Rationale

Global health has been defined as “an area for study, research, and practice that places a priority on improving health and achieving equity in health for all people worldwide. Global health emphasises transnational health issues, determinants, and solutions; involves many disciplines within and beyond the health sciences and promotes interdisciplinary collaboration; and is a synthesis of population-based prevention with individual-level clinical care”1

The study and practice of global health by post-graduate trainees necessarily involves advocacy, inter-professional collaboration and communication, enhanced skills in epidemiology and biostatistics, management experience, and ethical awareness, among others. Therefore, global health can contribute significantly to meeting traditionally difficult CANMEDS objectives.

In 2008 a survey was undertaken to gauge post-graduate trainee interest in global health and develop a curriculum for residents. The Interim Report on the Global Health Education Institute identified six reasons to create a structured global health curriculum for residents: 1. To fulfil an unmet need for formal global health training; 2. To help meet the Faculty’s social accountability mandate; 3. To enhance the competence of trainees in their practice locally and abroad; 4. To consolidate resources and build educational infrastructure; 5. To build relationships and create a community of practice and scholarship; 6. To innovate and strive toward excellence in training the next generation of global health leaders. Over the past 5 years, over 120 residents have completed the 2 year GHEI program, however, not all of the goals of the Interim Report have been met.

The Faculty of Medicine Road Map to Global Health calls for increasing collaboration among faculty in global health endeavors, advancing research education and scholarship, and nurturing sustainable partnerships. Postgraduate trainees can be important contributors to and beneficiaries of these activities. The Roadmap also calls for the faculty to “develop and provide diverse, learner focused educational offerings in global health”. These include expanding pre-departure training, faculty development and post-travel debriefing. The Strategic Plan (2011-2016) of the Faculty of Medicine highlights developing a global health education strategy as an example of innovation in education.

Post-graduate trainees have long been interested in augmenting their curricula with global health content and through international electives. Groups such as Residents Without Borders and Residents for Refugee Health meet regularly to discuss and advocate for global health issues. Residents from all specialties also regularly engage in formal and informal global health experiences with varying degrees of supervision. This has led to concerns regarding trainee and patient safety, as well as the integrity of the educational experience. Until now there has been no PGME-wide policy regarding central tracking of residents global health electives, pre-departure training or educational standards for global health experiences.

In 2012 PGME identified an Academic Lead, Global Health to continue directing the Global Health Education Initiative certificate program, develop pre-departure training and other global health educational offerings, and develop policy and structure for global health electives and experiences within post-graduate training. Undergraduate Medical Education also has a Global Health Lead with responsibilities including global health elective supervision and curriculum development.

To date, there is no committee or body with a global health education agenda, with representation from all clinical departments within the Faculty of Medicine.

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Main Activities and Goals

The main goal of the GHESC is to support global health research, education and practice in postgraduate medicine and throughout the Faculty of Medicine through:

1. Coordination of activities and sharing best-practices relating to post-graduate trainees in the areas of global health.
2. Drafting policy and developing infrastructure to support global health electives and experiences.
3. Develop and/or implement and/or monitor pre-departure training for post-graduate trainees of all departments.
4. Planning and implementing educational events and programs related to global health including an annual resident-led symposium.
5. Sharing curricula and strategies for augmenting global health education, including mechanisms for mentorship and career counselling.
6. Facilitating collaboration and shared global health project development across departments.
7. Raising issues related to global health to bring to PGMEAC for consideration.
8. Collaborate (or lead) parallel development and integration of undergraduate and faculty development educational initiatives in global health.
9. Act as advisory body to the Global Health Education Initiative.
10. Facilitation of communication and outreach on global health issues within programs, PGME and the faculty of medicine (via PGME website, twitter, facebook etc..)

Membership

Membership guidelines
- For departments which have formal ‘global health leads’, the global health lead will be invited to join the committee.
- Other members will be invited by the chair based on their interest and involvement in global health education and their ability and interest in representing their department on the committee.
- Members from other clinical departments will be added gradually.
- There are no term limits and members will remain on the committee as long as they are global health leads for their department.

Members

Academic Lead, Global Health, PGME (Chair)
Global Health lead or other representatives from all clinical departments, initially limited to:
- Internal Medicine
- Obstetrics and Gynecology
- Family Medicine (Global Health Program Director and/or alternate)
- Pediatrics
- Psychiatry
- Anaesthesia
- Emergency Medicine (GHEM representative or alternate)
- Public Health and Preventive Medicine
- Dalla Lana School of Public Health

Global Health Lead, Undergraduate Medicine
Aboriginal Lead, Dept of Internal Medicine
Representatives of other FoM Global Health Initiatives and Local Partners:
- Toronto Addis Ababa Academic Collaboration (TAAAC)
Medicin Sans Frontiers
Dignitas

Three post-graduate trainees
Chosen to representing surgical, medical and family medicine specialties as well as Residents Without Borders (RWB), Global Health Education Initiative (GHEI) trainees +/- Clinician Investigator Program (CIP) trainees

Accountability and Jurisdiction
- The scope of activity includes all matters relating to global health education and global health activities of post-graduate trainees.
- The committee will seek to implement relevant elements of the Global Health Roadmap, the PGME strategic plan and the Faculty of Medicine Strategic Plan.
- Global Health Education Subcommittee reports to the Postgraduate Medical Education Advisory Committee.
- The Global Health Education Subcommittee is advisory to program directors and the PGMEAC which is advisory to the Vice Dean.

Meetings
- Frequency: The GHESC will meet every other month – Thursday @ 8am
- Location: Meetings will be held at the PGME Offices at 500 University Ave.

Roles / Responsibilities:
Chair
- Call meetings, set agenda and distribute materials to members.
- The chair will report to the Vice Dean, PGME
- The chair will liaise with national and international global health and education committees on behalf of PGME and/or the University of Toronto.

Members
- Members are responsible to review materials, attend meetings, and contribute to discussions.
- Other activities on discussion with the chair.

Resources and Budget
Resources will be allocated to the committee at the discretion of the Vice Dean, PGME.

Governance
Decision-making is by consensus with a minimum of 2/3rds of members present.

Approved PGMEAC
March 22, 2013