Pediatric Global Health Education: Standardization, Implementation and Innovation

APPD 2018 Spring Meeting

March 20, 2018

Atlanta, GA
Session leaders are representatives from the APPD Global Health Learning Community Steering & Executive Committee

- Christiana Russ MD, DTMH, *Boston Children’s Hospital*
- Tania Condurache MD, MSc, *University of Louisville School of Medicine*
- Sabrina Butteris MD, *University of Wisconsin*
- Michael Pitt MD, *University of Minnesota*
- Heather Crouse MD, *Baylor College of Medicine*
- Heather Lukolyo MD, MHS, *Baylor College of Medicine*
- Joanne Mendoza MD, *University of Virginia*
- Adelaide Barnes MD, *Children’s Hospital Philadelphia*
- Nicole St. Clair MD, *University of Wisconsin*
Conflicts of Interest

None
Nenhum
无
Keine
Aucune
Nessuno
لا شيء
нет
Review a newly developed robust implementation guide for global health educators— the *Pediatric Program Director’s Guide to Global Health*.

Identify audience-specific challenges, and develop actionable strategies to implement or improve global health education for pediatric trainees at participants’ own institution.

Organize participants into work-groups based on the selected top five thematic areas of innovation in GH education, develop SMART goals, and draft work plan and timeline for identified scholarly projects.
<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:00-1:30</td>
<td>Introductions &amp; needs assessment</td>
</tr>
<tr>
<td>1:30-2:00</td>
<td>Overview of a new resource</td>
</tr>
<tr>
<td></td>
<td>GLOBAL HEALTH IN PEDIATRIC EDUCATION: An Implementation Guide for Program Directors</td>
</tr>
<tr>
<td></td>
<td><strong>BREAK</strong></td>
</tr>
<tr>
<td>2:15-3:15</td>
<td>Small groups: SWOT analysis to identify challenges &amp; solutions at your institutions</td>
</tr>
<tr>
<td>3:15-3:45</td>
<td>Large group: identify top thematic areas</td>
</tr>
<tr>
<td><strong>BREAK</strong></td>
<td></td>
</tr>
<tr>
<td>4:00-5:00</td>
<td>Small groups: develop scholarly project ideas</td>
</tr>
<tr>
<td>5:00-5:30</td>
<td>Large group: report back, final Q&amp;A, evaluations</td>
</tr>
</tbody>
</table>
Audience Needs Assessment

What are you hoping to get out of this workshop?
Standardization in GH Education

5 Pillars of Global Health Education

- Stateside Curriculum
- Pre-Departure Preparation
- Global Health Elective
- Post-Return Debriefing
- Evaluation
Tiered Approach for Pediatric Global Health Training

**TIER 3:**
Trainees with GH Career Interests
- Scholarly projects
- GH Track / GH Residency
- GH Fellowships
- Advanced degree(s)

**TIER 2:**
Trainees Doing Global Electives
- Pre-departure training, mentorship, partnerships

**TIER 1:**
All Trainees
- Core conferences
- Integrated into noon conferences, morning report, etc.

## GLOBAL HEALTH IN PEDIATRIC EDUCATION: An Implementation Guide for Program Directors

**WHAT is the guide?**
A comprehensive, practical resource for incorporating global health education into pediatric training programs

**WHO is the guide for?**
- Program directors
- Chief residents
- Global health (GH) educators
- Chairs & institutional leaders
- Program coordinators
- Pediatric trainees
- Global training partners

**WHEN was it developed?**
2017, with planned updates every 3 years (or as needed) by authors and the American Board of Pediatrics (ABP) Education and Training Committee

**WHERE should it be used?**
Any pediatric training program that offers GH electives and stateside GH education

**WHY is the guide important?**
It is the first comprehensive resource to guide educators through all aspects of GH in pediatric residency and fellowship: stateside GH training, GH electives, and global partnerships.

