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***ASPPH Presents Innovative  
Approaches to Applied and  
Experiential Learning for  
Undergraduates***

Friday, May 19, 2017  
1:00 pm-2:00 pm Eastern

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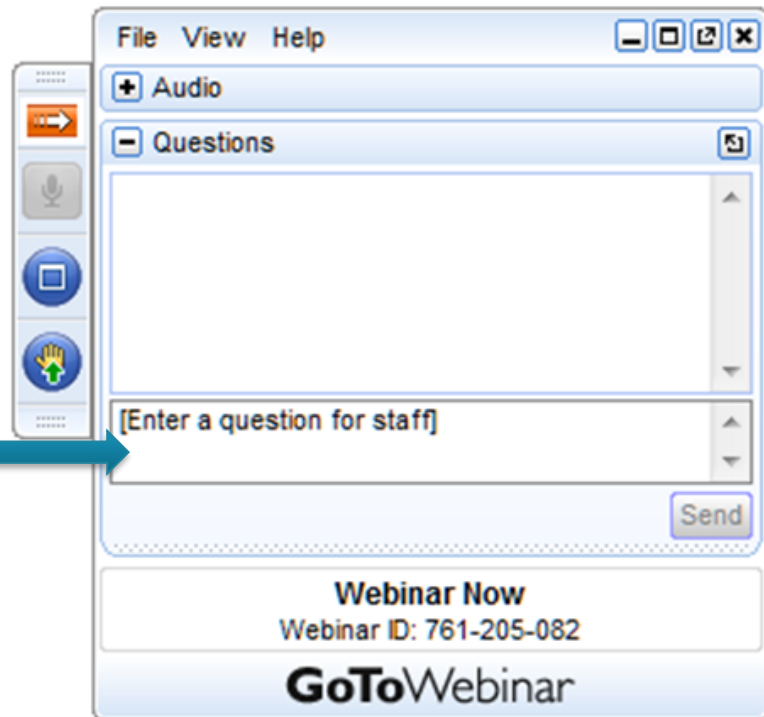
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# Method for Submitting Questions

## Join the Conversation...

- You can ask questions in writing anytime during the webinar.
- Simply type them in the “Questions” field on the right side of your screen.



ASPPH Presents  
WEBINAR

# Today's Presenters

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**Miryha Gould  
Runnerstrom, PhD**  
University of California,  
Irvine



**Janet DiVincenzo**  
University of  
California, Irvine



**Tricia Todd, MPH**  
University of Minnesota



**Jessica Evert, MD**  
UCSF/Child Family  
Health International

A photograph of a stone wall with the text "University of California, Irvine" carved into it. A small circular seal is visible on the left side of the wall.

University of California, Irvine

# **Immersing Online Students through Role Plays, a Case Study, and Group Work: Reconceptualizing an Environmental Quality and Health Course**

