

Approved by the Ad Hoc Subcommittee on Scholarly Concentrations 1/11/24
Approved by the Curriculum Committee 1/17/24

Scholarly Concentration: Global Health

Background:

Global Health (GH) is “an area for study, research, and practice that places a priority on improving health and achieving equity in health for all people worldwide”.¹ Engaging in GH activities can provide medical students with an opportunity to gain clinical, cultural, and linguistic skills, participate in the transfer of knowledge and skills with counterparts in low-resource environments, gain appreciation for the interconnectedness of health worldwide, increase interest in primary care specialties, humanitarianism, and public health, and improve interactions with underserved communities locally.²

Interest in GH among US-based medical students, trainees and professionals has grown dramatically in recent decades with over 60% medical students expressing strong interest in GH, over 55% of medical students participating in GH initiatives, and approximately 30% US-based medical schools offering GH opportunities in the form of electives, modules or concentrations.^{3,4} GH education (GHed) opportunities raise multiple ethical and sustainability challenges and concerns involving stakeholders such as students, trainees, patients, “host” institutions and staff and “sending” institutions and staff.⁵ Growing criticisms of GH initiatives and GHed programs include: limited impact with concerns about quality and efficacy of medical care provided by trainees and faculty unfamiliar with local health needs, culture and systems; concerns about inappropriate allocation of already scarce resources, both financial and human, and unbalanced relationships between high- and low-resource partners; lack of appropriate supervision of trainees and evidenced-based medicine; and fundamental ethical questions about patient consent, privacy and autonomy in these settings.²

Due to the rapid expansion of GH without adequate standardization or regulations, leaders in the field have developed GH ethical guidelines and GHed competencies to guide GH educators in the creation of GH/GHed programs and opportunities. The Working Group on Ethics Guidelines for Global Health Training (WEIGHT) is an international and multi-disciplinary group of GH and ethics experts who developed a set of ethics and best practices for GH training through a peer-reviewed literature search and moderated workshop format.² The Consortium of Universities for Global Health (CUGH), formed in 2008 to define, standardize and promote the discipline of GH, formed the CUGH Global Health Competency Subcommittee and created interprofessional GH competencies to set assessable standards of knowledge and performance and assist GH curriculum development and evaluation.⁶ Additionally, with increasing calls to “decolonize GH” and with recent travel restrictions forced by the COVID-19 Pandemic, GH leaders and educators are expanding the concept of GH into domestic community engagement and tackling inequities closer to home through *glocal* health initiatives.⁷

The new Center for Global Health and Global Health Education (CGHed) at Cooper Medical School of Rowan University (CMSRU) is thus proposing a new Global Health Scholarly Concentration, in collaboration with Universidad Iberoamericana (UNIBE) in the Dominican Republic. The concentration will be founded utilizing the CUGH GH competencies and the WEIGHT ethical guidelines, with a focus on both domestic and international GH needs, to provide elected CMSRU and UNIBE students with the opportunity to engage in ethically responsible and academically rigorous GH learning.

Faculty:

Lead faculty:

- Anna Pancheshnikov, MD, FACOG; Urogynecologist, Urogynecology and Reconstructive Pelvic Surgery, CUHC; Assistant Professor of Obstetrics and Gynecology; Director of Center for Global Health and Global Health Education (CGHed), CMSRU.

Other faculty:

- Nicholas Young, MD; Hospitalist, Assistant Program Director, Internal Medicine Residency Program, CUHC; Assistant Professor of Medicine, CMSRU.
- Nitin Puri, MD; Critical Care Intensivist, Division Head, Critical Care Medicine; Co-Medical Director, Center for Critical Care Medicine, CUHC; Associate Professor of Medicine, CMSRU.
- Saifuddin Mama, MD, MPH, FACOG, FACS, FPMRS; Urogynecologist, Division Head, Urogynecology and Reconstructive Pelvic Surgery; Head, Section of Minimally Invasive Gynecology and Robotics, CUHC; Professor of Clinical Obstetrics and Gynecology, CMSRU.
- Additional faculty: TBD
- Additional UNIBE faculty: TBD
- Visiting lecturers: TBD

Student Curriculum Coordinators:

- Samuel Snyder, MS3
- Amy Lynne Bordogna, MS3
- Julia Wiley LeDane, MS4
- UNIBE student curriculum coordinators: TBD

Goals and objectives:

Goal: This scholarly concentration will develop participating students' knowledge and skills in global health topics, with application to both local and international settings, through collaborative study, practice, and research.

