

# **Global Health Education in US and Canadian Universities and Colleges**

**Breyette Lorntz, PhD – UVa  
Richard L. Guerrant, MD – UVa  
Richard Deckelbaum, MD – Columbia University**

**17th Annual GHEC Conference  
Sacramento, California  
3 April 2008**

## **GHEC – Lorntz contract**

- 1. Created annotated bibliography (50)**
- 2. Analyzed GHEC / FAIMER / AAMC survey**
- 3. Conducted web-based survey of GH programs in US & Canadian academic institutions**
- 4. Conducted and analyzed interviews with selected US & Canadian GH leaders**

# GHEC / FAIMER / AAMC survey

## International Opportunities in US Medical Education

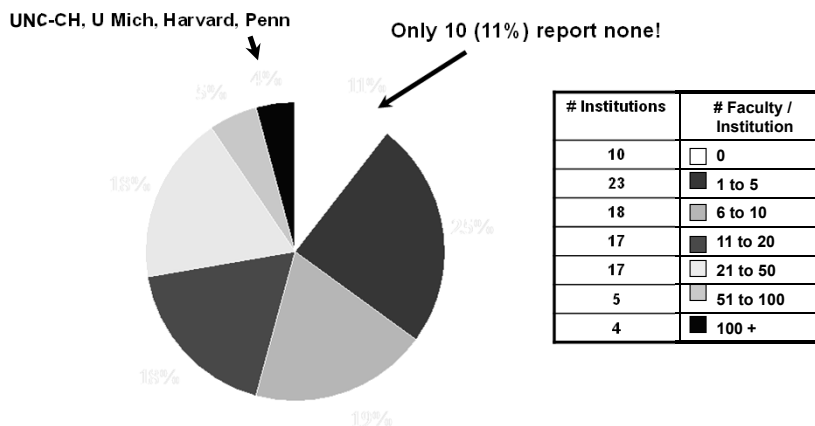
“ to make available information about the extent and nature of international opportunities for medical students, residents, and faculty.”

Survey Monkey <http://www.faimer.org/resources/opportunities> (2005-2007)

- All 126 US medical schools contacted
- 109 (86%) responded
- Interview instrument of 20 questions
  - Faculty participation
  - Int'l opportunities for faculty
  - Int'l activity by region – residents & students

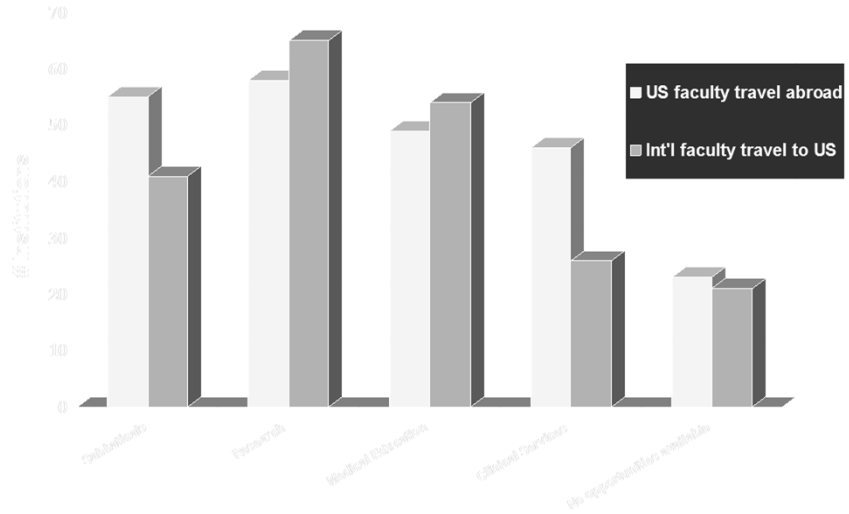
GHEC – Global Health Education Consortium  
 FAIMER – Foundation for the Advancement of International Medical Education and Research  
 AAMC – American Association of Medical Colleges

