (WHO). According to the latest data reported in the Rwanda Demographic and Health Survey (2014-2015), only fifty-six percent of women made their first visit before the fourth month of pregnancy. Evaluating the relationship between sociodemographic factors, cultural perceptions, health behaviors and delayed antenatal care may identify a modifiable risk factor to address delayed antenatal care.

Objective: To identify the socio-demographic, cultural perception, behavioral factors, and health system factors related to delayed attendance to ANC in the rural area of Rwanda.

Aim 1: To evaluate sociodemographic factors related to delayed first presentation to antenatal care.

Aim 2: To describe cultural perceptions and behavioral factors associated with delayed first presentation to ANC.

Aim 3: To identify health system factors related to delayed ANC care.

Methods: A cross-sectional, mixed methods study will be conducted in four health centers in the Gasabo District of Rwanda, among women 18-49 years of age, who gave birth 1-12 months prior to data collection. Women will be recruited from the pediatric immunization clinic. Data will be collected using a pre-piloted structured questionnaire on socio-demographics, behavior, and practice with regards to ANC. Qualitative interviews will be conducted in Kinyarwanda among 10-12 participants using a female Rwandan researcher to assess cultural perceptions of attending ANC. A review of the medical record will be completed to determine the date of first ANC visit and number of antenatal visits during pregnancy of participants.

Roles of Students in Project:

Medical record data collection from charts at four Health Centers in Gasabo District
Recruitment and administration of quantitative survey instrument to women at immunization clinic.
Qualitative interviews among 10-12 women using a semi-structured interview guide with Rwandan female student. Interviews will be conducted in Kinyarwanda, the native language of Rwanda.

Preferred qualifications: SPSS recommended; previous experience doing qualitative interviews recommended

Additional Project Info:

Round trip ticket \$1400
Rent/month \$200 month
Transportation \$60 month
Food \$300 month
Phone/Internet \$10.00
Translation services \$200

Immunizations recommended or required for work at this site:

Yellow fever-required
Typhoid-required
Hepatitis A-required
Hepatitis B-required
Malaria medication while in Rwanda-required
Cholera

UNITED STATES

Country/City: American Southwest (specific locations TBD, based on partners' locations)

Faculty Name: John Blevins, Th.D.

Faculty School/Department: Rollins School of Public Health, Hubert Department of Global Health; Laney Graduate School; Graduate Division of Religion

Contact: john.blevins@emory.edu

Project Name: Bridges, Not Walls: Faith-Based Support to Immigrants Coming into the United States along the US-Mexico Border

Project Dates: Summer 2019

Language Requirement: Fluency in Spanish would be highly useful, but not required to contribute to the team.

Partner Organization(s): Field Officers working with American Jewish World Service and with affiliate religious organizations/faith communities. Their work would be coordinated through Ruth Messinger, Executive Director, American Jewish World Service

Project description: This project will include interviewing religious leaders and faith-based organizations working to offer support to immigrants along the Mexico-US border, seeking to understand the current priorities of immigrants seeking to enter into the United States, the current social-political issues that impact services and US policies for immigrants, the influences of religion in relation to the social-political context, and the ways in which religious organization working in this context negotiate these challenges as they offer services to immigrants in the US or seeking to enter into the US. The project consists of qualitative methods with observations and semi-structured interviews and focus groups. Observations would occur in local organizations and religious communities; interviews would be carried out with various key informants, including (but not limited to) religious leaders, organization leaders, and immigrants receiving support from organizations.

Students from these schools/disciplines are preferred: Religious Studies, Theology, Public Health, Social Sciences, and Development Practice. This project is limited to students enrolled at Masters or Doctoral level.

Role of students in project:

- Conducting literature review/scoping study—this work should reflect findings and key questions from the areas of study named above.
- Develop conceptual framework for carrying out the work, in collaboration with on-site mentors. The framework should reflect findings and key questions from the areas of study named above.
- Develop interview guides for qualitative interviews, in collaboration with on-site mentors
- Gain IRB approval
- Conduct on-site research under supervision of site mentors

- Complete analysis of findings. This analysis should address the key conceptual and research perspectives of the areas of study named above.
- Provide summary report to on-site mentors and organizations.
- Explore opportunities for further research and/or publication.

