AAP LEadership

The AAP grows its global health expertise with two recent hires

By: Janna Patterson, MD, MPH, FAAP, Senior Vice President, Global Child Health and Life Support, AAP

As the Academy continues to advance and align its global child health efforts, I am pleased to introduce two new staff members who will support the implementation of our new strategic plan.

Beena Kamath-Rayne, MD, MPH, FAAP, joined the Academy in August as the Vice President of Global Newborn and Child Health. In this leadership role, Dr. Kamath-Rayne will support, strengthen and grow our global newborn and child health initiatives, including the Neonatal Resuscitation Program (NRP), Helping Babies Survive (HBS), Advanced Pediatric Life Support (APLS), and Pediatric Education for Pre-hospital Professionals (PEPP).

Bio: Dr. Kamath-Rayne comes to the AAP from the Cincinnati Children’s Hospital Medical Center and the Department of Pediatrics at the University of Cincinnati College of Medicine, where she was an Associate Professor of Pediatrics and a neonatologist. She brings deep clinical expertise as well as a wealth of experience in quality improvement and implementation research to her new role at the Academy, having earned funding from many reputable organizations and authored more than 50 publications that address a variety of topics affecting neonatal and pediatric outcomes. She has successfully built teams of collaborators from a variety of disciplines including obstetrics, pediatrics, infection control, biostatistics, simulation, and medical education. Dr. Kamath-Rayne served as a member of the AAP Helping Babies Survive Planning Group from 2012 to 2019, and has also served as a member of the International Liaison Committee on Resuscitation Neonatal Delegation since 2016.

Q: What makes you excited to work with pediatricians on global child health?
A: Pediatricians are taking the lead on so many important issues facing our society and directly impacting children right now. The AAP is dedicated to the health and well-being of all children, and the majority of children live outside the U.S. For that reason, I am really proud of a dedicated division within the AAP that focuses on global health. More pediatricians than ever before are engaged in global health activities, from research to advocacy to clinical practice. We are working hard to harness the energy and enthusiasm of our members to do global health work in a coordinated, informed, and collaborative manner with our counterparts in country.

Q: How do you plan to incorporate your previous experiences as an AAP volunteer member and practicing neonatologist into your new role at the Academy?
A: To me, being a neonatologist has always been about caring for babies, no matter where they are born. We know that the majority of newborns who die do so in less-resourced settings, which propelled me to want to work in those areas. We also know that to make further inroads in under-five mortality, we really have to shine a focus on newborns. Making sure that newborns get the right start from the moment they are born is an equity issue that I feel I can tackle through collaborating with my team, AAP members and our partners through curriculum development, education, and implementation.

Q: Tell us about some of the global health priority issues you're currently tracking.

A: In my new role at the AAP, I am overseeing the Helping Babies Survive Programs. The clinical impact of these programs has been well documented, but there is still much improvement that can be done with implementation—changing processes and systems to improve the quality of care. I also see access to quality care being an issue. Further challenges to these programs are ongoing practice after initial trainings, bottlenecks in the supply chain, and reprocessing of equipment. I am excited to work with the team in tackling these challenges from both a research and quality improvement perspective.

Q: Do you have any favorite blogs, recent articles, or podcasts related to global newborn/child health you'd recommend?

A: In February, the Lancet devoted an entire issue to advancing women in science, medicine and global health. The Editor-in-Chief wrote a commentary for this issue discussing the importance of gender equity in health—not just as consumers and health providers, but as global health leaders. While women are disproportionately affected by the burden of disease and are a large part of the global health workforce, this is not reflected in global health leadership. I also follow the Healthy Newborn Network blog. They often highlight important articles, but pepper in stories about newborns around the world to remind me on a personal level why I am passionate about this work in the first place.

Mandy Slutkser, MPH joined our DC office in July as the Academy’s Director of Global Child Health Advocacy Initiatives. She will build on our advocacy work with the US government and by ensuring the Academy is a trusted, consistent voice in major global convening at the United Nations and through the World Health Organization.

Bio: Prior to joining the AAP, Mandy worked for more than nine years at RESULTS, a grassroots advocacy nonprofit organization focused on ending poverty. She brings a passion for children’s health to her role, having worked on TB, HIV, vaccines, and child nutrition. Prior to RESULTS, Mandy worked at BRAC University’s School of Public Health, John Snow, Inc., AIDSTAR-One Project, the National Institute of Health’s Division of Occupational Health and Safety and was an orphanage volunteer for young children in Khayelitsha, South Africa.

Q: What makes you excited to work with pediatricians on global child health?

A: The last two decades have seen incredible progress in global child health, with under-five mortality rates cut by more than half. As the world’s experts in caring for children, Pediatricians are best placed to not only ensure children survive but that they thrive. With increased global efforts, pediatricians can work together to hold leader’s accountable for investments in child health and ensure every child, regardless of who they are or where they are from, has an opportunity to reach their potential.

Q: What can members do today to support our efforts?

A: I think it would be great for members to learn more about the US government’s investments in global health. The Kaiser Family Foundation (KFF) does a great job of breaking down the US global health budget by program area. KFF also has a great legislation tracker for the more than 40 pieces of legislation related to global health that were introduced in the last two years.

Q: Tell us about some of the issues you're currently tracking.

A: Over the last two months, I’ve been following the United Nations High-Level Meeting on Universal Health Coverage (UHC), which took place last month during the United Nations General Assembly. The AAP has been championing UHC for children in all settings and focusing on the importance of making sure children and their families have access to needed health services without financial hardship. Currently, half of the world’s population still do not have full coverage of essential services and over 800 million people spend at least 10% of their household budgets to pay for medical care.

