New Global Health Fellowship Links Jefferson and Sierra Leone

Sierra Leone, located in West Africa, is still recovering from the devastating repercussions of a civil war that ended in 2002. It is one of the poorest countries in the world, and ranks near the very bottom of the United Nations Development Index. The health care system is fragile at best, and Sierra Leone's population health statistics are grim. Average life expectancy at birth is 39 years for males and 42 for females; one in 8 women die from giving birth; and the under-five mortality rate is the worst in the world. The country's total expenditure on health is only 3.5% of GDP.

For several years the Department of Emergency Medicine (DEM) at Thomas Jefferson University & Hospitals has been building collaborations with physicians and institutions worldwide. Emergency Medicine lends itself to such global work due to its flexible shift schedules, a clinical foundation that is broad, and an understanding of the issues that surround the hospital and healthcare system as a whole. As part of the department's long-term growth strategy, we felt that it was important to develop international projects that faculty, residents and other staff could participate in. However, our belief is that sustainable development cannot be achieved in isolation from work in only one specialty or discipline. Sustainable development requires improvements in local governing structures, in financing, and in education. Hence, we decided to focus on the broader field of global health. The goal of all our department's global health initiatives is broad-based, collaborative development with an emphasis on education and long-term goals.

We developed ties with Global Action Foundation (GAF), a US-based non-governmental organization with a local partner, Wellbody, in Sierra Leone. Dr. Bailor Barrie, a Sierra Leonean physician and co-founder of GAF, visited Jefferson in April 2010; in turn, we visited Sierra Leone in October 2010. With assistance from Dr. Barrie, we conducted a preliminary survey of the local healthcare infrastructure and capacity. We also spent time teaching ultrasound and other clinical skills at a clinic he established in the Kono District (the setting for the movie Blood Diamond). Originally founded to serve amputee victims from the war, it now serves as a general clinic and urgent care center for the region. One of our most alarming observations of the health care system was the absence of an adequate healthcare workforce. The physician shortage is severe, with only 1 doctor per 50,000 people. If you were to imagine this statistic applied to Philadelphia, there would only be 29 physicians to serve the city's entire population.

Our growing work in Sierra Leone provided the impetus for establishing the first post-residency Global Health Fellowship program for physicians in Philadelphia, beginning July 2011. The program is a joint effort between the Department of Emergency Medicine and the School of Population Health. In addition to pursuing a Master of Public Health (MPH) degree, the Fellow will be placed in Sierra Leone for field training, where s/he will conduct ethnographic public health investigations within the Kono District. Additionally, DEM faculty will seek to work with local hospitals and the medical school in Sierra Leone to improve the quality of healthcare and mechanisms for healthcare delivery in Sierra Leone. The goal of the fellowship is to supplement the existing broad clinical skill-set of emergency medicine physicians with a knowledge and understanding of key issues and challenges in global health development. The program will focus on an interdisciplinary and systems-based approach to healthcare development that includes consideration of economic, political, cultural and social issues, providing the Fellow with a broad set of skills that can be used in the future to work in the field at a macro or micro level.

One cannot ignore the clear benefits of such a project and training program to both the Jefferson community and to the people of Sierra Leone. Locally at Jefferson, the presence of a Global Health Fellowship increases collaboration between departments (DEM and the Dept. of Family & Community Medicine's Center for Refugee Health) and schools (the Medical College and the School of Population Health), while also providing a strong academic impetus to advance the development of the field of global health. For Sierra Leone, our program will focus on developing local capacity, while providing guidance for improving local systems. No longer will it be about patients waiting six months for the next “Western” doctor to show up in town, but about increasing their confidence in their own healthcare providers and providing improved care to all patients.

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REFERENCES