

Qualitative Research Comparing HIC, UMIC, LMIC & LIC Host Perspectives: Global Health Competencies;

Biggest Mistakes & Challenges for Students; & What Students Should Remember Most - in Global Health Learning

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Outline

- I. **WHY:** Unresolved Issues in Competency-Based Global Health Education: Ethical Issues
- II. **WHAT:** Original Qualitative Research – Initial Data:
 - “Host Perspectives on International Experiences in Global Health” Survey Research Project

Survey Project

- Hybrid Quantitative & Qualitative Survey built into external websites
 - in English and Spanish
- Open from September 1st, 2015 to December 31st, 2015 (prior IRB approval)
- *Qualitative* Data not previously analyzed or presented
- Cherniak, Latham, Astle et al., Evert (2017). Visiting trainees in global settings: Host and Partner perspectives on desirable competencies. *Annual of Global Health*, 83(2), 359-368.

Research Study on Host Perspectives of Global Health Competencies

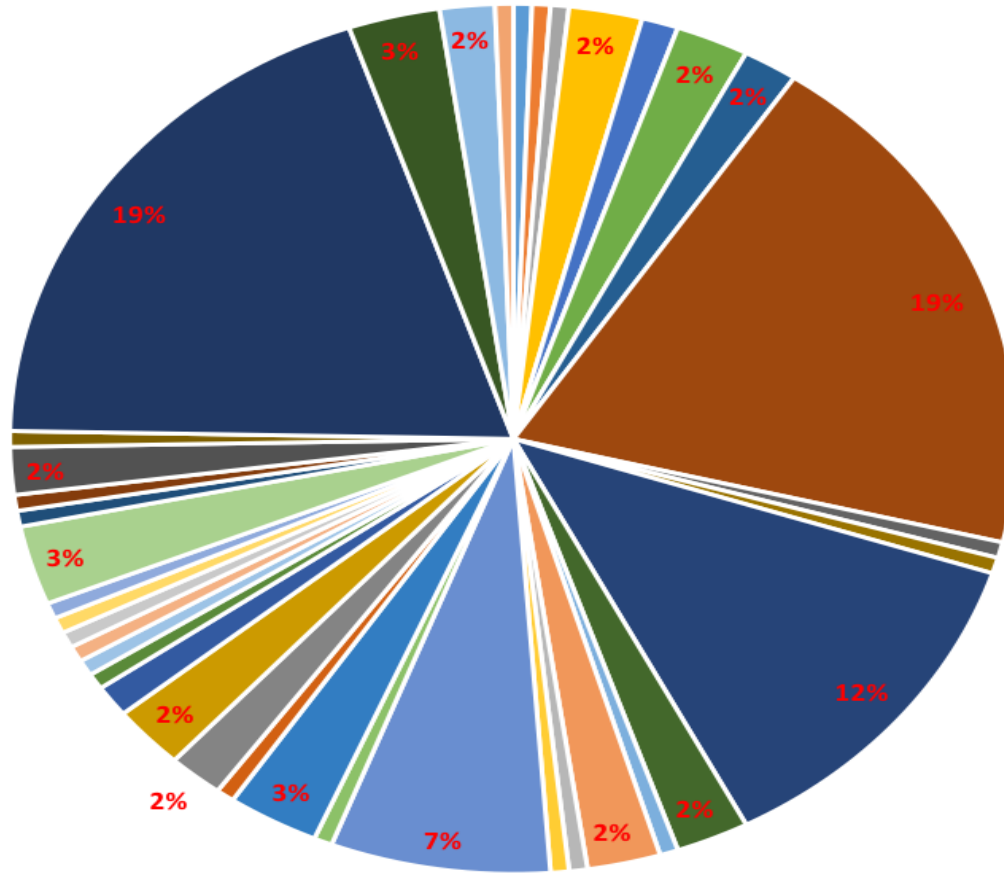
Do you interact with students from abroad in health-related settings?

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.

Countries of Respondents



- | | | | | | |
|--------------|----------------|-------------|----------------------|------------------|----------------|
| ■ Bangladesh | ■ Belizee | ■ Bolivia | ■ Brazil | ■ Cambodia | ■ Canada |
| ■ Chile | ■ China | ■ Colombia | ■ Dominican Republic | ■ Ecuador | ■ El Salvador |
| ■ Germany | ■ Ghana | ■ Guatemala | ■ Honduras | ■ India | ■ Italy |
| ■ Kenya | ■ Kosovo | ■ Malawi | ■ Mexico | ■ Namibia | ■ Nepal |
| ■ Nicaragua | ■ Nigeria | ■ Peru | ■ Philippines | ■ Rwanda | ■ South Africa |
| ■ Spain | ■ Sri Lank | ■ Tanzania | ■ Trinidad | ■ USA | ■ Uganda |
| ■ Vietnam | ■ Zambia | | | | |

Unresolved Issues: Ethics

- **Global Health Competencies - Ethical Issues:**
- Geographical Origin = Global North/HICs
- Troubling Imbalance: *Little if any contributions elicited from Global South/LMICs*
- Unconscious Assumptions of HIC Normativity/Superiority
- Hidden Curriculum = Colonialism/Neocolonialism

Unresolved Issues: Ethics

- LMIC hosts have better understanding of local: burden of disease, health systems, social & environmental health determinants, cultural concepts of “health” & “disease,” effective cultural styles of collaboration/partnering/communication, entrepreneurial adaptations to overcome challenges of low resources, sociocultural and political awareness, etc.
- Who should be doing the teaching (“capacity building”) and who should be doing the learning (what “competencies”)?

