Curriculum Creation for an International Palliative Care Elective

Purpose:
There are too few palliative care providers trained for resource limited settings to address the global need. International electives positively affect trainees: increasing clinical skills and cultural competence, influencing career choices, improving resourcefulness. International electives in palliative care fellowships are scarce. Searching “PubMed” for “international palliative care electives” resulted in one relevant paper describing the Global Palliative Education Collaborative (GPEC). There are no guidelines for global health curricula in palliative care. The University of Colorado (CU) palliative care team has a relationship with a home palliative care program in Uganda. The purposes of this project were to assess the interest in an international palliative care elective (IPCE) at CU and build its curriculum.

Objectives:
1. Conduct needs assessment
2. Create IPCE curriculum

Methods:
Survey: The survey assessed current and past fellows’ interest in an IPCE and their comfort level with practicing internationally. Forty-nine fellows and alumni from CU’s traditional and community based fellowships were identified (2017-2023). Thirty eight surveys were sent. One fellow who did not complete the program, the author and those whose emails were unknown were excluded.

Curriculum design: CU’s traditional palliative care fellowship does not provide education on practicing internationally. A curriculum for fellows involving an elective immersive experience abroad is being created. The goal is to develop the knowledge and skills to practice palliative care in resource-limited settings. This curriculum was informed by interviews with a GPEC co-founder, who successfully implemented an international curriculum. It incorporates aspects from general global health resources including “Global Health Training in Graduate Medical Education: A Guidebook” and SUGARPREP (an open source online global health curricula resource).

Results:
Survey:
16 (42%) responses
13 surveys from the traditional CU program and 3 from the community based fellowship.
83% of current fellows expressed interest in an IPCE
67% of alumni would have pursued an IPCE
31% said an IPCE would have influenced their fellowship choice
75% said they were either extremely or somewhat uncomfortable practicing internationally

Curriculum Description:
The curriculum educates fellows for global health generally and specifically for Uganda. Didactic content includes global health ethics, global palliative care including access to opioids and the policies affecting this, the Ugandan culture, healthcare system, and state of palliative care. The curriculum incorporates pre-departure simulation cases. Moral resiliency is addressed and opportunities for debrief are provided. To create a bidirectional mutually beneficial experience the fellows will lecture on topics the Ugandan team requests. Upon their return, fellows will present their experience during palliative care grand rounds and complete a reflective writing exercise.

Conclusions:

As the global demands for palliative care increase, more palliative physicians should be able to practice internationally. There is a need and interest for an IPCE at CU among palliative care fellowship trainees and graduates. The curriculum presented should provide a basis for fellows at CU to work in resource limited settings. Limitations include a small sample size for the survey. Next steps involve implementing this curriculum into the CU palliative care fellowship.