Learners Cultivating Equity in the World and our Backyard

Canadian Conference on Medical Education
Banff, Alberta • April 16, 2012

ASHLEY MILLER
Undergraduate Medicine, University of Ottawa, Class of 2012
Objectives

1) Understand some of the ethical issues in global health experiences for Canadian medical students and residents

2) Identify exemplars of global health curriculum which address these issues in different ways

3) Recognize the significant and increasing disparities in health and wealth status both between nations, and between urban/rural populations within nations

4) Identify exemplars of how academic institutions have begun to address these inequities
The Learner Context

• estimated 20-30% of students engaged in global health electives
• many more in global health experiences (anecdotally greater than 50%)
• global health experiences include local projects working with marginalized populations, national, and international work
• similarly high level of involvement among residents
The Learner Context

• as increasing numbers of students become involved, increased consciousness regarding need for facilitated consideration of ethical challenges

• significant progress over past decade in Canada strongly influenced by grassroots medical student projects
Ethical Challenges

• “harm versus good”
• many students express strong desire to “do good”
• common lack of understanding regarding ethical implications of presence alone
• teaching required around potential harm of engaging in global health experiences both locally and abroad
Ethical Challenges

• “learning over service”
• to “do good,” students express strong desire to serve while engaging in global health experiences
• this often negates social contexts and realities
• challenges arise when attempting to apply higher technological approach to global health setting
First Do No Harm

Created by Tim and Allyson Holland, Dalhousie Medical School graduates

**two minute video clip of the documentary First Do No Harm to be added once film editing is complete**
Key Areas of Success

• student grassroots action has focused on several key areas
  – National Global Health Program
  – Local Interest Groups
  – Global Health Curriculum
  – Elective Global Health Certificates
  – Pre-Departure Training
  – International Exchanges
National Global Health Program

- increasingly large branch of the Canadian Federation of Medical Students (CFMS), representing 14 of 17 medical schools
- strong representation for Quebec schools through International Federation of Medical Students’ Associations (IFMSA) Quebec
- CFMS Global Health Program (GHP) engages many students across Canada through national/local officers, global health advocates
Local Interest Groups

• most medical schools now have designated student interest groups in global health
• topics include international health, aboriginal health, street health, refugee health, and homeless health, reproductive health, and environmental health
• many also have strong representation of policy based groups that study health systems locally and abroad
Global Health Curriculum

• almost every school now has a designated global health office, funded by the faculties
• formal curricula is rapidly evolving, with many schools dedicating several hours of teaching to local and international global health issues
• CFMS working to adapt Global Health Education Consortium (GHEC) published Core Competencies to CanMEDs
• ongoing development of online learning
Elective Global Health Certificates

• some schools have begun to experiment with elective global health designations for students with particular interest and skill in global health

• strong student support for further development in this area given opportunity for holistic (local – national – international) approach and interest specific possibilities

• CFMS currently developing national guidelines
Pre-Departure Training

• significant area of student driven success
• 2008 student-led publication of National Guidelines for Pre-Departure Training (PDT)
• encourages critical consideration of ethical issues prior to departure, emphasizes safe practices and social accountability throughout experience
• 2010 student survey published in Academic Medicine, February 2012
Pre-Departure Training

Global Health Education

Are We There Yet? Preparing Canadian Medical Students for Global Health Electives
Kelly C. Anderson, MD, Michael A. Slatnik, MD, Ian Pereira, Eileen Cheung, MD, Kunyong Xu, MPH, and Timothy F. Brewer, MD, MPH

Abstract

Purpose
To understand the current landscape and the evolution of predeparture training (PDT) in Canadian medical education.

Method
The authors surveyed one faculty and one student global health leader at each of Canada’s 17 medical schools in February 2008 and May 2010 to assess the delivery of and requirements for PDT at each institution. The authors then used descriptive statistics to compare responses across schools and years.

Results
In 2008, one faculty and one student representative from each of the 17 Canadian medical schools completed the survey; in 2010, 17 faculty and 16 student representatives responded. The number of medical schools offering PDT grew substantially from 2008 to 2010 (11/17 [65%] versus 16/17 [94%]). Three of the five new programs in 2010 were student run. The number of schools with mandatory PDT nearly doubled (6/17 [35%] versus 11/17 [65%]). However, institutional funding remained scarce, as 10 of 16 programs had budgets of less than $500 in 2010. PDT content, frequency, and format varied from school to school.

Conclusions
Medical students have been responsible for organizing the majority of new PDT. To ensure quality and sustainability, however, faculty must play a more central role in the planning and implementation of such training programs. Medical schools must continue to reevaluate how best to maximize global health electives for trainees and the communities in which they study. PDT offers one avenue for schools to ensure that students are safe and socially accountable during their time abroad.

• calls for continual program evaluation and increased faculty involvement in PDT delivery
International Exchanges

• International Federation of Medical Students’ Associations (IFMSA) hosts professional and research exchanges to member countries including Canada (CFMS and IFMSA-Quebec)

• ~100 Canadian students participate per year, all required to complete pre-departure training

• Canada strong international contributor to IFMSA policy (ie. green charter)
Future Directions

• universal formalized curricula?
• incorporation of global health themes into case based learning activities?
• multi-tiered approach based on interest (ie. elective certification)?
• service versus learning?
• emphasis on social accountability locally and abroad?