**Miryha Gould Runnerstrom, Ph.D.  
Janet DiVincenzo, M.A.**





# ENVIRONMENTAL QUALITY AND HEALTH

**SYLLABUS**

**GET STARTED**

**FINALS**

**WEEK**

**1**

**WEEK**

**2**

**WEEK**

**3**

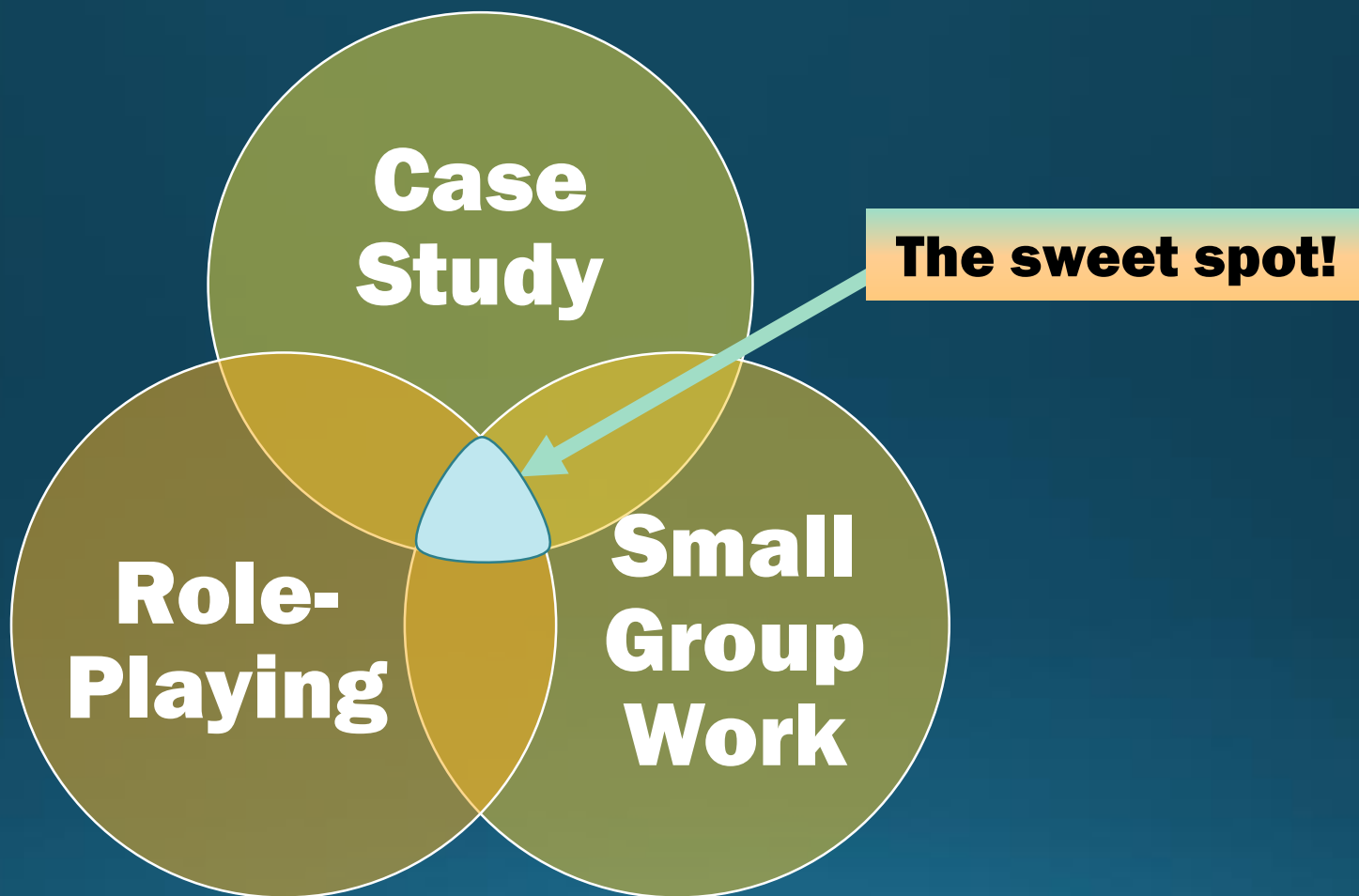
**WEEK**

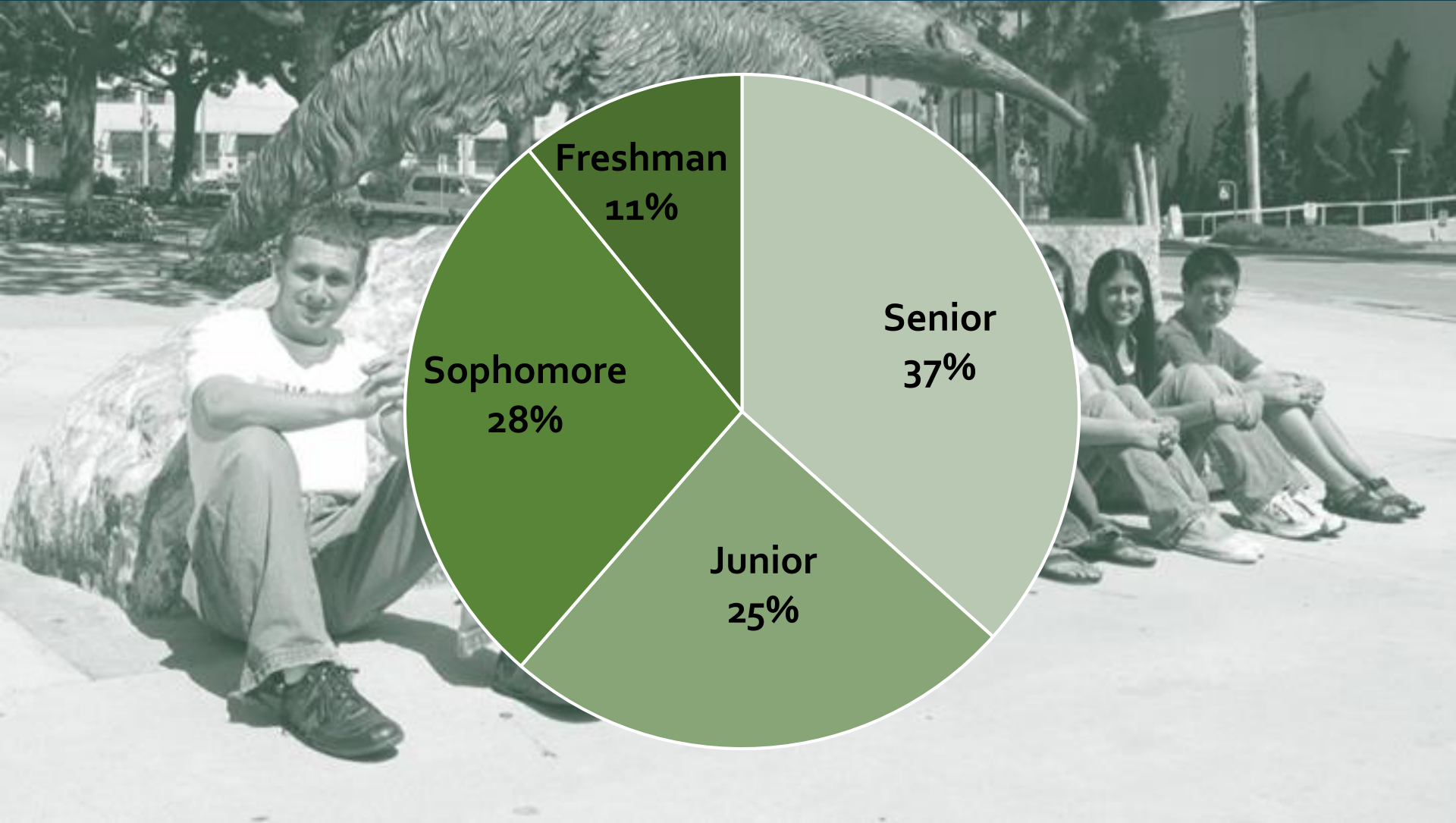
**4**

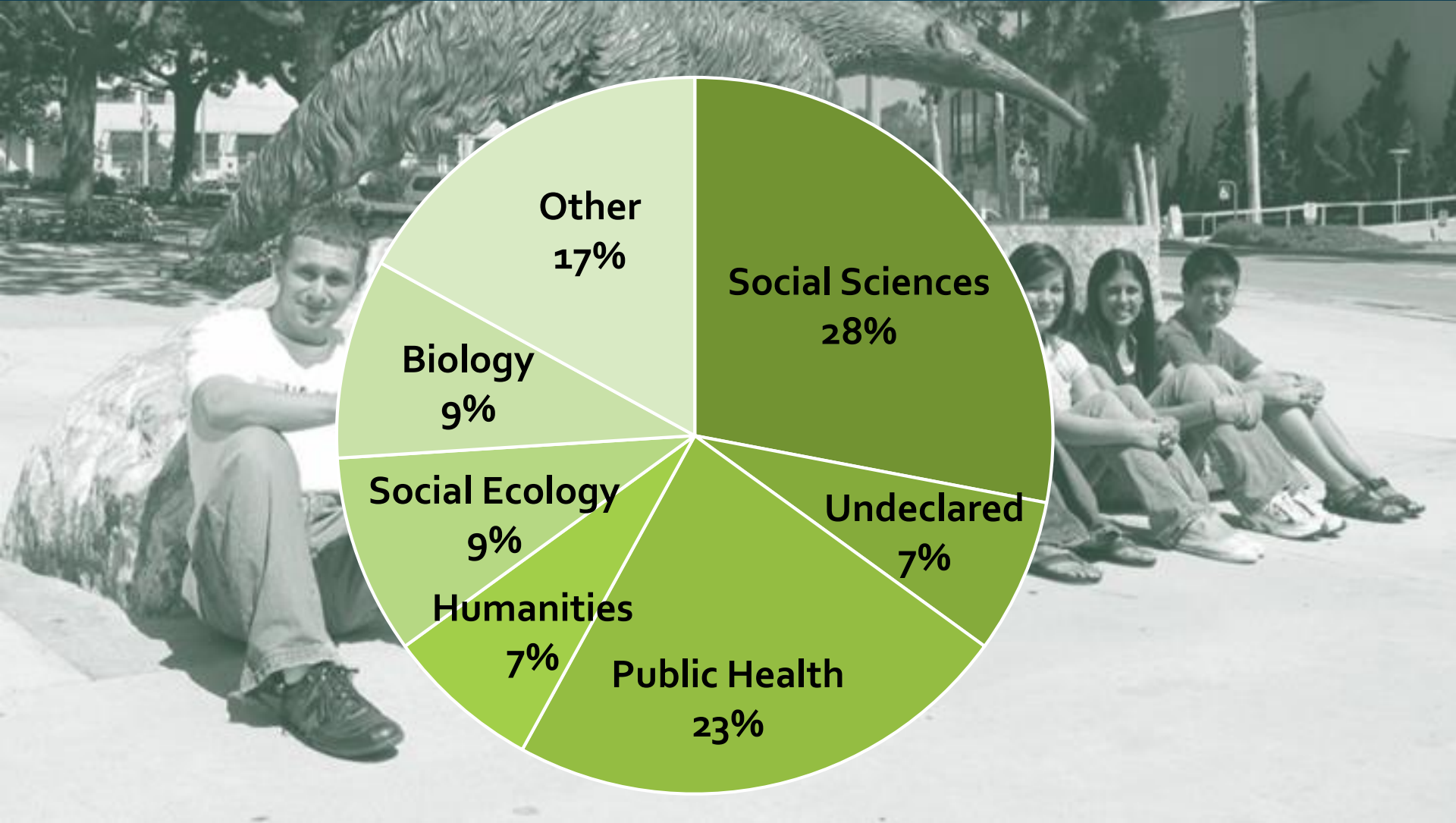
**WEEK**

**5**

# Objectives







"I don't want  
a canned  
online class."



1

2

3

4

5

- Scramble.

- Group organization

- Select topic

- Assigned to a group.

- Forum (in a group)  
- write a bio of their role as

- Lay out expectations

- They sign a contract.

- Quiz on syllabus &amp; class focus.

- Prepare to meet next week  
or meet as a group??  
(too much?)- Stay in role  
throughout

Storyline

Front load  
the lectures.

- Confusion ▼

- Allay fears. Clarify.

- No false starts!

- Establish their investment.

- Group must meet:

- establish their outcomes  
that they report on

- forum post

- turn in something form  
reflection  
checklist

- Embody their role!

- Key players/stakeholders

- What's at stake?

Hypothesis

- Early thinking

- Calm. Settled.

- Invested.

- Groups

- next steps

- approaches to

resolve the case:

- govt corruption

- funding/-policy

- idea generation

- risk assessment

- go beyond the

textbook

- Google Scholar

- guest speaker?

librarian

Scientific  
Evidence

- Overwhelmed, maybe.

- Reassure them.

- Curve ball?  
(leads to A-ha! moment)

- How bad is this?

- Characterize:

- hazards/risks

- impact

- social cost

- Whoa. What's

really at stake?

- What makes this

SO HARD?!

- What's the

value of X?

- What's the

value of the rain-

forest?

Big  
challenge- Ethical implications  
of action- Costs of doing  
nothing

- Denyers' role

- Internet "experts"

- This is SLOW

- Mom Blogs

- Political machine!

- Reality check!

Modeling  
Risk Assessment

- They get it!

- Strength of  
evidence?- Amount of  
uncertainty!- Political  
decision-making!

- Expert witnesses

- What are the  
real options?- Ethical implications  
of action- Costs of doing  
nothing

- Denyers' role

- Internet "experts"

- This is SLOW

- Mom Blogs

- Political machine!

- Reality check!

