**Wayne State University - Global Health Alliance**

**Global Health and Urban Equity Program**

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#### I. Background

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Global Health refers to the field of study, research, and practice that places a priority on improving and achieving equity in health for all people worldwide. It is a synthesis of population-based prevention and individual-level clinical care and emphasizes transnational health issues, determinants, and solutions; involves many disciplines within and beyond the health sciences; and promotes interdisciplinary collaboration.

Increasing international travel and migration have contributed to globalization of both communicable and non-communicable diseases. As the mobile U.S. population grows, emerging global trends in pandemics, increasingly virulent and antibiotic resistant pathogens, worsening health disparities, global warming, and geopolitical instability presents greater health threats without and within our borders.

Consequently, today’s physicians and health providers must understand the global burden and epidemiology of diseases, the disparities and inequities in global health systems, and the importance of cross-cultural sensitivity in order to assure a health domestic population.

To this end, the Wayne State University Global Health Alliance (WSUGHA) was formed to answer the call to train leaders in global health who will set national and international standards of best practice in global health education, service, research, policy, and advocacy. We aim to develop leaders who will lead transformational and innovative solutions to global and local programs and inspire national and global imagination to attain the dream of a truly better world.

The alliance is comprised of a multidisciplinary group of Wayne State University faculty who are passionate about global health and committed to providing strategic evidence-based, compassionate, culturally competent education and patient care.

Our mission is in keeping with that of Wayne State University which is to "…create and advance knowledge, prepare a diverse student body to thrive, and positively impact local and global communities." We recognized that school’s mission, location, and composition places us in a unique position to exert innovative and visionary leadership in both international-global and local-global health and equity arenas. The alliance also unifies the various global health silos throughout the university to more efficiently leverage our collective resources to achieve mutual education, clinical, research, service, and advocacy goals.

The WSUGHA developed the Global Health and Urban Equity (GLUE) program to meet the growing need of medical students and resident physicians across all specialties to acquire global health experiences and provide a well-structured program to coordinate, guide, and support their endeavors. It is well recognized that more students and residents appreciate the benefits of global health training which include a broader medical knowledge base, improved physical examination, technical, diagnostic and clinical skills, and strengthened commitment to practice medicine among underserved and multicultural populations. In fact, medical students and residents who participate in international clinical rotations are more likely to pursue primary care medicine, obtain a public health degree, and practice medicine that addressed issues of social justice such as health disparities and equity. They have a greater awareness of cultural and socioeconomic factors, and greater recognition of the importance of communication skills.

These are the type of scholars Wayne State University aims to train as a leader in “world class education” – world class leaders in world health who are able to apply real-world solutions to complex local and global real-world problems in a comprehensive context.

#### Goals & Outcomes

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The WSUGHA Global Health and Urban Equity program consists of the following components: seminar, research/service capstone project, symposiums, and field experiences.

The two-year seminar is designed to offer learners the opportunity to gain comprehensive knowledge and skills surrounding global health by providing local and international educational opportunities that focus on the care of underserved and vulnerable populations. We will also provide career and research mentorship in global and community healthy; promote scholarly activity in global health education, public health, research methods, and innovative service delivery; and education around health disparities and inequity.

We will follow Consortium of Universities for Global Health (CUGH) Global Health Education Competencies Toolkit (appendix A) to guide our core content to enable our scholars meet competency level of Global Citizen (8 domains) thru Basic Operational – Practitioner Oriented (11 domains) (appendix B). These include, but are not limited to, the scholars’ ability to:

1. Describe the major causes of morbidity and mortality and their variations between high-, middle-, and low- income regions, as well as major public health efforts to reduce health disparities globally
2. Describe how globalization affects health, health systems, and the delivery of health care.
3. List major social and economic determinants of health and their impacts on access to and quality of health services
4. Demonstrate application of capacity-strengthening through trusting collaboration with partner organizations to assess, build, and/or integrate community capabilities and assets to improve health of individuals and populations.
5. Exhibit inter-professional values and communication skills that demonstrate respect for, and awareness of the unique cultures, values, roles/responsibilities and expertise represented by other professions and groups that work in global health.
6. Apply social justice and human rights principles in addressing global health problems and demonstrate basic understanding of the relationship between health, human rights, and global inequities.

Overall, at the completion of the WSUGHA Global Health and Urban Equities program, our scholars will be able to fully engage in global health experiences with a well-rounded and proven foundation in global health and be equipped to solve complex global and local problems using interdisciplinary evidence-based, high value, compassionate, and culturally competent strategies.

