Global Child Health: Advances in Education
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Objectives
- Overview of current state of Global Health education
- Overview of best practices in Global Health education
- Outline the Key players & Resources in Global Health education
- Overview of Global Child Health concepts
- Overview of Global Child Health Epidemiology

An Intricate Science

“International Health is more than the study of the developing world: it is the study of the many factors that contribute to health and disease world-wide. Conceptualizing health as the end point of such complex processes involves looking at economic, cultural, historical, political, commercial, and environmental factors on a global scale”

International Health and Medical Education Centre, based in University College, London, England

Worldmapper.org – often preventable diseases

Why is GCH Important?

How do we ensure we are training all physicians to be compassionate & feel solidarity towards others?

“Off all the forms of inequality, injustice in health care is the most shocking and inhumane.”

Martin Luther King, Jr

Poor families often do not have the resources to advocate – it is those who are aware of the injustices who must work to eradicate them

Collective Responsibility

Initial Endowment

Equity In Process –
- Treatment by institutions
- Access to services

Physical Wealth
- Family background
- Physical health

Equity In Outcomes –
- Immunizations
- Education
- Jobs
Educators Catching Up!

What does all this travelling mean?

How Can We Teach Around GCH?

Complex Issues

Globalism

How Can We Teach Around GCH?

Frame Your Question

Traveling Trainees...

PROS

CONS

Impact

Partnerships

Individual

Safety
What is best practice in GH Education?

The availability of good medical care varies inversely with the needs of the population served.

Where Should we be forming our Partnerships?

Global Health Education

- AAP consensus guidelines for International Electives
  1) prerequisite clinical training;
  2) adequate pre-travel orientation and preparation;
  3) preceptorship by host and US faculty;
  4) formal post-travel evaluation and feedback

Global Health Training in Paediatrics

- Global Health Training in Pediatric Residency: A Qualitative Analysis of Faculty Director Insights
  Monica Eneriz-Wiemer, MD, Brett D. Nelson, MD, MPH, DTM&H; Janine Bruce, MPH; Lisa J. Chamberlain, MD, MPH
  ACADEMIC PEDIATRICS 2012;12:238–244

  Domain 1: Identifying & building partnerships with global sites

  Domain 2: Curriculum & pre-trip preparation

What are the Components of PDT?

- What are the Goals of the program & are they Realistic?
- Key Players involved, Safety in travel, Health Safety, Cultural Competencies, Political Awareness, Language training, Knowing your limits, Appropriate Supervision, Professionalism in a foreign environment, Preparation, What to Pack, How to Handle Culture Shock, Medical Resources to Use Abroad, Evacuation Policies, Post-Exposure Prophylaxis, Travel Clinic Visits, Health Insurance, Ethics of working in resource poor settings, Motivation, Tolerance, Outcome, Integrated Management of Childhood Illness, World Health Organization reports of childhood survival, Country specific data on child mortality & illness, Political climate in country of destination, Lancet articles on global child health, Global health education consortium website/presentations on traveling in resource poor settings, getting a visa, getting a temporary visa, testimonials from others who have travelled to similar locations, vector borne disease protection.

GH Training in Paediatrics
Globally, how many children under 5 are estimated to die per year?

Basics of GCH Knowledge

6.9 million children

Teaching Point?

2011 WHO stats

Daily ~ 19,000 children under five die

~43% of child deaths under age 5 are during the neonatal period

2/3 preventable

only 1% are of unknown causes.

What can 1 trainee do?

Not All Experiences are Equal

~ 1/2 of all global Under 5 Deathstook place in just 5 countries in 2010:

India

Nigeria

Dem. Rep. of the Congo

Pakistan

China

UN Inter-agency Group for Child Mortality Estimation 2011

Clinical Competencies

Undernutrition Pneumonia Malaria/HIV/ Measles

Social Determinants Of Health
"Few things have more impact than nutrition on a child’s ability to survive, learn effectively and escape a life of poverty."

Ann Veneman, UNICEF

Malnutrition

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>Risk Factors</th>
<th>Prevention</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pneumonia, or other acute respiratory infections</td>
<td>Malnutrition</td>
<td>Exclusive breastfeeding</td>
<td>Appropriate care by a trained health provider</td>
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<tr>
<td></td>
<td>Non-breastfed</td>
<td></td>
<td>Antibiotics</td>
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<td></td>
<td>Low birth weight</td>
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<td>Oxygen for severe illness</td>
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<td></td>
<td>Overcrowded conditions</td>
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<td></td>
</tr>
<tr>
<td>Childhood Diarrhoea</td>
<td>Malnutrition</td>
<td>Exclusive breastfeeding</td>
<td>Low-osmolarity oral rehydration salts (ORS)</td>
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<tr>
<td></td>
<td>Non-breastfed</td>
<td></td>
<td>Zinc supplements</td>
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<tr>
<td></td>
<td>Unsafe drinking water and food</td>
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<tr>
<td></td>
<td>Poor hygiene practices</td>
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<td></td>
<td></td>
<td>Adequate sanitation &amp; hygiene</td>
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</tbody>
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Adapted from WHO 2012

“Few things in life inspire more awe or hope than the miracle of a newborn child. Whether that child fulfills her or his vast potential is largely in the hands of the family, the community and country into which she or he is born.”


Global Health Training in Pediatric Residency: A Qualitative Analysis of Faculty Director Insights

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ACADEMIC PEDIATRICS 2012;12:238–244

Domain 1: Identifying & building partnerships with global sites

Domain 2: Curriculum & pre-trip preparation

Domain 3: Resident experience & evaluation

Domain 4: Factors that facilitate and hinder GH program implementation

Institutional Support

Committee Development

Institutional Partnerships

Global / Local Partnerships

Curriculum development

Low-osmolarity oral rehydration salts (ORS)

Adequate sanitation & hygiene

Adapted from WHO 2012
Tools for Building a GH Program

- Global Health Education Consortium Residency Handbook
- AAP – Competency-Based Curriculum Objectives
- AAP – Global Health Curriculum Toolkit
- Canadian Paediatric Society: Global Child & Youth Health Section – Global Child Health Curriculum

Key Players in GH Education

- Consortium of Universities for GH
  - Merger: Global Health Education Consortium & CUGH
- AAP – Section on International Child Health
- APPD – Global Health Educators
- Schools of Public Health
- UNICEF, WHO, NGOs / Foundations

Key Players in GH Education

How do key players affect our experience as GCH Educators & Clinicians?

Millennium Development Goals

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. Reduce child mortality
5. Improve maternal health
6. Combat HIV/AIDS, malaria, and other diseases
7. Ensure environmental sustainability
8. Develop partnerships for sustainable development

By the year 2015, the Millennium Campaign seeks to reduce by two-thirds the under-five child mortality rate.

When it comes to child health, what will we be counting after 2015?

Committing to Child Survival – A Promise Renewed
Doing Research Abroad

- Research Question
- REB
- Data Collection
- Partnerships
- Outcomes

What sets this question?
At home & Abroad
What Data???

Supporting Trainees Abroad

- WHO Guidelines on Child Health
- IMCI Guidelines
- Global Health Emergency Medicine – Education Modules
  - www.ghem.ca
- CUGH/GHEC
- Off site!

Looking Forward

Thank You

Dr. Adelle Atkinson, Dr. Daniel Roth, Dr. Michelle Shouldice
Department of Paediatric Medicine, Hospital for Sick Children, Toronto, Ontario
All my colleagues in GH

Interested in Global Child Health?
Follow me on twitter: @julecgraham

“Feeling pretty! Thank heaven! I thought you said you were feeling poor.”

drjohnstonesickkids.ca