Q: Do you have any favorite blogs, recent articles, or podcasts you'd recommend?

A: I recently read a really interesting blog by my colleague Dr Madhukar Pai titled “10 Fixes for Global Health Consulting Malpractice”. It addresses many of the problems that arise when public health practitioners from high-income countries provide technical assistance in low-income countries and identifies ways to prevent such malpractice. I also highly recommend going through the list of over 130 recommended books on global health that Dr Pai generated just by asking his twitter followers, “If there is one book that you would like all global health students to read, what would it be?”
NOTE FROM AN EXECUTIVE COMMITTEE MEMBER

Dear SOICH Members,

We hope to see many of you at the AAP National Conference & Exhibition October 25 – 29, 2019 in New Orleans, Louisiana! We have curated an extensive educational program spanning several days and touching on many aspects of global child health. SOICH-sponsored global child health highlights from each day of the conference are listed below.

We look forward to meeting many of you in October and hope you will enjoy our educational programming and networking opportunities!

Sincerely,

Heather Haq, MD, MHS, FAAP, SOICH NCE Education Chair

Friday, October 25

8:30 AM - 11:30 AM
Global Child Health Course (C1011): Pearls for Children’s Surgical and Perioperative Care in Resource-Limited Settings
Frequently, pediatricians who work in low-resource settings are called upon to help manage children with complex medical needs both pre- and post-operatively. SOICH has collaborated with pediatric surgical colleagues across multiple disciplines to bring you a half-day pre-course focused on surgical and perioperative care needs in resource-limited settings. This multidisciplinary panel will share resources relevant to pediatric medical, anesthesia, and surgical specialists, emphasizing perioperative pitfalls, plain X-ray findings (when advanced imaging is not available), safe anesthesia and sedation, and pain management.

Saturday, October 26th

8:00AM - 1:30PM
SOICH and Section on Breastfeeding (SOBr) joint half-day educational H-program (H2023): Global Lessons to Improve Nutrition in the First 1,000 Days
Featuring a diverse panel of speakers, we will explore the global landscape of child nutrition with a focus on breastfeeding, nutrition and neurodevelopment during the first 1,000 days of life, and the prevention, diagnosis, and treatment of micro and macro malnutrition. This session will include a hands-on demonstration of nutritional assessment tools, led by a nutrition expert from the Centers for Disease Control (CDC).

Sunday, October 27

Check out the SOICH scientific abstract posters and SOICHpix that will be displayed in the H-program room throughout the day.

8:00AM - 1:00PM
SOICH, Council on Community Pediatrics (COCP) and Section on International Medical Graduates (SOIMG) joint half-day educational H program (H3025): Refugee Health: Caring for those Seeking Safe Haven in our Nation of Immigrants
This program will explore the unique health and mental health concerns facing refugee children and families, including the impacts of trauma experienced throughout the migration journey. Attendees will learn strategies to increase children’s access to health care; how to build community partnerships; skills to work with medical interpreters; and opportunities to support families seeking asylum.

1:30PM - 4:45PM
SOICH Breakout Program (H3143): Global Health Update – Research, Advocacy, and Awards
Don’t miss the SOICH Breakout Program! This session will start with SOICH scientific abstracts selected for platform presentations. Mandy Slutsker, MPH, Director, Global Child Health Advocacy, AAP, will give a presentation on the View from Washington: Update on Global Child Health Advocacy. After a short break, we will present awards for best abstracts, SOICHpix, and the Hillman-Olness Award for lifetime achievement in global child health. The session will conclude with SOICH business updates and time for networking.

5:30PM - 7:00PM
International Reception
Please join us and bring your global child health champion friends for an evening of networking and appetizers. We will also hear spark talks from our International Travel Awardees.
HILLMAN-OLNESS AWARD

Congratulations to the 2019 Hillman Olness Award Winner!

The Hillman-Olness Award for lifetime service and lasting contributions to global child health was established in 2011 in honor of Liz Hillman, the late Donald Hillman, and Karen Olness. It recognizes individuals who have devoted their careers to advancing global child health.

This award recognizes a member of AAP/SOICH for his/her lifetime service and lasting contributions to global child health. The selection committee considers nominees who have worked in the area of global child health, in both domestic and/or international settings.

This year Dr. Cindy Howard was chosen by the SOICH executive committee as the winner and is joining leaders like Errol Alden, Linda Arnold, William Keenan and Donna Staton who have previously received this recognition. Dr. Howard just like her predecessors have more than enough merit to deserve it. Here is a short bio to honor Dr. Howard which summarize her numerous accomplishments in Pediatrics in particular Global Health.

Cindy Howard, MD, MPHTM is an Associate Professor of Pediatrics and Director of the Division of Global Pediatrics in the Department of Pediatrics at the University of Minnesota. Dr. Howard received her MD degree at the University of North Carolina, completed her pediatric internship and residency at the University of Alabama Children’s Hospital. She completed her pediatric infectious disease fellowship and MPH in tropical medicine at Tulane University. Prior to coming to the University of Minnesota Dr. Howard practiced in Germany, Nigeria, Uganda and inner city Baltimore.

Her areas of interest include developing and measuring the effectiveness of global health curriculum; training/mentoring young men and women to address global child health challenges particularly infectious diseases, protein energy malnutrition and health inequity; and the medical care of immigrant, refugee and internationally adopted children. Dr. Howard has two 17 year old twin daughters, Christine and Loice, who were born in the Democratic Republic of Congo. She enjoys time with her children, gardening and reading.
PARTNERSHIPS CORNER

Who’s Doing What?

