

Announcements

Jamaican Partnership Update:

The Global Health Unit (GHU) met to discuss a potential partnership with Jamaica. Dr. Armson will take the lead. It was agreed that Dr. Armson travel to Jamaica to discuss what this partnership will look like and to gain a better understanding of the OBGYN needs in Jamaica. Dr. Armson will be travelling to Jamaica on February 27th with a small delegation of academic faculty to meet with partners there, including the Women's Health Network team. Stay tuned for more updates!

Call for Local Global Health Participation:

The Global Health Unit is looking for OBGYN residents who are interested in participating in our local global health initiatives including the Mobile Outreach Street Health clinic and the Newcomer Women's Health Clinic. See below for more information on the Newcomer Women's Health Clinic.

Save the Date: Academic Half Day June 8th:

On June 8th, an Academic Half Day session will be held with a Global Health topic. The resident presenting is Jocelyn Stairs with staff member, Dr. Heather Scott.

This session will include guest speakers from both academic and non-profit roles and will be held at the North End Community Health Clinic in Collaboration Room (Rm 500).



The following is a list of other global health events that may interest our OBGYN staff, residents and personnel, as collated by the [Dalhousie Global Health Office](#).

- **March 16 - 18, 2018.** New York City: [CUGH Global Health Conference 2018](#)
- **March 25 - 27, 2018.** Toronto, Canada: [Bethune Round Table in Global Surgery](#)
- **April 26, 2018.** Halifax, Canada: Dalhousie Global Health Awards – Dr. Scott Presenting
- **April 27 - 28, 2018.** Toronto, Canada: [PEGASUS Conference](#)
- **May 9, 2018.** Halifax, Canada: [IWK Global Health Fair](#)
- **June 22 - 25, 2018.** University of Saskatchewan: [5th International One Health Congress in Saskatoon](#)

Mobile Outreach Street Health Clinic

The Mobile Outreach Street Health (MOSH) clinic has become a part of the OBGYN resident rotation schedule with the support and supervision of our staff members and the North End Community Health Clinic (NECHC).

Overall, the clinic has been going well and a system has officially been put in place. There are 8 patients scheduled for the next clinic, which is to be held on **March 12, 2018**.

Newcomer Women's Health Clinic

The Global Health Unit is happy to announce that our OBGYN residents and staff members have been partnering with the Newcomer Women's Health Clinic on Mumford Road to offer education and services to newcomer/refugee women.

The Newcomer Women's Health Clinic provides preventative health and primary medical services for women who are government assisted refugees, privately sponsored refugees and refugee claimants in the greater Halifax area. Patients are supported with finding and transitioning to a family practice in the community within a two year period. The next clinic is scheduled on **March 21, 2018**. **Volunteers needed!**

For more information about any or all of the announcements, including how to participate and become involved, please contact Janet Slaunwhite at janet.slaunwhite@iwk.nshealth.ca or 470-6464.

Leaving No One Behind (Part 2 of 3) Samira Thomeh

The opening plenary on the second day of the Canadian Conference on Global Health in Ottawa included: Guy Standing, Dr. Nicolas Medas, Dr. Esperanza Martinez, Anna Coates and Yv Bonnier Viger.

This plenary was filled with thoughts around universal programs for the sustainable development goals. Guy Standing began with a very compelling presentation on basic income, which he describes as “becoming a mainstream issue”. He described reasons for wanting to support basic income as ethical – a matter of social justice. When someone has basic income, they have the ability to advance liberal freedom, the ability to say “no” to inhuman acts for monetary rewards and the ability to say “yes” to buying shoes, taking public transit, etc. Basic income is the ability to not be afraid.

Some key learnings I took away from this panel:

- We can collectively advance improvements in health and equity through basic income for everyone.
- Globalization, technological development, and neoliberalism is creating a perfect storm for economic insecurity.

- Basic income would give everyone security, which removes “poverty traps”.
- The ability to give freedom with basic income is more valuable than the value of money itself.
- If you give basic income, people do more work, doing the sort of things that don’t get measured in our statistics.
- The minister of finance in the government of India said basic income is affordable.



Panel Discussion on Basic Income

Session 1 of Day 2: “Use of RADAR Tools for Implementing Strong Measurement Approaches for Maternal and Child Health Programs.”

The Real Accountability: Data Analysis for Results (RADAR) Project, led by the Institute for International Programs at the John Hopkins School of Public Health, is an initiative supported by Global Affairs Canada to improve accountability for Global Affairs Canada’s investments in Maternal, Neonatal and Child Health (MNCH). The RADAR team is developing tools to assist countries and international

NGOs in implementing strong measurement approaches for MNCH programs in low- and middle-income countries.

There are six RADAR tools (e.g., Coverage Survey, Impact Model Tool, Lives Saved Tool (LiST), Implementation Strength Assessment, Quality of Care Assessment, Measurement Plan for Accountability), each focused on a particular aspect of the impact pathway. The tools are all open-source and available free-of-charge online.

Session 2 of Day 2: “Improving Maternal and Child Health: What Works in Fragile Contexts.”

This session explained how conflict and violence-affected areas face a number of specific challenges in providing essential health services such as inadequate human and financial resources and poor infrastructure.

Focus was also placed on a number of health and non-health interventions that are more effective in fragile settings. These include developing the capacity of health systems to have flexible and adaptable financing and service delivery.

Some of the key learnings I took away from this session:

- Meeting the health needs of women, children, and adolescents in fragile contexts is a key component of improving their lives and in turn achieving the goals of new SDGs.
- The health interventions in fragile contexts need to have a “systems approach” and be adaptable and flexible at the same time.
- Particular attention needs to be focused on gender issues.
- Research can play an important role in developing strategies and informing policies to prioritize the necessary services.