Decision-  
making  
Process- End on an  
up note- What's their  
individual role?- Personal Plan  
of Action

- UCDC

- Study Abroad

- Ameri Corps

- Peace Corps

- Volunteer  
WORK

- TFA

- Run for office

- One possible  
solution-  $\Delta$  is  
possiblePlan  
Policy



# NATIONAL CENTER FOR CASE STUDY TEACHING IN SCIENCE

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## KEYWORDS

Our pe  
scienc

or Bro



## The Deforestation of the Amazon: A Case Study in Understanding Ecosystems and Their Value

by

Phil Camill

Department of Biology

Carleton College, Northfield, MN

*Biological diversity is the key to the maintenance of the world as we know it.... Eliminate one species, and another increases to take its place. Eliminate a great many species, and the local ecosystem starts to decay... How much force does it take to break the crucible of evolution?*

—E.O. Wilson, *The Diversity of Life*

### Introduction


In a crowded market in the Brazilian Amazon, a heated discussion develops between a farmer, a logger, and an environmentalist near the booth where the farmer is selling his crop.

"I just don't know how I am going to pay for this fertilizer," said Marco, a disgruntled peasant farmer growing beans in a cleared forest pasture. "This is only my second year of farming in the area, but already the crops are growing poorly, and it is hard to get rid of the weeds. They want \$300 per hectare for fertilizer and pesticides, but the land is not worth that much money. All I can afford is the \$70 per hectare to clear more forest."



Fig. 1 The Market Place





# ENVIRONMENTAL QUALITY AND HEALTH

## Discussion Section Agenda for Week 1

**Before the meeting:** Consult the Road Map for Week 1 and follow the instructions there

**During the meeting:** Follow this agenda here:

1. Introduce yourselves
  - Name
  - Major
  - Class year
  - What is your favorite food and why?
2. Talk about your roles
  - What role will you be playing throughout the case?
  - What perspective does your character have about the case?
  - What can your character add to your team's discussion of rainforest deforestation?
3. What is your understanding of the case study so far?
  - What do you know for sure?
  - What are you unclear about?
4. What problem are you trying to solve in this class (as described in the case study)?
  - Why is this problem relevant from a public health perspective?
  - How is this problem related to environmental quality and health?

### **Avoid these meeting traps!**

1. Don't spend time dwelling on the "unknowns" of the case or the class. As the weeks progress, you will discover more. We will always point you in the right direction.
2. In order to ensure that you are able to make it through the agenda, avoid chatting

In this class, you will be assigned a role to play. It's important to get to know your character so that you can embody them and advocate for their point of view. Below are the characters who appear in the case study. **Click on each one to learn more.**



Marco



Antonio



Carolina



Rachel



Maria



# RACHEL

Environmental  
ACTIVIST

LEARN MORE  
ABOUT RACHEL

**How does Rachel see the world?  
Through what lens? Do you know  
anyone like Rachel in your life?**  
(2-3 sentences)

**What has influenced Rachel's  
perspective on the world?  
(e.g., education, experiences).**  
Give specific examples. (2-3 sentences)

**How does Rachel feel about the  
rainforest, deforestation of the  
rainforest, and global climate change?**  
(4-5 sentences)

**What is Rachel's economic status?**  
(1-2 sentences)

**Would Rachel ride a bicycle to avoid  
driving a car?**

☐

YES

☐

NO

**Would she purchase bottled water?**

☐

YES

☐

NO

**Would she buy carbon offsets for her  
plane flight?**

☐

YES

☐

NO

**Would she eat meat?**

☐

YES

☐

NO

The quality of the content in this course is one of the best I have seen.

Cool, interactive role-playing in class. The entire class required group work which was challenging with deadlines not being met by all the team members. A lot of the work fell on me.

I enjoyed the interesting take she used for this class, setting up like a role playing game. It kept me very interested while I did my studying.

Class was extremely engaging.

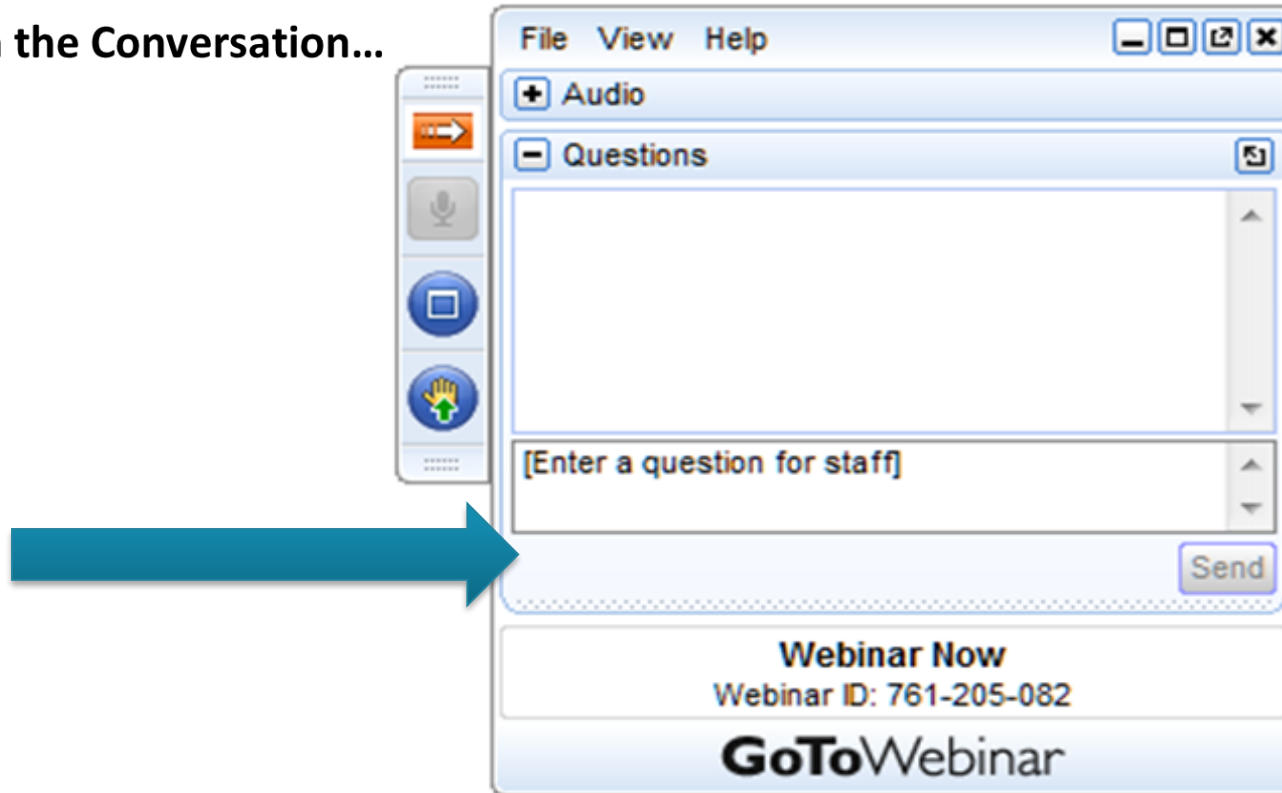
This course wasn't like any other class I have taken, online or otherwise. It was very interesting, interactive, and informative. I really enjoyed that it was online.

What questions  
do you have?



# Questions or Comments?

Join the Conversation...



# Ethics, Safety, and Power Dynamics, Oh My!

Best Practices in Undergraduate Public Health and Global Health Educational & Service Experiences with Vulnerable Populations



Tricia Todd MPH

Assistant Director, University of Minnesota Health Careers Center

Jessica Evert MD

Executive Director, Child Family Health International

Assistant Clinical Professor, UCSF Department of Family and Community Medicine

Affiliate Faculty, UCSF Global Health Sciences

## MEXICO

### OAXACA

- Realities of Health Access & Inequities

## MEXICO

### PUERTO ESCONDIDO

- Tropical Medicine & Community-Based Care
- Women's Reproductive Health

## INDIA

### MUMBAI/PUNE

- Confronting Tropical Disease Challenges
- Maternal & Child Health

## INDIA

### RURAL HIMALAYAS

- Rural/Urban Himalayan Rotation
- Intro to Traditional Medicine

## ECUADOR

### QUITO/PUYO/CHONE

- Amazon Community & Indigenous Health
- Andean Health
- Implementing Universal Healthcare
- Reproductive Health
- Urban & Rural Comparative Health
- Infectious Disease Eradication
- Sonrie Ecuador-Dental Program

## BOLIVIA

### LA PAZ

- Pediatric Health & Adolescent Medicine

## BOLIVIA

### TARIJA

- Healthcare in Remote Southern Bolivia

## SOUTH AFRICA

### DURBAN

- HIV/AIDS & Healthcare

## SOUTH AFRICA

### CAPE TOWN

- Healthcare Challenges

## INDIA

### NEW DELHI

- Public Health & Community Medicine
- Sight for All-Ophthalmology Rotation

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“I am trying to establish a long-term and impactful relationship between the [my school’s] student body and the villages and small towns of South Africa. [My school’s] students, who have a reputation for being extremely medically-driven, would be very interested in serving the communities medically, whether it is through patient advocacy, disease/illness awareness, or being able to directly participate in minor surgeries and procedures.”