Upon meeting all requirements of the program by which they would have demonstrated the Global Citizen and Basic Operational-Practitioner competencies, they will be able to receive a WSUGHA certificate of recognition. As our program grows we also hope that the participants will be eligible for completion of a Global Health and Urban Equity focus during medical school from the WSU School of Medicine or through their Department for residents and faculty.

#### Eligibility and Enrollment

MD students, Graduate Students, Residents, Faculty/ Practicing Physicians

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The Wayne State Global Health and Urban Equity Program content will be open access and available to any learner interested in gaining knowledge and skills in global health. Participants will need to complete an (online) application including a CV, letter of intent, and, if applicable, an approval letter from their program director (residents, graduate students). Participants will be required to participate in all (100%) of the scheduled classes to remain eligible for award of completion. Content will be available online; however, there must be a minimum 75% live attendance rate (this will include participation in a google hangout format). Global citizens (GCs) will be required to attend the classes and participate in the discussion board. Basic Operational Practitioners (BOPs) will have the same expectation and will also be required to complete and submit assignments related to each class. Basic operational practitioners must work with a mentor to design, implement, and present a Global Health and Urban Equity project (GLUE Project) aligned with the Global/Local projects supported by and approved by the Global Health Alliance.

#### Competencies

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The Global Health and Urban Equity Program will use the CUGH Competencies for Global Citizen and Basic Operational level as the foundation of our content. The competencies are fully designed and explained in the CUGH Toolkit (appendix A) and include the below eleven topics.

CUGH Global Health Competencies:

1. Global Burden of Disease (MK, SBP)
2. Globalization of Health and Health Care (PC,PBL, SBP)
3. Social and Environmental Determinants of Health (PC, ICS, P, SBP)
4. Capacity Strengthening (PC, PBL, SBP)
5. Collaboration, Partnering, and Communication (ICS, P, SBP)
6. Ethical Reasoning (PC, ICS, P)
7. Professional Practice (PBL, ICS, P, SBP)
8. Health Equity and Social Justice (ICS, P, SBP)
9. Program Management (PC, PBL, ICS, P, SBP)
10. Social-Cultural and Political Awareness (PC, ICS, P, SBP)
11. Strategic Analysis (MK, PBL, SBP)

The CUGH Toolkit does have a minimum level for Basic Operational – Program Oriented learners, but does not have criteria for Practitioner Oriented learners. For our medical students, residents, and faculty that may be involved in clinical work we are including practitioner based competencies. These will include the following:

Global Health Alliance Practitioner Oriented Topics:

1. Travel Safety and skills (PC, MK, PBL) – Learners will be able to demonstrate understanding of food safety, vaccine readiness, basic first aid and hygiene, and travel basics.
2. Infectious Disease (PC, MK, SBP) – Learners will gain knowledge in HIV/TB/Malaria in a global context. They will also demonstrate understanding of tropical medicine topics and neglected diseases.
3. Global/Local Detroit (ICS,P, SBP) – Learners will demonstrate understanding and working knowledge of the public health and how they can be applicable in our local Detroit environment as well as globally.
4. Special Populations (PC,MK,ICS,SBP) – Learners be able to identify additional considerations in special populations including children, pregnant females, elderly, and disabled patients.
5. Disaster and Humanitarian Response (MK, PBL, ICS, SBP) – Learners will demonstrate an understanding of the types of complex emergencies and have a working knowledge of the factors to consider including water, sanitation, and hygiene (WASH), shelter, food security, and medical care.
6. Journal club (MK, PBL, P) – Learners will demonstrate understanding on how to critically analyze publications. They will also become familiar with the working body of global health literature and current issues.

**ACGME Core Competencies:**

PC – Patient Care

MK – Medical Knowledge

PBL – Practice-Based Learning

ICS – Interpersonal and Communication skills

P – Professionalism

SBP – System-Based Practice

#### Program Requirements and Structure

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1. Didactics
2. Capstone Project
3. Symposiums/Conferences
4. Field Experience

**Didactics**

WSUGHA didactics are designed using innovative andragogic strategies to promote longitudinal self-directed learning. Each two-hour class will comprise both WSU or guest faculty-led presentations and small-group interactive discussions. Presentations will take the form of a variety of information delivery models such as debate and argumentation, case studies and problem-solving, journal club, reverse-classroom, cross-over learning, simulation, and use of technology (e-learning) such as global massive open online tools as well as transnational educational partnerships.

