The Centre for International Child Health (CICH) Quarterly e-Update

Issue 2: December 2016

Centre Updates

CICH welcomes new Program Coordinator!

A warm welcome to the newest member of the CICH Team: Michelle Langlois joined CICH in October as a full-time Program Coordinator. The Centre is excited to have Michelle on board!

Building momentum to solve global health challenges

From October 23-26, Grand Challenges hosted its 12th Annual Meeting in London, England. Dedicated to fostering and highlighting innovation to build momentum needed to solve key global health and development problems, the meeting brought together over 900 funding and research partners from across the globe.

One year after the launch of the Sustainable Development Goals (SDG), the 2016 Annual Meeting was an opportunity to highlight the critical role of innovation in enabling and accelerating the achievement of the SDG targets and the value of the Grand Challenges model to this broader global health and development agenda. The meeting consisted of talks highlighting specific scientific questions and a series of complementary plenary sessions and strategic side meetings.

CICH Director Dr. Mark Ansermino attended the meetings as a current recipient of several Grand Challenges grants. These include grants related to the monitoring, prevention, and treatment of pre-eclampsia, and to the development of a non-invasive diagnostic and treatment monitoring tool to enable identification of children who are at increased risk of dying from pneumonia.

Interested in learning more? Watch videos from the 2016 meeting and past meetings.

Creating resilient and responsive health systems for a changing world
Several CICH Committee members and Centre affiliates participated in the Fourth Global Symposium on Health Systems Research. The symposium, which took place from November 14-18, brought together over 2,000 leading global health thinkers and practitioners to discuss ideas on how to create resilient and responsive health systems for a changing world.

Dr. Srin Murthy, Dr. Mark Ansermino, Katie Johnson and Michelle Langlois represented the Centre at the CICH table, and Dustin Dunsmuir provided demos on innovative, low-cost, and robust mobile health (mHealth) tools that when combined with data-driven prediction, have the potential to save lives in remote and resource-constrained contexts.

Dr. Jean Pierre Chanoine (Secretary General of Global Pediatric Endocrinology and Diabetes) co-organized an interactive symposium, Navigating the Treacherous River of Access to Essential Medicines: Experience in Pediatric Endocrinology and Diabetes. The purpose of the symposium was to understand the barriers preventing access to essential medicines and to discuss solutions that can overcome these barriers. In-depth discussion focused on the challenge of interesting governments and the pharmaceutical industry in facilitating access to medicines that are needed by a small number of patients and are usually low cost. The discussion was enriched by the participation of the Vice Minister of Health of Ecuador and representatives of PAHO-WHO from Ecuador.

Alexis Davis co-presented Who me? A workshop on how awareness of power, privilege & inclusion can contribute to health systems strengthening with other facilitators from the Theme Group for Inclusion & Disability (TGID). TGID was created in 2011 to advocate to enhance the disability content at global health conferences in Canada. The session garnered rave reviews at the 2015 Canadian Conference for Global Health, which lead to TGID being invited to present the workshop as part of the 2016 Global Health Summit for students and young professionals.

Dr. David Goldfarb participated in a panel discussion on Challenges of improving maternal and child health in Africa: is innovation the solution?, highlighting his work integrating a neonatal healthcare package in Malawi. Other panelists discussed their experiences in Tanzania, Mali, Burkina Faso, Sénégal and South Sudan. The discussion focused on how simple and low cost innovations can save the lives of children and mothers, especially in Africa. The continent accounts for around half of the under-five and maternal deaths globally.

Browse through over 500 e-posters from the Global Symposium to discover new ideas to create resilient and responsive health systems.

Keeping our promise to child health on World Pneumonia Day

Dr. Mark Ansermino and Dr. Tex Kissoon represented CICH at a panel discussion organized by the Bill and Melinda Gates Foundation to celebrate World Pneumonia Day. The November 10 discussion panel in Seattle, Washington centred on progress to date in preventing early deaths from pneumonia and severe diarrheal disease, as well as the gaps that still need to be bridged. Deaths due to pneumonia and severe diarrheal disease have declined thanks to the improved uptake of life-saving vaccines, medicines, breastfeeding, and improved water and sanitation. However, they remain the leading worldwide causes of death in children under five.
Nearly 1 million children die from pneumonia every year - more than malaria, measles and HIV/AIDS, combined. And 99% of these deaths occur in the developing world.

