

**Global Health Workforce: Pathways to Health
Irish Forum for Global Health International Conference**

**hosted by Royal College of Surgeons in Ireland
2-3 February 2012**

CALL FOR ABSTRACTS ifghconf2012@rcsi.ie

5.00 pm Dublin time 21st December 2011 is the first deadline for submitting abstracts from which most abstract-driven oral presentations will be selected, so as to facilitate those coming from outside Ireland.

Late breaker submissions will be considered up to 5.00 pm Monday 16th January 2012

The Irish Forum for Global Health are inviting abstracts from individuals, partnerships and organisations who have been or are doing work that aims to contribute to the health workforce in relation to its impact on health in low and middle income countries.

Submissions may take the form of research findings, evaluations of programmes and projects, lessons from the field, or other forms of systematic learning on health workforce issues (i.e. they should be more than personal opinion or anecdote).

The conference, which will take place at RCSI, Stephens Green, Dublin, will include:

- Plenary sessions with panels of invited international and national speakers
- Oral presentations in parallel thematic sessions – abstract driven and invited speakers
- Oral poster presentations and posters
- Global Village activities – *see end*

Abstracts are now invited which will be considered for (i) oral presentations, (ii) oral posters and (iii) posters, unless those submitting wish to exclude one or more of these options for their submissions.

If you submitted summaries to the October 2011 Symposium at DCU and wish them to be considered as abstracts for the February 2012 Conference at RCSI, you must re-submit them. Abstracts for the February conference should conform to the guidelines below.

Further information about the conference, registration and speakers will be posted on www.globalhealth.ie

ABSTRACT GUIDELINES

ABSTRACT FORMAT to be submitted to: ifghconf2012@rcsi.ie

Title: should be concise (maximum 100 characters), in bold capital letters

Authors: a maximum of ten authors per abstract are allowed, or alternatively up to three authors and a composite grouping or network name, e.g. INDIGO, ChRAIC, ESTHER. Authors' names as follows: surname followed by initials (e.g. Murphy, M.). The presenting author's name should be underlined.

Corresponding author: the person who submits the abstract is responsible for notifying all co-authors. Contact details and email address of corresponding author should be included.

Affiliations: an affiliation (institution/organisation & country) should be included for each author.

Abstract text: must not exceed 300 words (excluding above 4 points) and should be informative, containing not more than 4 paragraphs (see below).

Font: Arial font size 11.

Document type: Submission in English only as a Microsoft Word or Open Office document

For each abstract you submit, select one of the two **abstract options** below.

OPTION 1: *This is most suited for scientific / empirical research findings.*

Download Option 1 Abstract Form here:

<http://globalhealth.ie/uploads/files/Abstract%20Option%201%20form.doc>

Aims: Specify the aim/objectives of the study following a brief background statement

Methods: Outline methods used, for example study design, study population, type of analysis

Results: Summarise the results of the study and key findings

Discussion / conclusions / implications: Outline the main implication(s) of the study for policy, or practice or advocacy. It is not sufficient to state: "results will be discussed".

OPTION 2: *This is most suited for presenting lessons from the field; project and programme evaluations; and syntheses or analyses that present new knowledge.*

Download Option 2 Abstract Form here:

<http://globalhealth.ie/uploads/files/Abstract%20Option%202%20form.doc>

If in doubt regarding the suitability of your ideas under this option, email your ideas / draft to ifqhconf2012@rcsi.ie and a member of the conference committee will get back to you.

Abstracts presented under the second option should normally contain concise statements along the following lines:

Issues: a summary of the issue(s) being addressed

Description: a description of the intervention, project, experience, service and/or advocacy.

Lessons learned: conclusions and implications of the intervention or project. Data that support the lessons learned and provide evidence for the conclusions must be included.

Next steps: recommendations for policy, practice and/or advocacy.

POSSIBLE THEMES

The **Major Themes** which were used to categorise the summaries submitted for the DCU October Symposium included:

Community-based, responses	Health worker motivation & retention Task shifting	North-South partnerships Training, Capacity-building	Ethical health worker recruitment & migration
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Below are some of the sub-themes that have been the focus of programmes, projects and research in which IFGH researchers and practitioners have engaged, usually in partnership with counterpart researchers and organisations in low and middle income countries.

This list is intended only to be illustrative. Other sub-themes in the area of the Health Workforce, including Community Health Workers and community-based / driven initiatives are welcomed.

Sub-themes

- Health worker production: doctors, nurses, midwives, allied health professionals, community health workers
- Training (basic, in-service and specialised training) as a global good and an unmet need in developing countries
- Workforce planning, and health worker distribution
- Health worker retention, motivation, supervision and career development
- Health worker management and information systems
- Task shifting, task-sharing and their effects on health services delivery and outcomes
- Community-based organisations (CBOs)
- Community (voluntary) Health Worker programmes
- NGO and civil society initiatives/projects
- Investing in the health workforce: Results-based programming
- Public-private health worker mix (for-profit and non-profit)
- Traditional health workers (Traditional Birth Attendants [TBAs] and Healers) including their relationship with allopathic (biomedical) health workers
- Health worker recruitment and migration (internal and trans-national)
- Capacity strengthening for researchers and policy makers
- Building capacity for biomedical science and product development focused on the needs of developing countries
- North-South partnerships for health worker training and capacity development, e.g. hospital twinning
- Service delivery innovations involving communities or the health workforce
- Information Communication Technology (ICT)

An acknowledgement of receipt of abstract will be emailed to the corresponding author. All selected abstracts will be published in an Abstract booklet, and titles and presenting authors names will appear in the final programme.

NOTE: Abstracts selected for oral presentations and oral posters should fit within the 2012 IFGH Conference theme: *Global Health Workforce: Pathways to Health*

We are also inviting those working in the area of Global Health to submit abstracts of work they are doing within the ***broader themes and priorities of Global Health*** (not necessarily restricted to the theme of the Health Workforce), which can be included as posters.

Ideas and innovative suggestions for ***Global Health Organisations*** and ***Networks*** to present their interests, activities and work in the ***Global Health Village*** are particularly welcome. If you are interested to learn more, explore and discuss your ideas,

Contact: nadine@globalhealth.ie

Corresponding authors (i) may be invited to present such work in the form of posters, or (ii) a conference organiser may contact the submitter with suggestions on how their work could be displayed at the conference.