Preferred qualifications: Priority given to student(s) with previous background working on immigration and border migration within the US.

VARIOUS CHAMP SITES

Country/City: In one or more of the seven countries that comprise the CHAMPS network: Bangladesh, Ethiopia, Kenya, Mali, Mozambique, Sierra Leone, or South Africa

Key Terms:

Faculty Name: John Blevins, Th.D.

Faculty School/Department: Rollins School of Public Health, Hubert Department of Global Health; Laney Graduate School; Graduate Division of Religion

Contact: john.blevins@emory.edu

Project Name: Building Support for Improved Maternal and Child Health in the CHAMPS Networks: Community Perspectives and Priorities [Child Health and Mortality Prevention Surveillance (CHAMPS)]

Project Dates: Summer 2019

Language Requirement: It is not expected that students will be fluent in the local languages where CHAMPS sites work

Partner Organization(s): Every CHAMPS site has an in-country office. This office would serve as the primary organization. The specific name will be dependent on the country in which a given team works.

Project description: The CHAMPS project is a longitudinal project designed to identify the causes of under-five (U5) mortality in parts of the world with annual rates of U5 mortality of at least 50/1000. CHAMPS is currently working in seven countries. In CHAMPS, the causes of U5 mortality are determined through rigorous, innovative procedures to collect samples of tissue and bodily fluids. These procedures can be in tension with cultural and religious norms and such tensions must be addressed, not only to carry out the first phase of surveillance but also to begin to build trust in local communities. As data from surveillance is generated, it will be used to inform national, regional, and local plans for data-to-action that will result in new programs and policies being implemented through the ministries of health in these countries in collaboration with national public health institute and a number of other partners from the civil society.

This project will work with the social-behavioral science (SBS) teams in the countries to identify the communities' priorities related to maternal and child health in general, identify the linkages between those priorities and the findings from surveillance, build support for CHAMPS by developing programs that reflect and address community priorities, and establish linkages between community perspectives and plans for data-to-action.

Students from these schools/disciplines are preferred: Religious studies or theology, public health, social sciences, development practice. This project is limited to students enrolled at Masters or Doctoral level.

Role of students in project:

- Conducting literature review/scoping study—This work should reflect findings and key questions from the areas of study named above.
- Develop conceptual framework for carrying out the work, in collaboration with on-site mentors. The framework should reflect findings and key questions from the areas of study named above.
- Develop or adapt interview guides for qualitative interviews, in collaboration with on-site mentors
- Gain IRB approval or amend existing IRB protocol to include this work.
- Conduct on-site research under supervision of site mentors
- Complete analysis of findings. This analysis should address the key conceptual and research perspectives of the areas of study named above.
- Provide summary report to on-site mentors and organizations.
- Explore opportunities for further research and/or publication.

Preferred qualifications: None required

ZIMBABWE

Country/City: Zimbabwe

Key Terms: Health Policy, Cervical Cancer Diagnostics, Sexual/Reproductive Health

Faculty Name: Dr. Robert Bednarczyk

Faculty School/Department: Rollins School of Public Health

Contact: robert.a.bednarczyk@emory.edu

Project Name: Decreasing cervical cancer related mortality and morbidity in Zimbabwe by offering a see-and-treat method of diagnosis and countrywide implementation of the HPV vaccine.

Project Dates: Summer 2019

Language Requirement: English

Partner Organization(s): Georgia Institute of Technology

Project description:

Aim: To understand better the problems the Zimbabwean healthcare system faces in cervical cancer detection and treatment, as well as bring country-wide implementation of the HPV-vaccine.

In order to decrease cervical cancer related mortality and morbidity in Zimbabwe, we will be focusing on three activities to fulfill the aim here above stated. First, the team will use qualitative and quantitative methods to assess the issues the Zimbabwean healthcare system faces through the means of interviews, data acquisition, and relationship building with Government officials. Secondly, the team will iteratively prototype different design solutions in order to provide a reliable and cost-effective "see-and-treat" method of detection and treatment. The team will be conducting research on implementation of a solution. This consists of regulatory affairs, clinical trials, and health extension workers training programs in order to ensure the success of the proposed solution. Lastly, the team will be working with governmental training programs and regulatory affairs in order to implement a countrywide HPV vaccination program that is sustainable.

