Unleash a culture of inquiry — get involved with MicroResearch

CICH is looking for physicians and Allied Health Professionals to become coaches or reviewers of MicroResearch. By giving of your time as a reviewer or coach, you can help improve local research capacity in front line health workers in Uganda, Kenya and Tanzania.

Microfinance has shown that a small infusion of capital can “prime the pump” for creative local economic productivity. In a similar way, MicroResearch has proven effective in promoting bottom-up strategies and sustainable solutions to local health challenges. Mentoring, small-scale funding, and hands-on training promotes small community-focused research projects that improve research skills across the entire health care provider spectrum — and unleash a culture of inquiry.

Your time commitment as a reviewer is only 30 minutes. Coaching requires a commitment of one hour per week over 2 to 4 months. You’ll be matched to projects based on your profession, areas of expertise and availability. No prior experience working in an African context is required as long as you are practical and eager to help grow research capacity globally.

Find out more about this exciting opportunity to share your skills or get in touch with Randi Weiss to sign up.

Celebrating the first annual World
On May 22, CICH celebrated the first-ever World Preeclampsia Day. Nearly 76,000 mothers and 500,000 babies worldwide lose their lives to preeclampsia and related hypertensive disorders of pregnancy every year. Over 99% of preeclampsia cases happen in low- and middle-income countries.

BC Children and UBC's own PRE-EMPT initiative was one of the co-sponsors of this globally-recognized day. The day’s theme — "Be prepared before lightning strikes" — encouraged pregnant women to recognize symptoms early and if they experience any, contact their healthcare providers.

In honor of World Preeclampsia Day, we shared a story of impact from our colleagues at PRE-EMPT through the BC Children's and BC Women’s weekly newsletter (available on POD), and endorsed the World Preeclampsia Day proclamation.

To learn more about the global impact of preeclampsia and about how simple interventions can help solve complex issues, visit Ending Eclampsia for infographics, publications and resources.

The results of the 2017-2018 Global Health Trainee Grant Competition are in! This year, we selected 6 trainees to receive support for their child-focused global health electives in Laos, Thailand, South Africa and Uganda.

Dr. Raidan Alyazidi, a second year pediatric infectious diseases fellow, recently returned from her 1-month elective at one of Thailand’s largest hospitals, and shared with us her experience there.

Read about Dr. Alyazidi's time in Thailand, or see a full list of grant recipients on the News & events tab of the CICH webpage.
On May 15, CICH and the Global Health and Innovations Group at the BC Children’s Hospital Research Institute invited researchers and clinicians to the third of an ongoing series of talks to highlight exciting and innovative research and practice in global health. Over 50 people gathered to learn and share perspectives on three questions with important implications for women and their babies around the globe.

Dr. Bahaa Abu Raya spoke about how to optimize whooping cough vaccination strategies for pregnant women, research that could save a significant number of the 200,000 babies around the world who die each year from this completely preventable disease.

Dr. Beth Payne examined how preeclampsia prognosis can be improved using mobile health apps. Challenges remain around ensuring uptake and use of mHealth technologies.

Jennifer Claydon discussed how early diagnosis of neonatal sepsis using reliable, accurate, and affordable diagnostic tools could prevent the deaths of over 1 million babies per year. She manages research (led by Dr. Pascal Lavoie) that is just beginning in Malawi.

Interested in attending the next talk in the series? Keep an eye out for emails announcing the next Global Health & Innovation Series.

Thank you for your support!

A big thank you to all for your recent votes and support for the Pocket Doc for Pneumonia in the recent Google.org Impact Challenge!

We are excited to be moving forward with the project, which will address the diagnosis and management of pediatric pneumonia (and sepsis more broadly). Initial meetings with Google have been very positive, and we’re excited to draw on their expertise as we develop mobile tools that can be used globally by health care workers. In July, project team members will travel to Uganda and Kenya to talk to health care workers and local software engineers to build a roadmap for the Pocket Doc.

Stay tuned for updates, or read about the Pocket Doc for Pneumonia.
Over 150 researchers and investigators celebrated recent women’s health research at the Second Annual Women’s Health Research Symposium at the BC Women’s Hospital Research Institute in April 2017. During the Women’s Health in the Global Context session, three investigators presented on their current research.

Ms. Kalysha Closson presented her research on sexual self-efficacy, an individual’s perceived control in decision-making regarding safe sex. Sexual self-efficacy predicts consistent condom use among adolescents in South Africa, where adolescent women have disproportionately higher HIV acquisition rates. Her research reveals that women have higher sexual self-efficacy than men but that sexual self-efficacy is associated with higher consistent condom use only in men, not in women. The research supports the need for gender-targeted HIV-prevention interventions.

Dr. Dorothy Shaw presented some of her research recently published in the 2016 Lancet Maternal Health Series. The series analyzes data from the past 25 years, and exposes the growing gap between countries with the highest and lowest levels of maternal mortality. The gap has doubled in size since 1990: the pooled maternal mortality ratio for the 10 countries with the lowest levels is now 200 times greater than the ratio for the 10 countries with the highest levels. Opportunities to improve quality of care and reduce inequality exist in innovations in behavioural economics, mHealth, and the data revolution, implemented alongside traditional approaches of Universal Health Coverage and wider adoption of effective models of care.

Dr. Angeli Rawat presented her work on drivers that build resilient health systems so countries can cope during “shocks” and continue to provide maternal and newborn care, using the examples of the Ebola crisis in Sierra Leone and Liberia, and the recent earthquakes in Nepal. The existence of women community health workers who are empowered to act during the shock and the overall adaptability of the health system seem to have the greatest impact on resilience.