**HOW was it developed?**
By the ABP Global Health Task Force Trainee Workgroup, in collaboration with GH educators from the Association of Pediatric Program Directors and the American Academy of Pediatrics Section on International Child Health

---

**CHAPTER 1**
Global Health Education in Pediatric Training Programs: Core Considerations

**CHAPTER 2**
Global Health Training at Home: Competencies and Implementation

**CHAPTER 3**
Local/Global Health

**CHAPTER 4&5**
Going Global: Trainee & Training Program Preparation

**CHAPTER 5&7**
Evaluation, Assessment, Accreditation, & Certification

**CHAPTER 8&9**
Fellowship Considerations & Post-Graduate Opportunities

**CHAPTER 10**
Partnerships & Bidirectional Trainee Exchanges

**CHAPTER 11**
Readiness Assessment for Global Health Training & many practical appendices

---

GLOBAL HEALTH IN PEDIATRIC EDUCATION: An Implementation Guide for Program Directors

INTRO: Training globally-minded pediatricians

- Trainee demand
- Stakeholders
- The “why” for global health training
- Target audience
Table 1: Opportunities to integrate GH education into pediatric training programs, based on learner audiences.

Appendix A: Global Health Tracks in Pediatric Residency Programs

Appendix B: Position description for a GH Track Director (template)

Appendix C: Position description for a GH Track Program Coordinator (template)
Table 2: Examples of resources for pediatric GH curriculum development & delivery
CH 3: Local/global health

Table 3: Health considerations associated with human migration
Table 4: Local/global competency-based objectives
Appendix D: Local/global elective (example 1 week schedule)
GLOBAL HEALTH IN PEDIATRIC EDUCATION:
An Implementation Guide for Program Directors

CH 4: Going global: training program preparation

Table 5: Checklist of considerations for trainees and program directors pertaining to GH electives and partnerships
Table 6: Opportunities for scholarly dissemination of projects completed during GH electives.
Appendix E: Evacuation insurance & emergency contact card
Appendix F: Risk reduction agreement (template)
Appendix G: Post-exposure guidelines for global health electives (template)
Appendix H: Global health elective pre-travel health self-assessment (template)
Appendix I: Culture shock & communication/social media guidelines
Appendix J: Professionalism agreement / code of conduct (template)
Appendix K: Guidelines for donations & customs considerations
Appendix L: Resources for finding a global health elective
Appendix M: Packing list (template)
Appendix N: Themes and best practices identified in the literature for short-term global health engagement
Appendix O: Choose your own adventure: case scenarios pertaining to global health electives
GLOBAL HEALTH IN PEDIATRIC EDUCATION: An Implementation Guide for Program Directors

CH 5: Going global: trainee preparation

EXPLORE PERSONAL MOTIVATIONS FOR WORKING GLOBALLY
Avoid poverty tourism, seeking opportunities to practice outside the scope of your expertise, “drop-in” visits outside of a sustainable framework, and paternalistic pursuits. Also ensure that you have a firm understanding of the importance of cultural and professional humility prior to global engagement.

CHOOSE AN ETHNICALLY SOUND GLOBAL HEALTH OPPORTUNITY
Review the Working Group on Ethics Guidelines for Global Health Training (WEGHT) recommendations pertaining to ethical partnerships, and seek opportunities that are ethically sound, mutually beneficial, and preceded by clear communication and agreement with the hosts regarding the purpose of your visit.

ENSURE THAT GOALS ARE OPENLY ADDRESSED PRIOR TO THE VISIT
Clearly identify your professional goals and scope of practice and ensure that they are in line with the host goals for your visit. Also identify what documentation of harm is required.

GAIN INSIGHT INTO THE IN-COUNTRY AND ON-SITE RESOURCES
When applicable, review formularies, supplies, other resources (e.g. clinical, research, etc.) at the host site.

