What exactly is global health? Do we say third world? Or Global South? Who defines the problems? Solutions? How do we know a solution is working? How do we address timely care with inadequate supply chains? Where should people access care? Who should deliver it? Why would I go to the hospital if I trust my local healer? What’s so bad about volunteering in a clinic if I want to help? Growing populations with disparate cultural norms in resource-limited environments pose unique challenges. We will address as many of these questions as we can with the support of documentary, political comedy, scientific papers, and other readings. You’ll have a dash of theory, a dose of friendly biostatistics/epidemiology, and many real examples.

The educational objectives will remain the same as below, but the topics discussed in weeks 3 and 4 will be adapted to the interests voiced by your classmates. Topics/applications within medicine (interest polled in week 2) may include environmental health, women’s health, infectious disease, technology dependent medicine (e.g. radiology, surgery), preventive medicine, oncology, etc. This is also an opportunity to discuss careers, research, barriers in the field, and your interests in and beyond medical school.

Instructor

Sisira Gorthala, MD, MSc
sisira.gorthala@stonybrookmedicine.edu

Educational Objectives:

At the conclusion of this selective you will have the ability to do the following:

1. Define basic terminology and themes
2. Discuss ethical challenges
3. Name key issues and solutions
4. Identify challenges to implementation and identification of problems/solutions

Last updated on: 6/8/2021
Sessions:

**WEEK 1 WHAT IS GLOBAL HEALTH?**
- Major Players: WHO, private foundations (Gates), NGOs (large vs grass-roots)
- Selections from political comedy, *NYTimes, NPR*

**WEEK 2 VOLUNTOURISM & ETHICS OF GLOBAL HEALTH**
- [https://www.instagram.com/nowhitesaviors/?hl=en](https://www.instagram.com/nowhitesaviors/?hl=en)
- Selections from a documentary, *NPR, The Guardian*

**WEEK 3* MATERNAL MORTALITY (POST-PARTUM HEMORRHAGE, PREECLAMPSIA, SEPSIS)**
- **Theory:** Three Delays Model (Thaddeus, 1994)
- **Quantification:** e.g. maternal mortality ratio vs maternal mortality rate
- **Solutions:** essential medicines, prenatal care, early detection methods
- Readings from scientific/medical journals + documentary clips
  - Traditional vs western medicine
  - Use of community health workers
  - Health systems strengthening – supply chain, emergency transport

**WEEK 4* CARDIOVASCULAR DISEASE (MYOCARDIAL INFARCTION, HYPERTENSION, HEART FAILURE)**
- **Theory:** Epidemiologic Transition (Omran, 1971)
  - [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2690264/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2690264/)
- **Quantification:** e.g. NCDs vs deaths due to infectious disease
- **Solutions:** polypill, lab on a chip/rapid tests, point of care ultrasound
- Readings from scientific/medical journals + documentary clips
  - Nurse-driven protocols
  - Health systems strengthening – access to expertise, funding

*Weeks 3 & 4 provide a general outline to be adapted to topics of interest assessed in Week 2. Relevant theory/solutions will be discussed as well as relevant epidemiology, because you can only solve what you can measure and only if you can measure accurately.*

Requirements and Outline:

To complete the selective, a student must:
1. Class attendance with exuberant and willing participation
2. Be prepared for discussion having viewed assigned media and completed readings
3. Submit and bring to class a short outline of discussion points and examples (bulleted, not an essay) – to serve as a reading guide

**Class Size**
Minimum 6 Maximum 12

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