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**Project Title:** Samoan, New Zealand and Nepalese medical student perspectives, attitudes and ideas arising from the Global Health Classroom (GHCR)  
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**Introduction:** Global health is becoming widely recognised as an important component of medical education. Consequently, implementation of global health into curricula of medical schools is increasingly valued internationally. While there is a consensus that medical students would like more teaching on global health topics, there are few qualitative studies that look directly at students' perspectives on what global health means to them or why it might be important.

**Aim:** To explore the perspectives of medical students participating in the Global Health Classroom (GHCR) programme in New Zealand, Samoa and Nepal, particularly regarding how interested they are in global health and how important they consider it in their medical education.

**Impact:** It is crucial that medical curricula produce medical practitioners who are competent in understanding patients of different cultures. Knowing medical students' perspectives about global health, particularly the attitudes that may motivate their learning in this area, will inform those involved in designing the medical curriculum at Otago Medical School.

**Method:** Quantitative and qualitative data for this project had already been collected, but not all of this had been fully analysed, prior to this summer studentship. Quantitative data were collected via questionnaires using an online survey platform. Questions with Likert scale responses (Very Interested, Interested, Neutral, Uninterested, Very Uninterested) or binary responses (yes/no) were analysed in Microsoft Excel. Qualitative data were predominantly collected from semi-structured interviews, as well as open-ended questions in the questionnaire. Students from University of Otago, Christchurch (UOC), Dunedin School of Medicine (DSM), Patan Academy of Health Sciences, Nepal (PAHS) and the National University of Samoa (NUS) were invited to complete the questionnaires. The data were thematically analysed using a triangulation approach.

**Results:** Across all four centres, 120/161 (75%) of invited students completed the questionnaire. Students were either in their 4<sup>th</sup> (27%) or 5<sup>th</sup> (73%) year of medical school. Twenty-one interviews were conducted. Of these, eight participants were from UOC, seven from DSM and six from NUS.

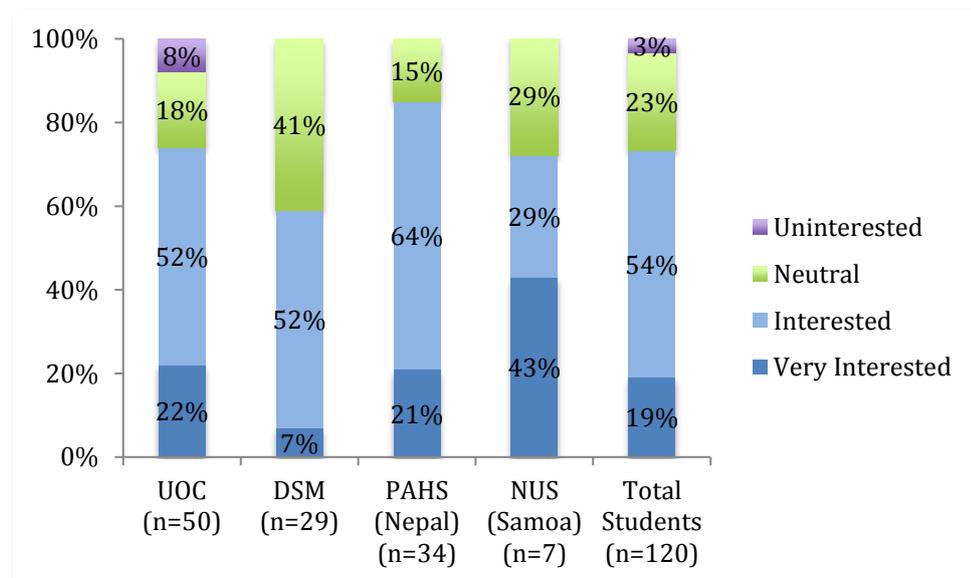


Figure 1: Study Participants responses to ‘How interested are you in learning about global health in your medical curriculum?’ by centre.

When asked about how interested they were in learning about global health, 73% of students answered indicating they were ‘interested’ or ‘very interested’. UOC was the only centre where 4 of the 50 students responded as ‘uninterested’.

From the interviews of students across 3 centres, we were able to explore their motivations as to why they considered global health important. The predominant theme that came across was the perspective of global citizenship, which can be defined as ‘someone who identifies with being part of an emerging world community and whose actions contribute to building this community’s values and practices’.

*the ability to go make a difference in other places is something that I feel we have an obligation to do (UOC 11)*

The desire to help people less fortunate than themselves was a common theme expressed by students. However, it was also apparent that students wanted to be respectful in how they approached helping groups of different cultures, and realised the relevance of knowing aspects of global health before they can act. Several students remarked about their intentions to work overseas in the future, and, therefore, global health education would prepare them to be effective doctors. Yet even if students planned to only practice in their home country, they still expressed their plan to think globally while acting locally in their practice.

*I think it’s also good to know other countries and cultures because you never know who, when you become a doctor, you don’t know who your patient might be. (NUS 20)*

*If you do stay in New Zealand, then it’s valuable to have an understanding of global health because populations are transient and mobile, so you are likely to encounter patients from other places. (DSM 5)*

*I think it’s always important to take into account other people’s culture and perspectives on medicine and whether baseline knowledge of a culture helps you to shape the way you treat that person. (UOC 12)*

**Conclusion:** There is a keen interest from almost all participating medical students to learn global health within the medical curriculum. Their idea of its importance comes from their desire to be doctors who are global citizens working towards more equitable health outcomes across the globe.

Medical schools have responsibility to train doctors who are capable of providing care in a variety of situations and who develop appropriate attitudes, knowledge and skills for interacting with patients from different cultural backgrounds, and within different health systems. It is inevitable that during their careers, wherever they work, today's medical students will treat patients from different cultures.

In summary, with New Zealand becoming increasingly diverse in regards to the cultures within our population, and with many medical students having a global perspective with aspirations to travel to practice overseas, education in global health is recognised as an important part of medical curricula.