To learn more about the global fight against pneumonia visit Stop Pneumonia or join the Every Breath Counts campaign.

**A new strategy for the Centre for International Child Health**

Based on feedback from the CICH Committee, Hospital executive, staff and stakeholders, the CICH Strategic Plan (2016-2020) has been finalized. Sub-committees have been organized to help drive strategic priorities focused on:

1. Building capacity through collaborative and sustained partnerships;
2. Expanding global health education opportunities for residents and fellows, and contributing to health workforce education at partnering institutions;
3. Enhancing global health research through training, mentorship and reverse innovation opportunities;
4. Strengthening the global health community at BC Children’s Hospital and beyond.

**Sharing new ideas through the Global Health & Innovation Series**

On November 1, CICH and the Global Health and Innovations Group at the BC Children’s Hospital Research Institute invited researchers and clinicians to the first of a series of talks that will highlight innovative research and practice in global health.

Dr. Pascal Lavoie presented on Improving Outcomes for Newborns and Infants, focusing especially on the burden of sepsis. Sepsis remains a leading cause of death, especially among children in the least developed countries. The talk was attended by over 35 people interested in learning more and sharing their perspectives.

See the News & Upcoming Events section below for further information on upcoming talks as part of the Global Health & Innovation Series.

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**Project Updates**

**Smart Discharges can improve post-discharge health outcomes in children in Uganda**

CICH is excited to announce that funding has been secured through the BC Children’s Hospital Foundation to continue critical research in Uganda.

In Uganda, when children are hospitalized for a serious infection, about 5 percent die and 95 percent are discharged, presumably well. Alarmingly, 5 percent of these children presumed well will die in the weeks after they return home. Doctors and parents are often unaware of this period of vulnerability and are poorly equipped to identify or handle this critical situation. Resources to provide follow-up of all children after hospitalization are limited, so precision in allocating resources is vital. An effective strategy is required to prevent these children from dying needlessly.

The project, which will run from 2017-2019 under the guidance of Dr. Tex Kissoon and Dr. Matthew Wiens, will build on six years of previous research undertaken by the study team. This work among children (6 months-5 years) with suspected sepsis has led to validated models that identify children at high risk of post-discharge mortality. The models have been integrated into a mobile application to allow front-line health workers to rapidly identify these vulnerable children. The feasibility of a Smart Discharge program in Uganda has also been tested. This program identifies vulnerable children and provides education and post-discharge follow-up to improve outcomes. Preliminary results show a 3-fold increase in post-discharge follow-up, a 2-fold increase in re-admission (i.e. early identification and treatment of critically ill children) and a 30% reduction in mortality.

Want to delve deeper? Read some of the articles published by the study team on their prior research...
Centre for International Child Health Global Health Trainee Grants

In 2016, CICH awarded seven grants of $1000 each to seven talented trainees who chose to pursue global health electives in Nepal, Uganda, Botswana, Ghana and South Africa. Marella Falat, a student midwife, traveled to Nepal to work with the Midwifery Society of Nepal (MIDSON). Of her experience, Marella writes:

In Nepal, 81% of the population identifies as Hindu. One of the their many gods is Ganesha: the elephant god. He is known as the remover of obstacles. The babies and children of Nepal face many obstacles to good health. The research and clinical placement I participated in is only one small piece in helping to reduce neonatal, infant and maternal morbidity and mortality in this fascinating, diverse, beautiful and difficult place. I am grateful for the opportunity. It has made me even more fiercely committed to the global struggle to provide evidence-based, compassionate care to mothers and neonates. Thank you for removing a financial obstacle so I could learn about the barriers to health for mothers and babies in rural and remote Nepal.

If you or someone you know is planning a global health elective in 2017-2018, applications for the CICH Global Health Trainee Grant are now open! See the Funding Opportunities section for additional details.

