

ISRAEL/PALESTINE  
INTERNATIONAL HEALTH ELECTIVE

JOHN PETER SMITH HOSPITAL  
FAMILY MEDICINE RESIDENCY PROGRAM

**Overview** – The Family Medicine Residency Program at John Peter Smith Hospital encourages and facilitates an interest in international health through its Rural and International Health Track. Residents who elect this track for their education are exposed to international health issues through noon conferences and through their clinical exposure to the large international/refugee patient population in Tarrant County. Attention to international health issues is an important emphasis for the program for a number of reasons:

1. Residents see and care for international patients during their residency.
2. Many family physicians – in urban, suburban, and rural settings – care for patients from other countries in their practices.
3. Many family physicians elect, at some point in their careers, to provide care for patients in international settings.
4. Many family physicians provide “travel medicine” consultations to their patients.
5. The skills and competencies developed during international health experiences are applicable in a wide variety of patient care settings.

Residents who participate in the Rural/International Health track are expected to spend one month during their third year on an international elective. Most residents arrange their own rotations. Many do so at traditional “mission” hospitals or as a part of “short term” mission trips, where the focus is often on acute care delivered in an episodic fashion. They are exposed to various issues in international health (primarily in the developing world) and learn valuable lessons about the provision of medical care in such settings. These experiences can be very beneficial to the residents by improving their fund of knowledge and clinical skills, as well as by introducing them to cross-cultural challenges and the practice of medicine in environments very different from the United States. Often, however, the residents are not exposed to larger issues related to community health, resource availability/allocation, and systems of care in other countries. In addition, some residents have been on rotations that provided insufficient structure to guarantee a quality academic and clinical experience and to insure that future residents can expect appropriate instruction and supervision.

The Israel/Palestine International Health Elective (I/P IHE) attempts to address these potential shortcomings by providing a structured experience, under the direct supervision of a faculty member of the Department of Family Medicine, and in conjunction with family physician educators in two very distinctive, but interconnected communities and cultures.

The Department of Family Medicine at John Peter Smith Hospital is eager to make this unique learning experience available to a small number of medical students each year, in addition to our own residents. We will review applications and select two to four students (3<sup>rd</sup> or 4<sup>th</sup> year preferred) who will join our faculty and residents for the entire one-month rotation. They will participate as full members of the team and be allowed to perform at a level consistent with their level of preparation.

**Rationale** – The Middle East is an area of considerable interest to many Americans for political, historical, and religious reasons. An extended visit to the region makes it possible for the residents and students to learn about the history of the political conflict. The close proximity of two related but very distinct cultures allows for a remarkable immersion into cross-cultural

experiences. In addition, the close proximity of an advanced, developed, national health care system in Israel to the developing, primarily relief-based, NGO health care system in Palestine provides for a unique exposure to a wide spectrum of community needs and responses. Few other international locations provide a setting for exposure to so many new and enriching opportunities within a short period of time.

**Setting and Activities** – The I/P IHE is a four-week rotation based in Beer Sheva, Israel, and Ramallah, Palestine (Occupied Palestinian Territories).

The residents and students spend part of the rotation with the **Department of Family Medicine at the Joyce and Irving Goldman Medical School of Ben Gurion University** in Beer Sheva. Established in 1974, the medical school represents a novel and experimental approach to medical education in a very challenging environment, under extremely adverse economic and psychological conditions. The school has become an international leader in the field of community medicine, receiving special recognition from the World Health Organization and partnering with major academic institutions across the United States and around the world.

The Department of Family Medicine at Ben Gurion is actively engaged in teaching, service, and research. It has responsibility for a four-year residency program, a six-week clerkship in the sixth year of the Goldman School of Medicine (for Israeli students), and a four-week clerkship in the third year of the Medical School for International Health (for international students, operated in collaboration with Columbia University Medical Center). The majority of primary care services in the Negev desert are provided by family physicians affiliated with this department. They provide services in a wide variety of settings to a diverse patient population – in the cities, on the kibbutzim, and among the semi-nomadic Bedouins. The department also operates a palliative care consultation clinic in association with the oncology department.

