Global Health Advocacy Program in Surgery (GHAPS)

An Update from December 2014

Correctable surgical disease is ubiquitous in the developing world and is now recognized as accounting for at least 11 percent of the world’s global health burden (Debas et al., 2006). The Global Health Advocate Program in Surgery (GHAPS) was initially conceived in 2008 as a program under the OHSU Department of Surgery and is in a unique position to not only contribute to the care of patients across the globe but advance the OHSU Vision 2020 goals of helping us to become an international leader in health and science.

When GHAPS was first created in 2008, its intention was to help OHSU general surgery residents gain experience in international surgery, within the structure of a Masters of Public Health (MPH) program. Now, seven years later, it is time to set our sights farther, add clinical time, build research capacity and take the lead in international surgery.

Surgically correctable disease is progressively being understood as a public health scourge on par with the major infectious diseases of our time (Duda and Hill, 2007). While previously thought to be too expensive, the cost effectiveness of basic surgical services is on the same magnitude as vaccinations, mosquito nets, and clean water – an order of magnitude MORE cost effective than anti-retroviral medications for HIV (Ozgediz and Riviella, 2008). Leaders in international health have described surgery as a critically neglected area of public health and advocate for programs pairing clinical support with long-term infrastructure and research efforts (Farmer and Kim, 2008).

Several American universities have established twinning programs with international institutions, showing that quality of care improves with international partnership – reducing length of stay, improving outcomes and efficiency (Khambaty et al., 2010; Ozgediz et al., 2005). In addition to improving clinical care, these rotations lay a foundation for interested residents to be involved in global health while potentially improving operative training of U.S. and international residents as well as buttressing research capabilities (Debas et al., 2012).

This interest in international work is echoed at OHSU where as many as 80% of the general surgery residents are considering making international surgery some part of their career. While twinning programs have been showed to be effective, the way forward may actually lie with multi-institutional consortiums (Debas et al., 2012). In conjunction with the department of surgery at the University of California San Diego, the University of Capetown, South Africa, and the Sanjay Gahndi Post Graduate Institute of Medical Sciences in Lucknow, India, the OHSU GHAPS proposes a collaboration focused on improving the clinical care for patients globally and advancing research on international surgical problems while improving the educational opportunities for local and international students and residents. We will bring teaching and healing onto the international stage.
Statement of Goals

In five years, the GHAPS program will be part of a consortium of institutions focused on teaching, healing and discovery on an international scale. OHSU will focus its attention on underserved populations while collaborating to improve the educational opportunities for health care learners across borders. OHSU will have a thriving academic interest in international surgical disease, contributing on a national and international stage to the discussion.

1) Teaching:
   a. Global surgery track for residents: A longitudinal track extending through the residency years designed to train future thought leaders in international surgery. This will include a prolonged time abroad focused on clinical and research work as well as a MPH degree.
   b. Short term global surgical experience for residents: Designed for the trainee with an interest in international surgery, but interested in making this part of their career – rather than the major focus. This will consist of short (< 4 week) international experiences that will highlight challenges of resource utilization and cross cultural learning while highlighting the importance of working in collaboration with local surgeons.
   c. Multi-year experience of medical students: As early experience in international health is critical to a long term interest, this begins with a seminar course designed for first and second year medical students. Additionally we will offer a one month elective as a sub-intern at an international institution, supervised by local surgeons and residents.
   d. As learning is multi-directional, we will support our international partners by offering visiting professor and clinical observer positions to allow our international partners to visit and explore health care in the US.

2) Healing
   a. OHSU residents, supported by multi-institutional faculty, will contribute to the surgical care of international patients.
   b. OHSU residents will support the clinical care provided by international partners by providing logistical and clinical support where needed. As clinical need varies from site to site, involvement will depend upon a detailed needs assessment from our partners.

3) Discovery
   a. Residents participating in GHAPS will have an active international research focus.
   b. Residents will actively participate in the national discussion on international health and work towards taking a leadership role as this unique international consortium progresses.
References