-Email from undergraduate (bachelor’s) student

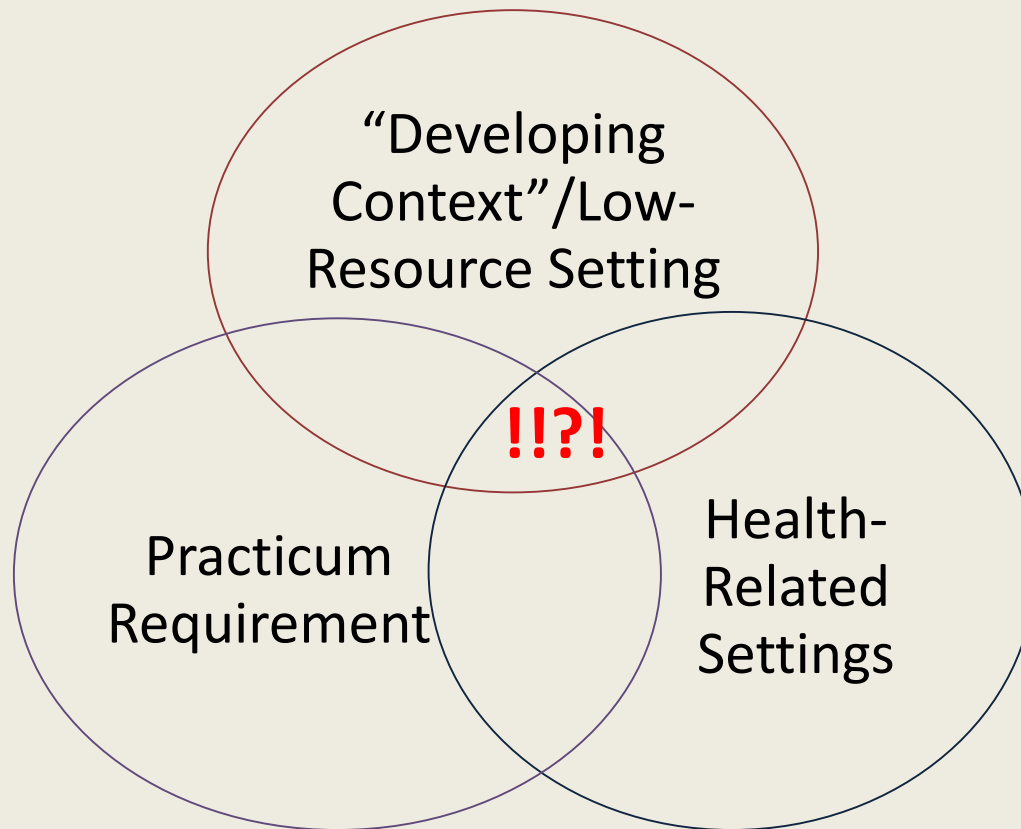


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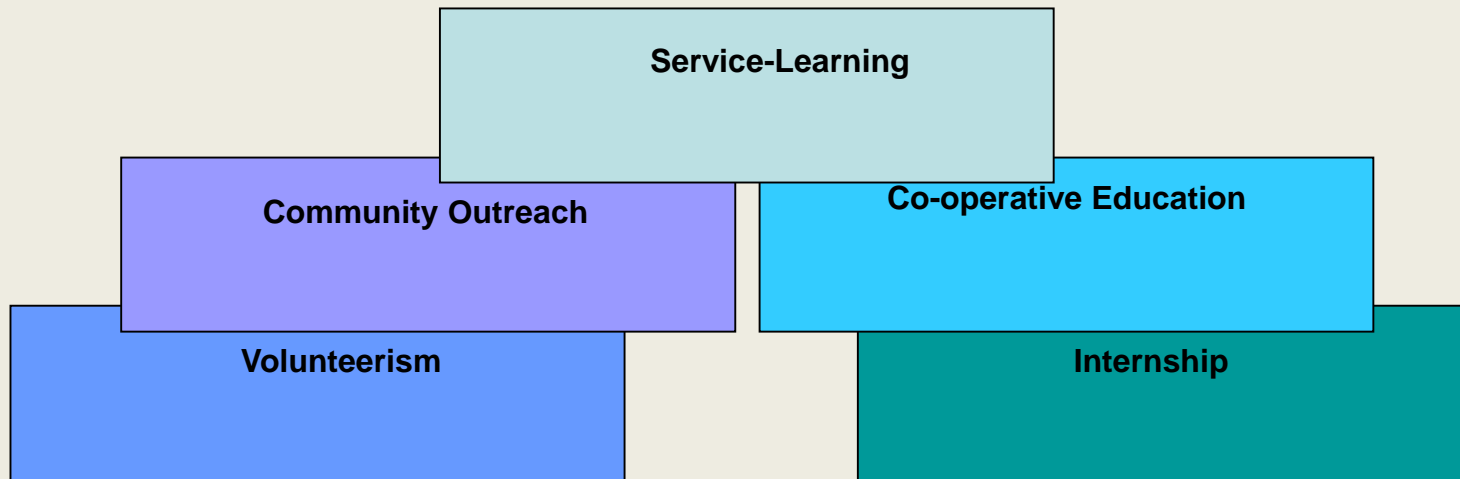
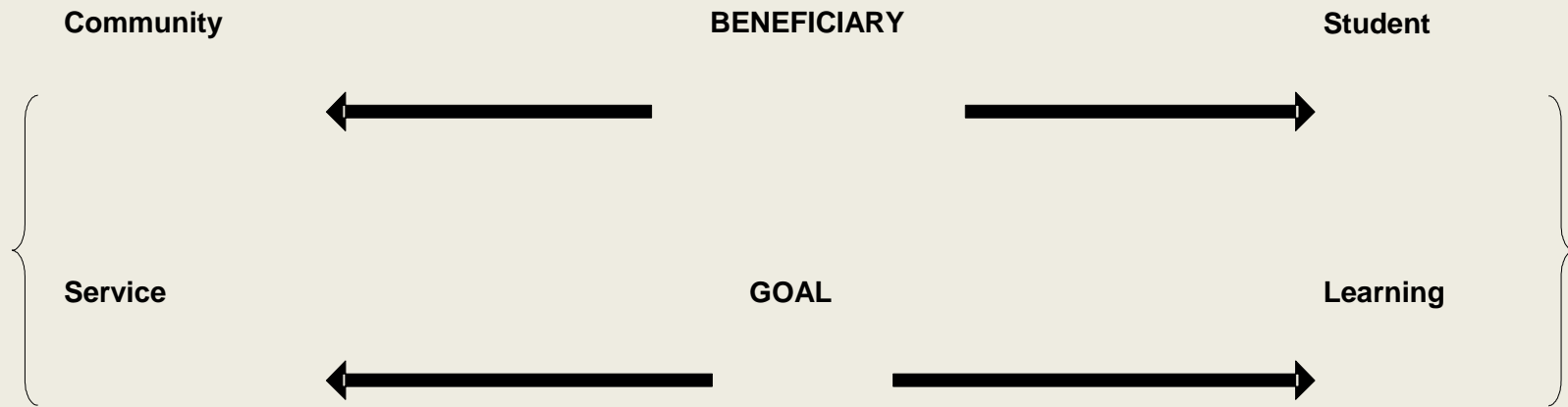
-Email from undergraduate (bachelor’s) student



# Challenges + Opportunities



Source: Service Learning in the Curriculum: A Resource for Higher Education Institutions. The Council on Higher Education. Pretoria, South Africa, 2006.



Today, 11:29 AM



at

21 mins · Instagram · 21

Suturing up a head laceration on one of the Vietnamese locals.  
#volunteersurgeon #idkwhatimdoing



Like

Comment

Share

one of my friends from high school....