During this portion of the rotation, the residents and students see patients in the clinics on the main campus of the medical school and on home visits to the Bedouin community with the palliative care team. Through readings, lectures, and conversations, they learn about the Israeli health care system and the prominent role of family medicine in this system.

The residents and students spend part of the rotation in Ramallah with the staff of the **Palestinian Medical Relief Society** and at the **Ramallah Emergency and Trauma Center (RETC)**. The Palestinian Medical Relief Society is a grassroots, community-based, non-profit health organization founded in 1979 by a group of Palestinian doctors and health professionals seeking to supplement the decayed and inadequate health infrastructure caused by years of military occupation. The organization's national health programs emphasize prevention, education, community participation, and empowerment. PMRS seeks to improve the overall physical, mental, and social well-being of all Palestinians. Their quality health services focus on the needs of the most vulnerable members of Palestinian society: women, children, the disabled, and the poor in rural villages, refugee camps, and urban centers. PMRS operates 26 primary care clinics, 8 mobile clinics, numerous emergency clinics, clinical laboratories, school-based clinics, a pharmacy, and a



school of community health. PMRS is recognized internationally as a leading health care provider among the Palestinians.

The *Ramallah Emergency and Trauma Center* is a private facility in Ramallah, across the street from the government hospital (operated by the Ministry of Health of the Palestinian Authority). The center's emergency room is staffed by physicians trained in emergency medicine and cares for patients with a wide variety of medical conditions, many of whom are victims of trauma related to the political conflict. In addition, the hospital has an excellent, board-certified surgeon who does urgent and elective cases on a regular basis.

During this portion of the rotation, the residents and students see patients in PMRS' primary care centers and mobile clinics and in the emergency department at RETC. They also have the opportunity to assist with surgical cases at RETC. Through readings, lectures, and conversations, they learn about the governmental and non-governmental systems of health care delivery in Palestine and about the extreme circumstances faced by communities in the developing world.

**Faculty** – The elective is conducted under the direct supervision of David McRay, MD. Dr. McRay is a graduate of the Northwestern University Medical School in Chicago, IL, and the John Peter Smith Family Medicine Residency. He has traveled to Israel and Palestine on numerous occasions, beginning at the age of 9, and has lived in Jerusalem for extended periods of time on three occasions. He has lectured at the medical school in Beer Sheva, Israel, and has participated in a variety of ways with the work of PMRS and RETC. He is on-site with the residents and students throughout their rotation. Dr. McRay is assisted by Douglas Brown, PhD. Dr. Brown is the hospital ethicist for Barnes-Jewish Hospital in St. Louis, MO. Barnes-Jewish Hospital is the teaching hospital for Washington University School of Medicine. Dr. Brown has traveled extensively in Israel and Palestine with Dr. McRay. He participates with the preparation of the residents and students and is on-site with them during their rotation.

**Logistics** – During their time in Beer Sheva, the residents and students are housed in dormitories on the campus of the medical school or in the homes of international medical students. While in Ramallah, the residents and students have access to a large apartment with individual sleeping quarters and a shared living space and kitchen. Transportation between Beer Sheva and Ramallah is by rented vehicle or by train. Grant funds may be available to assist with the travel costs associated with the elective.

**Safety** – Visitors to Israel and Palestine are often understandably concerned about their safety. While the region certainly has a history of violent outbreaks, international citizens and healthcare providers are rarely in situations where they are at risk. International travel always involves some risk of illness, injury, and/or emotional stress. The risks associated with this elective should not be greater than those encountered by students and residents traveling to and working in the developing regions of Africa and Asia. Every precaution is taken to insure the safety of the residents and students.

## **Goals/Objectives - ACGME Competencies (*in italics*)**

### ***Patient Care***

*Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents:*

- *Must receive training to perform those clinical procedures required for their future practices in the ambulatory and hospital environments*
- *Must receive training that focuses on the core principles of Family Medicine;*
  - *Continuity of Care*
  - *Family-Oriented Comprehensive Care Experience*
  - *Family Medicine Center Experience*
  - *Medical/Surgical Experiences*
  - *Inpatient Experiences*

The I/P IHE provides residents and students with exposure to patient care in a variety of settings – outpatient clinics, mobile clinics, emergency rooms, hospice, and inpatient wards. They see patients with common medical problems as well as those whose illnesses are directly related to the circumstances within which they live – trauma, infection, malnutrition, etc.

