University of Washington Global and Rural Health Fellowship

Mission Statement

Our mission is to train the next generation of leaders in medical fields to bring dignified, justiceoriented, and sustainable improvements to the healthcare of vulnerable populations within global and local communities.

Program Overview

This unique training program will provide the knowledge, leadership skills, and hands on experiences needed to become effective leaders, physicians, managers, and advocates in the field of global and rural health. We envision the University of Washington Global and Rural Health Fellowship (UWGRF) being comprised of University of Washington medical specialties who are responding to the need for physicians who have the training needed to address the challenges at the individual health system level that exist in resource limited settings in both the United States and around the world. Realizing that the fields of both global and rural health are complex, multifaceted and embedded in structures of healthcare inequalities and inequities which have the ability to be changed, the UWGRF is committed to improving the health care systems that affect the most vulnerable populations. The UWGRF will train its fellows to address the most pressing issues facing global and rural health today including health systems strengthening, implementation and clinical research, improving medical education, treating the expanding fields of chronic diseases, cancer, maternal and child health, trauma, mental health, and primary care in a culturally appropriate and dignified manner.

Internal Medicine Program Overview

The UWGRF in Internal Medicine is a two-year program based in a structured curriculum containing clinical and research training in global health, clinical training with Native populations in Alaska and South Dakota, education, mentorship, and teaching opportunities. During the first year of the program, fellows will provide direct clinical care either at the Alaska Native Medical Center in Anchorage, AK and at outlying rural clinics and hospitals or with Indian Health Services (IHS) on the Pine Ridge Indian Reservation in South Dakota. Fellows may also be able to participate in health systems strengthening projects at their respective sites and may have the opportunity to supervise and medical students and residents during their work at the Alaska Native Medical Center and Pine Ridge IHS. During the first year of clinical training, fellows will be supervised by the Alaska Native Medical Center and IHS physicians at their respected institutions as well as the fellowship program director.

During the second year of fellowship, fellows will have the option of choosing from one of two tracks:

1) Research Track: Fellows will have a variety of options to choose to perform clinical, implementation, health systems strengthening, monitoring and evaluation or public health research projects through one of University of Washington's partners. These partners include but are not limited to Health Alliance International, I-TECH, Kenya Research and Training Center (KRTC), the International Clinical Research Center, and Partners in Health. Fellows could also choose to return to their respected first year clinical site to perform an implementation research or quality improvement projects if a mentor is identified at their respected site. Fellows will be supervised by both their mentor who will be in the field with them as well as the fellowship director.

2) Clinical Education Track: Fellows who are interested in pursuing a career in clinical education will have the option to work with UW faculty in a number of countries. Fellows will perform clinical supervision, provide direct patient care, and work in partnership with the local ministry of health to strengthen the medical education curriculum. Fellows will be supervised by both their mentor, who will be in the field with them, as well as the fellowship director.

Fellows will also participate in Global Health classes through the University of Washington Department of Global Health including a 4 week course global health leadership course taught by Dr. Jason Beste and Dr. Aliza Monroe-Wise called "Global Health Leadership for Clinicians" in the fall of the first year which is held in Seattle. Fellows in either track will also have a chance to pursue a Master of Public Health degree at the London School of Tropical Medicine, or participate in a number of tropical medicine courses such as the Gorgas Course in Peru or the University of Minnesota Clinical Tropical Medicine and online Global Health course. At the end of the second year, fellows will be expected to present a research manuscript or medical education project.

