**Conclusion:** As the educator role continues to develop, additional studies are needed to assess the merit and feasibility of this intervention in other low and middle resource settings. Initial outcomes suggest this is a promising initiative for improving nursing in Haiti.

Funding: Institute for Health and Social Policy; McGill Faculty of Medicine.

Abstract #: 2.016\_HRW

Methods: Four hundred and forty-seven households were randomly surveyed in an urban slum in Karachi Pakistan using a cross-sectional design survey with pre-tested and coded questions following an informed consent. The surveys were analyzed for vaccination use, and the current knowledge attitudes and practices towards vaccinations. Data was collected and entered in Excel, then analyzed using SPSS Version 2.0.

Findings: According to the analysis, only 49.7% of people heard about vaccinations through their doctors. Attitudes towards vaccinations are positive 82.1% of respondents know vaccinations prevent against diseases However, only 65.3% of people have ever vaccinated their child and individual vaccination rates range from 47% to 5%.

Interpretation: Knowledge of vaccinations is limited by poor communication by doctors and health workers. Recommendations include increasing campaigns to increase awareness of vaccinations utilizing media and health workers. Further research is needed into what non-financial barriers prevent high vaccine uptake in this population.

Funding: The household survey was funded by ChildLife Foundation, Pakistan.

Abstract #: 2.015\_HRW

## Nurse educators in Haiti: A quality assurance review

A. Mahon<sup>1</sup>, R. Valcourt<sup>2</sup>, L. Merry<sup>1</sup>, F. Dieudonne<sup>2</sup>, J. Tuck<sup>1</sup>; <sup>1</sup>McGill University, Montreal, Canada, <sup>2</sup>Zanmi Lasante, Hinche, Haiti

Background and Aims: Nurses provide over ninety percent of health care services worldwide, however training and licensure standards for these professionals, especially in low-resource settings, vary. As populations and health needs grow, empowering and educating those at the bedside must be a top priority. Unfortunately, there is limited understanding of professional development and continuing education for nurses in low and middle resource settings. In this review we: 1) describe an initiative launched by Zanmi Lasante to implement nurse educators in two tertiary care centres in the Lower Artibonite and Central Plateau regions of Haiti; and 2) highlight barriers and facilitators experienced by the nurse educators in this role.

**Methods:** We used a quality assurance framework with qualitative description. Data were collected through participant observation, document reviews, and semi-structure interviews with four nurse educators and three support staff.

**Findings:** The educator positions were created as part of a larger plan to improve the health infrastructure at one hospital site. With the success of the implementation of the first educators at this site, additional positions were added in a second hospital and plans made to expand to other hospitals. Educators were tasked with assessing learning needs, training and mentoring nursing staff, and performing skill evaluations. Barriers included: little specialized training for educators; limited resources; poor attendance at trainings; disparate education and skills among staff; and high expectations and ambiguous role definition. Facilitators included: previous management experience; peer support; value placed on continuing education by staff; and a perception that care was improving.

## The knowledge and perceptions regarding the role of family physicians among patients in primary care clinics in Nairobi

G. Mohamoud<sup>1</sup>, M. Merali<sup>1</sup>, A. Gilani<sup>2</sup>, M. Mahoney<sup>1,2</sup>; <sup>1</sup>Aga Khan University East Africa, Nairobi, Kenya, <sup>2</sup>Stanford University, Stanford, USA

**Background:** Family Medicine is recognized by the Kenya Ministry of Health as a way to provide high quality and cost-effective care at the population level and address the fragmentation of the current health care system. Understanding the current perception of Family Medicine, while the specialty is in its nascent stage, is a crucial step in promoting, marketing and planning the delivery of family medicine services.

Methods: The aim of this study was to identify gaps in primary care patients' knowledge about the role of family physicians in Aga Khan University clinics in Nairobi. The study is a questionnaire based cross-sectional survey of patients visiting selected primary care clinics in Nairobi. Convenience sampling was used; all consenting English-speaking adult patients were included in the study. Ethical approval was obtained from the Ethics committee of the Aga Khan University Hospital, Nairobi. SPSS Software and Excel spreadsheet were used for the data entry and analysis.

**Findings:** One hundred sixty-two participants were surveyed (n = 162). The majority of participants were between the ages of 18 and 45 years, with 54% being female, 61.3% employed, 83.8% university graduates, 69.1% had children, 65.4% resided in Nairobi and 34.6% were from the periphery of Nairobi. Sixty-eight percent (68.5%) had heard about family physicians. Regarding family doctor services, 45.1% of participants were unsure or didn't believe that family doctors could provide pediatric, ante-natal care, pap smear tests, family planning services and circumcision. While the majority of participants thought the family doctor can treat small babies, a comment noted "Infants are supposed to be treated with a pediatrician." There was more variance in results regarding FP treating chronic illnesses and other noncommunicable diseases, and performing common procedures.

**Interpretation:** Based on the findings of this study, a campaign that raises more awareness on the role of the family physicians in Nairobi will be developed in partnership with the Kenyan Association of Family Physicians.

Funding: None.

Abstract #: 2.017\_HRW

## Improving care for patients with epilepsy in rural Sierra Leone: A replicable model for low-resource settings

S. Jalloh<sup>1</sup>, K.P. Barron<sup>2</sup>, K.L. Dierberg<sup>2</sup>, J. Cooper<sup>1</sup>, R.H. Marsh<sup>2,3</sup>; <sup>1</sup>Partners In Health, Sierra Leone, <sup>2</sup>Partners In Health, Boston, MA, USA, <sup>3</sup>Harvard Medical School, Boston, MA, USA