Objectives:

- **Learning Objectives are based on the CUGH GH competencies, categorized into 11 domains (8 basic domains, and additional 3 more advanced, optional operational level domains marked with a *).** ⁶
 1. **Global Burden of Disease:** Encompasses basic understandings of major causes of morbidity and mortality and their variations between high-, middle- and low-income regions, and with major public health efforts to reduce health disparities globally.
 - a. Describe the major causes of morbidity and mortality around the world, and how the risk for disease varies with regions.
 - b. Describe major public health efforts to reduce disparities in global health (such as Millennium Development Goals and Global Fund to Fight AIDS, TB, and Malaria).
 2. **Globalization of Health and Health Care:** Focuses on understanding how globalization affects health, health systems, and the delivery of health care.

- a. Describe different national models or health systems for provision of health care and their respective effects on health and health care expenditure.
 - b. Describe how global trends in health care practice, commerce and culture, multinational agreements, and multinational organizations contribute to the quality and availability of health and health care locally and internationally.
 - c. Describe how travel and trade contribute to the spread of communicable and chronic diseases.
 - d. Describe general trends and influences in the global availability and movement of health care workers.
3. **Social and Environmental Determinants of Health:** Focuses on an understanding that social, economic, and environmental factors are important determinants of health, and that health is more than the absence of disease
 - a. Describe how cultural context influences perceptions of health and disease.
 - b. List major social and economic determinants of health and their effects on the access to and quality of health services and on differences in morbidity and mortality between and within countries.
 - c. Describe the relationship between access to and quality of water, sanitation, food, and air on individual and population health.
 4. **Capacity Strengthening:** “Capacity strengthening is sharing knowledge, skills, and resources for enhancing global public health programs, infrastructure, and workforce to address current and future global public health needs.”
 - a. Collaborate with a host or partner organization to assess the organization’s operational capacity.
 - b. Cocreate strategies with the community to strengthen community capabilities and contribute to reduction in health disparities and improvement of community health.
 - c. Integrate community assets and resources to improve the health of individuals and populations.
 - d. Identify methods for assuring program sustainability.
 5. **Collaboration, Partnering, and Communication:** “Collaborating and partnering is the ability to select, recruit, and work with a diverse range of global health stakeholders to advance research, policy, and practice goals, and to foster open dialogue and effective communication” with partners and within a team
 - a. Include representatives of diverse constituencies in community partnerships and foster interactive learning with these partners.
 - b. Demonstrate diplomacy and build trust with community partners.
 - c. Communicate joint lessons learned to community partners and global constituencies.
 - d. Exhibit interprofessional values and communication skills that demonstrate respect for, and awareness of, the unique cultures, values, roles/responsibilities and expertise represented by other professionals and groups that work in global health.
 - e. Acknowledge one’s limitations in skills, knowledge, and abilities.
 - f. Apply leadership practices that support collaborative practice and team effectiveness.
 6. **Ethics:** Encompasses the application of basic principles of ethics to global health issues and settings