"#idkwhatimdoing"

## ■ **Do you GASP? How pre-health students delivering babies in Africa is quickly becoming consequentially unacceptable**

*Jessica Evert MD, Tricia Todd MPH, and Peggy Zitek PhD*

Nobel-prize winner George Bernard Shaw pointed out an unfortunate paradox- “Self-sacrifice enables us to sacrifice other people without blushing.” Over the last decade advisors have noted an increase in pre-health students clamoring for international experiences especially

of clinical care that results from this shortage is both naïve and potentially deleterious. There are many efforts at district, national, regional, and international levels to address Human Resources for Health (HRH) shortfalls throughout the world. There is no mention of

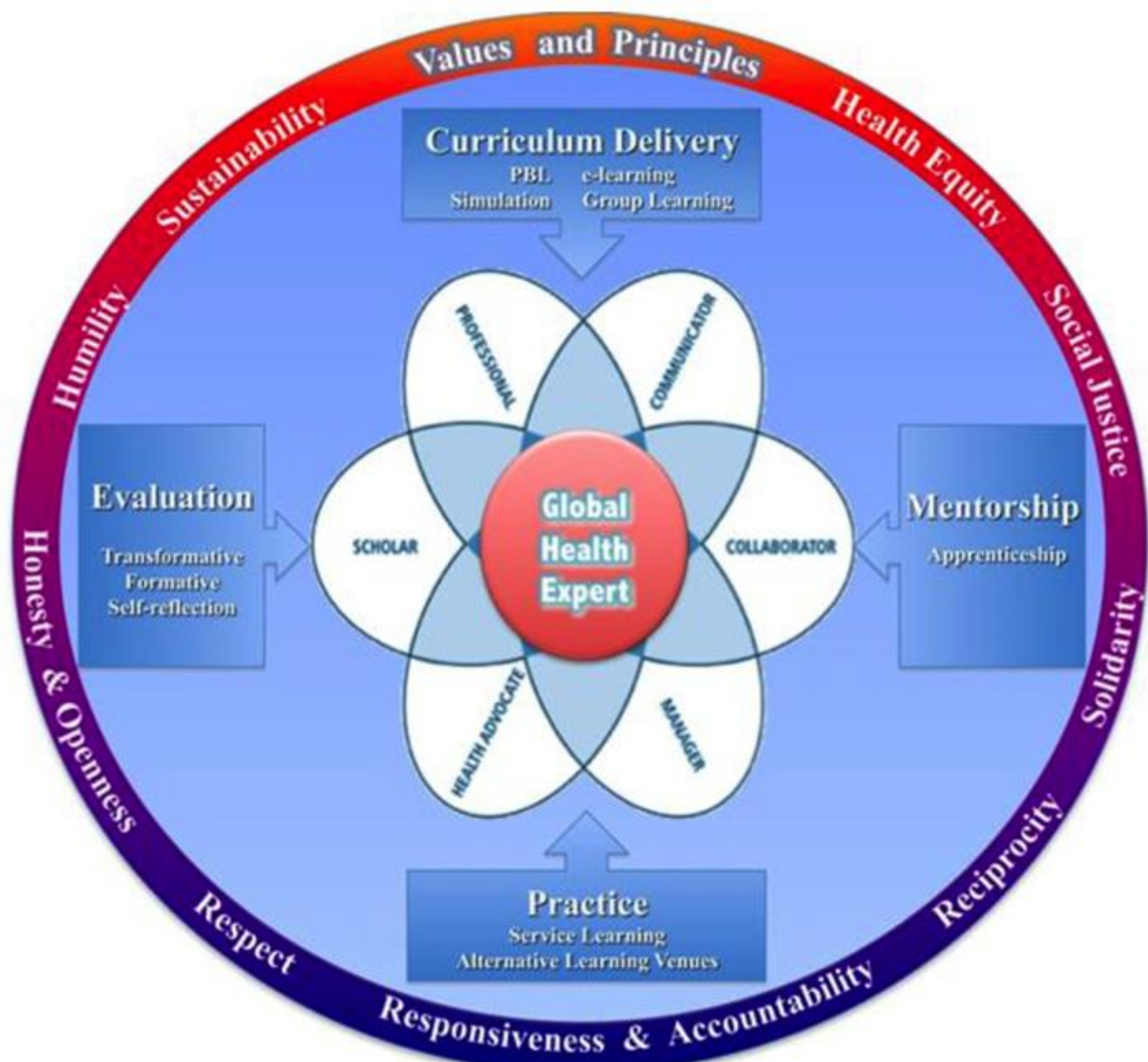


# HOPING TO HELP

THE PROMISES  
AND PITFALLS  
OF GLOBAL HEALTH  
VOLUNTEERING

Judith N. Lasker

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**Framework for Global Health Education in Postgraduate Family Medicine Training** Available online at:  
<http://globalhealth.ennovativesolution.com> webside©The Ontario Global Health Family Medicine Curriculum Working Group,

Standards

# THE FORUM ON EDUCATION ABROAD

## Guidelines for Undergraduate Health-Related Programs Abroad

Updated March 2013

There is a growing interest in global health among college students in the U.S. Some are interested because of a passion to “help people”; others see pursuing a health related activity as a way to gain experiences that will help them be successful when applying to medical school, or another health profession. With the increase in interest in global health, has come an increase in organizations trying to serve these students, and give them experiential learning opportunities in health settings. The concern that has been raised by many focuses on the safety and ethical nature of the types of experiences these students are having when abroad. These standards have been created to support sending institutions and hosts that serve students who are involved in experiential learning in health-related settings outside the United States.

These guidelines should be used to augment The Forum’s *Standards of Good Practice for Education Abroad*.

These guidelines are designed for a wide range of program types including: academic, for-

## Global Health Training

### Ethics and Best Practice Guidelines for Training Experiences in Global Health

John A. Crump,\* and Jeremy Sugarman,\* and the Working Group on Ethics Guidelines for Global Health Training (WEIGHT)†

*Division of Infectious Diseases and International Health, Duke University Medical Center, Durham, North Carolina; Duke Global Health Institute, Duke University, Durham, North Carolina; Kilimanjaro Christian Medical Centre, Moshi, Tanzania; Kilimanjaro Christian Medical College, Tumaini University, Moshi, Tanzania; Berman Institute of Bioethics and Department of Medicine, Johns Hopkins University, Baltimore, Maryland; Office of Global Health, Stanford University, Stanford, California; Researcher, Bioethics and Global Health, Pune, India; Fogarty International Center, National Institutes of Health, Bethesda, Maryland; Departments of Medicine and Public Health, Stony Brook University School of Medicine, Stony Brook, New York; Emory Global Health Institute, Emory University, Atlanta, Georgia; Naval Medical Research Center Detachment, Lima, Peru; Doris Duke Charitable Foundation, New York, New York; BMJ, London, United Kingdom; Clinical Research Unit, London School of Hygiene and Tropical Medicine, London, United Kingdom; Chula Medical Research Center (ChulaMRC), Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand; HIVNAT, Thai Red Cross AIDS Research Center, Bangkok, Thailand; College of Health Sciences, Makerere University, Kampala, Uganda*

**Abstract.** Academic global health programs are growing rapidly in scale and number. Students of many disciplines increasingly desire global health content in their curricula. Global health curricula often include field experiences that involve crossing international and socio-cultural borders. Although global health training experiences offer potential benefits to trainees and to sending institutions, these experiences are sometimes problematic and raise ethical challenges. The Working Group on Ethics Guidelines for Global Health Training (WEIGHT) developed a set of guidelines for institutions, trainees, and sponsors of field-based global health training on ethics and best practices in this setting. Because only limited data have been collected within the context of existing global health training, the guidelines were informed by the published literature and the experience of WEIGHT members. The Working Group on Ethics Guidelines for Global Health Training encourages efforts to develop and implement a means of assessing the potential benefits and harms of global health training programs.

#### PREFACE

Educational institutions, foundations, and governmental

global health and to benefit from the appeal of such programs to funders and philanthropists.

# WHAT TO LOOK FOR IN GLOBAL SERVICE LEARNING

## 6 STANDARDS OF PRACTICE TO GUIDE YOUR DECISIONS

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### 1 ORGANIZATIONAL ALIGNMENT

**Do** the sending, intermediary, and host community entities really share the same mission, commitment and capacity to collaborate? Or is one using another to achieve different goals? Do the people involved have the proper credentials to deliver what they promise? Or are they working in an uncoordinated and complex space without proven competencies?

#### WHAT TO LOOK FOR

- ✓ Aligned missions, equitable relations, critical thinking, and dialogue among stakeholders
- ✓ Evidence of long term commitment to collaborative practices and common goals
- ✓ Professionals with related academic preparation and professional experience in international education and community development

#### WHAT TO AVOID

- ✗ Organizations that are aimlessly jumping on a trend of internationalization without partners
- ✗ Conflicting academic, commercial, cultural, or community visions, values, and methods
- ✗ Amateurs with an abundance of enthusiasm and a shortage of pertinent qualifications

#### WHY IT MATTERS ●

Aligned sponsoring, intermediary, and community organizations produce more defined reciprocal public benefits and less vague mutual private benefits that advance the overall aims of global education and community development.