### Faculty participation in organized and established international opportunities (n=94)

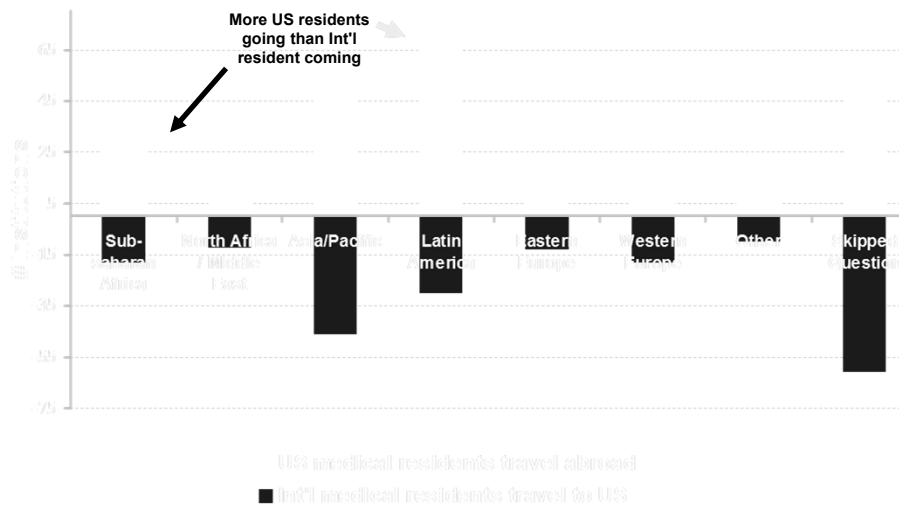


Note: The average number of clinical and basic science faculty in US medical schools is 500. Review of US Medical School Finances, 1996-1997 Robert F. Jones, PhD; Janice L. Ganem, CPA; Donna J. Williams, MA; Jack Y. Krakower, PhD. JAMA. 1998;280:813-818.

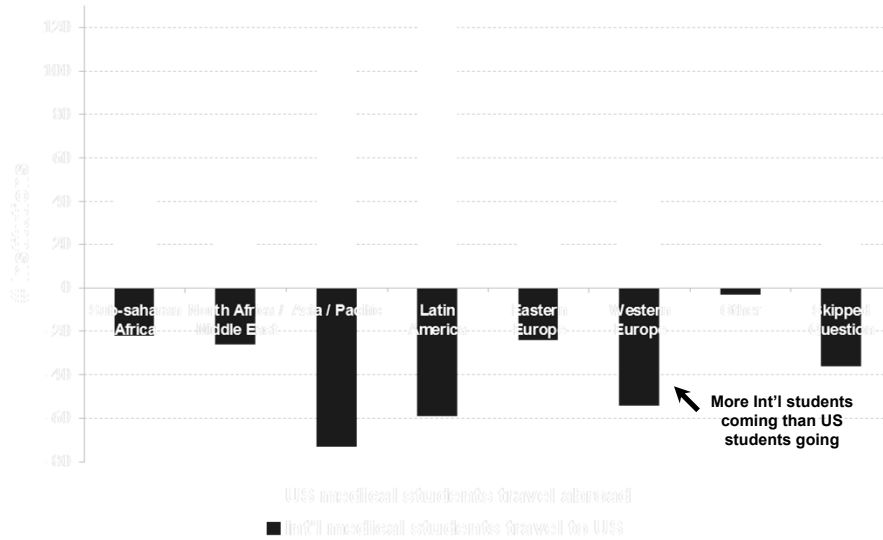
## International opportunities available to faculty



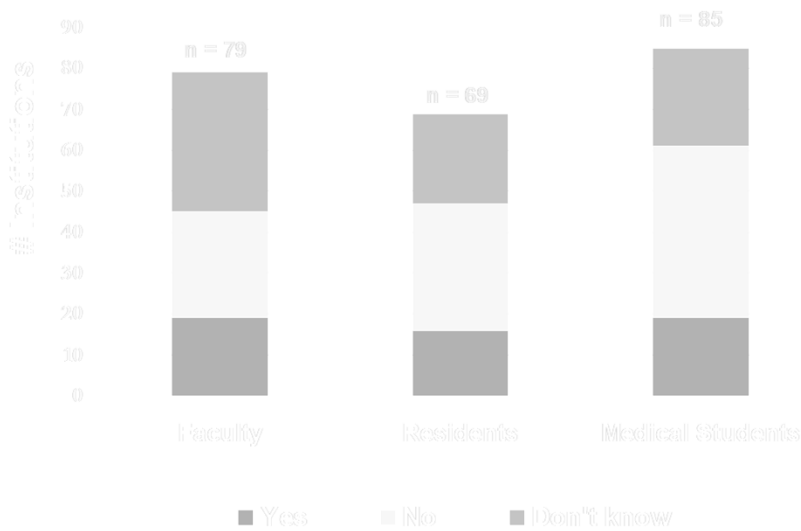
## Regions visited or represented by medical residents