### ***Medical Knowledge***

*Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care.*

- *Adult Medicine*
- *Care of Neonates, Infants, Children, and Adolescents*
- *Maternity Care*
- *Gynecology*
- *Care of the Surgical Patient*
- *Musculoskeletal and Sports Medicine*
- *Emergency Care*

The Elective provides the residents and students with multiple opportunities – in both the inpatient and outpatient settings – to advance their fund of knowledge of patient care across the life cycles. They have a special opportunity to participate in the provision of emergency care at the Ramallah Emergency and Trauma Center.

- *Human Behavior and Mental Health*
- *Community Medicine – Residents must receive a structured curriculum in community medicine, including didactic and some experiential components. The curriculum should include:*
  - *assessment of risks for abuse, neglect, and family and community violence;*
  - *reportable communicable disease;*
  - *population epidemiology, and the interpretation of public health statistical information;*

- *environmental illness and injury;*
- *school health;*
- *disease prevention through immunization strategies;*
- *disaster responsiveness;*
- *community-based disease screening, prevention, health promotion; and,*
- *factors associated with differential health status among sub-populations, including racial, geographic, or socioeconomic health disparities, and the role of family physicians in reducing such gaps.*
- *The program should also require that each resident participate in clinical experiences in community medicine including:*
  - *experience in using community resources appropriately for individual patients who have unmet medical or social support needs;*
  - *structured interaction with the public health system;*
  - *occupational medicine including disability determination, employee health and job-related illness and injury;*
  - *experience in community health assessment;*
  - *experience in developing programs to address community health priorities; and,*
  - *community-based health education of children and adults.*

The Elective provides the residents and students with a structured exposure to community health in two related, yet quite distinct, settings. They participate in clinical experiences in the Occupied Palestinian Territories (OPT) working with family physicians and other primary health care providers who are addressing the health care needs of at-risk, underserved communities through the Palestinian Medical Relief Society and its multiple programs. Through participation in lectures, mobile health clinics, patient education settings, reading assignments, and interaction with local health care professionals and agencies, the residents and students learn about community health assessment, the appropriate use of community resources to meet identified needs, how specific programs have been developed and sustained to meet those needs, and health education in a community setting.

The residents and students also participate in clinical experiences through the Department of Family Medicine at Ben Gurion University in Beer Sheva, Israel. BGU is located in the Negev Desert, which comprises over 60% of the land of Israel and is where in excess of 500,000 of its citizens live. The inhabitants of the Negev represent one of the most unusual ethnic mixtures in the world and include immigrants from North Africa, Ethiopia, India, Europe, North and South America, the Republics of the former Soviet Union, and Israeli-born Bedouin Arabs and Jews.

Residents and students participating in this elective have the opportunity to investigate and participate in the remarkable community-based health care system established in the Negev, learning about health system structures, utilization of community resources, community health assessment, and community-based education.

- *Care of the Skin*
- *Diagnostic Imaging and Nuclear Medicine*
- *Management of Health Systems*
  - *The leadership curriculum should include training to provide leadership for a clinical practice, a hospital medical staff, professional organizations, and community leadership skills to advocate for the public health*

The Elective allows the residents and students to interact with skilled, experienced public health advocates who have effectively addressed a wide range of community health needs in the Negev Desert area of Israel (in both the Israeli and Bedouin populations) and in the “West Bank” area of the OPT.

