

Newsletter – May 2015

Friday, 22nd May, 2015

GREETINGS & NEWS

One year since the Newsletter for SIG: Health Equity has started, it has been great to see increasing interest to the group, which is free for anyone of all healthcare professions to join. For the coming year, we aim to gather more momentum and to stimulate more discussions to share knowledge, ideas and experiences related to our goals as family doctors.

We always welcome contributions from our members, if there is anything of interest that you would like us to include in the next Newsletter or have any interesting materials you would like to share with us and our members, feel free to direct your emails to: SIGhealthequity@wonca.net.



Highlights

- ◆ Greetings & News
- ◆ Food for Thought
 - Gaps in Medical Education
 - Changing trends and sustainability
- ◆ Events, Conferences & Call for Abstracts

Publication of Interest

Health Disparities Training in Residency Program in the United States

Hasnain M, Massengale L, Dykens A, Figueroa E. (*Fam Med* 2014;46(3):186-91.)

BACKGROUND AND OBJECTIVES: Our objective was to review and summarize extant literature on US-based graduate medical education programs to guide the development of a health disparities curriculum.

METHODS: The authors searched Medline using PubMed, Web of Science, and Embase for published literature about US-based graduate medical education programs focusing on training residents to care for underserved and vulnerable populations and to address health disparities. Articles were reviewed and selected per study eligibility criteria and summarized to answer study re-search questions.

RESULTS: Of 302 initially identified articles, 16 (5.4%) articles met study eligibility criteria. A majority, 15 (94%), of reported programs were from primary care; one (6.25%) was from surgery. Eight (50%) programs reported longitudinal training; seven (44%) reported block experiences, while one (6.25%) described a one-time Internet-based module. Four (25%) programs required residents to develop and complete a research project, and six (37.5%) included community-based clinical training. All 16 programs utilized some form of evaluation to assess program impacts.

CONCLUSIONS: There are few published reports of graduate medical education programs in the United States that focus on preparing residents to address health disparities. Reported programs are mostly from primary care disciplines. Programs vary in curricular elements, using a wide variety of training aims, learner competencies, learning activities, and evaluation methods. This review highlights the need for published reports of educational programs aimed at training residents in health disparities and underserved medicine to include the evidence for effectiveness of various training models.

◆ FOOD FOR THOUGHT - Gaps in Medical Education

Education considered one of the most promising way to tackle disparities in health. Training students to be competent in managing vulnerable patients and health equity should start early in their medical curriculum. Efforts have already been done to assess this such as at The Medical School in the University of Michigan¹ and The School of Medicine at The University of New Mexico². However these efforts are only the beginnings of much more need efforts to prepare medical students in addressing health disparities³ for the populations they will come to serve.



Source: <http://www.thelancet.com/series/medical-education>

In the UK, Williamson *et al*⁴ to identify core learning areas which should be incorporated into medical curricular through the use of a Delphi poll consisting of 19 out of 32 universities in throughout the UK. These core areas act to guide those involved with the medical curriculum but also as Husnain *et al*³ points out the increasing evidence will ultimately help clarify necessary training elements to assist medical students to possess the right skills, competencies and experience to address health inequities.

Core intended learning areas for tackling health inequalities, identified by Williamson *et al*⁴.

- ◆ Population concepts of health inequalities
- ◆ The Health System Impact
- ◆ Marginalised Patient Groups
- ◆ Cultural Diversity
- ◆ Ethics of Health Inequalities

1. Williams *et al* (2014). Developing a Professional Pathway in Health Equity to facilitate Curricular Transformation at the University of Michigan Medical School. *Academic Medicine*, Vol. 89(No.8), pp. 1153-1156
 2. Geppert *et al* (2011). Reuniting Public health and Medicine: The University of New Mexico School of Medicine Public Health Certificate. *Am J Prev Med*. Vol. 41(4s3), S214-S219

◆ FOOD FOR THOUGHT - Changing trends and sustainability

Health Equity is a broad concept incorporating many different aspects. Anwar *et al* (2015), assessed use-equity of maternal health care services in Bangladesh. They found increases in utilisation between 1991 and 2011. However, noticed that C-sections are increasing alarmingly, especially amongst wealthier, urban, and more educated women. Many of these are taking place in private facilities which are not only expensive but also unregulated and varying in terms of care quality.

In part, this is linked to changes to social determinants of health have impacted issues of equity. Increasing amount of mothers with education and programmes such as demand-side financing schemes have altered the behavioural phenomenon displayed by mothers. Although there are increases in utilisation of maternal healthcare services such determinants may have also increased preference for C-sections. In light of this, the study has demonstrated the importance of continued monitoring and assessment of the social determinants of health and their impact on equity.

Source: Anwar *et al* (2015). Trends and inequalities in use of Maternal Health Care Services in Bangladesh, 1991-2011. *PLOS ONE*, DOI:10.1371/journal.pone.0120309

Upcoming Events, Conferences & Call for Abstracts



Arizona Health Equity Conference 2015

'Building Bridges: Connecting Communities in Research, Practice, and Policy'

Dates: Thursday, October 29, 2015

Location: Desert Willow Conference Center, 4340 E. Cotton Center Boulevard, Suite 100, Phoenix, AZ 85040

Link: <http://www.azdhs.gov/health-equity-conference/>



"Challenging Health Equity: A call to Action"

6th International in Sickness and in Health Conference

Dates: June, 10-12th, 2015

Location: University of Balearic Islands, Palma de Mallorca

Link: <http://www.icphr.org/news/abstract-submission-opportunity-isih-conference-2015-on-challenging-health-equity-a-call-to-action>