By: Nicole St. Clair, MD, FAAP
SOICH Partnerships Chairperson

In this section, we offer updates on what other groups and organizations are doing related to global child health, including other medical and surgical subspecialties. If you have any updates for us, please send to soich@aap.org. Today, we are featuring updates from the newly formed Section on Neonatal Perinatal Medicine (SoNPM) Global Health Subcommittee. The subcommittee’s vision is to serve as partners in an international neonatal perinatal medicine community dedicated to improving the system, quality, experience and outcome of care for every newborn.

Over the past decade, the SoNPM has contributed to global neonatal mortality reduction in significant ways, including leadership on the Helping Babies Survive curricula (Helping Babies Breathe, Essential Care for Every Baby, Essential Care for Small Babies, and Improving Care of Mothers and Babies: A Guide for Improvement Teams). Following the successful launch of these programs, AAP members and our global community have increased tools to contribute to international partnerships, saving newborn lives, and improving newborn care globally.

Through the establishment of this Subcommittee, SoNPM members seek to draw from the pool of almost 3500 neonatal perinatal medicine physicians in SoNPM, and provide a unique forum and opportunity to contribute collectively. The Subcommittee will serve as a forum to promote leadership in member-identified topics such as Neonatal Perinatal Medicine fellowship global health experiences, and global health networking on career development, ethics, research and advocacy. The first deliverable from this Subcommittee is the SoNPM sponsorship of an iCATCH grant focused on Newborn Health for the 2019 and 2020 application cycles.

The SoNPM Global Health Subcommittee plans to liaise closely with SOICH members to promote collaboration and synergy. If you are a SOICH member passionate about global newborn health, and are not yet a member of the Section on Neonatal Perinatal Medicine, please consider sharing your ideas for collaboration. For additional questions, please contact Danielle Ehret, MD, MPH at dehret@vtoxford.org.
GLOBAL SURGERY

Role of Surgery in Global Pediatric Care

By: Lina Roa, MD, MPH & John G. Meara, MD, DMD, MBA

Affiliations:
1. Program in Global Surgery and Social Change, Department of Global Health and Social Medicine, Harvard Medical School, Boston, MA USA
2. Department of Plastic and Oral Surgery, Boston Children’s Hospital, Boston, MA USA

Globally, 5 billion people lack access to safe, timely and affordable surgical and anesthesia care. Of these, it is estimated that 1.7 billion are children and adolescents. Pediatric conditions amenable to surgery cause significant mortality and morbidity worldwide, particularly in low and middle-income countries (LMIC), where 90% of pediatric deaths occur. For example, road traffic injuries account for more deaths in children ages 5 to 14 than HIV, malaria and tuberculosis combined. Furthermore, congenital conditions such as cardiac, craniofacial and neural tube anomalies account for approximately 32 million Disability Adjusted Life Years (DALY). Despite pediatric surgical procedures being shown to be cost-effective and recognized as essential surgical procedures, delivery of pediatric surgical care has not been prioritized. Several challenges to provide adequate surgical care remain including lack of infrastructure, and specialized workforce. For example, it is estimated that low-income African countries have a shortfall of 3,000 pediatric surgeons and the anesthesia provider density is estimated to be one-hundred times lower in LMICs compared to high-income countries.

To address the unmet burden of pediatric surgical disease, there have been nascent efforts by the global community to strengthen surgical systems that include specialized pediatric care. In 2015, the World Bank’s Disease Control Priorities-Third edition recognized 44 surgical procedures as essential and cost-effective, these include procedures for children such as repair of congenital anomalies (cleft lip and palate, club foot, hydrocephalus, anorectal malformations), male circumcision, inguinal hernia repair, and orthopedic procedures. That same year, the Lancet Commission on Global Surgery recommended the collection of six surgical indicators as well as a framework for the development of National Surgical, Obstetric and Anesthesia Plans (NSOAPs). These plans integrate surgical and anesthesia care into national health plans, ensuring that the burden of surgical diseases of the population are addressed. Since 2017, a dozen African countries are in the process of developing or implementing NSOAPs. In 2017, Nigeria was the first country to embark on the NSOAP process with a particular focus on pediatric surgical care given that 43% of its population is children under 15 years of age. Other global efforts include the Global Initiative for Children’s Surgery, which was founded in 2016 to provide a unified platform to identify barriers to pediatric surgical care and standardize optimal resources needed to provide surgical care.

At the Program in Global Surgery and Social Change at Harvard Medical School, we advocate for universal access to safe, timely and affordable surgical care by conducting impactful research that will inform national and global policy. Children in LMICs remain a vulnerable group with a large unmet surgical burden. Addressing this burden will be essential to achieve the Sustainable Development Goal 3 targets and to promote healthy lives and development for children around the world.

Resources:
INTERNATIONAL LEADER IN GLOBAL HEALTH

IPA LEAD: Child Health Emerging Leaders Program

By: Linda Arnold, Associate Professor of Pediatrics and Emergency Medicine, Yale School of Medicine

Improving global newborn, child and adolescent health requires Leadership, Engagement, Advocacy and Determination from the world’s pediatricians and their professional societies, which have the power to advocate for children on a large scale. This was the inspiration for “IPA LEAD: Child Health Emerging Leaders Program”, a novel mentored leadership development program tailored to the needs of early career pediatricians seeking greater influence on child health priorities within organizations, health systems and global development agendas. IPA LEAD was launched in March, with support from Johnson & Johnson, during the IPA Congress in Panama.

