INTERPROFESSIONAL GLOBAL HEALTH EDUCATION: AN EXPERIENTIAL MODEL AND AN EDUCATIONAL FRAMEWORK

JODY OLSN, MSW, PHD (UNIVERSITY OF MARYLAND SCHOOL OF SOCIAL WORK)

MARCH 20, 2014
Presentation Overview

- UMB Center for Global Education Initiatives
- Background of CGEI
- Student Survey
- Malawi Projects
  - CCAI Study
  - Competencies Project
- Interprofessional Grant Award Program
UMB Center for Global Education Initiatives

- Founded in 2004 with an NIH Fogarty International Center “Framework” Grant that provided funds to universities to encourage capacity building & training in global health across schools on an academic campus.
- Focus: *interprofessional* global health education
Goal:
Survey UMB students (dentistry, law, medicine, nursing, pharmacy, social work) on their international experiences, impact of these experiences, perceptions of global opportunities, and expectations about global opportunities while at UMB.
Survey sent to 6,300 students, 653 completed survey, 50% of respondents had had international experience.
Measures:

- qualitative data through open-ended questions.
Summary of Findings

- All types of international experience (study abroad most frequent) scored between 4.4 and 4.7 on 5 point modified IES scale.
- Relevancy impact of international experiences on 7 point modified IES scale:
  - Professional: 5.4
  - International perspective: 5.6
  - Personal development: 5.5
  - Global-local connect: 4.29
University support asked for by students

- Give more frequent and available information
- Match opportunities with discipline driven academic time constraints
- Keep costs down
- Offer discipline specific opportunities – to see other countries’ practice approaches
University support asked for by students, cont.

- Ensure quality and academic rigor
- Expand geographic opportunities
- Add global curriculum in discipline specific courses
- Strengthen global-local connections to relate international experiences to communities in which most will later work.
Goal: To create an interprofessional global health training opportunity and foster ongoing engagement with communities

Included faculty and students from all schools on campus – dentistry, law, social work, medicine, nursing, and pharmacy

Why Malawi? Connections with former GHIC Director and School of Medicine faculty member, Dr. Miriam Laufer

A six-week interprofessional summer program with pre and post-project activities
Project History

- 2010: Team evaluated access to health, legal, and psychosocial services for orphans and vulnerable children and their families (Salima District)
- 2011: Team conducted an interdisciplinary assessment of health utilization behavior for malaria (Chikhwawa District)
2012: Team studied maternal morbidity and mortality in Chikhwawa District using the WHO’s Safe Motherhood Needs Assessment to survey health facilities

2013: Team conducted two projects:
- A joint workshop on HIV/AIDS with students and faculty at the Chancellor College of Law in Zomba, Malawi
- A “community mapping” activity using the Participatory Analysis for Community Action framework in the village of Mfera
Project Details

- Individual faculty cover 10-14 day periods
- Faculty supervise students and projects outside areas of expertise
- Students participate in activities previously unfamiliar to them and depend on each other for support and assistance
- Timeframe with activities:
  - 4 weeks conducting project-related research
  - 2 weeks analyzing and writing research results, developing recommendations, and presenting findings to host participants
- Students keep reflective journals throughout and develop summative essays
What we learned...informally

- Importance of timing
- Importance of group dynamics and team building
- Value of an interprofessional experiential learning project
- Need to incorporate interprofessional education skills, knowledge, values, and attitudes into global health training programs PRIOR to commencement of project
- Poor group dynamics may overshadow the most well-designed, well-executed project!
What we learned formally: Impact on students

- 2012 study: To determine if a 6-week global immersion experience in a less-resourced country had an effect on development of cross-cultural adaptability (a component of cultural understanding skill development)
Value of experiential learning
Value of global immersion activities
Value of building cultural integration skills
Value of experiential learning in developing cultural understanding over education alone
Qualitative improvement in aspects of student’s personal professional development
Study Details

- Hypothesis: There will be a difference in students who took part in global immersion compared to similar group of students who did not take part in experience (cross-cultural adaptability)
- Design: non-randomized cohort
- Participants: two groups of unmatched graduate professional students (law, medicine, nursing, pharmacy, & social work)
- Both groups reviewed online educational module: experimental group participated in Malawi experience
- Instrument: Culture-general instrument the self assesses cultural adaptability (CCAI™)
## Project and Study Activities

### Pre-immersion
- Review of online educational module
- Briefings with faculty about the project and professional development activities
- Peer discussions and presentations for project preparation
- Immersion project details and travel plan
- Completion of the CCAI™

### Immersion
- Informal and guided discussions with faculty and peers about the activities
- Reflective journaling about the activities using trigger questions
- Data collection for community health project activities
- Presentation of community health project activity results to local leaders
- Development of draft summary and analysis paper

### Post-immersion
- Debriefings with faculty and students about experiences
- Completion of the CCAI™
- Presentations on immersion experience (for campus leaders, students, others)
- Preparation of poster abstract for professional dissemination
Study Results

