

## Implementing Newborn Care Services in Humanitarian Settings: Barriers and Facilitators to Implementation at the Community and Facility Level in Displaced Person Camps in South Sudan

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**Background:** The majority of countries with the highest neonatal mortality rates have recently experienced a humanitarian emergency. Health service delivery challenges are aggravated by deterioration in facility infrastructure and lack of skilled health care workers and medical supplies. Additionally, neonatal health services are typically not prioritized in the initial emergency response. Achieving an understanding of the complex interactions between these barriers and the delivery of lifesaving newborn care is critical for humanitarian health responses. This study aimed to determine the feasibility of providing a package of newborn care interventions, as outlined in the recently drafted *Newborn Health in Humanitarian Settings Field Guide*, in two internally displaced person (IDP) camps and one refugee camp in South Sudan.

**Methods:** Using a mixed methods study design, we conducted 26 in-depth interviews (IDIs), 12 focus group discussions, and 5 health facility assessments. Data were collected among program managers and community and facility health workers across camps in Maban, Juba and Malakal during April–September 2016. Trained local researchers, using semi-structured tools, assessed health worker's clinical attitudes, program staff and health workers' experience during implementation, and facility readiness for maternal and newborn care.

**Findings:** Perceived difficulty of interventions, coordination among agencies, organizational management and policies, and community acceptance were among barriers to providing quality newborn care. Among the interviewed community health workers, attitudes toward caring for newborns were positive although they were unlikely to reach most newborns in the first week of life. Midwives saw most newborn practices as highly important but clinical protocols prevented care for very sick or small babies. The facilities were ready to perform signal functions; however, critical newborn medicine and equipment were unavailable.

**Interpretation:** The factors influencing care for newborns are multilevel and complex, and underscore the need to study health systems at the facility and community levels to address barriers to care. Findings will be used to inform newborn practices in South Sudan, and to finalize the *Field Guide* prior to global dissemination and use.

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## Key Drivers of Success and Sustainability for Academic Global Health Centers: Lessons Learned from CUGH Members

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**Background:** Global health has taken on an increasingly more visible role within academic institutions engaged in health professions training. Many institutions have worked to collocate and strengthen global health teaching, research, and clinical education by creating centers thereby housing multiple resources of the academic institution under a single hub and that focuses on global health issues. There is, however, a dearth of literature on the issues involved in developing global health centers within academia that would serve to guide and direct institutions during this process. As a newly established group of global health faculty leaders, the Hofstra University Global Health Faculty Planning Committee ventured to elicit expert opinions from academic leaders of well-established global health centers.

**Methods:** Semi-structured interviews (N=14) were conducted with select global health academic leaders who are members of the Consortium of Universities for Global Health (CUGH) in New York, Massachusetts, and New Jersey. A 12-question interview guide was developed that elicited perspectives on best practices and lessons learned when developing an academic center for global health.

**Findings:** Based on a review of the interviews, the following themes were deemed as critical to success and sustainability: 1) establish *stakeholder* buy-in within the institution and from appropriate external agencies; 2) develop a clear *strategic* plan; 3) pursue *support* and guidance from established professional agencies that focus on global health issues; 4) ascertain the *scope* of impact that the center will provide to the academic institution, and 5) identify funding sources and develop a plan to *seek* external funding for centers.

**Interpretation:** Although, the benefits of global health centers and institutes in academic institutions have been well-documented throughout the literature, few, if any, studies have examined key drivers of institutional success and potential challenges that academic institutions encounter during the development of these organizational bodies. By identifying these key considerations, academic institutions can establish clear goals and objectives, increasing the likelihood of success and sustainability for these programs.

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## Novel Device for Rapid Acquisition of Heart Rates in Neonatal Patients for future use in Malawi

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