### 2 SUSTAINABLE MANAGEMENT

**Are** the organizations ethically managing their legal, financial, administrative, and human resource functions in compliance with formal requirements and best practices? Or are they taking advantage of unregulated spaces to operate informally? Is there openness and in-depth transparency or reluctance and superficial sharing?

#### WHAT TO LOOK FOR

- ✓ Civic licences to operate and written partnership agreements with communities and stakeholders
- ✓ Proactive disclosure and explanation of financial statements and access to substantive information
- ✓ Staffing policies and manuals, codes of conduct, fair remuneration, and professional development

#### WHAT TO AVOID

- ✗ Organizations that are operating without any public status or established local partnerships
- ✗ Simplistic and one-time financial reporting that boasts of low overhead and imprecise high impact
- ✗ Exploitation of people in uneven power relationships with less access to resources

#### WHY IT MATTERS ●

Sustainable and ethically operated sponsoring, intermediary, and community organizations have a long-term, accountable presence that engages local authorities, extends public networks, develops local capacity, and supports collective initiatives.

### 3 RESPONSIBLE MARKETING

**How** are words, images, and symbols used to promote engagement and outcomes? Respectfully, realistically, accurately, and consensually? Or do they perpetuate stereotypes, reinforce clichés, provoke pity, glorify individuals, exaggerate claims, or misuse cultural icons? Does content analysis lead to clear and mission-relevant messaging? Or to faulty assumptions and slacktivism?

#### WHAT TO LOOK FOR

- ✓ Text that uncovers assumptions about power, privilege, outcomes, and personal agency
- ✓ Images that are genuine, balanced, and dignified that provide context and perspective
- ✓ Modest and qualified use of short and long-term claims reflective of both success and limitations

#### WHAT TO AVOID

- ✗ Text that presents short and easy solutions and predicts grand outcomes and amplified impact
- ✗ Images that gratuitously use or idealize children and vulnerable populations without consent
- ✗ Symbols or unverifiable statistics that over-simplify complex issues and wicked problems

#### WHY IT MATTERS ●

Responsible marketing materials inform and inspire local and global engagement rooted in reality not illusion, and invite multi-faceted collective participation not one dimensional individual solutions.

# WHAT TO LOOK FOR IN GLOBAL SERVICE LEARNING

## 6 STANDARDS OF PRACTICE TO GUIDE YOUR DECISIONS

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4

### INTEGRATED IMPLEMENTATION



Is the program and/or project identified, designed, prepared, and implemented within a shared theory of change and operationalized in a logic model? Or is it segregated solely by function and convenience based on assumed roles? Are there common strategies, resources, and decisions? Or unrelated independent activities?

#### WHAT TO LOOK FOR

- ✓ Shared processes, roles, responsibilities, and solutions across organizations
- ✓ Comprehensive pre/during/post experience materials and itineraries for all parties
- ✓ Connection between systemic local and global issues; interdependence not independence

#### WHAT TO AVOID

- ✗ Northern organizations assuming substance, Southern ones relegated to logistics
- ✗ One-sided attention to broadening the participants, but not communities, service learning experience
- ✗ Adventure-destination and consumer-oriented international travel that appropriates cultures

#### WHY IT MATTERS ●

Integrated design and implementation reduces neo-colonial tendencies while challenging and raising the capacity of all entities to demonstrate true partnership and a more equitable distribution of responsibilities, risks, and rewards.

5

### PROTECTION OF PEOPLE & PLANET



What safeguards are in place to protect children, vulnerable populations, and the environment from harm? Is the need for them articulated and reflected in policies, procedures and training? Or are boundaries and obligations forgotten in the excitement of travel and absence of regulation?

#### WHAT TO LOOK FOR

- ✓ Protocols for contact with children and vulnerable populations that protect privacy, prevent interference, exploitation or abuse
- ✓ Codes of conduct for photography that honor cultural norms and require respectful use of images by individuals and organizations
- ✓ Health, safety, and conservation practices for visits to urban, rural, natural, wildlife and heritage sites
- ✓ Carbon offset mechanisms for air travel

#### WHAT TO AVOID

- ✗ Unrestricted access, contact, and voyeurism of children and vulnerable populations
- ✗ Unbounded photography of people as objects, posting of images without consent, and use of images in marketing materials without recognition
- ✗ Lack of evidence of due diligence, health and safety risk mitigation, and carbon offset strategies

#### WHY IT MATTERS ●

The rights of children and vulnerable populations merit respect and legal and moral obligations exist to protect all people and our planet from harm.

6

### REALISTIC EVALUATION



How are inputs, activities, outcomes, and indicators chosen to be monitored, evaluated and shared effectively? Is reliable and valid quantitative and qualitative data collected? Or are reports mostly anecdotal and episodic? What metrics are employed and who benefits from analysis? Or do feedback loops appear self-serving?

#### WHAT TO LOOK FOR

- ✓ Data collected by a variety of means over time from a sufficient number and scope of consenting sources
- ✓ Recognition of the complexity of evaluation and the limitations of findings – for example, deadweight, displacement, and drop-off effects
- ✓ Credibility gained from failure reporting, external evaluators and on-going research efforts

#### WHAT TO AVOID

- ✗ Findings derived from unreliable or invalid data
- ✗ Organizations that invest a little in evaluation and a lot in promoting simplistic results as impact
- ✗ Resistance to external critique or performance analysis

#### WHY IT MATTERS ●

Realistic evaluation measures allow organizations to incrementally improve their efficacy and efficiency in a credible and constructive context.

## Fair Trade Learning: A Rubric Guiding Careful and Conscientious Partnership (1 of 4)

Indicator	Ideal	Level 3	Level 2	Level 1
<b>Common Purposes</b>	Agreement upon long-term mutuality of goals and aspirations	Agreement upon overlap of goals and aspirations	Clarity from multiple stakeholders regarding how service* supports community and participant interests	Existing connection facilitates immersive exchange; service is added to "make a difference"
<b>Host Community Program Leadership</b>	Community members have clear teaching, leadership roles; Community-driven research initiatives are co-owned, including fair authorship rights to any co-generated publications	Content and activities of program, from educational through development intervention, are owned by the community through diverse input by community members	Multiple community members have remunerated speaking and leading roles	Key dynamic community member facilitates access
<b>Host Community Program Participation</b>	Community age-peers of participants have financially embedded opportunities to <i>participate</i> (where applicable in an	Community age-peers of participants are continuously invited for exchange, participation, and structured	Deliberate spaces of free interaction exist within the program, and participants are made aware of opportunities	Program is largely a bubble of visiting students; interaction with community tends to be highly structured

# Competencies

## ORIGINAL RESEARCH

# Identifying Interprofessional Global Health Competencies for 21st-Century Health Professionals

Kristen Jogerst, BS, Brian Callender, MD, Virginia Adams, RN, PhD, Jessica Evert, MD, Elise Fields, PharmD, Thomas Hall, MD, DrPH, Jody Olsen, PhD, MSW, Virginia Rowthorn, JD, Sharon Rudy, PhD, Jiabin Shen, M.Ed, Lisa Simon, DMD, Herica Torres, MSN, Anvar Velji, MD, Lynda L. Wilson, MSN, PhD

*Hanover, NH; Chicago, IL; Washington, DC; San Francisco, Martinez, and Elk Grove, CA; Baltimore, MD; Birmingham, AL; Cambridge, MA; Albuquerque, NM*

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### Abstract

**BACKGROUND** At the 2008 inaugural meeting of the Consortium of Universities for Global Health (CUGH), participants discussed the rapid expansion of global health programs and the lack of standardized competencies and curricula to guide these programs. In 2013, CUGH appointed a Global Health Competency Subcommittee and charged this subcommittee with identifying broad global health core competencies applicable across disciplines.