While pediatricians are recognized experts in child health, they rarely receive formal leadership training as part of their medical education. Effective leadership skills are essential to mobilizing communities, health systems and multi-sector responses to meet the needs of children. IPA LEAD is designed to increase leadership capacity, networking and collaboration among young physicians in pediatric professional societies throughout the world, and to provide high-level mentorship and leadership opportunities for the next generation of global leaders in child health.

Goals of IPA LEAD include increasing engagement of early career pediatricians within the IPA and its member societies, fostering collaborations across borders, disciplines and sectors to advance child health, and improving key leadership skills in both current and future pediatric leaders within individual pediatric societies and the global child health community.

IPA LEAD launched during the IPA Panama Congress in March, with formal leadership training sessions for LEADers and their mentors, networking with senior IPA and member society leaders, and an IPA LEAD Hub in the exhibit hall, with activities designed to showcase the program and first cohort of IPA LEAD participants – a diverse group of early career pediatricians with recognized leadership potential, a demonstrated commitment to advancing child health, track records of meaningful engagement, and pledges of support and mentorship from senior leaders within their pediatric professional societies.

Danielle Ehret, a member of the first cohort of IPA LEAD Participants, speaking at the IPA Congress

First cohort of IPA LEAD Participants

continued on next page ▶
The first cohort of IPA LEAD participants includes: Angela Osei-Bonsu (Ghana), Anne Rerimo (Kenya), Bharath Reddy (India), Catharine Mayung Sambo (Indonesia), Cecelia Nuta (Liberia), Danielle Ehret (USA), Fitsum Belay (Ethiopia), Geraldine Norte (Panama), Kenan Barut (Turkey), Melvin Ramirez (Honduras), Randula Ranawaka (Sri Lanka), Santorino Data (Uganda), Sayaka Horiuchi (Japan), Sebastian Gray (England), Smriti Mathema (Nepal).

Between scheduled in-person leadership trainings, IPA LEADers have regular individual “coaching” calls with a program manager, and participate in quarterly web-based convenings that enable them to work together on an ongoing basis, discussing leadership training modules, sharing successes, and identifying strategies for addressing leadership challenges and barriers to the design and implementation of individual leadership projects—which will be presented during the IPA Congress in Glasgow in August, 2021.

The majority of IPA LEADers will be coming to New Orleans for NCE, with travel support from the AAP. Please come introduce yourself at the SOICH Program, during the International Reception, or if you see them at other sessions and events. Together, we can go farther, and “be the change.”

Goals of IPA LEAD: Child Health Emerging Leaders Program

- Identify and build leadership capacity among emerging leaders in child health from around the world, providing them with the knowledge and skills required to drive improvements in child health.
- Create and deliver a formal mentored leadership development program tailored to the needs of pediatricians seeking greater influence on child health priorities within organizations, health systems and global development agendas.
- Increase engagement and leadership opportunities for young physicians within the IPA and national pediatric societies, to build current and future capacity of pediatric professional societies to advocate and lead improvements in children's health and well-being at local, national and global levels.

For over 100 years, the International Pediatric Association (IPA) has been the only global body representing pediatric professional societies from around the world. IPA provides global leadership on key child health issues; advocates locally, nationally and globally for high quality, evidence-based and child-centered pediatric care; collaborates with leading global health players across multiple sectors to advance maternal and child health; and connects over a million pediatricians, from 143 countries and 164 pediatric member societies, enabling us to work together to improve the health and well-being of more than a billion newborns, children and adolescents worldwide.
ICATCH CORNER

Tsimane’ Territory Multi-Medium Public Health Education to Prevent Childhood Illness

Using local radio to share pediatric health prevention messages in indigenous communities on Bolivia’s Rio Maniqui

ICATCH grant July 2016 - June 2019, Director Tomás Huanca, PhD and Co-Director Erin Masterson, PhD, MPH

In 2015 two cousins, Maya Masterson, MS, and Erin Masterson, PhD, MPH spent several months in the Bolivian Amazon collaborating with Dr. Tomas Huanca PhD (Director), Esther Conde (Co-Director) and their local team from the Centro Boliviano de Investigacion y Desarrollo Socio Integral (CBIDSI) to collect data for a research study focused on adolescent health. During visits in dugout canoes to 15 remote Tsimane’ villages, the team presented a brief health educational workshop to the communities, sharing the message in the native Tsimane’ language through the team translators using visuals drawn on large poster boards. Afterward, the community members, leaders and teachers, and the tribe’s governing body, the Gran Consejo Tsimane’ (GCT) enthusiastically requested continuation and expansion of these health messages. Upon her return to the U.S. and through a CUGH newsletter on funding opportunities, Erin noticed information about ICATCH grants. Thus was borne one of ICATCH’s most unique media/health education projects—a community project requested by stakeholders (the GCT) with local partnership of a well trusted collaborator, CBIDSI.

Background:
The Tsimane’ people have a population of approximately 17,000 in 100 villages in the Amazonian lowland, most accessible by footpath or dugout canoes and many hours from the market town of San Borja where the local radio station broadcasts from. This population speaks the indigenous Tsimane’ language and many do not speak or read Spanish. Their access to health care is limited by language, cost and geographic barriers. None of the villages have running water and there is bacterial contamination in the river and community wells used for drinking. The Tsimane’ people are undergoing a dietary transition from a traditional hunting, fishing and horticultural diet to a market economy with access to processed foods and refined sugars/simple carbohydrates. It is estimated that more than half of Tsimane’ children are stunted and have parasitic GI burdens, yet overweight/obesity and dental decay in adolescents and adults is on the rise.