Ethics Research to Improve Global Health Education

- *Isn't it time we asked LMIC hosts:*
- *"What would you like to teach us and our students?"*

Qualitative Research Data

- LMIC (Ghana, India, Kosovo, Nicaragua, Nigeria, Vietnam, & Zambia)
- LIC (Cambodia, Kenya, Malawi, Nepal, Rwanda, Tanzania, & Uganda)
- UMIC (Belize, Brazil, China, Ecuador, Mexico, Namibia, South Africa)
- HIC (Canada, Chile, Germany, Trinidad, USA)

- Host Perspectives on:
 - Most Important Global Health Competencies
 - Biggest Mistakes Students Make
 - Biggest Challenges Students Face
 - What Students Should Remember Most in Global Health Learning

Qualitative Research Methods

- 6 “Open-Ended” Survey Questions
- 95 Respondents Completed
- Content Analysis Performed on Responses
- Coded: 3 Main Themes Emerged – (1) Cultural Competency; (2) Knowledge & Skills;
(3) Attitudes, Character Traits & Behaviors
- Ensured Inter-Rater Reliability

Demographics

Role of Respondents	Number (N)
Doctors	33
Nurses	8
Local Program / Logistic Coordinators	12
Homestay	2
NGO Staff	1
Administrators	8
Researchers	13
Public Health	2
Other *	16
TOTAL	95

***OTHER:** Director of GH Program; APN & participate in and developing research; Mentor to students in the Indonesian community; Professor of Microbiology; Professor or Faculty; Pharmacist; Alumni of UG/Post Graduates; CFHI Director for India Programs; Chief Functionary of Host NGO; Faculty; Medical Director & Coordinator; Supervisor; Clinic Instructor for Local students; Health Advisor (Tanzanian gov' t); Local Coordinator

Most Important GH Competencies (LMIC & LIC)

- Expansive, enriched emphasis on “Attitudes/Character Traits/Behaviors” (cf. Professionalism - harder to teach & assess)
- Much broader & more fundamental “Cultural Competencies”
- Adapted/Honed “Knowledge & Skills” to “cope with low resource settings” w/ “little lab, investigative, tech support”

Biggest Mistakes Students Make:

- 1. Problematic “Attitudes, Character Traits and Behaviors”
- 2. Lack of “Cultural Competency”

Biggest Challenges Students Face:

- The majority of “biggest challenges” came under the category of “Cultural Competency.”
- (n.b. Need for Improved Pre-Departure Orientations + Greater Humility, Sensitivity, Respect and More Effective Adaptations)

What Students Should Remember:

- Primarily emphasize “Attitudes/Character Traits/Behaviors” & “Cultural Competency”
- Ask students to recognize & appreciate LMIC/LIC *Host Assets*: e.g., “caring, ingenuity, resourcefulness, dedication, hospitality, sustainability, program planning, vision, mission, being part of the social justice process globally, being able to inspire...even in resource poor settings”
- Ask students to “demonstrate humility, respect, sympathy, empathy, compassion & enlarge own world, believe in own potential & leave legacy”

Most Important GH Competencies (UMIC & HIC)

- HIC - focus on “Cultural Competence” (awareness / sensitivity); UMIC “importance of communication”
- “Knowledge” – health care system “structure” & “processes”/ health equity; SDOH; Research skills
- Notion of (openness, willingness to learn, respectful)
“Attitudes/Character/Traits/Behaviours
- Overlap with CUGH Competencies: GBD; Globalization of health & health care; SDOH; Health Equity/Social Justice; Strategic Analysis

Biggest Mistakes Students Make:

- 1. "Attitudes, Character Traits & Behaviors"
 - Some similarities & differences btn HIC & LMIC:
 - Similarities: Not interacting with the "host culture"; 'know more that they do';
 - Differences: HIC: "not taking advantage of opportunities"/ LMIC: "Treating context differently"; Underestimate hard work/unglamorous GH Research
- 2. Lack of "Cultural Competency"
 - Unpreparedness for what is required in the "context"
 - Language abilities "communicating

Biggest Challenges Students Face:

- “Cultural Competency.” (language barriers; accommodating to a new context)
- “Attitudes/Character Traits/Behaviors”: Not a part of the “team” (HIC)

What Students Should Remember:

- Focus “Cultural Competency”: variable (HIC), eg., global citizenship; [similar] cultural differences; respectful;
- “Attitudes/Character Traits/Behaviors”: variable (HIC) eg., reflective/curious/ “they have the power – to make a change”[mentor others]; (UMIC) eg., “remember our passions/friendships/keep in-touch”;
- “Knowledge & Skills”: ability to apply what they’ve learned to another context; (UMIC) “patient care is patient care regardless of the setting”.

Conclusions

- **By adding Global South host perspectives, we aim to:**
- improve mutual respect and trust
- share power honestly and ethically
- facilitate more genuinely collaborative agenda setting & *mutual* education between North-South/East-West partners

Conclusions

- Con't
- build on and evolve Global Health competencies
- improve Global Health pedagogy, curriculum design, assessment, and experiential learning
- better meet host goals and expectations

Questions?

Be in touch!

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