## **ARTICLE IN PRESS**



Advances in Pediatrics ■ (2018) ■-■

# **ADVANCES IN PEDIATRICS**

# Global Health and Pediatric Education

## **Opportunities and Challenges**

Maneesh Batra, MD, MPH<sup>a,\*</sup>, Michael B. Pitt, MD<sup>b</sup>, Nicole E. St Clair, MD<sup>c</sup>, Sabrina M. Butteris, MD<sup>c</sup>

<sup>a</sup>Department of Pediatrics, Division of Neonatology, University of Washington School of Medicine, 4800 Sand Point Way Northeast, Mailstop OC.7.830, Seattle, WA 98105, USA; <sup>b</sup>Department of Pediatrics, Division of Pediatric Hospital Medicine, University of Minnesota, 2450 Riverside Avenue, M657, Minneapolis, MN 55414, USA; <sup>c</sup>Department of Pediatrics, Division of Pediatric Hospital Medicine, University of Wisconsin School of Medicine and Public Health, H4/470 CSC, Box 4108, 600 Highland Avenue, Madison, WI 53792-4108, USA

#### **Keywords**

• Global health • Child health • Pediatric residency • Medical education

#### **Key points**

- Global health has emerged as its own discipline over the past several decades, and is permeating the missions of academic health centers and pediatricians worldwide.
- Global child health education has moved from an elective or enrichment activity for few residents to an integrated curricular thread for pediatric trainees across subspecialties.
- The current state in global child health training is heralded by integration of global health into pediatrics.
- Partnerships are the gold standard for advancing advocacy for vulnerable children around the world, including in our own resource-limited communities.

#### INTRODUCTION

Global health (GH) involves the study, research, and practice that prioritizes achieving equity in health for all people and has emerged as its own discipline over the past several decades, fueled largely by the staggering numbers of

Disclosure: None of the authors has any relevant financial conflicts of interest to declare.

\*Corresponding author. E-mail address: Maneesh.batra@seattlechildrens.org

https://doi.org/10.1016/j.yapd.2018.04.009 0065-3101/18/© 2018 Elsevier Inc. All rights reserved. annual childhood deaths, globalization, human migration, and global epidemics [1]. As interest in GH has expanded, it has begun permeating the missions of academic health centers and pediatricians worldwide [2,3]. Accordingly, a global child health (GCH) perspective focused on improving the state of all the world's children is becoming an integral part of the broad field of pediatrics. National pediatric professional societies such as the American Academy of Pediatrics, American Board of Pediatrics, and Association of Pediatric Program Directors all have initiatives aimed at integration of GCH into pediatrics and pediatric training [3]. Looking to the education space for signs of what is emerging in the expectations and practices surrounding GCH is informative.

In 2010, a Lancet Commission Report on medical education for the 21st century called for major reforms to the training systems for health professionals, proposing the vision that, "all health professionals in all countries should be educated to mobilize knowledge and to engage in critical reasoning and ethical conduct so that they are competent to participate in patient and population-centered health systems as members of locally responsive and globally connected teams" [4]. This landmark call to action serves as a beacon for educational programs as they strive to develop ethical, sustainable, and mutually beneficial partnerships for GCH.

During the last 20 years, GH education in pediatric residency programs was marked by expanding international opportunities, increasing resident participation, integration of GCH education into the overall residency curriculum, and growing GCH education resources. During this time, pediatric residency programs responded by offering GH tracks, pathways, and electives to enrich the conventional pediatric residency curriculum [3]. A survey of pediatric residency programs from 2013 revealed that 58% of programs offered international field experiences, up from 25% in 1995, with approximately one-fifth to one-quarter of pediatric residents participating in GH electives at some point in their training [5–7]. Ongoing efforts to improve mentorship, supervision, preparation, debriefing, and the development of ethical partnerships with organizations serving underserved populations have improved these educational experiences offered to our trainees.

Through this evolution, GCH education has moved from an elective or enrichment activity for few residents, to an integrated curricular thread for all pediatric trainees and across subspecialties in many programs. The era of programs establishing "sites" for rotations is being replaced by an era heralded by the establishment of international partnerships between institutions [8]. Haphazard educational experiences based on serendipitous personal connections are giving way to coordination and collaboration between stateside institutions with their international partners to advance child health. Assessment of learner, institutional, and population-based outcomes are the frontier, as GCH education has emerged as a rigorous pursuit within pediatrics.

In this article, we review 4 domains heralding the current state in GCH training: (1) GH education for all trainees, (2) GH partnerships, (3) preparation for GH experiences, and (4) the impact of GH education. We highlight

### Download English Version:

# https://daneshyari.com/en/article/8808529

Download Persian Version:

https://daneshyari.com/article/8808529

<u>Daneshyari.com</u>