The 2-part project includes the design and implementation of an HPV-test, and the introduction of a vaccination program in the districts.

Student Responsibilities:

- Initiate conversation and relationship building with the Zimbabwean doctors and government as soon as team is assembled
- Qualitative interviews of doctors, nurses, and patients who have experience with the current diagnostic procedures once on site
- Quantitative research of prevalence, incidence, costs associated with cervical cancer diagnostics and treatment
- Aiding in implementation efforts of the HPV vaccine and training programs for healthcare staff in Zimbabwe

Preferred qualifications:

- Interest in cancer diagnostics, public health, health trainings, sub-Saharan Africa
- Interest/experience in qualitative data collection and analysis; ethnographic research experience preferred
- Interest/experience in low-resource medical device design
- Interest/experience in training and/or device implementation in a Governmental scheme
- Strong written and oral communications; Manuscript development experience preferred.
- Interest/experience in business and economic growth of an area

Students from these schools are preferred: College of Arts & Sciences (junior or senior only), Laney Graduate School, Law, Rollins School of Public Health, School of Medicine, School of Nursing

Additional Project Info: Cervical cancer is on track to overtake childbirth as the developing world's largest killer of women. It takes the lives of 266,000 women every year and this number is rising, with projections suggesting this figure could hit 416,000 by 2035 if we do nothing to tackle it. This is a cancer that disproportionately affects the world's poorest countries, with low- and middle-income countries accounting for more than 90% of all deaths. The five countries with the highest incidence of cervical cancer are all in sub-Saharan Africa – Malawi, Mozambique, Comoros, Zambia and Zimbabwe. According to the World Cancer Research Fund, Zimbabwe has the fourth highest burden of cervical cancer in the world, moving up from fifth place in 2016. Over a thousand women die from the disease in the country every year, making it the most common cause of cancer in women in the country.

It is estimated that 2270 women are diagnosed with cervical cancer in Zimbabwe annually and a mortality rate of 64% has been recorded. Access to screening, early detection, diagnostic and palliative care services is limited due to resource constraints as well as due to being centralized. Chemotherapy and radiation treatment is currently only available at two locations in the country, the capital Harare and the next largest city, Bulawayo. The centralized nature of the services also poses transport and accommodation problems, leading to treatment delays. Non-governmental organizations do complement government cancer control activities but unfortunately, they too are centralized. Additional support is received from international organizations such as the United Nations. Additional problems include a shortage of pathologists, radiologists and surgical oncologists in government service and again, most are available in the cities and in private practice, compromising access and early diagnosis. With regard to costs, many patients cannot afford the fees for services such as screening, biopsy, staging investigations and chemotherapy, and palliative care medication. Social welfare funds are inadequate and selective. Only a minority of patients have health insurance and, in many situations, reimbursement for service provision is rationed.

There is no national HPV vaccination program to prevent cervical cancer, however, there were two pilot programs being run in three different towns Marondera, Beitbridge and Centenary. These pilot programs were launched in 2011 but unfortunately were successful until only 2014. They aimed to target 10-year-old girls in the school system. HPV vaccination is the only way to completely eradicate cervical cancer and a sustainable program ensuring vaccination of the next generation is necessary.

To aid these issues, we are designing;

1. A **cost-effective HPV test** that will bypass the need for biopsies, a cytopathologist and a picture-analysis by the doctor by offering accurate prognosis of high-risk HPV, drastically increasing the risk for cervical cancer
2. An implementation program for HPV vaccination that will go in effect in all districts of the country, vaccinating young girls at first.

How to apply: Interested candidates should contact Leyla Larsson (llarsson3@gatech.edu) to set up a time to meet to discuss the project.

