

# Policy Document

## Global Health and the Medical Curriculum Policy

### Background

The Australian Medical Students' Association (AMSA) is the peak representative body for Australia's medical students. As such, AMSA has a key role in advocating for the highest quality medical curriculum that equips future generations of health practitioners with the necessary knowledge and skills to deliver the highest quality care to patients and the community.

#### Global Health and Medical Education

Today's doctors can no longer approach patients or populations in isolation. Global interconnectedness is increasing exponentially, with more people displaced than at any other time in human history [1]. Today, health care involves a complex web of issues including transient populations, pollution and environmental considerations, and political and economic factors. As health outcomes and risks have inherently global causes [2], the medical curriculum needs to go beyond a mere overview of global health issues and instead integrate global health at every level to prepare students for the world they will work in. Global health can be defined as "an area for study, research, and practice that places a priority on improving health and achieving health equity for all people worldwide" [3]. It draws on the Alma Ata Declaration (1978), which enshrines the centrality of "health for all" as a human right, the interdependence of nations in achieving good health, and that "good health for all will advance social and economic development and world peace" [4]. The interdependence of health outcomes and matrix of global health determinants mean that global health also requires "collaborative trans-national research and action" [5].

#### Current Issues

Issues in global health span environmental health, health security, public health and emerging threats. Climate change, rising air pollution, and compromised water supplies pose the single largest threat to global health in the 21<sup>st</sup> century, threatening to undo over 50 years of progress in global health [6]. At the same time, the recent rise of populism and xenophobia in North America [7] and Europe [8,9], and protracted conflicts in the Middle East, Central Asia, and Africa, has put the health security of millions around the world at risk [10,11]. Corruption and global inequality are at their worst since the 19th century [12], with more people at the losing end of the social gradient [34]. Vulnerable groups, such as women, children, refugees, LGBTIQ individuals, Indigenous peoples, and those with low socioeconomic status, are most affected.

The global refugee crisis is, in itself, a significant global health issue, with over 65 million displaced worldwide [13]. The psychological trauma suffered by those displaced also presents a significant problem for the world's already under resourced mental health infrastructure [14].

Many emerging threats to health – rising levels of mental illness, cancer [15] and non-communicable diseases, antibiotic resistance [16] – are global concerns, affecting developing and developed nations alike. Meanwhile, the burdens of infectious diseases such as HIV and malaria persist, and sexual and reproductive health remains a significant concern. Rising levels of neurological disorders are also an increasing global burden, in part due to the ageing population. Mental and neurological disorders now account for 13% of the global burden of health [17,18]. Nations and health organisations should collaborate to address these broad and complex issues and ensure health for all.

### Global Health and the Curriculum

Without an adequate global health curriculum, including skills development and opportunities to practice in low and middle income settings, Australian medical students will be ill equipped to face the challenge of global health [19,31]. While medical schools in Australia increasingly face a crowded curriculum, global health needs to be given greater attention than it currently receives. By integrating global health into existing medical curriculum, schools can address this vital issue without increasing teaching time.

Universities across Australia are already taking advantage of the wealth of global health knowledge that exists within the wider Australian medical community [30]. The expansion of these networks and the inclusion of more symposiums and guest lecturers with experience in global contexts will enable students to engage in global health in a more tangible way.

Australia must graduate doctors able to meet our population's health needs, but as a member of the global community we have a responsibility to help address growing global health concerns around the world. However these two priorities are not in conflict; indeed global health experience helps doctors meet the needs of Australia's population [32]. This includes the increasing importance of doctors who understand the challenges facing refugees and asylum seekers, vulnerable population groups and recent immigrants [33].

Innovative and engaging curriculum materials already exist within the global health field and should be utilised. Educational resources for global health are provided to all universities through agents like AMSA Global Health (2016) and the International Federation of Medical Students Association (IFMSA, 2016), that make clear curriculum links between commonly taught content and global health issues.

These include, but are not limited to:

- problem/case based learning scenarios that feature globally relevant characters;

- databases of relevant clinicians and scientists with expertise in a range of global health topics;
- educational packages with clear learning outcomes and content;
- online learning modules including the AMSA Academy on Global Health and Pre Departure training;
- and global health mapping across core content - which matches opportunities for global health content with current medical curriculum.

### Global Health Opportunities

Medical curriculum also encompasses the many opportunities outside the classroom, including elective opportunities available to students, many of whom may have a strong passion for global health. Students who participate in electives overseas gain a significant advantage in terms of knowledge and skills, as they are exposed to a wider spectrum of disease states, often of greater severity than those in their home region [19]. They also gain improved physical examination and procedural skills, in the face of limited access to testing, imaging and other diagnostic tools [20].

Students who participate in electives in low to middle income countries often develop better communication skills, and an appreciation of the role of culture and language in patient care [21]. Cultural competency and the ability to effectively work within diverse communities is highly valued in Australia and produces better health outcomes for all patients. Integration of global health into medical education not only leads to cultural competency, flexibility and innovation, but it also enables students to take a more holistic approach to health care. Student exposure to global health also impacts future career choices, with students more likely to assist in international efforts to provide equitable access to health care [22]. International academic partnerships also facilitate future opportunities for research, allowing Australia to increase its practical contributions toward emerging global health challenges [23]. In recognition of the need for sustainable, mutually beneficial student placements in developing settings, and the potential for harm if these needs are not addressed, research supports ethical medical placements on all occasions [29]. This policy will call on medical schools to continue their support for overseas medical placements both as part of core curriculum and in elective and extracurricular format.