## Regions visited or represented by medical students



## Availability of international opportunities to other domestic schools



## **GHEC / FAIMER / AAMC survey: Conclusions**

- Range in faculty participation from 0 (11%) to >100 (4%) per school
- Many international opportunities for faculty
- US / Int'l residents & students: Non-parity
- Sharing between domestic institutions

## **Web-based survey of GH programs in US and Canadian academic institutions**

80,000 hits examined (Oct 07 – Mar 08)

Sites surveyed:

- 1) WHO Collaborating Centres Database: US & Canada
- 2) Google Search terms:

Global Health / International Health				
University			College	
Program	Institute	Center / Centre	Department	Initiative
Public Health	Medicine		Nursing	Dentistry

Example: "global health" AND "university" AND "department" AND "public health"  
x5 ie: 1) alone, 2) "allintitle" 3) ".edu", 4) ".ca", 5) allintitle + .ca

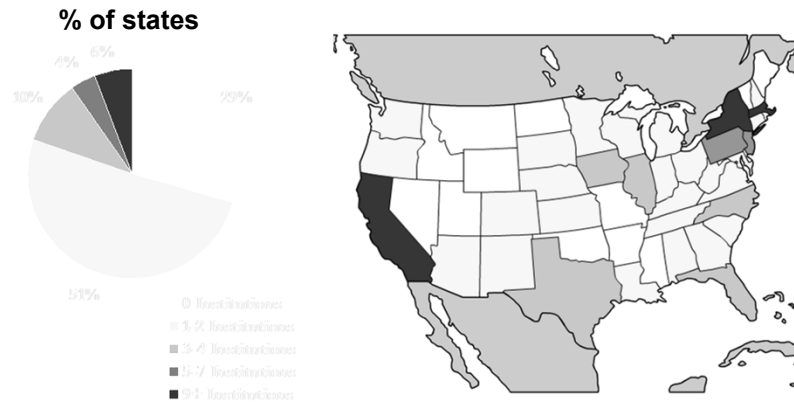
**199 GH programs  
at  
123 academic institutions  
in US and Canada**

**Data fields collected**

<p><b>Institution name</b>  <b>Name of GH program</b>  <b>Program contact information</b>              Website / Post address              Email address / Phone # / Fax #              Date accessed  <b>Director's Contact Information</b>              Name / Email Address / Phone #  <b>Program description</b>              Mission statement              School where based              Date founded (year)              Major projects (yes/no)                  Research, service, education, "diseases"</p>	<p><b>Primary funding sources &amp; amounts (if indicated)</b>              Private, government, other  <b>Curriculum sponsored (if yes, schools and discipline)</b>              Undergraduate / graduate / professional              Degree program(s) offered? (If yes, type, level)  <b>Students abroad (if yes, include regional locations)</b>              Groups / Individually  <b>Capacity building through int'l partnerships</b>              International partner(s) – (yes/no)              Type of partner (university, government, other)              Location(s)              Reported areas of emphasis / collaboration:                  Research, education, service, "diseases"</p>
---	--

