IN-CONFERENCE WORKSHOP ADVERT

1. AFREhealth and the Consortium of Universities of Global Health (CUGH) partnership – a collaborative partnership in action

Presenter/facilitators: Marietjie de Villiers, Quentin Eichbaum, Elsie Kiguli-Malwadde

Affiliation/Organization: AFREhealth, CUGH, ACHEST

Learning objectives:

1. To update participants on the current status of the AFREhealth-CUGH collaborative partnership
2. To provide feedback on the progress made by the three sub-groups namely health professions education for health system strengthening, student exchanges, and research.
3. To facilitate discussion and input into the next steps for the partnership

Programme description

1. Introduction
   Introduction of presenters and facilitators; review learning objectives
   Presentation of recent developments in and current status of the partnership

2. Progress of the three sub-groups
   Presentation by the co-chairs of each of the sub-groups

3. Group discussion
   Small groups discussions in each of the sub-groups on the next steps for the partnership

4. Conclusion and way forward
   Feedback from the sub-groups and general discussion

Format:

The workshop will start with introductions and presentations by the workshop facilitators (15 min).

The three sub-groups co-chairs will then present the objectives of the groups, and what has been achieved up to now (25 minutes).
This will be followed by structured small group roundtable discussions for each sub-group, where participants can get the opportunity to provide input into the work of the sub-groups (30 minutes).

Finally, the groups will provide short feedback to the plenary and then a general discussion will follow focusing on collaborative actions going forward (20 minutes).

**Materials:**

Participants will be provided with the PowerPoint presentations and a summary of the workshop

**Duration:** 90 minutes
2. Strengthening health research, education, service delivery, and advocacy to achieve the SDGs in Africa: How can The Network: Towards Unity for Health (TUFH) work together with African Forum for Research and Education in Health (AFREHealth)?

Facilitators: Godwin N. Aja & Elsie Kiguli-Malwadde

Affiliation:  
1. The Network Towards Unity for Health (TUFH) 
2. Adventist International Institute of Advanced Studies, Philippines 
3. African Centre for Global Health and Social Transformation (ACHEST), Uganda

This workshop will provide delegates with an opportunity to learn about The Network: Towards Unity for Health (TUFH) and to discuss how TUFH and AFREHealth can work together. Specifically, the aims of this interactive workshop are:

a. To introduce The Network: Towards Unity for Health (TUFH) including its Theory of Change, objectives and priorities.

b. To explore health research, education, and publication opportunities that TUFH offers.

c. To seek input from participants on ways TUFH and AFREHealth can collaborate to strengthen health research, education and service delivery to achieve the SDGs in Africa.

d. To explore, from participants, ways TUFH and AFREHealth can collaborate to influence global policy recommendations to achieve the SDGs in Africa.

Target audience: Health care organizations, universities, educational institutions, and individuals
3. Interacting with the 21\textsuperscript{st} century health professional student made easy

\textbf{Facilitators:} Dr. C.N. Nyoni & Dr. L. Hugo  
\textbf{Affiliation:} University of the Free State, South Africa

\textbf{Workshop summary:}

Advances in the 21st century have transformed the nature of students within health professions education. These students challenge their facilitators to adopt different facilitation strategies to enhance competence in both the classroom and the clinical environment. This workshop is designed for health professions educator in an African setting, who has to facilitate interactively with students in the classroom and clinical setting.

\textbf{Workshop objectives}

At the end of the session, the participants will

a) Describe the characteristics of the 21\textsuperscript{st} century learner in health professions education  
b) Apply flipped classroom in facilitating student learning in the classroom  
c) Apply several techniques of interactive clinical facilitation

\textbf{Target participants}

Due to the nature of the workshop, there would be limited spaces of up to 16 participants.

Participants have to be facilitators/educators/teachers/lecturers etc. in health sciences disciplines with both a classroom and clinical component.

Facilitators: Tenore, Alfred
Suskind Robert MD
Institution: California University of Science and Medicine, School of Medicine (CUSM), San Bernardino, California, USA

In 2010, the Lancet Commission shed light on the deficits of existing medical educational systems and called for instructional reforms including system-based, integrated curricula with individualized learning opportunities and activities resulting in transformative learning. (1) The discipline-based curriculum has been the mainstay of the teaching worldwide. However, over the past 50 years institutions have realized that there are numerous shortcomings in the discipline-based curriculum. Several medical schools have experimented with various curricular reforms including system-based, problem-based, and clinical presentation-based curricula.

