Anne Marie Williams

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Holmes Society

Class of 2017

Travel to Mbarara, Uganda, February 1st, 2017 to March 15th, 2017.

Report to Scholars in Medicine Office, on International Independent Study: Development of a Maternal Health Needs Assessment in Bugoye, Uganda.

I spent 6 weeks in western Uganda, and two weeks of combined preliminary and wrap-up work based in the US to total 8 weeks of full-time work on this project. At the time of my participation in this project, a preliminary needs assessment had been conducted, for internal programmatic use, with the purpose of designing further study in the form of a larger, structured, IRB-approved needs assessment. The eventual goal of this needs assessment is to design a targeted implementation to improve maternal health in Bugoye sub-county, Uganda.

Contribution to the project:

I reviewed the preliminary findings of the initial informal needs assessment to determine the appropriate focus of the formal needs assessment—including investigations regarding antenatal care, delivery decision-making and experiences, and use of contraception. I conducted a literature review on international research in resource-poor settings related to contraceptive use. I conducted a literature review of international and Ugandan policy documents and guidelines related to maternal health, including the Ugandan Ministry of Health strategic plans for the health sector. I supplemented my existing knowledge of qualitative methods with additional reading in order to design a methodologically rigorous study. I completed one week of field observation related to the delivery of antenatal care and delivery in the rural health center that consists of the study partner. After all of this preliminary work, in partnership with my research mentor, I designed a full-scale qualitative needs assessment covering antenatal care, delivery, and family planning inquiries. I developed the research questionnaires, surveys, and interview guides that will be used to conduct this needs assessment—consisting of over forty pages of questionnaire material. At this point, these final products are being reviewed by all study partners for comments and amendments, and eventual submission to the IRB. I remain involved as a consultant on further changes to the study protocol, and will aim to remain peripherally involved in this project as it goes into the data collection and analysis phase.

Site benefits of my work:

My participation in this project provided a significant boost in the capacity of the site to develop this protocol in a timely manner, and with intellectual rigor that will enable future publication of this work. In addition, I brought significant experience and insight in qualitative work to the study team. This experience was particularly useful given the nature of this research—a needs assessment based on the experiences and decision-making processes of community members.

Personal benefits of my participation:

I gained valuable experience in research design and protocol development, as well as strengthened my qualitative research skills. In addition, I attended clinical rounds with my research mentor in a regional referral hospital, which provided me with excellent exposure and insight into what inpatient internal medicine looks like in a resource poor setting. This exposure will help direct my future career decisions in global health.

Critical assessment:

While I would have loved to be involved in this project at a later stage (i.e. during data collection and analysis), it is important to be flexible and understanding of delays in a global health setting. I feel that I gained and strengthened really important skills in research development that not only will help me think critically about what involvement with research I want to have in my career, but also gave me a greater appreciation of the effort and attention to detail required for large scale study designs. This experience actually complimented my prior experience in data collection and analysis quite nicely. In addition, the research team remains eager to have me involved to the extent I am able during residency.

Time overseas:

Given where this project was when I was joining, 6 weeks was a good amount of time to be overseas. It enabled me to work in close partnership with my research mentor to complete the bulk of the proposal, and I left just as we were submitting the proposal for comments.

Site mentor:

Palka Patel, MD

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Recommendation to future students:

This was a good research group to work with and they will likely have additional work for students in the future. The person to contact would be Geren Stone, MD, Program Director of the Global Medicine Internal Medicine Residency at MGH. Gstone@partners.org.

Categorize the project:

Research

Rural

For a student with experience abroad

English OK

No suggestions for SOM. Thank you!

I am willing to speak with students. Ams.williams@gmail.com.