

Abstract:

Facilitators and Barriers to Family Medicine Resident Engagement in Global Health: A Secondary Data Analysis of a CERA Study

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Background

Interest in global health has been increasing over the years. Many family medicine residency programs have been incorporating abroad training opportunities for their residents. An analysis was done to identify facilitators and barriers to resident engagement in global health.

Methods

A secondary data analysis of a cross-sectional, national family medicine residency program director survey was conducted (CERA Survey PD-6). Data were obtained from the Council of Academic Family Medicine Educational Research Alliance (CAFM) data clearinghouse. The sampling frame for the survey was all ACGME accredited US family medicine residency program directors as identified by the Association of Family Medicine Residency Directors (AFMRD). This project was approved by the American Academy of Family Physicians Institutional Review Board.

Results

The overall response rate for the survey was 60.62% (274/452), and a total of n=257 (56.9%) answered questions related to global health. Seventy four percent of respondents indicated their program offered global health experiences. No significant differences were detected between university-affiliated and community-based programs in regards to the principle goal of the program in offering a global health experience. Both identified preparing physicians to practice underserved medicine and teaching community medicine or public health as primary goals. Resident engagement in global health activities was significantly correlated with faculty engagement in global health activities ($r=.52$, $p<.01$). The most common type of preparation residents received prior to going abroad was individual mentoring. Funding and time restraints were identified as primary barriers to implementing global health programs.

Conclusions

For family medicine residency programs, resident engagement in global health activities is correlated with faculty engagement in global health activities. Further work should examine whether this correlation leads to more ethical collaboration in global health practices as increasing numbers of residents engage in global health.