CUSM was established with the intent of being an innovative, socially accountable medical school producing graduates optimally prepared for the evolving practice of medicine. CUSM developed the global active learning curriculum, an innovative student/patient-centered curriculum that includes an amalgam of established, successful pedagogy collated from the most advanced educational institutions around the world. This competency-based curriculum, designated as the Global Active-Learning Curriculum, incorporates carefully conceived approaches and methodologies to learning, guided by adult learning strategies. It is a system-based curriculum focusing on the clinical-presentations of each system and an early focus on developing clinical reasoning skills. Active learning modalities, including pre-recorded power point lectures, including Lecturio Lectures, associated with team-based learning and flipped classroom activities are fully incorporated into the curriculum. The curriculum utilizes a Person-Centered/Clinical Approach Learning Methodology that requires students to integrate the basic sciences, the clinical relevance, and the environmental/social determinants of health.

We will review the curriculum reforms needed to support universal health coverage and the CUSM model of curriculum reform. Participants will also discuss the leadership and management skills that will transform the health workforce from technicians working in silos to critical thinkers working in teams.

Learning objectives

- Reflect on curricular reform needed for the 21st Century and for universal health coverage and learn about the CUSM example of an innovative curriculum
- Understand the difference between informative, formative and transformative learning. Then discuss and define the specific ‘management and leadership skills’ that should be incorporated into reformed education curricula
- Examine the concept and the value of active-learning, discuss examples and challenges of integrating active learning into a health professions training program

Activities:

- Introduction: Dr Alfred Tenore will review the Global Active learning Curriculum
- Participants will discuss as a group the difference between informative – formative – transformative learning in the context of universal health care delivery. Participants will then break out into groups to discuss and describe specific leadership skills for education curricula. Small group discussions will be followed by a debrief to agree on a broad set of leadership and management skills that would equip health professionals to support a system that provides universal health coverage.
- Discussion on active learning techniques – the value, the challenges and examples of incorporating active learning into an integrated curriculum.

Format: Large and small group discussions

Materials: handout of the presentation along with paper and pens

Duration 120-180 minutes
4b. Addressing the global healthcare workforce challenge

Facilitators: Stefan Wisbauer and Peter Horneffer

Organization or Institution: Lecturio, Germany and All-American Institute of Medical Sciences

**Background & Objectives:** The current shortage of health workers is significant and affects mortality in affected countries. Current approaches are not keeping up with the challenge and WHO forecasts indicate a significant worsening of the situation. The objective is to address the issue in a scalable, cross-country manner.

**Methods or Description:** Evaluation of WHO statistics, case example evaluation regarding innovative solutions

**Results or Lessons Learned:** The current shortage of millions of healthcare workers is set to exacerbate over the coming years according (13m by 2035) to WHO forecasts and Africa is the continent worst affected by this reality, with 36 of 52 countries with severe shortages being in Africa. Traditional teaching methods will not be sufficient to address the shortage as they are too slow and costly to establish. Distance teaching methods in medical education are feasible and have been accredited as far back as 12 years ago.

**Conclusions or Way Forward:** Africa has a chance to leapfrog to more modern approaches and a concrete approach to address the challenge is outlined.
5. Developing Emotional Intelligence for Effective Negotiation and Conflict Resolution in Low Resource Settings in Africa.

**Presenter:** Prof Quentin Eichbaum  
Prof Francis Omaswa

**Learning Objectives**

1. Present the fundamental principles of emotional intelligence, conflict resolution and negotiation skills and how they might apply in different global contexts.
2. Discuss unique scenarios in applying these principles in low resources settings in Africa
3. Consider writing an article for publication based on the findings of the workshop

**Programme/Workshop Description**

Despite great efforts to develop and implement sustainable global health programs such as the SDGs, many such programs fail to achieve their objectives due to poor management, conflict resolution and negotiation skills of the implementers. These skills and attitudes are rooted in an array of attributes we now call emotional intelligence. Programme managers and leaders should not be assumed to possess these critical skills and attributes which can be taught and enhanced over time. This workshop lay the foundation for developing the cognitive and emotional and skills for effective negotiation and conflict resolution.