News and Upcoming Events

World AIDS Day | December 1, 2016

Head over to the Chan Auditorium from 8 a.m. to 9 a.m. to sit in on the BC Women's Hospital's Grand Rounds on December 1, hosted by the Oak Tree Clinic. Presented by Oak Tree Clinic staff and a community member, No it's not over yet! What's new in HIV for women, mothers and babies in BC & Canada will explore innovative strategies and therapy to improve the health of women living with HIV/HCV, reproductive issues for women living with HIV, and progress made towards the elimination of vertical transmission of HIV for infants and children.

In the afternoon, keep an eye out for the World AIDS Day Roadshow, organized by the Pediatric Residency Program’s Global Health Committee with the support of Oak Tree Clinic. Residents will be traveling the wards of BC Children’s and BC Women’s in the afternoon of December 1 to teach others how to challenge stigma around HIV. Try your hand at some educational trivia and make sure you get a ribbon to promote AIDS awareness.

Want to learn more about World AIDS Day? Find information, campaigns, data, and videos.

OPSEI Rounds -- Healthcare in Uganda | January 3, 2017

Start the new year on a global health kick. Hear more about CICH Global Health Trainee Grant recipient Laura Kim’s experience working at the Soroti Regional Referral Hospital in Uganda when she presents at the Office of Pediatric Surgical Evaluation and Innovation Rounds at 7 a.m. on January 3, 2017.

Global Health & Innovation Series | February 7, 2017

Save the date! The next Global Health & Innovation Series talk will be held on February 7, 2017. Don’t miss this opportunity to learn about some of the most exciting ideas in global health alongside colleagues from around BC Children’s and BC Women’s. Stay tuned for more information on the venue, time, and topic. Or get in touch to make sure you receive updates on this forum.
Funding Opportunities

International Community Access to Child Health (ICATCH)

Early Application Deadline: December 12, 2016 | Final Application Deadline: February 10, 2017

The 2016-2017 ICATCH call for proposals is now open! ICATCH is now accepting proposals from health providers in low and lower-middle income countries for clinical or educational/training programs that will support child health in their communities. ICATCH grants provide both financial and technical support to grant recipients. Funding is $2,000 per year for 3 years.

ICATCH grants emphasize:

- Partnerships with governmental and/or nongovernmental agencies or groups (such as public health centers, schools, faith-based groups or local businesses).
- Sustainability and growth of the program beyond the funding period.
- Expansion of successful strategies to other communities or regions.

Know someone who would benefit from a grant? For more information and to find application forms and contact details, visit the American Academy of Pediatrics ICATCH website.

CICH Global Health Trainee Grants

Application Deadline: February 28, 2017

CICH is supporting trainees in the health professions who are engaged in global health research and/or education activities related to the health care of children and youth. Funding is available in the amount of $1,000 (for up to 5 trainees) who chose a global health elective as part of their academic training. Candidates must be registered as a resident or fellow in a postgraduate medical training program, or be a student in a British Columbia professional training program. This includes any health care discipline that leads to a professional designation.

For more information, download an application form via the CICH webpage or ask us for one.
The Canadian Child Health Clinician-Scientist Program (CCHCSP) is a transdisciplinary training program for the next generation of clinician-scientists in child and youth health research in Canada. CCHCSP provides support for highly qualified child health clinician candidates to develop knowledge and skills for a career as an independent scientist in child health research. The program is an excellent opportunity to develop the national connections that are needed to succeed in pediatric research. Several clinician-scientists now working at BC Children’s Hospital have received CCHCSP grants.

The program focuses on a variety of clinical disciplines, including nursing, occupational therapy, physical therapy, social work, and pharmacy. Funding is provided at the doctoral, post-doctoral and early career levels, up to $50,000 (doctoral) or $70,000 (post-doctoral or early faculty) per year for up to three years. Candidates must have a clinical degree and be involved in research to a significant degree.

To learn more about the program and the process of applying, contact Pascal Lavoie, the CCHCSP leader for UBC and BC Children's Hospital, or Jennifer Myers, Manager of Research Education at BC Children’s Hospital Research Institute.

Have questions, suggestions or information to share? Email us at cichinfo@cw.bc.ca so we can include it in our next quarterly e-update.