## Position Statement

In the current global climate, we firmly believe that Australia should strengthen its approach to global health within medical education courses for all future doctors. This action can, and will, have positive impacts on patients, students, the wider medical profession and communities the world over. The vision of the Alma Ata Declaration still holds true, and ultimately we are all motivated toward "health for all".

AMSA believes that contemporary medical curricula in Australia should produce graduating medical students that:

1. have a strong understanding of global health issues, determinants and solutions;
2. are equipped and empowered to deal with the health of patients and communities in global health settings through relevant clinical skills and knowledge; and
3. are global leaders, driven to achieve health equity.

## Policy

AMSA accordingly calls upon:

1. Australian Medical Schools and the Australian Medical Council to adopt the promotion of health for all as a strategic objective;
2. Australian Medical Schools to facilitate the development and implementation of medical curricula for all students that, at a minimum:
  - a. Integrate a global health focus vertically across year levels and horizontally across themes, enabling the continued delivery of existing models of clinical and community medicine teaching;
  - b. Acknowledge the importance of the social determinants of health as outlined by the World Health Organization [24];
  - c. Recognise health as a social construct that represents different things to different people, is dynamic and is influenced by a wide range of factors, often beyond an individual's control;
  - d. Highlight the intersectoral nature of health which involves a number of players at different levels, across multiple sectors, including education, town planning, politics, and public health;
  - e. Illustrate that doctors and health professionals may engage with health in a variety of ways, ranging from clinical medicine through to public health policy;
  - f. Foster a broader awareness of global trends in morbidity and mortality and the international health profile of nations;
  - g. Promote culturally inclusive practices through an emphasis on cultural humility and pluralism.
3. Australian Medical Schools to integrate the following topics and issues:
  - a. Climate Health:
    - i. The impacts of climate change on human health and its inherent link to sustainable development. This should include the need for the international health community to actively engage in adaptation and mitigation efforts on a global scale;
    - ii. The current and future agenda for sustainable global development, including issues of effective global governance and international agreements which work toward this goal;

- b. Health Security:
  - i. The inextricable link between health and human rights;
  - ii. Refugee health in both an international and local context. This should address the diverse nature of refugee populations, who may be displaced in a diverse range of settings, due to the protracted nature of conflicts;
  - iii. The risk of global conflict and the consequential adverse health outcomes for civilian populations and non-combatants;
  - iv. Corruption of political institutions and bureaucracy and its detriment to health care delivery and outcomes locally and internationally;
  - v. The tools required to act professionally in politically charged situations, including with prisoners, asylum seekers, and refugees;
- c. Public Health:
  - i. Health systems and effective delivery of care despite limited resources, including: management, policy; organisation; and the field of health economics;
  - ii. The future role of information technology in the delivery of health care locally and globally, as a means of reducing health inequities;
  - iii. The effect of discrimination due to gender, age, income, race, sexuality, disability, health, and religion in accessing equitable healthcare;
  - iv. The persistent burden of communicable diseases and their biomedical basis, and the success and/or failure of past public health campaigns;
  - v. Sexual and reproductive health; including HIV/AIDS, women and maternal health, LGBTIQ health, and gender inequalities.
  - vi. Indigenous health in Australia and in other countries, with a specific emphasis on the complex historical, social and cultural factors which underpin entrenched disadvantage and the significant disparity in health outcomes;
- d. Emerging Public Health:
  - i. The threat and growing global burden of non-communicable diseases, specifically obesity, heart disease, diabetes, kidney disease, lung disease and cancer, with attention to the situation in low and middle-income countries;
  - ii. The growing concern of mental health in both global and local settings. This should address the prevention and management of mental illness across diverse populations;
  - iii. Bioethics and research ethics in underdeveloped settings,
  - iv. Ethical student and professional conduct on international placements, which address current concerns in the space around ethical and sustainable medical placements;

- v. Immigrant health, emphasising the spectrum of infectious diseases that changing and dynamic populations bring [26];
4. Australian Medical Schools, both at a faculty and a student society level, to support and encourage students to participate in global health through appropriate elective opportunities, leave allowances, relevant training and scholarship support [25, 27]. This should be facilitated through:
  - a. Rotations and electives in low and middle income nations or the opportunity for internships and fellowships with global health related organisations in accordance with AMSA's Overseas Medical Placements Policy [28], for the safety of students and patients;
  - b. Optional course components, assignments, modules or electives in global health;
  - c. Support to be involved in approved third party Global Health education opportunities like those offered by AMSA Global Health and the annual AMSA Global Health Conference;
  - d. Intercalated honours year degrees (e.g. BSc/BMedSc, MPH) that combine structured teaching around global health issues with a traditional research program;
  - e. Actively evaluating global health experiences at individual, program and impact levels to facilitate program improvement. [25]

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