**Format**

This 90 min workshop will start with a presentation on the fundamentals of emotional intelligence, conflict resolution and negotiation skills. The audience will then split into roundtable discussion groups to discuss unique scenarios and situations of conflict resolution and negotiation tactics in low resources settings. In the final part. In the final part of the workshop, the roundtables will each report back their discussions on how to facilitate conflict resolution and negotiation in low resource settings.

**Materials**

Participants will receive handouts with case scenarios on negotiation and conflict resolution and as well as handouts summarizing these essential approaches and skills.
6. Challenges and Opportunities of New Medical Schools in Africa – the Consortium of New Sub Sahara African Medical Schools (CONSAMS).

Presenter/facilitators:
Dr Peter Nyarango, Dr Oathokwa Nkomazane, etc.
Dr Quentin Eichbaum (Moderator/speaker)

Affiliation / Organisations: Consortium of New Sub Sahara African Medical Schools (CONSAMS)

Proposal
Over one hundred new medical schools are projected to open in Africa over the next decade. This group of medical schools presents a unique niche in health professional education on the African continent. This proposed panel describe the challenges faced by these new schools and explore some of the unique opportunities available to these schools. The panel will present several of the innovative programs developed between the CONSAMS schools. The unique combination of south-south and south-north partnerships developed within CONSAMS will be presented and discussed to provide critical insights for other partnerships.

Learning objectives:
1. Discuss the challenges faced by new medical schools in sub-Saharan Africa.
2. Explore unique opportunities available to new medical schools in Africa.
3. Describe innovative programs developed by new medical schools in CONSAMS through south-south and south-north partnerships.

Short Description of the Programme
This session is intended as a series of presentations by 3 or 4 speakers on a panel followed by a question/answer and discussion period. The talks will highlight different aspects of the challenges and opportunities faced by new medical schools in Africa from the perspectives of specific schools in the Consortium. The unique components of the south-south and south-north partnerships in CONSAMS will be presented by southern and northern partners. There will be ample period for discussion for attendees to understand how the Consortium has functioned and for other new schools to consider joining.
Format

The panel will consist of 3-4 presentations each of about 10-15 minutes followed by 20-30 minutes of a question and discussion period. This would depend on the length allowed for the workshop. Either 60 or 90 min would work.

Materials:

Presentations will be in the form of PowerPoint audiovisuals. Flipcharts may be used in the discussion period to capture ideas.

Duration: 60 or 90 minutes.
7. Developing Africa’s Inter-professional, Health Professions Student Mobility Program: A partnership with AFREhealth, AFREhealth’s member institutions, and GEMx - a service of ECFMG®

Presenters/facilitators: Faith Nawagi, Anna Iacone
Affiliation/Organization: Educational Commission for Foreign Medical Graduates (ECFMG®)

Learning Objectives
1. To inform the group on AFREhealth’s concept approval for the development of inter-professional student mobility model in partnership with ECFMG, and the importance of this initiative.
2. To define an inter-professional student elective exchange and what that might look like.
3. To identify the various inter-professional education competencies, training approaches, and assessment of outcomes from an IPE student elective exchange.
4. To identify how student mobility across Africa might work.

Short description
This workshop will focus on the importance of inter-professional student exchanges across Africa to prepare the next generation of Africa’s health care professionals, equipping them with inter-professional skills. It will also address curricular elements and competencies of an inter-professional elective placement (4-6 weeks in duration). One of the goals is to identify African institutional partners who have the capacity to offer inter-professional electives to students whose institutions are interested in entering a multilateral agreement, in partnership with AFREhealth and GEMx, a service of ECFMG.

Format
The format will be a presentation to frame the workshop (30 minutes); followed by 3 concurrent working groups (30-minutes); each group will report out on their finding and recommendations (10 minutes each).