## US distribution of institutions w/ $\geq 1$ GH Program (n=104)

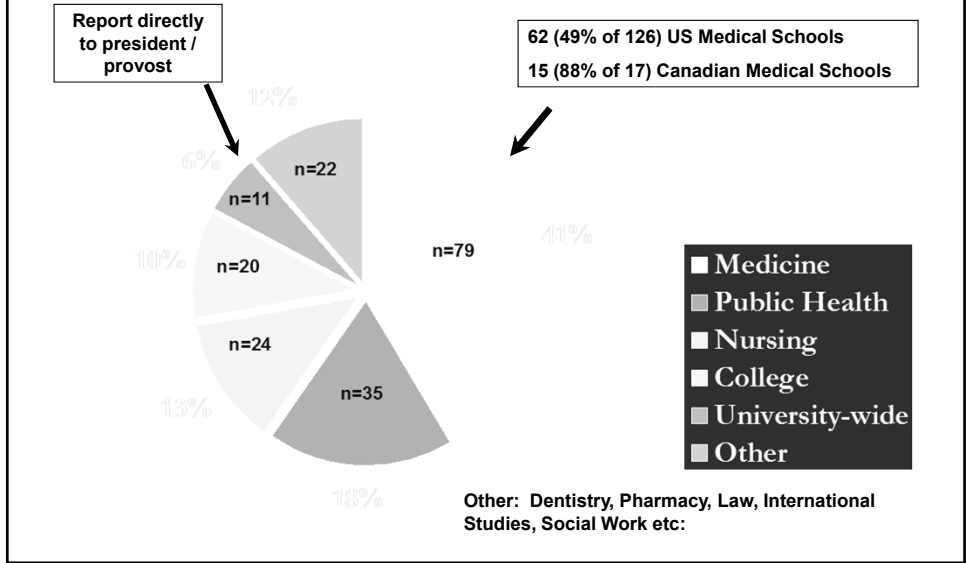
# institutions by state



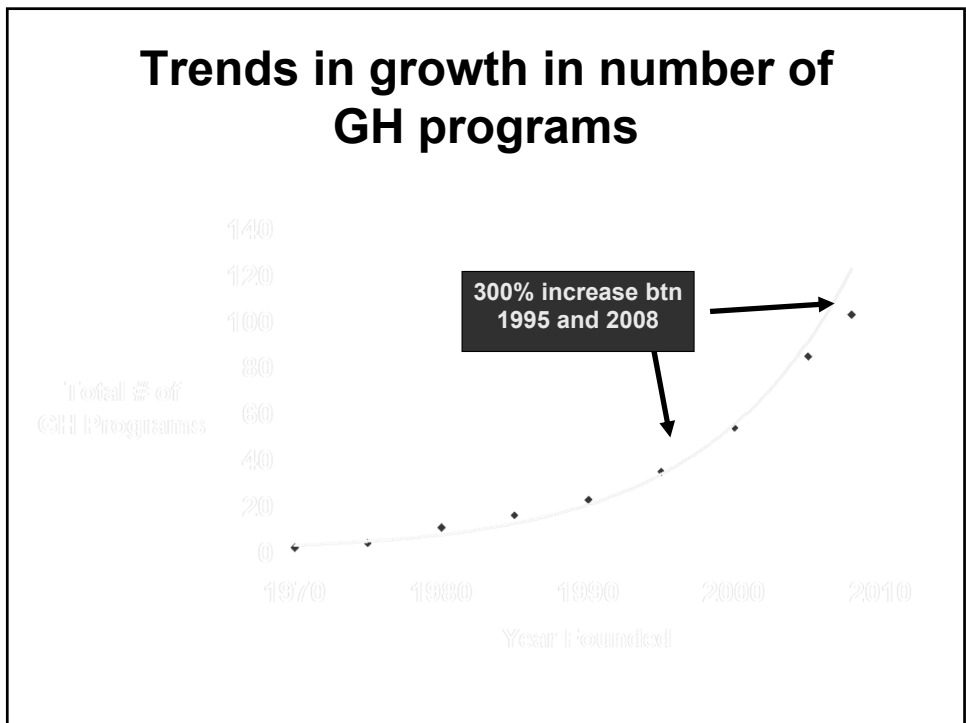
## Canadian distribution of institutions w/ $\geq 1$ GH program (n=19)

	Province	# Institutions
1	Alberta	2
2	British Columbia	3
3	Manitoba	1
4	New Brunswick	0
5	Newfoundland	0
6	Nova Scotia	1
7	Ontario	9
8	Prince Edward Island	0
9	Quebec	3
10	Saskatchewan	0