Global Health and Urban Equity program scholars will be expected to participate in every class offered in the two-year curriculum either in person, by google hangout remotely, or as a make-up session described below. Scholars will be expected to participate in an online discussion question prior to attending each class. They will be expected to log attendance to each class and participate actively in the small group discussions. An assignment will be due following each class for any student attempting to obtain the Basic Operational – Practitioner Oriented level. Any absences will require scholars to review online materials, view the online recording of lecture, and complete the regular assignments and an additional “out of class” assignment to make up for the small group discussion portion. All material, videos, and assignments will be available on the Google Classroom for the Global Health and Urban Equity Program. Class list is as follows for the two year curriculum.

|  |  |  |  |
| --- | --- | --- | --- |
| **Year 1 – Month** | **Topic** | **Year 2 – Month** | **Topic** |
| August | Intro to Global Health/Social-cultural and Political Awareness | August | Intro to Global Health/Social-cultural and Political Awareness |
| September | Global Burden of Disease/Infectious Disease | September | Globalization of Health and Healthcare |
| October | Social and Environmental Determinants of Health | October | Collaboration, Partnering, and Communication |
| November | Travel Safety and Skills | November | Travel Safety and Skills |
| December | Ethical Reasoning | December | Health Equity and Social Justice |
| January | Journal Club and Infectious Disease | January | Journal Club and Non-communicable Disease |
| February | Capacity Strengthening | February | Professional Practice |
| March | Special Populations | March | Infectious Disease |
| April | Program Management | April | Strategic Analysis |
| May | Disaster and Humanitarian Emergencies | May | Global/Local Detroit |

**Capstone Project**

In addition to the class discussion questions, participation, and assignments, scholars aiming to achieve the Basic Operational –Practitioner Oriented level will also be required to complete a capstone project. Capstone projects should be aimed at addressing relevant global health issues and solving real-world problems. This project will require approval and mentoring with one of the core faculty members or fellows. The project design will need to be submitted a minimum of six months prior to program start. The program will require an assessment and presentation after completion. This Global health capstone may be completed in an international site or in a local Detroit site but the same format of pre-approval, program completion, and final assessment/presentation will remain the same. Project presentations will be at local, regional, and national Global health conferences – WSUGHA symposium, Henry Ford Hospital Global Health Initiative, and Consortium of Universities for Global Health. Additionally, students are strongly encouraged, and will be mentored, to submit their work for publication.

**Symposiums/Conferences**

1. Two travel safety and skills symposiums that are hands-on learning opportunities for students to familiarize themselves with common skills that are important in resource-limited settings such as use of ultrasound, intubation by head lamp, paracentesis, improvised splinting, Oral Rehydration Solution preparation, water purification.
2. Annual WSUGHA symposium on a global health theme and poster showcase of global health work by our scholars.
3. Annual Henry Ford Global Health Initiative symposium.
4. Annual Consortium of Universities for Global Health conference.

**Field Experience – Sites**

Approved sites and coordinators include but are not limited to:

1. Lao PDR- Emergency Medicine Development with Health Frontiers. Program coordinator Kristiana Kaufmann MD, MPH
2. India- Rural Health and community assessment with Pardada Pardadi. Program coordinator V. Arun Kumar MD, MPH
3. India – Tropical Medicine with CMC Vellore. Program coordinator Pranatharthi Chandrasekar MD
4. Guatemala – Emergency Medicine Development with USAC: Program coordinator Daniel Ridelman MD, FACEP
5. Haiti – WHSO community assessment with HART: Program coordinator Chih Chuang MD. Lisa Allenspach MD
6. Nicaragua – WHSO community assessment with Bridges to Community: Program coordinator TBD.
7. Panama – Community Health Assessment and Health Clinic. Program coordinator Dr. Jason Moore MD
8. Detroit – WSU co-curricular program, Jenny Mendez

Field Expectations:

*Global-International*

There is an increasing awareness of the need for safe and ethical international field experience by U.S. medical learners that are grounded in respect of host communities and are appropriate for the level of training of medical learners. Therefore, our international experience are designed in compliance with the Working Group on Ethics Guidelines for Global Health Training (WEIGHT) which were developed for institutions, trainees, and sponsors of field-based global health training on ethics and best practices. In so doing, we aim to mitigate the potential harms to institutions, personnel, trainees, patients, and the community in host countries of global health training programs while providing a balanced and well-rounded learning experience for our scholars.