ICATCH Project: With the support of ICATCH funding, this team developed, translated, recorded and broadcast three educational health messages, with a fourth currently in the works. Their chosen themes covered oral health, sanitation and hygiene, infectious illness, water care, and traditional and market foods. They recorded radio programs at the local station/studio in town. The recording was taken to the Tsimane’ radio program to be broadcast throughout the Tsimane’ Territory five times per week. They targeted peak listening times, during the weekend, for airings. The team also hand drew large poster books that CBIDSI uses as visuals for sharing these messages when their team is in the communities with visiting researchers. Finally, the team is working on producing DVDs that they will distribute to leaders and teachers in communities that have electricity.

The team ran into challenges in the first year of this ICATCH project, including a change in local Tsimane’ government policy to allow the radio staff to both manage and make decisions around recording of radio programs, which meant increased costs and requirements for the team to create their recordings. However, the result was a much higher quality and more representative voice in the recordings: male and female voices shared the message in both Spanish and in Tsimane’ with accompanying music in the background. The team was also undaunted by a technical failure which required them to reorder their budget to replace their translation laptop and software, procured from Tech Soup.

In year 2 of ICATCH grant funding, in addition to continuing work on translation, recording and broadcasting of health education messages, the team began scrutinizing the feasibility of developing local production of ceramic water filters. CBIDSI (Tomas Huanca and Esther Conde), Erin Masterson and Potters Without Borders (as technical advisors) completed a feasibility study in 2018.

Finishing their 3rd year of funding, this team is in the process of finalizing a fourth health education message for local radio and combining all four recorded messages into a DVD production. The CBIDSI team continues to carry the visual posters they developed as part of this project with them when they are working in the Tsimane’
communities with visiting research teams.

**Future Plans:**
From the beginning of this project, this team has been inspired by their long-term vision to develop of a community health worker (CHW) program for the Tsimane' Territory. A next step in this direction is the startup of local ceramic water filter production that will be led by CBIDSI and will hopefully create a sustainable basis by which to begin training CHWs. The team is currently raising funds to kick start this next endeavor. Interest in supporting the project can be directed to Erin at e-masterson@u.northwestern.edu.
MEMBER ON THE SPOTLIGHT

Collaborative Pediatric Education in Nepal

By: Katie McMullen | Health Volunteers Overseas

“It is a warm and welcoming community, and very safe. People will make you feel at home! It is a fabulous opportunity,” noted Molly Rideout, MD in a post-trip survey summarizing her experience as volunteer at the Health Volunteer Overseas (HVO) project at Lumbini Medical College (LMC) in Tansen, Nepal. She completed her first assignment at the site in January 2019.

HVO is a global health nonprofit based in Washington, DC that is dedicated to improving the quality and availability of care in resource-scarce countries by providing education and professional development opportunities to the local health workforce.

Dr. Rideout also serves as project director for the site in Tansen. In this volunteer leadership position, she works closely with on-site staff to understand their teaching and training needs. She also assists in the placement and preparation of the HVO pediatric volunteers traveling to the site.

While visiting LMC, Dr. Rideout provided lectures on newborn jaundice, newborn resuscitation, ECG reading pneumonia, and CXR reading and rashes. She introduced the use of mock codes, or “drills,” to enhance practical skills. Dr. Rideout also joined a community outreach trip with a group of first-year nursing students. Addressing a group of nearly 100 women from a local village, the group discussed the health effects of junk food, as well as menstrual hygiene.

“I felt that my contributions were welcome,” observed Dr. Rideout. “My teaching was valued, and I think it helped to decrease the workload for the pediatricians. I felt like my involvement met the needs of each group - students, interns, residents, pediatricians, nurses - in different ways.”

Following Dr. Rideout’s visit, Jeffrey Green, MD, MPH – a pediatrician specialized in clinical genetics – volunteered at LMC in February 2019. He provided a series of lectures related to his subspecialty. As a Master Trainer for Helping Babies Breathe (HBB), he also worked with two LMC staff members to organize a two-day HBB course for 18 medical interns and nurses.

In addition to offering training and education opportunities for pediatric residents, interns and medical students at LMC, HVO volunteers contribute to academic and professional development of pediatric faculty through mentorship, collaboration and train-the-trainer courses. The site is seeking general practitioners, as well as subspecialists in nephrology, cardiology, development, and neonatology. Assignments at LMC are 3-4 weeks.

HVO volunteers must be experienced, board-eligible general pediatricians or pediatric subspecialists. Retired pediatricians and pediatricians in academic practice are also encouraged to apply. In addition to its project in Nepal, HVO seeks volunteers, including subspecialists, for projects in Bhutan, Cambodia, Laos, St. Lucia, and Uganda (Kabale and Kampala). For a full list and description, please visit our pediatric program page.

To start the volunteer placement process, please complete the HVO volunteer application or contact HVO.
INTERNATIONAL CHILD HEALTH IN THE NEWS

Despite progress, only 3 African nations expected to meet global breastfeeding goal

Estimates show more than 800,000 child deaths could be averted annually with optimal breastfeeding

American Academy of Pediatrics Policy Statement Provides Guidance on Caring and Advocating for Immigrant Children and Families

As communities grow increasingly diverse, pediatricians play a role in helping immigrant families with health care needs through core competencies and advocacy. Urging health equity for immigrant children, the American Academy of Pediatrics (AAP) published a policy statement that describes how compassionate care and cultural understanding strengthens families, builds individual resilience and enriches society at large.