UWGHF Core Components:

- Clinical Training: Fellows will spend a minimum of one year over the two-year fellowship performing hospitalist and outpatient clinical work in Alaska at the Alaska Native Medical Center or at Indian Health Services on the Pine Ridge Indian Reservation in South Dakota. Fellows also will have the chance to perform clinical work in a number of countries including, but not limited to Kenya, Mozambique, Liberia, Rwanda, Nepal, Mexico, and Peru if they choose the clinical education track during their second year.
- 2) Education: The University of Washington Global and Rural Health Fellowship believes that in order to study, evaluate, and change health systems delivery and care, medical education, and provide valuable research to the field of global health, its fellows must be equipped with the knowledge and fundamental tools needed to address and solve these issues. Therefore, fellows will take a minimum of one global health course during their first year of fellowship in global health leadership. Other global health courses through the University of Washington's Department of Global Health will be offered on an optional basis. Fellows will also be given the opportunity to pursue a Master in Public Health degree at the London School of Tropical Medicine. Or, in year two, fellows in either pathway will have an optional opportunity to attend the Gorgas Course in Peru or the University of Minnesota Clinical Tropical Medicine and online Global Health course.
- 3) **Teaching:** Fellows will have the chance to teach clinical and academic medicine to UW residents and medical students in Anchorage, Pine Ridge, and possibly abroad.
- 4) **Career Development/Mentorship**: Our fellowship will provide career development mentorship by holding forums and meetings for its fellows with various organizations such as the Bill and Melinda Gates Foundation, I-TECH, PATH, Health Alliance International, Partners In Health, CDC, and other global health institutions to help build career opportunities for its fellows post fellowship. The fellowship will also provide an array of mentors in the fellow's clinical, research, and educational endeavors.
- 5) Scholarly Activities: Fellows will be expected to produce a scholarly project at the end of their second year as well as present their scholarly project at a local, national, or international conference. Each fellow will have a mentor during their second year of the fellowship that will assist the fellow on his/her scholarly project. Scholarly projects can include an array of work such as implementation and clinical trials research, health systems strengthening projects, and development of medical education curriculum.

Curriculum and Evaluations

Didactic Curriculum

Year 1	Year 2
Mandatory Courses1) Global Health Leadership for Clinicians:4 week course fall quarter (in person in Seattle, WA)Optional Courses-Master of Public Health Degree through the London School of Tropical Medicine-Introduction to Epidemiology for Global Health -Principles of STD/HIV Research -Introduction to Global Health: Disparities, Determinants, Policies and Outcomes -Data Sources for Monitoring and Evaluation	Optional Courses -Masters of Public Health through the London School of Tropical Medicine -Gorgas Course - University of Minnesota Clinical Tropical Medicine and online Global Health course. -Principles of STD/HIV Research* -Introduction to Global Health: Disparities, Determinants, Policies and Outcomes -Data Sources for Monitoring and Evaluation -Access to CFAR Seminar Series* *available online
-Access to CFAR Seminar Series <u>Weekly Seminar Series via ZOOM</u> -Fridays from 9:00am-10:00am PST <u>Alaskan Native American Medical Center/Pine Ridge</u> -Attend weekly noon conference -Present 2-3 education lectures to local residents/staff	<u>Weekly Seminar Series via ZOOM</u> -Fridays from 9:00am – 10:00am PST

Rotation Goals and Objectives

ANMC and Pine Ridge Objectives and Goals for fellows:

-Improve and solidify clinical knowledge and physical exam skills

-Provide efficient quality care in a hospitalist setting

-Gain a comprehensive understanding of Alaska Native and Oglala Sioux health issues

-Learn how to gain trust and acceptance by the local population

-Incorporate oneself into the local culture and attend cultural events

-Familiarize oneself to the structural violence that undermines health which leads to poorer health outcomes.

Appointment Year:

The academic year of this fellowship will be from July 1st-June 30th.

Scholarly Activities

Fellows will be expected to produce a scholarly project at the end of their second year as well as present their scholarly project at a local, national, or international conference. Each fellow will have a mentor during their second year of the fellowship that will assist the fellow on his/her scholarly project. Scholarly projects can include an array of work such as implementation and clinical trials research, health systems strengthening projects, and development of medical education curriculum.

Eligibility and Selection

Eligible applicants for this fellowship must have graduated from an ACGME accredited Internal Medicine Residency Program and must be either board certified or board eligible. Applicants also must be a permanent resident of the United States.

Recruitment/Application Process

Recruitment will begin in July prior to the following academic year. Please submit applications by 1/13/2023.