### ***Practice-based Learning and Improvement***

*Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. Residents are expected to develop skills and habits to be able to meet the following goals:*

- *identify strengths, deficiencies, and limits in one’s knowledge and expertise;*
- *set learning and improvement goals;*
- *identify and perform appropriate learning activities;*
- *systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement;*
- *incorporate formative evaluation feedback into daily practice;*
- *locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems;*
- *use information technology to optimize learning; and,*
- *participate in the education of patients, families, students, residents and other health professionals.*

### ***Interpersonal and Communication Skills***

*Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals. Residents are expected to:*

- *communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds;*
- *communicate effectively with physicians, other health professionals, and health related agencies;*
- *work effectively as a member or leader of a health care team or other professional group;*
- *act in a consultative role to other physicians and health professionals; and,*
- *maintain comprehensive, timely, and legible medical records, if applicable.*

The Elective allows the residents and students the opportunity to enhance their communication skills across cultural/ethnic/linguistic/socioeconomic barriers in relationships with patients, families, and other health care providers. They participate in clinical care in very diverse settings – urban Jewish Israeli, rural Bedouin (Arab Israeli), urban Palestinian, and rural Palestinian. The learners are challenged to work as a part of a team composed of JPS residents and faculty, visiting medical students, and Israeli/Palestinian physicians/nurses/health educators/etc. They have the opportunity to serve as both learners and teachers in a variety of settings. Although English is widely spoken in both Israel and Palestine, the residents and students will encounter many patients who do not speak English or whose English is quite limited. Thus, the learners will gain experience in cross-language communication and working with interpreters.

## **Professionalism**

*Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate:*

- *compassion, integrity, and respect for others;*
- *responsiveness to patient needs that supersedes self-interest;*
- *respect for patient privacy and autonomy;*
- *accountability to patients, society, and the profession; and,*
- *sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.*

The Elective affords the residents and students a continuous and challenging opportunity to develop professionally and personally. They are expected to think carefully and in new ways about people groups, political situations, historical contexts, and cultural interactions, demonstrating respect and compassion in all settings. They are forced to consider carefully their understanding of fairness and justice across the complex political spectrum and with respect to the delivery of health care in difficult circumstances. Their ability to respond sensitively and with integrity is repeatedly tested. They complete structured didactic exercises designed to strengthen/test their ability to identify and discuss the core ethical issues in international health embedded in their clinical experiences in Israel and the OPT.

## **Systems-based Practice**

*Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to:*

- *work effectively in various health care delivery settings and systems relevant to their clinical specialty;*
- *coordinate patient care within the health care system relevant to their clinical specialty;*
- *incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate;*
- *advocate for quality patient care and optimal patient care systems;*
- *work in interprofessional teams to enhance patient safety and improve patient care quality;*
- *participate in identifying system errors and implementing potential systems solutions;*  
*and*
- *be taught to develop the skills necessary for career-long professional learning sufficient to maintain certification in the specialty*

The Elective introduces the residents and students to complex, new systems of health care in settings with notable distinctions from those found in Tarrant County, Texas, or most other US settings. They see firsthand how different communities and cultures have responded to the diverse and challenging needs of their citizens and the impact that resources, both local and international, have had on the development of these systems and the delivery of care.

In Israel, the residents and students have the opportunity to learn about a national healthcare system that effectively provides primary and tertiary care to all its citizens. They see a regional primary-care based system that effectively addresses the needs of a large, diverse population in a challenging environment. They participate in a rural outreach program that provides care to the Bedouin community, a semi-nomadic desert people group. They witness the central leadership role family physicians play in each of these settings. Through lectures, reading, and individual conversations, they participate in considerations of the cost of healthcare in this system and learn how healthcare professionals advocate for quality care on an individual and system-wide basis.

In the OPT, the residents and students have the opportunity to learn about two major systems of care – the public system provided by the Ministry of Health of the Palestinian Authority and the private, non-profit system operated by the Palestinian Medical Relief Society, a non-government organization (NGO). Through lectures, readings, and individual conversations, they are exposed to a system of care developed by a small group of individuals in response to an urgent need. The relief society now provides care for over a million individuals through community clinics, mobile clinics, community-based rehabilitation, clinical laboratories, health education, emergency services, ophthalmology program, counseling centers, youth centers, and a school of community health. The residents and students have the opportunity to participate with the physicians and other members of the relief society's staff in a variety of settings, in both direct patient care and observation.

### ***Contact Information***

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