

Toward redefining global health training: ethical practices, cultural humility, and community partnership in medical education

Vers une redéfinition de la formation en santé mondiale : pratiques éthiques, humilité culturelle et partenariats communautaires dans l'enseignement médical

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Dear Editor,

We would like to thank Fisher et al, for the valuable insights they provided through their article “Rethinking global health training: making the links between theory and practice.”¹

This article weighs in on the critiques of international medical electives citing concerns including conflict of interests from students due to the differences in personal gain versus benefits for the people served, the creation of non-sustainable services that the local community cannot provide, and learners not being fully prepared causing more harm than good. As this is an ongoing challenge, the authors introduce a redesigned, ethically grounded global health training program called “Making the Links” which emphasizes anti-racism, community partnership, and advocacy that could improve global health training. This program centers around critical self-reflection through focused advocacy work, integrates history and ethical global health principles prior to international travel, and establishes local community placements where students directly engage with underserved populations to prepare for global experiences.

As medical students, we agree with the authors and suggest that this program would be beneficial when integrated into medical schools that have international global experiences because it redefines how future physicians engage with global health. Indeed, similar concerns about mutual benefits in international medical programs have been raised by the Association of Pacific Rim Universities and the Working Group on Ethics Guidelines, emphasizing pre-trip orientations on appropriate behavior and cultural norms.^{2,3} This program emphasizes cultural humility and community partnership, preparing students to work in diverse settings without overstepping clinical boundaries.

In conclusion, adopting ethically grounded, community-focused programs modeled after “Making the Links” can help address persistent challenges in international electives and enable future physicians to engage responsibly and equitably with global communities.

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