Background: On Dec 1, 2006, Mexico's public health-care insurance scheme, Seguro Popular, implemented the Medical Insurance Century XXI (SMSXXI) programme, to provide insurance to children younger than 5 years without social security.

Victoria, Australia Child Hearing-Loss Databank to Go Global

A unique databank that profiles children with hearing loss will help researchers globally understand why some children adapt and thrive, while others struggle

International team discovers unique pathway for treating deadly children's brain cancer

An international team of researchers led by Yale University, University of Iowa, and the Translational Genomics Research Institute (TGen), an affiliate of City of Hope, has discovered a new pathway that may improve success against an incurable type of children's brain cancer.
Groups to Follow

Take a look at the groups and people followed by the AAP’s main and global health twitter accounts to get a better sense of the major players in global child health advocacy. Below are a few suggested accounts to get you started:

- **UNICEF, UN, UN_EWEC**: The United Nations has several official accounts for different regional offices, programs, and agencies. Read about them [here](#) and then follow the ones most relevant to your interests.

- **Save the Children US**: Save the Children is celebrating its 100th birthday in 2019 – learn more about current campaigns [here](#).

- **PATH**: PATH focuses on advancing health equity through innovation and partnerships.

- **Global Health Council**: The AAP is active member of the Global Health Council.

AAP Leaders in Global Health to Follow

- **Alcy Torres**  
  MD, FAAP  
  Membership & Communication Chairperson, SOICH

- **Linda Arnold**  
  MD, FAAP  
  Associate Professor of Pediatrics, Yale School of Medicine

- **Janna Patterson**  
  MD, MPH, FAAP  
  VP Global Child Health & Life Support, AAP

- **Katherine Yun**  
  MD, MHS, FAAP  
  Policy & Advocacy Chairperson, SOICH

- **Parminder Suchdev**  
  MD, MPH, FAAP  
  Immediate Past Chairperson, SOICH

- **Heather Haq**  
  MD, MHS, FAAP  
  Education Person Chairperson, SOICH

AAP has developed a network of pediatricians on Twitter, known as #tweetiatricians, who regularly interact with AAP and each other.

To subscribe to AAP’s official #tweetiatrician list, visit this [page](#).

To request to be added to the list, email [Helene Holstein](mailto:helene.holstein@americanpediatrics.org).
Recent Tweets from @AAPGlobalHealth

AAP Global Health
@AAPGlobalHealth

SELF partnered with @AmerAcadPeds to create a series of medically accurate vaccine photos that convey the life-saving importance of vaccines. They’re available to download by anyone to use for free, with proper attribution.

AAP Global Health
@AAPGlobalHealth

Over half of the world’s population living in 91 countries benefit from large graphic pack warnings featuring all recommended characteristics. The AAP urges quick adoption of the @US_FDA’s proposed graphic warnings. #MPOWER

AAP Global Health
@AAPGlobalHealth

#HelpingBabiesSurvive program train #healthworkers to support & empower #breastfeeding moms b/c breastfeeding is critical to the health of mothers AND babies! #WBW2019 #EmpowerparentsEnablebreastfeeding

Upcoming Social Media Observances

The last quarter of 2019 offers several opportunities to join the global conversation.

- **World Polio Day**
  - October 24

- **Universal Children’s Day**
  - November 20

- **Human Rights Day**
  - December 10

- **World Diabetes Day**
  - November 14

- **World AIDS Day**
  - December 1

- **Int’l Universal Health Coverage Day**
  - December 12
GLOBAL HEALTH LITERATURE REVIEW


Study Objective: To gain an understanding of the variation in available resources and clinical practices between neonatal units (NNUs) in the low-income and middle-income country (LMIC) setting to inform the design of an observational study on the burden of unit-level antimicrobial resistance (AMR)...


Abstract: As interest in global health education continues to increase, residency programs seeking to accommodate learners’ expectations for global health learning opportunities often face challenges providing high-quality global health training. To address these challenges, some residency programs collaborate across medical specialties to create interdepartmental global health residency tracks...


BACKGROUND: Gaps persist in HIV testing for children who were not tested in prevention of mother-to-child HIV transmission programs. Oral mucosal transudate rapid HIV tests (OMT) have been shown to be highly sensitive in adults but their performance has not been established in children...


Abstract: Neonates born very preterm (before 32 weeks’ gestational age), are a significant public health concern because of their high-risk of mortality and life-long disability. In addition, caring for very preterm neonates can be expensive, both during their initial hospitalization and their long-term cost of permanent impairments. To address these issues...


Abstract: Zika virus (ZIKV) infection during pregnancy causes congenital abnormalities, including microcephaly. However, rates vary widely, and the contributing risk factors remain unclear. We examined the serum antibody response to ZIKV and other flaviviruses in Brazilian women giving birth during the 2015–2016 outbreak...


Concussion, also referred to as mild traumatic brain injury (MTBI), is a common pediatric condition. This article reviews global perspectives on the epidemiology, treatment, and prognosis of concussion in children...
UPCOMING EVENTS IN GLOBAL HEALTH

AAP National Conference
Please join us in New Orleans for #AAP19 from October 25-29. Reminder: Sessions now begin on Friday afternoon and will conclude after the Tuesday plenary session. Register by September 13 to save with advance pricing. Access the [conference schedule](#) to view education sessions, special events and meeting details!

Featured Speaker: Kim Schrier, MD, FAAP (D-WA), US Representative, United States Congress
US Rep Kim Schrier, MD, FAAP (D-WA), is the first pediatrician to be elected to Congress and the only female physician serving in Congress. She will discuss what compelled her run for office, what it’s like to be a member of Congress, and why it’s so important for pediatricians to advocate for children.

