Health Systems and Human Resources

January – February 2017: 117-155

CHWs, with different life experiences, are motivated in the work because they find personal fulfillment in ways previously unavailable to them. They are also motivated by the perceived improvement in health and economic security of their families and communities. CHW motivation can be viewed through the construct of betterment of self, family and community.

**Interpretation:** This study illuminated important motivating factors which lead to job fulfillment for CHWs, all of which are intertwined and drive towards betterment. Financial incentives are important, but there are other, equally important motivating factors. In building a robust CHW program, attention needs to be paid to supporting personal growth, economic support, and engagement with the community. By recruiting CHWs from within the community and providing ongoing training and supervision, Liberia can take an important step forward in strengthening its health system.

**Source of Funding:** None.

Abstract #: 2.045\_HHR

## Creating a Bidirectional Culture of Safety in Global Health Electives Via Comprehensive Safety Protocols

M. Sadigh<sup>1</sup>, S. Parve<sup>2</sup>, L. Moody<sup>2</sup>, M. Sadigh<sup>3</sup>; <sup>1</sup>University of Vermont, Burlington, USA, <sup>2</sup>Western Connecticut Health Network, Danbury, USA, <sup>3</sup>Western Connecticut Health Network/Robert Larner College of Medicine, Danbury, USA

**Program/Project Purpose:** Despite refinement of selection tools and pre departure orientations in response to rising participation in global health electives, the development of safety protocols trails behind as attention has been on ethical and emotional issues, illness, and infection, while studies that do address safety lack comprehensive solutions vital to sustaining these electives and protecting involved parties. The Liaison Committee on Medical Education deems it the responsibility of global health programs to uphold the highest possible safety standards for participants and faculty members. We believe this extends to host institutions. Thus, a thorough investigation of the sociopolitical and cultural context of each elective site is needed for the systematic compilation of safety hazards and corresponding solutions, with the ultimate goal of preventing harm to participants, and to patients and host institutions by participants.

**Structure/Method/Design:** The CUGH webinar *Rules for the Road: Global Health, Safety and Security for Deploying Students, Staff, and Clinicians Overseas* provided impetus for this study. Following a comprehensive literature review of safety issues in global health electives, potential safety risks were detailed by program alumni and site administrators from each elective site. Using this data, along with that from weekly reflections submitted by students during their electives, a master prototype was developed and sent to each site's program directors, faculty, and supervisors for final revisions which were formatted into the safety protocols.

**Outcome & Evaluation:** Each protocol contains seven sections: accidents/injury, crime, discrimination, illness, mental health, political unrest, and violence, with subsections "precautions, "warning/anticipated problems," and "what to do in case of an incident."

**Going Forward:** To our knowledge, we are the first to comprehensively address safety issues. Our program is based in safety throughout its entirety. Simulation labs, vignettes from former elective participants, strong infrastructure in elective sites, and constant communication via feedback create a supportive safety network. To uphold bidirectionality, we are currently broadening safety measures for patient populations and our partners in host countries. We call on safety experts and global health leaders to collaborate in creating optimal protocols, and recommend an annual collaborative conference, as well as a journal, aimed toward creating a culture of safety.

Source of Funding: Western Connecticut Health Network.

**Abstract #:** 2.046\_HHR

## Utility of WhatsApp Messenger to Promote Communication in a Medical Department in Malawi

A. Sakona<sup>1</sup>, Y. Mtende<sup>2</sup>, T. Bui<sup>1</sup>, A. Kennedy<sup>1</sup>, L. Chunda<sup>2</sup>, J. Ngoma<sup>2</sup>; <sup>1</sup>University of Pittsburgh Medical Center, Pittsburgh, PA, USA, <sup>2</sup>Kamuzu Central Hospital, Lilongwe, Malawi

**Background:** The use of mobile phone technology in healthcare has the potential to improve patient care and medical education. We evaluated the use of a WhatsApp messaging group among clinical staff of the Internal Medicine department at Kamuzu Central Hospital in Lilongwe, Malawi. WhatsApp is a low-bandwidth instant messaging platform that allows users to send and receive text messages and media as a low-cost alternative to SMS.

**Methods:** Messages exchanged over the course of one month in 2016 were reviewed and categorized by purpose. In addition, some of the clinical staff were surveyed about usage and feedback (n=18).

Findings: A total of 556 messages were reviewed, of which 37% were directly related to patient care, such as test result queries, clinical questions asked of consultants, discussion of management, or shared teaching points. Department news, such as announcement of meetings, call schedules, or out-of-stock tests or medications, accounted for 23% of messages. The majority of those surveyed felt the use of the WhatsApp group improved patient care (83%). Most viewed the group at least several times a day (89%), and 39% viewed the group every time they received a notification about a new post. The top reported use for the group was tracking lab results (78%), as the hospital does not have a laboratory reporting system or electronic medical record. Other common uses were finding an answer to a clinical question (72%) and obtaining information about hospital services (61%). Suggestions for improvement included avoiding posting of material unrelated to patient care (jokes, external news, etcetera) and preventing the dissemination of identifying patient information.

**Interpretation:** The use of a department wide WhatsApp group was perceived as beneficial in the day to day activities of staff members, but steps should be taken to limit unprofessional or extraneous posts to the group and to protect patient privacy.

Source of Funding: None.

Abstract #: 2.047\_HHR