



### Global Health Interest Group

Anca Matei

The Obstetrics and Gynaecology Global Health Interest Group is composed of residents, physicians, nurses, and administrative staff with an interest in women's health in low resource settings. We are currently working on creating a partnership with a local mobile health clinic for the purpose of providing basic care to women in and around Halifax who would otherwise find it challenging to access health services (see MOSH article below). As a start to this partnership, several educational sessions will be organized in shelters in the HRM to mark Cervical Cancer Awareness week. These will take place in October. Our secondary goal is to create an environment where interested individuals in the OBGYN community can find resources and support to advance their own training in global health. We hope to be a platform for each other to develop research projects, electives, local outreach projects, or to learn more about professional opportunities in low resource settings. If you are interested in joining or for further information, please email [dalobgyn.globalhealth@yahoo.com](mailto:dalobgyn.globalhealth@yahoo.com).

### Accessing Safe Deliveries in Tanzania

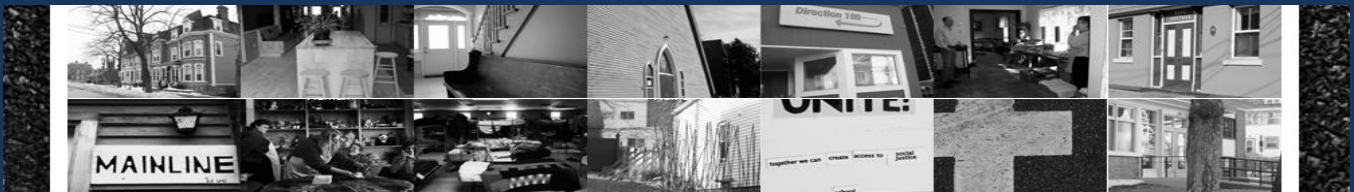
Heather Scott

A multidisciplinary research team from Dalhousie University was recently awarded a multi-year IDRC grant to reduce maternal and neonatal morbidity and mortality. The Dalhousie research team, led by John Leblanc (Department of Pediatrics, IWK), includes Heather Scott (Obstetrics), Ron George (Anesthesia) and Doug MacMillan (Neonatology). The team also includes Gail Tomblin Murphy from Nursing and Shawn O'Hearn from the Global Health Office, Dalhousie Faculty of Medicine. They will be working closely with a large Tanzanian team based out of Ifakara at the Tanzanian Training Centre for International Health.

The aim of the project is to identify the requirements for scaling up Comprehensive Emergency Obstetrical Care in Tanzania by studying its implementation in selected health centres. Work is scheduled to begin early in 2016 when the Canadian team will travel to Tanzania to help launch the project. Qualitative data collection will begin along with the update of current training programs for associate clinicians and midwives. Training will then be "scaled up" and after full implementation, maternal and newborn outcomes will be evaluated.



### Partnering with Mobile Outreach Street Health



The North End Community Centre's Mobile Outreach Street Health (MOSH) program provides accessible primary health care services to people who are homeless, insecurely housed, street involved and underserved in the Halifax community. The MOSH team is a collaborative primary health care team of nurses, an occupational therapist, and a GP physician. Access to the existing health care system is difficult and or impossible for many people living on the margins of society. MOSH aims to meet people in spaces where there is a greater level of comfort, take primary health care to them, establish relationships and build trust as a means to improve their health outcomes.

Heather Scott spent a day shadowing one of the mobile nurses and met with the MOSH team. The Global Health Interest Group is now working with MOSH to try and identify the specific needs of women living in shelters. Residents have volunteered to help with informal education sessions. In addition it is hoped that a needs assessment can be undertaken to better inform future initiatives.

## Global Health Elective: Rwanda

Liz Randle

To finish off my fourth year of Ob/Gyn residency I was fortunate enough to travel to Kigali to complete a global health elective through the University of Rwanda. I was supervised in Rwanda by Dr. Stephen Rulisa in the Department of Obstetrics and Gynaecology at the Centre Hospitalier Universitaire de Kigali (CHUK) and remotely by Dr. Heather Scott, at Dalhousie.

My experience in Rwanda was unforgettable. I was welcomed with open arms by everyone. The residents and staff at CHUK were eager to have me involved in all aspects of patient care: morning “staff meeting” (more commonly referred to as handover rounds here at home) inpatient rounding, labour and delivery, the operating theatre, outpatient clinics - you name it, I was involved in it! I also had the opportunity to administer the oral exams for the “doc four” medical students (soon-to-be general practitioners at district hospitals) as well as sit in on the Master’s of Medicine thesis defenses of the graduating residents. I think what impacted me most during my clinical time in Kigali was not so much the differences in clinical presentation and delivery of healthcare I witnessed, but the similarities. The determination with which residents advocate for their patients, the joys and sorrows experienced as individuals move through the healthcare system, these emotions resonated deep within me and I carry these experiences forward to this day.

In addition to my work at CHUK, I was able to travel around Rwanda on the weekends. It is a beautiful country. From village co-ops to mountain gorillas, safari drives to lakeside resorts; Rwanda has an adventure to suit any traveler’s desire. And everywhere, warm greetings from “the land of a thousand hills” and, as one local put it to me, “the land of a thousand smiles”. My month in Rwanda is not an experience I will soon forget, and I can only hope I will be lucky enough to return in the future.



## BETHUNE ROUND TABLE 2016



A multidisciplinary team at Dalhousie University is pleased to bring the Bethune Round Table 2016 to Halifax, Nova Scotia. The Bethune Round Table (BRT) is an annual interdisciplinary scientific meeting hosted at a Canadian academic centre to discuss challenges and solutions to improving surgical care to underserved and marginalized populations in low- and middle-income countries.

The 2016 course will focus on the theme of “building collaborative teams to strengthen global surgery” including collaboration for clinical service, education, research, and advocacy. The course will explore examples of successful collaborations involving multidisciplinary teams which may include various medical professionals, health care administration, government, universities, or community associations.

**CALL FOR ABSTRACTS: September 2015**

**REGISTRATION: January 2016**

**[www.BRT2016.com](http://www.BRT2016.com)**

### Keynote Speakers:

Dr. John Meara | Lancet Commission on Global Surgery  
Dr. Andrew Furey | Team Broken Earth Haiti  
Prof. Dame Tina Lavender | Centre for Global Women’s Health  
Dr. Patrick Kyamanya | University of Rwanda  
Dr. Dylan Bould | University of Ottawa

## Upcoming Global Health Events

### Dalhousie Global Health Open House 2015

Tupper Link, October 3, 2015, 1:00-4:00PM

[www.dal.ca/globalhealth](http://www.dal.ca/globalhealth)

### FIGO World Congress of Gynecology and Obstetrics

Vancouver, October 4-9, 2015

[www.figo.org](http://www.figo.org)

### Canadian Conference on Global Health

Montreal, November 5-7, 2015

[www.ccggh-csih.ca](http://www.ccggh-csih.ca)