5th International Conference on Global Public Health

The Pediatric Academic Societies 2020 Meeting
This event will be held at the Pennsylvania Convention Center from Wednesday, April 29 through Wednesday, May 6. The PAS Meeting brings together thousands of pediatricians and other health care providers united by a common mission: improve the health and well-being of children worldwide. The PAS Meeting is the largest and most prestigious pediatric research meeting in the world, bringing together over 7,500 scientific attendees.

30th International Pediatric Association Congress
Join us in Glasgow, Scotland for the 30th International Pediatric Association Congress (IPA 2021). With support from the Royal College of Paediatrics and Child Health, IPA 2021 will deliver a diverse program focused on global pediatric care and emerging child health issues. Working for every child, every age, everywhere, IPA is committed to saving the lives and improving the health of more than a billion children worldwide.

UNICEF’s State of the World’s Children report is due to be published by mid-October.
The United Nations Children’s Fund (UNICEF) works in more than 190 countries and territories to put children first. UNICEF has helped save more children’s lives than any other humanitarian organization by providing health care and immunizations, safe water and sanitation, nutrition, education, emergency relief and more.
### Friday, October 25

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
<th>Faculty</th>
<th>Sponsored by</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30 - 11:30 AM</td>
<td>C1011: Global Child Health Course Pearls for Children’s Surgical and Perioperative Care in Resource-Limited Settings</td>
<td>MCC 243-245</td>
<td>P Aldana, F Evans, S Krishnaswami, H Otero, B Shaw</td>
<td>SOICH, SOS, SORa, SOA, SOSu</td>
</tr>
<tr>
<td>1:00 - 2:30 PM</td>
<td>W1051: Creative Innovations for Pediatric Care in Low-Resource Settings (Repeats as W1091)</td>
<td>MCC 286-287</td>
<td>T Slusher, Y Vaucher</td>
<td>SOICH, SOCC, SOPT</td>
</tr>
<tr>
<td>1:00 - 2:30 PM</td>
<td>I1041: Screening for Adverse Childhood Events in Primary Care: Pitfalls and Possibilities (Repeats as I2162)</td>
<td>MCC 296</td>
<td>R Gillespie</td>
<td>COCAN, COFCAKC</td>
</tr>
<tr>
<td>3:00 - 4:30 PM</td>
<td>F1068: Identifying and Providing Medical Care for Victims of Sex Trafficking</td>
<td>MCC R07</td>
<td>T Chaffee</td>
<td>COCAN, SOAH, SOB</td>
</tr>
<tr>
<td>8:30 - 11:30 AM</td>
<td>F1091: Creative Innovations for Pediatric Care in Low-Resource Settings (Repeats from W1051)</td>
<td>MCC 286-287</td>
<td>T Slusher, Y Vaucher</td>
<td>SOICH, SOCC, SOPT</td>
</tr>
</tbody>
</table>

### Saturday, October 26

<table>
<thead>
<tr>
<th>Time</th>
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<th>Faculty</th>
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</tr>
</thead>
<tbody>
<tr>
<td>8:00 AM - 1:30 PM</td>
<td>H2023: Global Lessons to Improve Nutrition in the First 1,000 Days Joint H Program</td>
<td>Hilton Grand Ballroom A</td>
<td>C Engmann, L Gummer-Strawn, Y Piovanetti, P Suchdev, R Whitehead</td>
<td>SOICH, SOBr</td>
</tr>
<tr>
<td>8:00 AM - 10:00 AM</td>
<td>I1080: Blind Side: Implicit Bias We Hide, Abide, and Push Aside (Repeats from I1080)</td>
<td>MCC 294</td>
<td>T Johnson</td>
<td>SOIMG, CONACH, PSOMHEI, SOLGBTHW, COFCAKC, COEC, COCP, COOWD, Family Partnerships Network</td>
</tr>
<tr>
<td>1:00 - 2:30 PM</td>
<td>I1041: Screening for Adverse Childhood Events in Primary Care: Pitfalls and Possibilities (Repeats from I1041)</td>
<td>MCC 296</td>
<td>R Gillespie</td>
<td>COCAN, COFCAKC</td>
</tr>
<tr>
<td>2:00 - 2:45 PM</td>
<td>F2145: Unaccompanied and Scared: Supporting Immigrant Children (Repeats as F3045)</td>
<td>MCC R09</td>
<td>M Griffin</td>
<td>COPACFH, COCP, COFCAKC, COCAN</td>
</tr>
<tr>
<td>3:00 - 4:30 PM</td>
<td>I1041: Screening for Adverse Childhood Events in Primary Care: Pitfalls and Possibilities (Repeats from I1041)</td>
<td>MCC 296</td>
<td>R Gillespie</td>
<td>COCAN, COFCAKC</td>
</tr>
<tr>
<td>5:00 - 5:45 PM</td>
<td>F2251: Infectious Disease Considerations in Refugees, Immigrants, and International Adoptees</td>
<td>MCC 352</td>
<td>T Tan</td>
<td>COCP, COFCAKC, SOID</td>
</tr>
</tbody>
</table>

