

ORIGINAL RESEARCH

On Becoming a Global Citizen: Transformative Learning Through Global Health Experiences



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Abstract

BACKGROUND Globalization has increased the demand for international experiences in medical education. International experiences improve medical knowledge, clinical skills, and self-development; influence career objectives; and provide insights on ethical and societal issues. However, global health rotations can end up being no more than tourism if not structured to foster personal transformation and global citizenship.

OBJECTIVE We conducted a qualitative assessment of trainee-reported critical incidents to more deeply understand the impact of our global health experience on trainees.

METHODS A cross-sectional survey was administered to trainees who had participated in a 2-month elective in Kenya from January 1989 to May 2013. We report the results of a qualitative assessment of the critical incident reflections participants (n = 137) entered in response to the prompt, "Write about one of your most memorable experiences and explain why you chose to describe this particular one." Qualitative analyses were conducted using thematic analysis and crystallization immersion analytic methods based on the principles of grounded theory, employing a constructivists' research paradigm.

FINDINGS Four major themes emerged. These themes were *Opening Oneself to a Broader World View; Impact of Suffering and Death; Life-Changing Experiences; and Commitment to Care for the Medically Underserved.*

CONCLUSIONS Circumstances that learners encounter in the resource-scarce environment in Kenya are *eye-opening* and *life-changing*. When exposed to these frame-shifting circumstances, students elaborate on or transform existing points of view. These emotionally disruptive experiences in an international health setting allowed students to enter a transformational learning process with a global mind. Students can see the world as an interdependent society and develop the capacity to advance both their enlightened self-interest and the interest of people elsewhere in the world as they mature as global citizens. Medical schools are encouraged to foster these experiences by finding ways to integrate them into curriculum.

KEY WORDS global health, global health experience, medical education, student experience; training.

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INTRODUCTION

Globalization has increased both the need and the demand for international experiences in undergraduate and graduate medical education. Short-term international experiences can improve medical knowledge and clinical skills,¹ influence career objectives,² provide insights on ethical and societal issues,³ and enhance self-development.^{4,5} However, little is known about the process and theoretical underpinning of learning through these experiences. Global health rotations can end up being no more than tourism if not structured to foster personal transformation and global citizenship.⁶ Social transformation theoretical models suggest that experiences that promote global citizenship should be guided by principles of mutuality and reciprocity through established partnerships.⁷ Pertinent transformative learning theory asserts the critical importance of processes of self-reflective practices essential for self-development leading to sustained changes in perspectives.⁸⁻¹⁰ Sustained changes in perspective are often triggered after intense experiences that have evoked strong personal emotions.¹¹

By way of brief framing, transformative learning theory suggests adults have acquired a coherent body of experience—associations, concepts, values, feelings, conditioned responses—that are the frames of reference that define their world. These consist of a *point of view* or perspective and *habits of mind*, which are broad, abstract, explicit ways of thinking, feeling, and acting, influenced by assumptions that may be cultural, social, educational, economic, political, or psychological. The point of view may be an implicit one that is subject to change after reflection on experience. When circumstances allow, transformative learners move toward a frame of reference that is more inclusive, discriminating, self-reflective, and integrative of experience.¹² To accomplish this change, learners may establish new points of view or elaborate on and transform existing perspectives and habits of mind.

Transformative learning may often be an intensely disruptive or even threatening experience in which we have to become aware of both the assumptions undergirding our ideas and our emotional response to the need for change.¹³ Uncomfortable emotions, or *edge emotions*, arise when we feel pushed to the edge of our comfort zone and we are not able to maintain coherence and continuity in our frame of reference with habitual interpretive frameworks. One needs to acknowledge and accept *edge emotions* as a prerequisite to becoming aware of and assess-

ing the problematic assumptions in reflection. Awareness of these *edge emotions* allows the learner to become aware of such emotions, assess and explore what is giving rise to them, and set the stage for transformative learning to occur.

In 1989, Indiana University (IU) School of Medicine formed an academic partnership with Moi University School of Medicine founded on principles of mutuality and reciprocity.¹⁴ The goals of the partnership are to deliver health care services, conduct health research, and develop leaders in health care for both the United States and Kenya. Through the framework provided by this longstanding institutional partnership, a bilateral exchange of learners was made possible. Participants have described their experiences through the exchange as *life-changing*, *challenging*, *incredible*, and *enlightening*.^{5,14-16}

This unique partnership supports long-term North American faculty in Kenya who host and support participants during their 2-month global health rotations. These rotations have a strong education focus, and the faculty (Team Liaisons) provide a formal structure that introduces participants to global medicine through bedside teaching with Moi University School of Medicine learners, case presentations and discussions, grand rounds, tropical medicine lectures, and journal club meetings. The bilateral nature of the program in supporting reciprocal opportunities for Moi Teaching and Referral Hospital (MTRH) faculty and learners has been previously described.¹⁶

The multidisciplinary, multinational nature of the program fosters informal opportunities for learning as well (eg, mealtime discussions where a preprofessional student shares a meal with an entomologist, a journalism professor, and/or an HIV/AIDS dermatology expert or share a car ride to a local clinic with a seasoned clinician). In this environment, participants share experiences, surprises, challenges, and discomforts and gain from one another's experiences. Learners also join in weekly faculty-led "fireside chats," which provide an opportunity for group reflection and shared processing and dialogue. In addition to opportunities to meet with on-site faculty leaders during the rotation, learners also receive a 1-on-1 debriefing with experienced global health faculty on their return to the United States.

To more deeply understand the impact of our global health experience, created with action and reflection cycles thought to be essential to transformative educational practice, we conducted a qualitative assessment of trainee-reported critical incidents.

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