For more information visit the Women’s Health Research Institute’s website. You can also watch a photo story on the role of Community Health Workers in Sierra Leone during the Ebola response.
Hartley Bay is a remote First Nations Gitga'at community 150 kilometers from Prince Rupert in northern BC. Over the past year, BC Children’s has been re-establishing a partnership with the community to collaborate on child health and community health initiatives.

Most recently, teams from BC Children’s Hospital including pediatrics residents, pediatric dentistry residents, and ear nose and throat specialists have travelled to Hartley Bay in March and May to continue to build relationships with the Hartley Bay community and develop health projects in partnership with the community. The Gitga’at First Nation Band Council, the Nursing Station and the Hartley Bay School have invited and welcomed clinical staff and residents from BC Children’s Hospital to participate on several priorities articulated by the community around public health, active living, healthy nutrition and oral health. The focus areas will guide future collaboration between BC Children’s and families in Hartley Bay.

The partnership leads for work in Hartley Bay are David Benton (Health Director, Hartley Bay) and Damian Duffy (Executive Director, OPSEI). For more information, please contact Damian Duffy.

Exploring issues and challenges in global pediatric endocrinology

More attention is increasingly being paid to the global burden of pediatric non-communicable diseases (NCDs) such as obesity, diabetes, cardiovascular diseases, and other diseases of the endocrine system. Indeed, NCDs account for 63 per cent of global deaths — more than 36 million per year! Approximately 4 out of 5 of these deaths occur in low- and middle-income countries.

NCDs are especially important for young people, now and in the future. Two thirds of premature deaths in adults are associated with childhood conditions and behaviours. Yet, the diagnosis and treatment of NCDs, especially diseases of the endocrine system, is reasonably straightforward. It can also prevent irreversible complications in adulthood and have a major impact on quality of life and health.

Dr. Jean-Pierre Chanoine and colleagues at BC Children’s and around the globe are tackling some of the complex issues that prevent children from accessing the best quality care. (One close collaborator, Dr. Margaret Zacharin of the Royal Children’s Hospital in Melbourne, Australia, spoke on April 28 to a very full Chan Centre about issues and challenges in global pediatric endocrinology, telling stories of her work in the Asia Pacific and
Through collaborations with endocrinologists in some of the world’s most resource-poor settings, Dr. Chanoine, Dr. Zacharin and colleagues — working together through networks and non-profit organizations such as Global Pediatric Endocrinology and Diabetes — have identified key opportunities to make a difference in the lives of children with endocrine disorders. Additional training and support for frontline health care workers, increased access to essential medicines, and mobilization and support of patient care groups are all paths to better outcomes.

In fact, though the past 10 years have seen a major increase in capacity in pediatric endocrinology and diabetes in low- and middle-income countries, access to medicines needed to treat newly diagnosed conditions has not kept pace. Access to endocrinology medicines remains limited in most areas of the world despite the fact that they have often been used for decades in high-income countries and are affordable and often out of patent.

Increasing sustainable, affordable access to medicines for all pediatric endocrinology and diabetes patients is not simple, but it is vital. Efforts to do so will require concerted effort from governments, physicians, pharmaceutical industry, patients and their families, and global health advocates.

To learn more about access to medicines globally, explore the Global Pediatric Endocrinology and Diabetes website, read a recent article published by Dr. Chanoine’s research team, or see which pharmaceutical companies are doing the most to ensure that everyone has the medicine they need.

News & Upcoming Events

Congrats Dr. Kishore Mulpuri

Congrats to CICH collaborator Kishore Mulpuri on his recent award of the Canadian Orthopedic Association’s Presidential Award for Excellence! The award recognizes Dr. Mulpuri’s excellence in teaching, education and research, as well as his active volunteering at the Balaji Institute of Surgery, Research and Rehabilitation for the Disabled (BIRRD) in Tirupati, India. Dr. Mulpuri works especially on issues related to pediatric hip dysplasia and cerebral palsy while collaborating with other clinicians and researchers worldwide.

Know someone who deserves to be recognized for their achievements? Let us know!

Publication spotlight:

April 2017 - June 2017

Evaluating the impact of global health interventions is challenging, but crucial. In this quarter’s publication spotlight, CICH is highlighting work that points a way towards effective approaches for evaluating complex health interventions in resource-constrained settings. Recently published in BMC Health Services Research, the article describes process evaluation plans that assess effectiveness and not just efficacy. The article is related to community-based maternal health interventions in Nigeria being undertaken by PRE-EMPT.

Want to share something you’ve recently published? We’d love to hear from you.

Funding Opportunities

Submit your global health

Have an idea for an awesome global health project focused on research, education, or capacity building? The Child Health Integrative Partnerships Strategy (CHIPS) Committee (which involves BC Children’s Hospital, BC
proposals to CHIPS

Children’s Hospital Research Institute, and the BC Children’s Hospital Foundation) invites proposals for inspiring projects ranging from $25,000 to $2 million+. If approved by CHIPS, the BC Children’s Hospital Foundation will work in partnership with proposal leaders to develop fundraising proposals to share with potential donors.

CICH is partnering with CHIPS to identify effective, sustainable, collaborative global health projects. Get in touch for more information.

NIH Mobile Health — Technology in LMICs (R21):

The National Institutes of Health and the Fogarty International Centre have invited applications that encourage exploratory research to develop or adapt innovative mobile health technology specifically suited for low- and middle-income countries, and to determine the health-related outcomes associated with implementation of the technology. Of highest interest are innovative, well-designed multidisciplinary projects that aim to generate generalizable knowledge for the field. Grants will be for a maximum of USD $125,000 per year for up to 2 years.

For more information and to apply, visit the National Institutes of Health website.

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