Working Group 1: Define a 4-6-week, inter-professional elective curriculum to send (home institution) and receive (host institution) students’ enrolled in health professions education

Working Group 2: Identify metrics on student learning outcomes: What should students learn

Working Group 3: Elements to centralize and operationalize a student mobility program amongst partners, using a multilateral approach and web-based system

Conclusion: Each group has 10 minutes each to report out findings

Materials
3 whiteboards, 3 easels, 3 roundtables with chairs; laptop and projector, at least 3 markers
8. Equity in Short-Term Global Physician Training: Updates from a US-based Advocacy Effort

**Presenter/facilitator:** Bradley Dreifuss, MD¹,², Tracy Rabin, MD, SM³, Harriet Mayanja-Kizza, MMed, MS, PhD⁴

**Affiliation/Organisation:** ¹University of Arizona Colleges of Medicine and Public Health – Tucson, Tucson, AZ, USA; ²Global Emergency Care, Uganda; ³Yale University School of Medicine, New Haven, CT; ⁴Makerere University School of Medicine, Kampala, Uganda

• **Learning objectives:**
  o Understand existing models for bilateral global health education collaboration between United States and LMIC institutions
  o Describe the current limitations on short-term LMIC physician training in the United States
  o Outline potential medical licensing board and visa regulation changes that could facilitate the development of opportunities for U.S.-based short-term physician training
  o Identify Strengths/Weaknesses/Opportunities/Threats (SWOT analysis) for advocacy efforts from LMIC institutions

• **Short description for the programme:**
  30 minutes: Introductions/Participant Assessment – Structured small and large group conversations about the current state of physician faculty development efforts at participants’ institutions, including discussions of ongoing north-south/ south-south collaborations that support faculty development and the degree to which these opportunities incorporate hands-on clinical training. Additionally, this discussion will include an assessment of the types of faculty development that participants feel would be helpful to their institutions. 30 minutes: Current Efforts - Overview of the current situation in the United States with respect to facilitators and barriers to short-term, hands-on clinical faculty development opportunities, based on the recently published paper: Reconfiguring a One-Way Street: A Position Paper on Why and How to Improve Equity in Global Physician Training (Academic Medicine, April 2019). Several published models of north-south collaboration will be explored, with a focus on global south faculty development.

  30 minutes: Advocacy to Address Local Needs – Paired/small group SWOT analysis of the potential for participant institutions to engage in advocacy for short-term clinical faculty development opportunities, followed by a large group report back. The workshop will end with a paired/small group discussion about catalysts for and barriers to leveraging institutional partnerships for clinical capacity development, with a large group report back focused on how LMIC institutions can engage in advocacy around this issue.
• **Format:** Interactive large group didactics, small group/paired discussions, and individual reflections
• **Materials:** Copies of the position paper
**Duration:** 90 minutes

**Presenter/facilitator:** Sarah Kiguli, MMed, MHPE\(^1\), Tracy Rabin, MD, SM\(^2\), Rosana Gonzalez-Colaso, PharmD, MPH\(^2\), and Roy Mubuuke-Gonzaga, PhD, MSc\(^1\)

**Affiliation/Organisation:** \(^1\)Makerere University College of Health Sciences, Kampala, Uganda; \(^2\)Yale University School of Medicine, New Haven, CT, USA

**Learning objectives:**
- Describe existing models of interprofessional education (IPE) and interprofessional practice (IPP) in the US and Africa
- Outline potential IPE curricular innovations at participant institutions
- Identify Strengths/Weaknesses/Opportunities/Threats (SWOT analysis) for implementing a new IPE program

**Short description for the programme:**
30 minutes: IPE Foundations – The workshop will start with an interactive presentation on Principles of IPE, to provide a common framework for the workshop, and review the data in support of IPE efforts for healthcare workforce development. This first section will end with a paired/small group discussion activity to encourage participants to describe current examples and strengths of IPE and Interprofessional Practice (IPP) opportunities at their home institutions, followed by a large group debrief.

30 minutes: IPE Core Competencies – This section will start with an interactive presentation on IPE Core Competencies for IPP, based on a framework that was developed by the U.S. Interprofessional Education Collaborative. This will incorporate opportunities for group reflection on the relevance of this framework for the African setting. The section will end with a paired/small group discussion activity to describe educational activities that would address these various core competencies, and brainstorm additional competencies and activities that are relevant to local settings, followed by a large group debrief.