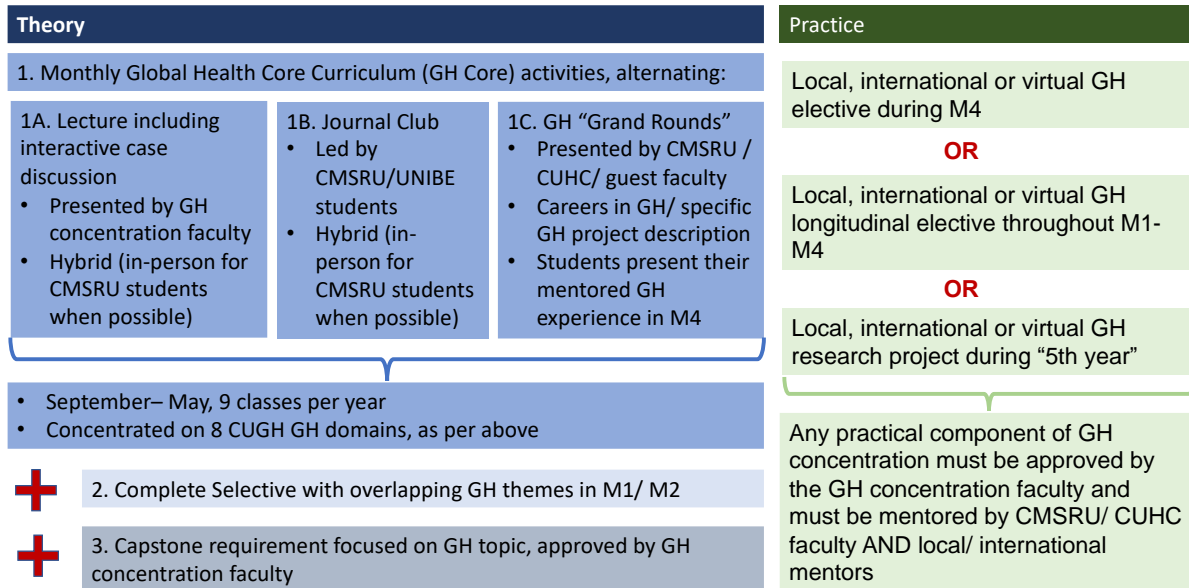
- a. Demonstrate an understanding of and an ability to resolve common ethical issues and challenges that arise when working within diverse economic, political, and cultural contexts as well as when working with vulnerable populations and in low-resource settings to address global health issues.
 - b. Demonstrate an awareness of local and national codes of ethics relevant to one's working environment.
 - c. Apply the fundamental principles of international standards for the protection of human subjects in diverse cultural settings.
7. **Professional Practice:** Refers to activities related to the specific profession or discipline of the global health practitioner.
- a. Demonstrate integrity, regard, and respect for others in all aspects of professional practice.
 - b. Articulate barriers to health and health care in low-resource settings locally and internationally.
 - c. Demonstrate the ability to adapt clinical or discipline-specific skills and practice in a resource-constrained setting.
8. **Health Equity and Social Justice:** "Health equity and social justice is the framework for analyzing strategies to address health disparities across socially, demographically, or geographically defined populations."
- a. Apply social justice and human rights principles in addressing global health problems.
 - b. Implement strategies to engage marginalized and vulnerable populations in making decisions that affect their health and well-being.
 - c. Demonstrate a basic understanding of the relationships between health, human rights, and global inequities.
 - d. Describe role of WHO in linking health and human rights, the Universal Declaration of Human Rights, International Ethical Guidelines for Biomedical Research Involving Human Subjects.
 - e. Demonstrate a commitment to social responsibility.
 - f. Develop understanding and awareness of the health care workforce crisis in the developing world, the factors that contribute to this, and strategies to address this problem.
9. ***Program Management:** "Program management is the ability to design, implement, and evaluate global health programs to maximize contributions to effective policy, enhanced practice, and improved and sustainable health outcomes."
- a. Plan, implement, and evaluate an evidence-based program.
 - b. Apply project management techniques throughout program planning, implementation, and evaluation.
10. ***Sociocultural and Political Awareness:** "Sociocultural and political awareness is the conceptual basis with which to work effectively within diverse cultural settings and across local, regional, national, and international political landscapes.
- a. Describe the roles and relationships of the major entities influencing global health and development.
11. ***Strategic analysis:** "Strategic analysis is the ability to use systems thinking to analyze a diverse range of complex and interrelated factors shaping health trends to formulate programs at the local, national, and international levels."
- a. Identify how demographic and other major factors can influence patterns of morbidity, mortality, and disability in a defined population.

- b. Conduct a community health needs assessment.
 - c. Conduct a situation analysis across a range of cultural, economic, and health contexts.
 - d. Design context-specific health interventions based on situation analysis.
- **Process Objectives:**
 - An official Memorandum of Understanding will be formed with UNIBE Medical School and CMSRU by September 2024.
 - The Global Health Concentration will have a minimum of 3 CMSRU students per year.
 - The Global Health Concentration will offer a minimum of 18 meetings in a 2-year period concentrating on the 8 basic GH domains detailed above including alternating:
 - Lectures with interactive case discussions
 - Student led Journal clubs
 - GH “grand round” presentations
 - Students will choose a at least 1 Selective (overlapping GH themes, see below) during their M1/M2 and will complete all Selective requirements.
 - Each student will complete a mentored GH experience/elective, either internationally, locally or virtually/ hybrid with regular meetings with their mentors and GH concentration faculty.
 - Students will attend a pre-departure workshop prior to participation in international travel.
 - Each student will complete a capstone project with a GH focus.
 - GH concentration faculty will meet regularly, at least on a quarterly basis.
 - **Outcome Objectives:**
 - Students will fill out evaluation forms after each GH concentration activity including lectures/ case discussions, journal clubs, grand rounds, and any GH mentored experience/ elective (evaluating satisfaction and whether learning objectives were achieved).
 - Increase in student participation interest is expected with more than 4 students applying each year.
 - Increase in applications for official GH electives for CMSRU students (at least one for 2024).
 - Students who participate in the GH concentration will plan to include GH and/or community health in their future careers.

Capacity:

- 3-4 CMSRU students (participation must begin at M1 or M2).

Global Health (GH) Scholarly Concentration Structure:



Requirements:

Application:

- Students will be chosen by an application process which will evaluate students’:
 - Interest and experience in GH.
 - How GH concentration fits with their own professional goals and values.
 - Future plans/ ideas for mentored GH project.
- Interview process with concentration faculty may be necessary if large number of students apply.