- Significant difference in total scores for immersion group after the experience.
- Significant difference in immersion group’s component scores:
  - Emotional resilience (ability to rebound and react positively to new experiences)
  - Perceptual acuity (extent of paying attention to and accurately perceiving various aspects of the environment)
- No significant changes for either group:
  - Flexibility/openness (extent of enjoying different ways of thinking and behaving)
  - Personal autonomy (extent of the evolution of a personal system of values and beliefs, while respecting others and their values)
Study Conclusion

Participation in 6-week global immersion experience in a less-resourced country with review of online educational module and on-campus activities made a greater change in the development of cross-cultural adaptability for a team of graduate professional students compared to a similar group of students who reviewed an online educational module only.
Recent Study (2013)

- Measured readiness for interprofessional learning pre/post immersion and *cross-cultural adaptability
- For the IPE dimension:
  - Tool: RIPLS
  - 23 item survey; 5-item Likert scale
  - Topics: value of shared learning; importance of trust & respect, teamwork skills, patient benefits to team interactions, etc.
- Preliminary unconfirmed results:
  - Greater change in immersion participants than non-immersion participants
  - Growth in learning and value of team for immersion participants post experience

*Preliminary inspection of data: no difference between groups or pre/post immersion for either group
UMB roundtable of global health and IPE experts (October 25, 2013)

Purpose of roundtable:
- Identify key IPE competencies for global health education and how they should be taught and measured
- Draw on roundtable participant comments and discussions to develop an IPE competency domain for global health education
- Develop a model curriculum to teach these competencies to global health students
Roundtable Results

- Developing IPE competencies for global health education is critical for future of global health.
- Case studies, simulations, and project-based learning are best for students learning to work together in global health.
- “Train the trainer” programs, resources, and incentives are critical for faculty.
- Innovative evaluation methods are required to assess value of interprofessional global health.
Domains of Interprofessional Education

- IPEC Domains
  - Values/Ethics
  - Roles/Responsibilities
  - Interprofessional Communication
  - Team and Teamwork
- Key personal attributes (where do they fit?)
Proposed Teamwork and Communication Competency Domain

- TC1: Exhibit interprofessional values and communication skills that demonstrate respect for, and awareness of, the unique cultures, values, roles/responsibilities and expertise represented by other professionals and groups that work in global health.
- TC2: Work with individuals of other professions to maintain a climate of mutual respect and shared values in which active listening and sharing of ideas is encouraged.
- TC3: Recognize one’s limitations in skills, knowledge, and abilities.
- TC4: Communicate with team members to clarify one’s own role and responsibility and each member’s role and responsibility on the team.
- TC5: Choose effective communication tool and techniques, including information systems and communication technologies, to facilitate discussions and interactions that enhance team function, avoiding discipline- or culturally-specific terminology when appropriate.
- TC6: Describe the process of team development and the roles and practices of effective teams.
- TC7: Apply leadership practices that support collaborative practice and team effectiveness.
- TC8: Apply relationship-building values and principles of team dynamics to perform effectively in different team roles.
- TC9: Give timely, sensitive, instructive feedback to others about their performance on the team, responding respectfully as a team member to feedback from others.
- TC10: Engage self and others to constructively manage disagreements about values, roles, goals, and actions using respectful language appropriate for a given difficult situation, crucial conversation, or interprofessional conflict.
Examples of Personal Attributes

- Leadership
- Openness
- Self-discipline
- Flexibility
- Self-awareness
- Cultural awareness
- Empathy
- Vulnerability
- Mindfulness

- Sensitivity
- Adaptability
- Curiosity
- Tolerance
- Detachment
- Intellectual curiosity
- Self-reflection
- Emotional maturity
CGEI Interprofessional Grants: Pilot year, 2014

- $200,000 from campus President’s office
- **Goal:** To provide funds to UMB faculty and students to foster interprofessional global health research and project collaboration.

**Parameters:**
- Must include both *global health* and *interprofessional collaboration* components.
- Must have at least two students from different UMB schools work together on one project under faculty guidance.
Grant Parameters, cont.

- Must be well-designed with structured goals and outcomes.
- Must be a minimum of one week in-country (including direct travel) and can be as long as a full semester.
- Must meet the UMB safety and security standards and students must participate in a pre-departure cross cultural workshop.
Grant Awards

- 9 Projects in 2014
- 5 Projects in 2015 (so far)
- 2014 projects:
  - Nine faculty: dentistry, law, medicine, nursing, social work
  - 42 students: dentistry, law, medicine, nursing, pharmacy, social work
  - Seven countries: China, the Gambia, Kenya, Malawi, Nigeria, the Philippines, Rwanda
Grant projects

- Evaluation & interprofessional collaboration: Human Resources for Health, Rwanda
- Occupational health and TB prevention services for health workers: investing in health system strengthening, the Gambia
- Philippines: an interprofessional program on global health and social services
- Examining palliative care in China
- Malaria prevention in school-aged children in rural Malawi
Grant Projects, cont.

- The Malawi 2014 Post-rehabilitation sustainability project
- Evaluation of barriers to cervical cancer screening, Nigeria
- Interprofessional assessment of health, research and service need and collaborative opportunities in The Gambia
- Community based perception of out-of-hospital emergency care needs, Kenya