Exploration of Global Health Careers Across the Medical Fields

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Abstract

BACKGROUND Despite expansion of interest among American medical students in global health (GH), academic medical centers face multiple obstacles to the development of structured GH curricula and career guidance. To meet these demands we sought to provide a systematic analysis of the accounts of GH experts.

METHODS We developed a collaborative, interview-based, qualitative analysis of GH experiences across six career-related themes that are relevant to medical students interested in GH: justification, medical education, economics, research prospects, law and ethics, and work-life balance. Seven GH faculty members were interviewed for 30-90 minutes using sample questions as guidelines. We applied a grounded theory approach to analyze the interview transcripts to discover an emerging theory pertinent to GH trainees.

FINDINGS Regarding justification, 4 respondents defined GH as work with the underserved irrespective of geographic location; 5 respondents found sustainability imperative; and all respondents believe GH creates better physicians. Respondents identified many physician competencies developed through GH medical education, with 5 respondents agreeing that work with underserved populations has transformative potential. Concerning economics, 3 respondents acknowledged GH’s popularity among trainees, resulting in increased training opportunities, and 2 respondents emphasized an associated deficiency in program quality. All respondents described career models across specialties. Four respondents noted funding challenges when discussing research prospects. Within the theme of laws and ethics, 4 respondents perceived inadequate accountability, and 6 respondents identified ways to create accountability. Finally, 6 respondents recognized family demands can compromise one’s GH career and thus work-life balance.

CONCLUSION Despite diverse perspectives on the meaning and sustainability of GH work, this analysis provides a nascent framework that may inform curricular development for GH trainees. Suggestions are offered for elaborating this framework to fully exploit the transformative potential of GH training in medical education.

KEY WORDS career advising, curriculum development, education, global health, grounded theory.
**INTRODUCTION**

A constant expansion of interest among American medical students in global health (GH) experiences continues to outpace the ability of academic medical centers (AMCs) to provide adequate GH education and training for these students.\(^1\)\(^3\) Despite increasing awareness of this pedagogic inadequacy, AMCs face multiple obstacles to the development of structured GH curricula and career guidance; such obstacles include a paucity of scientific literature on novel approaches to classroom-based GH education and a lack of faculty mentors with sufficient time and GH experience to advise interested students.\(^4\)\(^5\)

To meet the growing demand for GH education and career guidance, it is incumbent on AMCs to operationalize the domain knowledge and competencies that constitute GH and its available career paths and to integrate this information into the curricula and career advising offered to medical students. The competency model of medical education, and its appropriateness for socially relevant areas of medicine, has been questioned from the perspective that these areas, such as medical ethics, professionalism, and issues of diversity and social justice, are epistemologically distinct from the basic and clinical biomedical.\(^6\) Insofar as GH training offers unique insights into these humanistic areas of medicine, the challenge of integrating GH into medical school curricula may create opportunities to enhance medical student understanding of the social role of the physician.\(^1\)\(^6\)

Career advising in GH for medical students presents unique challenges to AMCs.\(^7\) The variety of career paths available for meaningful GH work, such as short-term missions, long-term international research collaborations, and full-time positions in global nonprofit groups, suggests that any faculty member’s experience and expertise in GH is likely to be limited to only a small scope of possibilities available to aspiring GH workers. Moreover, different medical and surgical specialties lend themselves to different models of involvement in GH and might therefore restrict faculty perspectives to their own area of practice.\(^1\)\(^8\) These challenges should be addressed and accounted for in the conceptualization of a framework for advising undergraduate medical students who plan to pursue GH careers.

We report on a collaborative, interview-based, qualitative exploration of 6 career-related themes that are relevant to medical students interested in GH, regardless of medical specialty. Similar approaches have encompassed by these themes.\(^9\)\(^10\) The themes, which recur in the GH literature as areas of growing study and debate, include: justification of GH, medical education, economics, research prospects, law/ethics, and work-life balance.\(^1\)\(^2\)\(^5\)\(^11\)\(^17\) This study adds to the existing literature by providing a systematic, hermeneutic analysis of the verbatim accounts of GH experts regarding these themes as they pertain to careers in GH.

**METHODS**

The workflow of our methodology is graphically represented in Figure 1.

**Setting.** Our study focused on interviews of attending physicians from the Mount Sinai Hospital, identified as leaders in GH by their faculty appointments to the Arnhold Institute for Global Health (AIGH). These interviews explored 6 themes determined by the authors to be of interest and relevance to trainees pursuing GH careers (Fig. 2).

**Participants.** Interviews were conducted by student volunteers from each of the 4 classes at the Icahn School of Medicine at Mount Sinai. Potential faculty interviewees were contacted via e-mail using a form letter describing the interview format and inviting them to participate. Seven faculty members were recruited in this manner, representing the medical specialties shown in Figure 3.

**Data Collection.** To allow for discovery of principles relating to our selected themes within GH, we used a constructivist grounded theory approach.\(^18\)\(^20\) From November 2011 through April 2012, each of the student interviewers (VMT, CP, CdH, RK) conducted semistructured telephone interviews lasting 30-90 minutes with 1 or more of the participating faculty members. Although the sample questions developed by 1 of the authors (EJB) and shown in Figure 2 were provided as a guideline, student interviewers were encouraged to approach the conversation with sufficient flexibility to allow for exploration of each faculty member’s unique perspective, while touching on all 6 interview themes. Recordings of the interviews were transcribed verbatim, and interviewees’ responses were transferred into spreadsheets to facilitate data analysis.

**Data Analysis.** Interview transcripts were openly coded by 2 authors (EJB and VMT). We selected 7 faculty members involved in Global Health at the Icahn School of Medicine at Mount Sinai, representing the specialties listed in the Coding Legend (Fig. 3). Codes were then compared and refined through a process of focused coding and memo writing until saturation of emergent categories was
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