First and second year medical students participating in the GLUE program will obtain a public health service experience, commensurate with their level of training, while resident and faculty scholars will have a more clinical experience in collaboration with host medical providers.

*Global-Local*

Metropolitan Detroit is a rich tapestry of racial, ethnic, national, socio-economic, sexual, and able diversity. It is also home to significant health disparities and inequities that reflect global realities. This offers global health and urban equity (GLUE) scholars and practitioners the unique opportunity for bi-directional service, learning, and research that provide benefit for local and international citizens. Global lessons could be applied to solve local problems and vice-versa. To effectively serve the local community, it is important to be aware of and understand local realities. Thus, global-local site experiences are immersion opportunities to increase exposure to and awareness of local issues of health and socioeconomic disparities and

inequities as it relates to vulnerable populations in our immediate community. Each month, all scholars will visit at least 1 community & health centers caring for a variety of vulnerable populations including, but not limited to, the homeless, refugee and immigrants, commercial sex workers, HIV/AIDS, LGBTQIA. They will also be able to participate in cultural activities such as festivities, town hall meetings, and social events. During each visit, the scholar will work with a Site leader who will provide an orientation to key issues affecting the population served. The goal is to gain awareness about the social determinants of health affecting these populations and gain appreciation for the complexity of their health experience which should inform the design and implementation of appropriate multi-contoured health interventions. This buttresses the Global health principle of community-led interdisciplinary interventions for long term, sustainable impact on health outcomes. Scholars who are unable to travel internationally to experience their longer-term service-learning opportunity will conduct their service-learning in one of these local sites.

There will be opportunities for global health advocacy through online resources to understand key issues, acquire communication tools effective messaging, and build partnerships with local leaders.

Before embarking on any global or local site visit, Global Health and Urban Equity scholars must complete online pre-departure workshops as well as cultural competency/humility simulations. After each site experience, scholars will complete a reflective exercise online. Opportunity for small group discussion of reflections will be provided throughout the year.

#### Course Topics and Resources

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The course topics will follow the above mentioned competencies for CUGH and additional practitioner oriented basic operational level skills. The resources for the CUGH topics are included at length in the CUGH toolkit (appendix A) and will be utilized fully during the course. Additional resources will be complied by the co-instructors for each session and will be reviewed and amended by the core faculty Dr. Kaufmann and Dr. Nnodim. The team approach will ensure the curriculum remains consistent and follows our over-arching vision to create Global Health and Urban Equity providers who have a working knowledge and skills for global health work. Additional resources will be offered on our website including a reading list, movie list, and online courses. Our learners will be encouraged to attend an additional Global health discussions session that will include a book club to discuss extra readings and a “movie night” to watch documentaries and important films that address global health situations. This will occur on alternate weeks and may be used as extra credit.

Other opportunities for additional course learning will be encouraged including online courses such as the Boston U edX three part courses: *The Practitioner’s Guide to Global Health.*  This coursework may also be used as the foundation of “make up” assignments or “extra credit”.

#### Assessments

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Basic Operational – Practitioner Oriented

1. Pre- and Post- surveys of Global health knowledge, skills, and attitudes
2. Completion of required monthly assignments and discussion board
3. Preparation, participation, and presentation of capstone program.
4. WSUGHA Mentor Evaluations
5. Field Site Leader Evaluations
6. Cumulative assessment
7. >75% face-to-face class attendance

Curriculum

1. Participant evaluations for seminar, online resources, field experience, mentorship experience, and symposium.
2. Review of number of scholars entering global health fields, primary care fields, or serving predominantly underrepresented minority patient populations through Alumni Surveys.
3. Alumni employer surveys about on the-job field-specific application and value of skills
4. Curriculum analysis
5. Alumni Exit interviews and surveys
6. Regular review by core faculty to review and apply scholar program evaluations for program improvement.

#### Additional Training Opportunities

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WSUGHA Global Health and Urban Equity scholars will have the opportunity to further their training and increase their expertise by obtaining:

1. MPH degree, via partnership with NextGenU.org
2. Preventive Medicine Residency Program, via partnership with NextGenU.org
3. Community Health Fellowship, via partnership with Detroit Health Department
4. HIV Primary Care Certification, via Department of Internal Medicine, WSUSOM