30 minutes: Addressing Local Needs – This section will start with a paired/small group SWOT analysis of the potential for participant professions to engage in IPE and IPP, followed by a large group report back. The workshop will end with a paired/small group discussion about systems level catalysts or barriers for IPE and IPP at participants’ home institutions or countries, with a large group report back focused on leveraging catalysts and overcoming barriers.
• **Format**: Interactive learning strategies that have proven effective for interprofessional and cross-national dialogue: interprofessional large group didactics, intra-professional small group/paired discussions, and individual reflections

• **Materials**: Two handouts for individual work

**Duration**: 90 minutes
10. Developing Best Practice Guidelines for Ethical and Equitable Global Health Engagement Between LMIC and HIC Institutions

Presenter/facilitator: Tracy Rabin, MD, SM\textsuperscript{1,5}, Efua Mantey, PhD\textsuperscript{2}, Daniel Doh, PhD\textsuperscript{2}, Emilly Comfort Maractho PhD\textsuperscript{3}, Judith N Lasker, PhD\textsuperscript{4}

Affiliation/Organisation: \textsuperscript{1}Yale University School of Medicine, New Haven, CT, USA; \textsuperscript{2}University of Ghana, Accra, Ghana; \textsuperscript{3}Uganda Christian University, Mukono, Uganda; \textsuperscript{4}Lehigh University, Bethlehem, PA, USA

• Learning objectives:
  o Describe the existing guidelines for ethical/equitable global health engagement between LMIC and HIC institutions, regarding research, education, capacity building, and service
  o Discuss the results of two studies (Ghana and Uganda) that examined stakeholder perspectives and context for short-term global health engagement
  o Identify Strengths/Weaknesses of existing best practice guidelines for global health engagement
  o Outline ideas to improve existing guidelines for endorsement by the Consortium of Universities for Global Health (CUGH)

• Short description for the programme:
  20 minutes: The workshop will start with a presentation on the development of the CUGH Ethics and Best Practices Working Group, and a review of current literature on guidelines for ethical/equitable global health engagement between LMIC and HIC institutions.

  30 minutes: Locally Relevant Data – Results will be presented from two studies that investigated LMIC stakeholder perspectives for short-term global health engagement with HIC partners. This portion will incorporate opportunities for large group reflection on the findings of the two projects.

  40 minutes: Structured small group conversations to review strengths and weaknesses of the existing guidelines, as well as thoughts on how they could be improved, whether or not a new set of guidelines is necessary, and the possible mechanisms for implementing and enforcing such guidelines. This will be followed by a large group discussion of next steps for the development/endorsement of guidelines to meet the needs of both the CUGH and AFREhealth constituencies. Following the workshop, participants will have the opportunity to become involved with the work of the CUGH Ethics and Best Practices Working Group.

• Format: Large group didactics/discussion, small interprofessional group discussions, and individual reflection
11. Inclusive Health Research Strategies for the attainment of the SDGs

Authors: Louis Mbibeh, Lynn Cockburn, Mary Atanga, Diane Bergeron, David Berman, Sama Fru, Shende Kometa, Stephan Nkouly, Helen Ndi, Mahadeo Sukhai

Background: Research in today’s world needs to be inclusive of researchers and community members with diverse experiences and abilities. To address the need for inclusion of researchers with disabilities and other experiences of marginalization, the Partnerships for Inclusive Research and Learning (PIRL) was developed. PIRL is a 3-year project to increase researchers’ abilities to lead and participate in disability inclusive research teams and studies. PIRL emphasises understanding the use of accessible technology and includes researchers from the Global North and Global South, including low-income African countries, and is a good example of SDG #17.

Purpose: This presentation has 2 aims. 1) To raise awareness about the need for more inclusion and awareness of intersectionality in African health research (SDG #5 Gender Equality and SDG #10 Reduced Inequalities). All genders, and especially women with disabilities, need to be included in research training programs. 2) To describe effective strategies to increase accessibility in African research teams.

Description: PIRL uses critical, human rights, and post-colonial perspectives to guide strategies. As a community of practice that is aware of intersectionality, PIRL is identifying and developing reference documents, guidelines, checklists, and videos to assist researchers be more inclusive.

Lessons Learned: We will provide examples of changes and resources that can be applied.

This presentation addresses SDG #8 Decent work, by focusing on workplaces for researchers and community members who are often marginalized. SDG #9 Innovation is addressed through the focus on inclusive research, which leads to more innovative outcomes and results. Inclusive strategies support SDG #11 Sustainable cities and communities, and SDG #16 Peace, Justice and Strong Institutions, by addressing the need for inclusive health and social science research to ensure that environments are sustainable, and as healthy and peaceful as possible.

Key Words: Health Research, Inclusive research, Intersectionality, Accessibility, SDGs