

ESTABLISHMENT OF THE *GLOBAL HEALTH EMERGENCY MEDICINE* ORGANIZATION AT THE UNIVERSITY OF TORONTO TO FACILITATE ACADEMIC CAREERS IN GLOBAL HEALTH FOR FACULTY AND RESIDENTS

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Description of the Innovation

Demand for training in global health emergency medicine (EM) practice and education across Canada is high and increasing. Unfortunately, for faculty with advanced global health EM training, EM departments have not

traditionally recognized global health as an academic niche warranting support. To address these unmet needs, expert faculty at the University of Toronto (UT) established the Global Health Emergency Medicine (GHEM) organization to provide both quality training opportunities for residents and a collaborative academic home for faculty in the field of global health EM.

The setting of innovation: University of Toronto, Division of Emergency Medicine

Approximately 40 EM faculty affiliated with the Department of Family and Community Medicine and the Department of Medicine working in six academic and four community teaching hospitals around Toronto are actively engaged in GHEM projects as well as 22 residents from both the FRCP and CCFP-EM training programs.

The resources required to make this happen: Six faculty with training and experience in global health EM founded GHEM in 2009 at a UT teaching hospital, supported by the leadership of the ED chief and head of the Divisions of EM. This initial critical mass of faculty formed a governing body and was granted seed funding from the affiliated hospital practice plan. A five-year strategic academic plan was developed. Since then, operational and project-specific funding has come from a variety of sources, including practice plan contributions, departmental funding, grants and in-kind donations. We have a full-time Program Manager who works with the GHEM executive (co-innovators listed above) on a variety of GHEM projects and initiatives.

GHEM has flourished at UT with growing membership and increasing academic outputs. Five governing members and 10 general faculty members currently lead 18 projects engaging over 60 faculty and residents. Formal partnerships have been developed with institutions in Ethiopia, Congo and Malawi, supported by five granting agencies. Fifteen publications have been authored to date with multiple additional manuscripts currently in review. Twenty-two FRCP and CCFP-EM residents have been mentored within three global health pillars: clinical practice, research and education. Finally, GHEM's activities have become a leading recruitment tool for both EM postgraduate training programs and the EM department.

What lessons have you learned in implementing your local innovation: In establishing GHEM at UT we have learned several valuable lessons, including the importance of champions in leadership positions at the hospital, departmental and divisional levels. These champions were invaluable in the early stages of establishing the organization with respect to funding, hiring and retention of faculty with expertise in global health EM, and the creation of physical space for the organization to function.

In the ensuing eight years we have learned the tremendous importance of cohesion and collaboration among the executive, of seeking expert advisors during strategic planning and execution, and of developing a consistent and compelling narrative for contributors and donors based on the GHEM mission and vision.

The initiation and structure of GHEM has allowed numerous benefits for individual faculty, trainees and the university. First, the unique structure of GHEM has allowed faculty members with relevant interest, training and expertise to develop and maintain a career in global health EM with formal peer and departmental support. Secondly, the concentration of experts in global health EM and the creation of the GHEM community has channeled myriad individual global health interests into several collaborative and successful projects at the UT Divisions of EM. The largest of these projects, the Toronto Addis Ababa Academic Collaboration in Emergency Medicine (TAAAC-EM), has been particularly valuable for city-wide collaboration and GHEM community building. Third, GHEM faculty have been able to provide unique and highly structured elective training opportunities for UT EM trainees in global health EM.¹ Finally, the GHEM organization has allowed Canadian involvement in key endeavors to reach the worlds' vulnerable and under-resourced. While this impact is difficult to quantify, GHEM members have been instrumental in bringing local EM training leadership to low-resource settings^{2,3,7,8,11,17}, have participated in various emergency missions in refugee camps and conflict zones^{4-6,8}, have supported Canadian

NGOs in developing key research findings relevant to health systems strengthening in developing countries^{9-15,17,18}, and have identified knowledge gaps in global health among Canadian EM physicians¹⁶.

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Suggested Readings

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BOTTOM LINE:

GHEM is the first supported academic group in global health EM within an EM Division or Department in Canada. The productivity from this collaborative framework has established global health EM at UT as a relevant and sustainable academic career. GHEM can serve as a model for other faculty and institutions looking to move global health EM practice from the realm of 'hobby' to recognized academic endeavor, with proven academic benefits conferring to faculty, trainees and the institution.