ATLANTA

Country/City: Atlanta, GA

Key Terms: Women's health, maternal health, pregnancy, health communications, social marketing

Faculty Name: Stephanie Holt, MD

Faculty School/Department: Emory School of Medicine, Department of Pediatrics

Contact: stephanie.addison@emory.edu; 404-778-1605

Project Name: Healthy Pregnancy Spacing and Social Marketing

Project Dates: Summer 2019

Language Requirement: Oral and written Spanish a plus, but not required

Partner Organization(s): Urban Health Initiative

Project Description: This project is interested in testing knowledge around pregnancy spacing and developing effective messages and message delivery strategies for target audiences. The WHO recommends 18 months between the birth of one child and the conception of a second, though many people are unaware. UHI is interested in determining how to package this message for various key audiences. It will first test knowledge around pregnancy spacing in various key populations, using focus groups, surveys, and/or in-depth interviews. The results of this first stage of research will be used to identify key messages among the various populations. The project will then undergo a second round of health communications and social marketing research to determine how to best present the key messages identified in stage one. These messages will then be packaged and disseminated according to project results. This summer field experience offers the opportunity to plan a multi-year project and conduct formative research for a future intervention.

Student Responsibilities:

Public Health Student: Plan, prepare, and execute focus groups to determine key pregnancy spacing messages.

Anthropology or Sociology: Work with Public Health student on qualitative research to flesh out questions of how the community makes decisions regarding pregnancy spacing.

Medicine, Nursing or other health sciences: Offer insights to the medical field and develop strategy for working with medical professionals to deliver these messages.

Business student: Plan and package social marketing strategies for healthy pregnancy communications.

Preferred qualifications:

Oral and written Spanish a plus
Strong oral and written communication, as well as interpersonal and organizational skills.
Willingness to work on a team
Qualitative research methods knowledge or experience
Experience with communications or social marketing

Students from these schools are preferred:

Public Health, Medicine, Nursing or other health sciences, Anthropology, Sociology, Business

How to apply: Interested candidates should contact Nicole Maloney, nicole.taylor.maloney@emory.edu to set up a time to discuss the project.

ATLANTA

Project Title: The Global Health Primer

Project Lead: Theresa W. Gillespie, PhD
Professor, Department of Surgery & Department of Hematology & Medical Oncology
Emory University School of Medicine & Winship Cancer Institute
tgilles@emory.edu

Sponsors: Emory Institute for Drug Development
Project funded by a grant from the Bill and Melinda Gates Foundation

Key Terms: Data management, cancer care in LMIC, informatics and information technology, research and development and medicinal chemistry related to new drugs in global cancer care

Looking for students interested in global health related:

- Cancer care in under-resourced countries
- WHO policy on Essential Medicines in LMIC
- Large database development and sustainability
- Business aspects of non-profit and for-profit organizations and government ministries related to drug development in LMIC
- Application of information technology and informatics expertise to global health issues, including website development, database development/expansion (SQL).

Focus of Student Experience:

Do you want to gain experience in global health projects but cannot travel to an international site for an extended period?

As part of the Global Health Primer (<http://www.globalhealthprimer.emory.edu/>) Project Team:

- Learn about cancer care in LMIC
- Learn how medicinal chemistry and drug development might help treat cancer as well as increase compliance with cancer therapy in low-resourced areas
- Conduct literature reviews and identify anti-cancer agents that are cost-effective options for cancer therapy
- Application of the WHO policy on Essential Medicines, including cancer drugs, in LMIC
- Design and expand the current website
- Update and enhance the SQL database that populates the website

Students must commit to work two or more hours/week with the Global Health Primer for one or more semesters and lead efforts on key aspects of project after completing training.

Areas of expertise/majors/schools that may be of particular relevance include:

- Chemistry (Emory College)
- Information technology/informatics/web design (Ga Tech, Emory)
- Database development and expansion (SQL) (Ga Tech, Emory)
- Public Health Policy (Public Health)

- Cancer Care in LMIC (Medicine, Nursing, Public Health, and undergrad majors)
- Cost effectiveness analysis (MSPH, Public Health Policy, Economics, Business)
- Literature reviews (all majors, all schools)