Within the MD curriculum, students must:

- Complete one Selective in the first two years, completing all requirements of chosen selective. Students can choose between:
 - Applied Medical Ethics
 - Race and Medicine in American History
 - Climate Change and Health
 - Medical Spanish* (if student plans to participate in international travel to Spanish speaking country, student must participate in Medical Spanish selective, unless student is a native or fluent Spanish speaker)
 - TBD (if another selective overlaps with GH themes, must be approved by GH concentration faculty)
- Identify a faculty mentor and complete a **Capstone Project** related to Global Health in the Scholar’s Workshop, including an extramural poster presentation and article submission* (of note, Capstone Project can include a research project/ quality improvement project related to GH mentored activity, see below)
- Submit all course and concentration evaluations in a timely manner.
- Actively engage in meetings with mentors and GH concentration faculty.

Outside the MD curriculum, students must:

- Attend lectures/ activities of the GH Core Curriculum (GH Core).
 - Prepare and lead at least two interactive case discussions.
 - Prepare and lead at least two journal club discussions.
 - For any GH lecture/ interactive discussion missed, student must submit 1–2-page reflection on the topic/ relevant reading.
 - For any GH “ground rounds” missed, student must watch recorded talk.
- Participate in at least one GH mentored activity.
 - Local, international or virtual experiences will be considered. Examples:
 - MED 03202 Global Health Elective (M4): 2-week Panama-Floating Doctors, faculty mentor: Dr. Nicholas Young.
 - Fistula Care (M4): 2-week Rwanda- International Organization for Women and Development (IOWD), faculty mentor: Dr. Saifuddin Mama.
 - Global Urogynecology education, training and service (M2-M4): longitudinal hybrid (virtual/ in person) Dominican Republic-GURU, faculty mentor: Dr. Anna Pancheshnikov.
 - Any experience must be pre-approved by GH concentration faculty.
 - If GH experience is NOT already a CMSRU approved elective, students and mentors must create a syllabus including detailed description, objectives, preliminary schedule, and outcome measures for the consideration of GH concentration faculty.
 - Of note, for any international experience, student must submit CMSRU GH checklist and travel acknowledgement and participate in pre-departure CGHed workshop.
 - Present GH project during GH core curriculum “grand grands”.
 - *If Capstone project did not culminate in an article submission, submit an article/ scholarly product on GH topic of choice/ GH experience by graduation.
- Actively participate in the partnership with UNIBE students including small group discussion, working on case study creation/ Journal Club discussions and possibly engaging in GH projects or research.

Courses/ Sessions/ Projects that fulfill the MD Curriculum and Scholarly Concentration:

Requirement	Hours
Complete a Selective in the 1st/2nd year with overlapping GH themes ^a : <ul style="list-style-type: none"> - Applied Medical Ethics - Climate Change and Health - Race and Medicine in American History - Medical Spanish^b 	12
Complete Capstone on a GH topic including poster and paper for submission ^c	30
Elective / mentored GH project (International or community-based) ^d <ul style="list-style-type: none"> - MED 03202 Global Health Elective (M4): 2-week Panama-Floating Doctors, faculty mentor: Dr. Nicholas Young. - Fistula Care (M4): 2-week Rwanda- International Organization for Women and Development (IOWD), faculty mentor: Dr. Saifuddin Mama. - Global Urogynecology education, training and service (M2-M4): longitudinal hybrid (virtual/ in person) Dominican Republic-GURU, faculty mentor: Dr. Anna Pancheshnikov. CFHI GH education program: diverse locations/ projects.	80
Total required hours (also counted within MD curriculum)	122
^a Students are required to complete the specific Selective requirements. ^b Required if student is not a native/fluent speaker and will participate in international activity in Spanish speaking country). ^c Capstone can include a research/ quality improvement project associated with mentored GH activity (See below). ^d If participating in official CMSRU elective, will also be counted towards MD curriculum; If mentored project is not a CMSRU elective, must have CMSRU/CUCH and "local" mentor, and project must be approved by GH concentration faculty.	

Courses/ Sessions/ Projects required for the Scholarly Concentration outside of the MD Curriculum:

Requirement	Hours
Attend GH core curriculum sessions ^e	27
Present/ lead at least 2 interactive case discussions	4
Present/ lead at least 2 journal club discussions	4
Present GH project/ scholarly work during "grand rounds" in M4	5
Total required hours	40
^e Including reading relevant literature, preparation for interactive discussion. Of note, for any GH lecture/ interactive discussion missed, student must submit 1–2-page reflection on the topic/ relevant reading. For any GH "ground rounds" missed, student must watch recorded talk.	

References:

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