Accreditation Council for Graduate Medical Education  
American Academy of Family Physicians  
American Academy of Pediatrics  
American Association of Colleges of Nursing  
American Congress of Obstetricians and Gynecologists  
American Association of Oral-Maxillofacial Surgeons  
American College of Physicians  
American College of Surgeons  
American Dental Association  
American Medical Association  
American Medical Student Association  
American Psychology Association  
Association of American Medical Colleges  
Association of Schools of Public Health  
Consortium of Universities for Global Health  
International Academy of Physician Associate Educators  
International Council of Nurses  
International Federation of Gynecologists and Obstetricians  
International Pharmaceutical Federation  
International Union of Psychological Science  
Liaison Committee on Medical Education  
Movement for Global Mental Health  
National League for Nursing  
One Health Initiative  
Sigma Theta Tau, International Nursing Honor Society  
Society for Medical Anthropology  
World Federation of Occupational Therapists  
World Confederation for Physical Therapy  
World Dental Federation  
World Health Organization

**Figure 1.** List of Professional Society and Professional Organization Webpages Reviewed.

# Domains of Global Health Competency

- Global Burden of Disease
- Globalization of health and health care
- Social and Environmental Determinants of Health
- Capacity Strengthening
- Collaboration, Partnering, and Communication
- Ethics
- Professional Practice
- Health Equity and Social Justice
- Program Management
- Sociocultural and Political Awareness
- Strategic Analysis

**Table 1. List of Competencies Categorized into 8 Domains for Global Citizen and 11 Domains Basic Operational Program-Oriented Levels**

Domains and Competencies	Knowledge (K), Attitude (A), Skill (S)	Global Citizen Level	Basic Operational Program-Oriented Level
DOMAIN: 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. <sup>16,20</sup>			
1a. Describe the major causes of morbidity and mortality around the world, and how the risk for disease varies with regions. <sup>16,20</sup>	K	X	X
1b. 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). <sup>16,20</sup>	K	X	X
1c. Validate the health status of populations using available data (e.g., public health surveillance data, vital statistics, registries, surveys, electronic health records, and health plan claims data). <sup>24</sup>	K, S		X
DOMAIN: 2. Globalization of Health and Health Care.			
Focuses on understanding how globalization affects health, health systems, and the delivery of health care. <sup>16,20</sup>			
2a. Describe different national models or health systems for provision of health care and their respective effects on health and health care expenditure. <sup>16,20</sup>	K		X
2b. Describe how global trends in health care practice, commerce and culture, multi-national agreements, and multinational organizations contribute to the quality and availability of health and health care locally and internationally. <sup>16,20</sup>	K		X
2c. Describe how travel and trade contribute to the spread of communicable and chronic diseases. <sup>16,20</sup>	K	X	X

## Research Study on Host Perspectives of Global Health Competencies

Do you interact with students from abroad in health-related settings?

THIS STUDY HAS CLOSED AS OF 12/31/15. PLEASE CHECK BACK FOR RESULTS AND FOLLOW UP.



The **Collaboration for Host Perspectives on Global Health Competencies** is a group of community and academically-based researchers from 9 countries collaborating to investigate the opinions of host faculty, staff, and community members in countries across the socioeconomic spectrum who host visiting students and trainees from other countries at their healthcare and public health facilities (including hospitals, NGOs, community development organizations, clinics, and mobile outreach). The goal is to understand host perspectives of competencies, learning objectives, and other aspects of what is important for students and trainees from other countries to learn.

- Importance of recognizing limitations
- Need to work well within a team setting and maintain respect
- Huge role for culture in all aspects of learning

		Number	Percent	Totals
Recognize personal limitations	<b>Important</b>	89	<b>90%</b>	
	<u>Somewhat Important</u>	10	10%	
	<u>Not Important</u>	0	0%	
				99
Demonstrate inter-professional values being respectful of all staff	<b>Important</b>	85	<b>88%</b>	
	<u>Somewhat Important</u>	12	12%	
	<u>Not Important</u>	0	0%	
				97
Demonstrate professionalism and respect of the entire team including culture and practices	<b>Important</b>	81	<b>82%</b>	
	<u>Somewhat Important</u>	18	18%	
	<u>Not Important</u>	0	0%	
				99
Culture vs medical conditions	Medical more important	10	9%	
	Culture more important	12	11%	
	<b>Equally important</b>	88	<b>78%</b>	
	Do not agree with either	2	2%	
				112
Culture on perception of disease	<b>Important</b>	94	<b>86%</b>	
	<u>Somewhat Important</u>	13	12%	
	<u>Not Important</u>	2	2%	
Cultural impacts on patient behaviour	<b>Important</b>	87	<b>81%</b>	
	<u>Somewhat Important</u>	20	19%	
	<u>Not Important</u>	1	1%	
				108
Cultural awareness/sensitivity	<b>Important</b>	83	<b>76%</b>	
	<u>Somewhat Important</u>	24	22%	
	<u>Not Important</u>	2	2%	
				109

- Clinical learning much less important than culture and professionalism
- Not important for students to be working independently

		Number	Percent	Totals
<b>Perform surgical procedures</b>	Important	26	28%	
	Somewhat Important	30	33%	
	Not Important	36	39%	
				92
<b>Manage rare diseases seen at home</b>	Important	25	27%	
	Somewhat Important	34	37%	
	Not Important	32	35%	
				91
<b>Care for patients without supervision</b>	<b>Important</b>	13	<b>14%</b>	
	Somewhat Important	22	24%	
	<b>Not Important</b>	55	<b>61%</b>	
				90

- 72% of preceptors received feedback from students
- 71% engaged in debriefing with students after rotation

- 48% wanted more students, 52% said it was fine, 0% wanted less
- 0% said students come as practitioners ready to work
- 90% said they wished students would stay more in touch after their rotation

# Qualitative Data: Biggest Mistakes

“They must abstain from over expectation and over criticism; must have a compassionate approach as the host and the team puts lots of effort in establishing the program”

“Not respect the environment and culture. Do not want to come out of their comfort zone. Do not follow the discipline and dress code etc. (however, this is not common to all)”

“They tend to over expect from the program sometimes, as they want hands on experience which cannot be provided very extensively keeping local government, administrative protocol in place.”

“attempting to do too much and not able to achieve goals”

# Qualitative data: What should students remember when they go home

“our culture and our dedication to make their time memorable”

“the knowledge they gained here and the Indian hospitality. During the program, some of them discover their potential, they should always believe in that potential”

“to be good doctor, you need to be good listener. Must listen to your patient very well”

“That they can change a life of a person who is different if they are aware and respectful of that difference ”

# Tools & Resources

1. Reflection results in learning – through changing ideas and your understanding of the situation
2. Reflection is an active process of learning and is more than thinking or thoughtful action
3. Reflection involves problematising teaching by recognising that practice is not without dilemmas and issues
4. Reflection is not a linear process, but a cyclical one where reflection leads to the development of new ideas which are then used to plan the next stages of learning
5. Reflection encourages looking at issues from different perspectives, which helps you to understand the issue and scrutinise your own values, assumptions and perspective.

# Rolfe's Framework

- What?
- So What?
- Now What?

# Global Ambassadors for Patient Safety

- Online workshop to learn about the risks related to participating in global volunteer experiences

The screenshot shows the University of Minnesota Health Careers Center website. At the top, there are links for various campuses: Twin Cities, Crookston, Duluth, Morris, Rochester, and Other Locations. The main header features the University of Minnesota logo and the tagline "Driven to Discover™". Below this is the "Health Careers Center" title. A search bar is located in the top right corner. The left sidebar contains a "What's Inside" section with links to Health Careers, Info Sessions & Events, Courses, Online Workshops, Volunteering, Research, Career Development, Students, Advisors & Counselors, Ask Us, and About Us. Below this is an "HCC Home" section with a search bar, an "Ask A Question" button, a "Volunteer & Research Info" button, and a Facebook icon. The main content area is titled "Global Ambassadors for Patient Safety" and includes a breadcrumb trail: Home > Online Workshops > Global Ambassadors for Patient Safety. The text "Attention students:" is followed by a bulleted list of questions: "Are you a pre-health student who wants to experience global health first-hand?", "Are you planning to travel abroad to gain that experience?", and "Did you know that there are limitations of what you can and cannot do when you are abroad?". Below this is a section titled "Before You Pack Your Passport..." which discusses the importance of gaining experience abroad and provides information about a free online workshop. The right sidebar contains "Related Links" (Learning Abroad Center) and "Downloads" (U of M Twin Cities students: Click here to register). At the bottom, there is a section titled "Impact on Your Application to a Health Program... in a Positive Way" which discusses the benefits of global experience and provides information about a free online workshop. A "Remember:" section at the bottom states: "If you're unlicensed HERE, you're unlicensed THERE. When you are in your host country, what happens if you are asked to do".