### Location Legend

- **MCC** = Ernest N. Morial Convention Center
### Sunday, October 27

<table>
<thead>
<tr>
<th>Time</th>
<th>Event Description</th>
<th>Location</th>
<th>Faculty</th>
<th>Sponsored by</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 AM - 1:00 PM</td>
<td>H3025: Safe Haven in the US: Advancing the Health and Well-being of Migrant and Refugee Families in Our Communities Joint H Program / SOIC Abstract Display</td>
<td>Hilton - Churchill CD</td>
<td>T Betancourt, A Green, A Ilbrahim, J Linton</td>
<td>COCP, SOICH, SOIMG</td>
</tr>
<tr>
<td>8:30 - 9:15 AM</td>
<td>F3045 Unaccompanied and Scared: Supporting Immigrant Children (Repeats from F2145)</td>
<td>MCC 228-230</td>
<td>M Griffin</td>
<td>COPACFH, COCP, COFCAKC, COCAN</td>
</tr>
<tr>
<td>8:30 - 10:00 AM</td>
<td>I3062: Tools and Resources to Assist Children and Families Who Have Immigrated (Repeats as I3231)</td>
<td>MCC 296</td>
<td>E Collins, M Curran</td>
<td>COCP</td>
</tr>
<tr>
<td>1:30 - 4:45 PM</td>
<td>H3143: Section on International Child Health Breakout Session: Global Health Update – Research, Advocacy, and Awards</td>
<td>Hilton - Churchill CD</td>
<td>M Pitt</td>
<td>COCP, SOICH, SOICH, SOICH, SOIMG</td>
</tr>
<tr>
<td>1:30 - 5:30 PM</td>
<td>H3145: Media Representation and Cross-Cultural Bridging: Challenges, Successes, and Opportunities H Program</td>
<td>Hilton New Orleans Riverside, Canal</td>
<td>S Bell, E Bracho-Sanchez, A Ibrahim, K Yun</td>
<td>COCM</td>
</tr>
<tr>
<td>4:00 - 5:30 PM</td>
<td>I3231: Tools and Resources to Assist Children and Families Who Have Immigrated (Repeats from I3062)</td>
<td>MCC 296</td>
<td>E Collins, M Curran</td>
<td>COCP</td>
</tr>
</tbody>
</table>

### Monday, October 28

<table>
<thead>
<tr>
<th>Time</th>
<th>Event Description</th>
<th>Location</th>
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</tr>
</thead>
<tbody>
<tr>
<td>8:00 AM - 12:30 PM</td>
<td>H4026: Hidden Figures: The Pivotal Role of the Pediatric International Medical Graduate (IMG) in US Health Care</td>
<td>MCC 231-232</td>
<td>J Boulet, A Cabrera, J Pederson, W Pinsky, C Wendt</td>
<td>COCP, SOICH, SOICH, SOIMG</td>
</tr>
<tr>
<td>8:00 AM - 1:15 PM</td>
<td>C4016 Advanced Point-Of-Care Ultrasound-Guided Resuscitation: Precision Care for the Critically Ill Child</td>
<td>MCC 391-392</td>
<td>B’ D’Amico, A Kornblith, A Sivitz, A Toney</td>
<td>SOEM, SOICH, SOCH, SOCC</td>
</tr>
<tr>
<td>8:00 AM - 5:00 PM</td>
<td>C4017 Basic Point-of-Care Ultrasound Workshop: Improving the Care of Children</td>
<td>MCC 231-232</td>
<td>A Chen, J Cohen, E Constantine, J Deanehan, M Levine, J Rabiner, D Teng, F Warkentine</td>
<td>COCP, SOICH, SOICH, SOICHEM</td>
</tr>
<tr>
<td>9:30 - 10:15 AM</td>
<td>F4082 Volunteerism vs Voluntourism: Professional, Ethical, and Best Practices for Medical Volunteers</td>
<td>MCC 231-232</td>
<td>M Pitt</td>
<td>SOCP, SOICHEM, SOCP, SOCH</td>
</tr>
<tr>
<td>4:00 - 5:30 PM</td>
<td>S4226 Perspectives From Both Sides of the Border: Challenges for Pediatricians Caring for Children Emigrating from Mexico to the US</td>
<td>MCC R04-R05</td>
<td>M Griffin, A Sierra</td>
<td>SOID</td>
</tr>
<tr>
<td>5:00 - 5:45 PM</td>
<td>F4245: New Concepts for Testing and Managing Tuberculosis Infection in Children (Repeats as F5020)</td>
<td>MCC R08</td>
<td>J Starke</td>
<td>COCP, SOICHEM, SOCP, SOCH</td>
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</table>

### Tuesday, October 29

<table>
<thead>
<tr>
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**American Academy of Pediatrics**

**Section on International Medical Graduates**

**American Academy of Pediatrics**

**Twitter**

@aapglobalhealth
HOW TO JOIN SOICH

If you are NOT a current SOICH member, you may follow one of two options to become one.

1 Call AAP’s Customer Service at +1.866.843.2271, available Monday - Friday from 7:30am - 5 pm (CST)

2 Go online and sign up on your own by either:

   A) Filling out the section application directly at this link

   B) Or by following the 5 steps below:

   **Step 1:** Confirm you are a member of the section by logging into your account by visiting this link. If you are a section member you should see it listed on the My Membership homescreen.

   **Step 2:** If you do not see the Section on International Medical Graduates listed, click on the Join Now link, which you can find in the textbox containing information on Section/Council Membership.

   **Step 3:** Clicking on Join Now will take you to the section / chapter / council membership registration pages. (Please note: access to this page requires login. This page displays the list of all sections. International Child Health will be in the 2nd column.)

   **Step 4:** Select International Child Health and proceed with the application instructions

   **Step 5:** Email soich@aap.org to let us know that your membership has been updated.
SOICH ACKNOWLEDGMENTS

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