## Distribution of GH programs within institutions (n=196)



## Trends in growth in number of GH programs



## **Web-based search: Conclusions**

- **More programs than generally acknowledged by GH community**
- **GH programs not equally distributed throughout N. America**
- **School sponsorship varied. New trend: University-wide**
- **GH programs proliferating**

## **Interviews with selected US & Canadian GH leaders**

- **Respondents chosen by leadership within GHEC, FIC, and IOM**
- **Interviewers:**
  - **Breyette Lorntz**
  - **Richard Guerrant**
  - **Thomas Hall**
  - **Anvar Velji**

## **Interview Respondents**

**Anderson - AAMC**

**Banoob - APHA**

**Baumann- McMaster**

**Brewer - McGill**

**Coates - UCLA**

**Debas - UCSF**

**Dekelbaum - Columbia**

**Dharamsi - UBC**

**Fein - Cornell**

**Hanson - U Saskatchewan**

**Haq - University Wisconsin**

**Holmes - U Washington**

**Hughes – Emory**

**Hunt - AAMC**

**Gardner - FIC**

**Guerrant - UVa**

**Kelley – IOM**

**Kolars - Gates Foundation  
and Mayo Clinic**

**Keusch - BU**

**Merson - Duke**

**Nathanson – U Pennsylvania**

**Quinn - Johns Hopkins**

**Stern – Michigan**

**Tugwell – U Ottawa**

**Wilkes - UC Davis**

**Zakus – U Toronto**

## **Five Interview Questions Building Capacity of Overseas Universities**

- 1. Top priorities**
- 2. Existing activities**
- 3. Impediments**
- 4. Collective actions**
- 5. Other**

### **Question 1. Top priorities**

2. Existing activities
3. Impediments
4. Collective actions

1. **Train leaders from N. America**
2. **Train leaders from developing world**
3. **Fund training programs overseas**
4. **Align with priorities of collaborating international partners**
5. **Develop research capabilities of international partners**

1. Top priorities

### **Question 2. Existing activities**

3. Impediments
4. Collective actions

1. **Training international partners**
2. **Training US students**
3. **Sandwich programs**
4. **Partnerships with international universities**
5. **Collaborative research**

1. Top priorities
2. Existing activities

### **Question 3. Impediments**

4. Collective actions

1. **Funding**
2. **Protected faculty time**
3. **Institutional support and buy-in**
4. **Lack of clarity on global priorities**

1. Top priorities
2. Existing activities
3. Impediments

### **Question 4. Collective actions**

1. **Information sharing**
2. **Advocacy**
3. **Complement strengths between universities**
4. **Define field of global health**

**“US/Canadian universities should partner with overseas universities in joint activities, jointly identifying problems and solutions .”**

**Mike Merson, MD  
Director, Duke Global Health Institute**

**“The major local challenges to implementing international activities are: 1) insufficient governmental and institutional funding... and 2) the lack of coordination and awareness of efforts by different faculty and groups within and between universities.”**

**Timothy Brewer  
Director, Global Health Programs  
McGill University**

**“By bringing universities together, a broader range of assets can be assembled and accessed and synergies which are otherwise not possible may be explored.”**

**Pat Kelley, MD  
Director Board on Global Health  
Institute of Medicine**

**“There is an advantage in a group which is stronger than an individual, even for Hopkins. For example, advocacy at the federal level is needed. “**

**Tom Quinn, MD  
Director, Center for Global Health  
Johns Hopkins University**

## **Interviews: Conclusions**

- **Collaborative training: Priority and Action**
- **Funding, protected time, clarity NOT interest are impediments**
- **Isolated GH programs**
- **Need for a network**

## **Conclusions**

- **Medical schools**
- **Broad perspective of N. American**
- **Capacity building of GH professionals**
- **Need for a network**

# **Acknowledgments**

- **GHEC – Anvar Velji, MD and Tom Hall, MD, DrPH**
- **Center for Global Health, University of Virginia**
- **AAMC / FAIMER**
- **Suzanne Sarfaty, MD**
- **UVA Students – Missy Mallory and Roma Kaundal**