Campuses: [Twin Cities](#) [Crookston](#) [Duluth](#) [Morris](#) [Rochester](#) [Other Locations](#)

myU One Stop

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Health Careers Center

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[Home](#) > [Online Workshops](#) > [Global Ambassadors for Patient Safety](#)

## Global Ambassadors for Patient Safety

Attention students:

- Are you a pre-health student who wants to experience global health first-hand?
- Are you planning to travel abroad to gain that experience?
- Did you know that there are limitations of what you can and cannot do when you are abroad?

### Before You Pack Your Passport...

Volunteering abroad can be informative. You will learn about a new culture, and how that culture influences health. You will have an opportunity to meet new people, and expand your own world view.

But before you pack your passport and head to the airport, there are some important considerations you need to make in gaining experience in another country...things that you may not have even considered or thought of yet.

This free online workshop is designed to help you learn about important information you need to be aware of, before you travel abroad to volunteer and gain experience outside the United States.

### Impact on Your Application to a Health Program... in a Positive Way

Experiences abroad have proven to be a great ways for students to learn and grow. A global experience will impact you in ways you cannot even conceive of yet...and the experience can impact your application to a health program as well. Make sure it impacts your application in a positive way!

Take this online workshop and learn how to make the most of your experience, so that it benefits you at the time of application. Gain wisdom and insight from other students' learning abroad experiences. Learn in advance from their successes – and their mistakes – when gaining experience in another country.

**Remember:**  
**If you're unlicensed HERE, you're unlicensed THERE.**

When you are in your host country, what happens if you are asked to do

**Related Links**

[Learning Abroad Center](#)

**Downloads**

**U of M Twin Cities students:**  
[Click here to register](#)

# GAPS Oath



## *Oath of Global Ambassadors for Patient Safety*

This certificate confirms that I have completed the University of Minnesota Health Careers Center's "Global Ambassadors for Patient Safety" workshop. I agree with and am committed to upholding the important standards it introduced regarding my responsibilities for patient safety and privacy while participating in a healthcare experience abroad.

I am currently an unlicensed pre-professional, and just as it is unethical for me to practice direct patient care within the United States, it is equally so in any country I am visiting. Regardless of intent, by engaging in any unlicensed medical practices, I would be disregarding patient boundaries and safety, and would be placing that patient at considerable risk.

Signature

Date

After taking  
a final quiz,  
You get  
a certificate of  
completion.

Impacts

## **Partnering with *Parteras*: Multi-Collaborator International Service-Learning Project Impacts on Traditional Birth Attendants in Mexico**

**M. Alexandra Friedman**

**Dana R. Gossett**

*Northwestern University*

**Isabella Saucedo**

*Child and Family Health International*

**Shayna Weiner**

**Mimi Wu Young**

*Northwestern University*

**Nick Penco**

*Child Family Health International*

**Jessica Evert**

*University of California, San Francisco*

# Impacts of Students on Host/Partner Communities

1. Improved English Proficiency
2. Increased Prestige of host institutions
3. Fulfilling local practitioners sense of global citizenship

“As a global citizen of the world, if I am able to educate a student from any other nation, and he feels a little softer about places that are not as economically well off, then from that perspective of course it is beneficial, because we are benefiting some students living in affluent nations to have a balanced view of life.”

-CFHI Medical Director, India

Kung T, Richardson E, Mabud T, et al. 2016. Host community perspectives on trainee participating in short-term experiences in global health. *Medical Education* 50:1122-1130.



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let the world  
**CHANGE** you

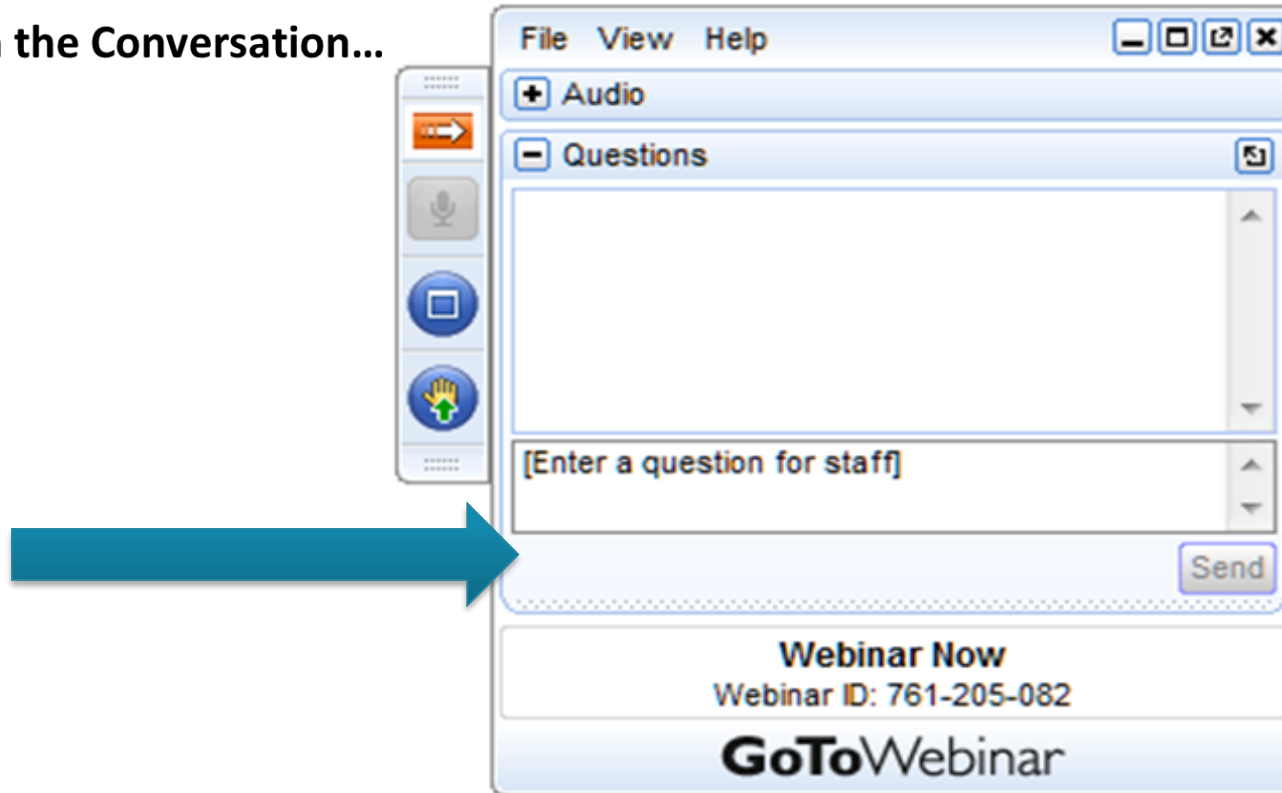
Health Careers Center

UNIVERSITY OF MINNESOTA

**Driven to Discover<sup>SM</sup>**

# Questions or Comments?

Join the Conversation...



# Today's Presenters

Now taking questions.

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**Miryha Gould  
Runnerstrom, PhD**  
University of California,  
Irvine



**Janet DiVincenzo**  
University of California,  
Irvine



**Tricia Todd, MPH**  
University of Minnesota



**Jessica Evert, MD**  
UCSF/Child Family  
Health International

# Thank You!

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See the webinar event page on the ASPPH website for a link to the **archived webinar**:

<http://www.aspph.org/event/aspph-presents-innovative-approaches-to-applied-and-experiential-learning-for-undergraduates/>

Contact: [webinars@aspph.org](mailto:webinars@aspph.org)

**CPHCE**  
*Credits*

# Coming Attractions...

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## **CEPH Webinar Pre-Application Orientation Workshop: Standalone Baccalaureate Program P-AOW Webinar**

Thursday May 23, 2:00-3:00 PM Eastern

## **ASPPH Presents: National Board of Public Health Examiners Certified in Public Health Exam New Content Outline**

Wednesday, May 24, 2:00 – 3:00 PM Eastern

## **ASPPH Presents Webinar: Reaching Beyond our Students: Recruit, Educate, Engage**

Thursday, June 1, 12:00 – 1:00 PM Eastern

For more information about and to register for upcoming webinars, visit the  
ASPPH Events page:

<http://www.aspph.org/events/category/webinar/>

## Coming Attractions...

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# Registration now open for: Undergraduate Faculty Development Workshop

Monday, June 5, 11:00 AM - 5:30 PM Eastern

- **Registration fee:** \$200 (includes working lunch)
- **Location:** ASPPH Headquarters, 1900 M Street, Suite 710, Washington, DC
- **Lodging rate:** Please see the [Event page](#) for a listing of recommended hotels within walking distance of ASPPH.

<http://www.aspph.org/event/undergraduate-faculty-development-workshop/>

Register today!

Thank you!