RESEARCH THE REGION, PEOPLE, RELIGION(S), LOCAL LAWS, AND CUSTOMS
Engage in pre-departure cultural and language studies and, when able, meet with people from the region or who have traveled/worked in the region.

ASSESS AND PREPARE FOR ON-SITE PROFESSIONAL SCENARIOS
Identify the factors (e.g. resources, endemic diseases, infrastructure, etc.) that will inform modifications to your professional practice on-site, and determine what additional training is required prior to the visit to adapt to these factors.

ASSESS AND PREPARE FOR PERSONAL SCENARIOS DURING TRAVEL
Ensure that basic travel logistics are addressed and safety precautions are taken (e.g. registration with the Department of State Smart Traveler Enrollment Program; purchase of travel and evacuation insurance; travel vaccines; malaria prophylaxis when applicable; post-exposure prophylaxis; safe modes of transportation; etc.).

RESEARCH AND RECOGNIZE CULTURE SHOCK
Review the stages of culture shock, and recognize them during your own experience. Prior to travel, identify resources to assist you during the rejection/frustration stage of culture shock.

ESTABLISH HOME COMMUNICATION PLANS THROUGH PRIVATE VENUES, AND IDENTIFY TIME FOR DEBRIEFING POST-RETURN
Ensure that communication meets professionalism guidelines (e.g. avoid public blogging, posting clinical photos, etc.) and that there is an opportunity established for debriefing post-return.

FOSTER CLEAR COMMUNICATION WITH HOSTS, INCLUDING DEVELOPMENT OF BIDIRECTIONAL PREPARATION GOALS, EXPLORATION OF OPPORTUNITIES FOR SUSTAINABLE COLLABORATION, AND INCORPORATION OF EVALUATION
Establish ongoing communication during and after the visit to optimize sustainability and future engagement, if applicable.

Appendix P: trainee planning timeline & checklist

Appendix Q: Trainee assessment for GH electives (examples)
> 6 months requires review and approval by the ABP

Individuals do not require ABP approval unless they impinge on the 6 month rule

Programs are expected to seek global health elective preceptors who routinely provide health care to infants and children (not necessarily MD)
CH 8: Fellowship opportunities in global health

Appendix R: Curriculum for a general pediatric GH fellowship
Appendix S: Goals/objectives for a combined subspecialty-GH fellowship
Appendix T: Combined subspecialty-GH fellowship training pathway
Appendix U: Alternative pathway petition letter for GH training during pediatric subspecialty fellowship
Appendix V: Draft schedule / block diagram for a fellow to include with ABP petition letter
Physician Density Based on Country

 Territory size shows the proportion of all physicians (doctors) that work in that territory.

www.worldmapper.org

Table 7. Post-graduate career opportunities in global health
Appendix W: Global health resources after residency training
GLOBAL HEALTH IN PEDIATRIC EDUCATION:
An Implementation Guide for Program Directors

CH 10: Partnerships and bidirectional trainee exchanges

Table 8: Benefits of Bi-Directional Exchanges of Learners within Global Health Partnerships
Table 9 – Obstacles and Solutions Encountered During Implementation of Bidirectional Exchange between Lurie Children’s and Bugando Medical Centre
Table 10 – Suggested Timeline for Implementation from Model Exchange at Indiana University
Table 11: Example of 4-Week Curriculum for Visiting Trainees (from Lurie Children’s/BMC Exchange)
Appendix X: Memorandum of understanding
GLOBAL HEALTH IN PEDIATRIC EDUCATION: An Implementation Guide for Program Directors

CH 11: Readiness assessment for global health training

STEP 1: Curriculum development
- Core curriculum integrated into standard residency training (noon conferences/afternoon sessions) and potentially into morning report and an advocacy curriculum. See Chapters 1, 2 & 3
  - Harness local expertise both among faculty and in the community for curricular content
- GH Faculty Champion(s). This is critically important for successful development of GH training in a residency program. This person does not have to be an associate program director but an APD can be very advantageous in helping to focus the program on GH.

STEP 2: GH Elective (see Chapters 4 & 5)
- All of the above and:
  - GH director
    - Additional GH mentors for the trainees is ideal
  - Checklist components in Table 5 (for the institution and the trainee)
  - Debriefing process
  - Evaluation process (Chapter 6)
  - +/- bidirectional training partnership (checklist in Chapter 10)

STEP 3: GH Track or Fellowship (see Chapter 1)
- All of the above and:
  - Support of leadership (including residency program, department, hospital, and institution)
    - Refer to “Making the Global Pitch to the C-Suite” for leadership talking points (Appendix D)
  - GH program director and core GH faculty assembled
    - More extensive mentorship process in place
  - GH program coordinator
  - Determination of required activities
  - Expanded curriculum and consideration of the “individualized curriculum”
    - e.g. bootcamp, GH simulation sessions
  - Competencies identified and linked to curricular and experiential elements
  - GH sites: consideration of a true partnership with sites including bidirectional exchanges (refer to checklist in Chapter 10)
  - Scholarly project process
  - Fellowship-specific considerations, if applicable (Chapter 8)
  - Pre-graduation evaluation
Implementation in GH Education

Small Groups...Go!
Using Worksheet #1, 60 minutes

What challenges do you face at your institution that prevent you from having your ideal global health education program?

What are some different areas of global health education that you might improve at your institution based on the PD Guide? What steps would you need to take to implement those changes?
Implementation in GH Education

Large Group Report Back, 30 minutes

What are the key challenges that GH educators are facing in implementing high quality GH education?

What are the resources that already help address those challenges?

What are the potential areas for scholarly work?
Break
Preview of Additional Resources

pedsglobalhealthed.com

sugarprep.org

https://youtu.be/iV11exmWiPk
Using Worksheet #2, 60 minutes

- Brainstorm project ideas to address the identified challenge
- Develop SMART goals
  - Specific
  - Measurable
  - Attainable
  - Relevant
  - Timely
- Draft workplan and timeline
Innovation in GH Education

Large group report back, 30 minutes
Wednesday, 1:45-3:15: Earn MOC Part 4 Credit while Improving your Global Health Education Program

Thursday, 10:10-11:55: Global Health Table to Able

Thursday, 1:30-3:00: Global Health Learning Community

Friday, 10:30-12: Introducing SUGAR PACK! Pre-departure Activities Curricular Kit for Global Health Electives

Global Child Health Abstract Symposium:
“Advocacy and Justice for Children at Home and Abroad”

Sunday, November 4, 2018, 8:00 AM – 5:30 PM
AAP National Conference & Exhibition (NCE)
Orlando, Florida

Questions?
Alcy Torres, MD
atorres@uwy.edu
Heather Crouse, MD
Abstract Co-Chair
hcrouse18@gmail.com
Vayrash Nyadro
Manager, International Relations
soich@aap.org

For more information on NCE: http://www.aapexperience.org

The Section on International Child Health (SOICH) is partnering with the Section on International Medical Graduates (SOIMG) to host a joint abstract program on global child health.

Abstracts in the categories of original research, program evaluation, and educational or advocacy initiatives will be considered. Selected abstracts will be accepted for podium (oral) or poster presentations.

Submissions by members and non-members of SOICH and SOIMG are welcome; participation is open to health professionals in any field.

Travel awards will be awarded to presenters of 3 accepted abstracts: (1) first author from a Low and Middle Income Country (LMIC) who is a trainee; (2) first author from a LMIC who is a non-trainee; (3) ICATCH awardee from a LMIC. Each award will reimburse travel costs up to $3,000. Presenters who wish to apply for this award will submit a short application when submitting their abstract.

Deadline for submissions is Friday, April 13, 2018
Submit abstracts electronically to the AAP:
Thank you!

Please complete your evaluations