

# Thailand International Elective (TIE): A Model Curriculum in International Health And Cross-Cultural Experience

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## INTRODUCTION

Physician assistants (PAs) are becoming well known on a global scale, with the creation in the last few years of new programs in England, Canada, the Netherlands, and elsewhere. Additionally, according to a survey by the PAEA International Affairs Committee (IAC), 50 countries have been identified where PA students had completed clinical rotations.<sup>1</sup> It is important that students understand international health care issues, not only to work internationally, but also to effectively deal with an increasing number of foreign patients in US practice settings. The IAC survey also indicated that 68% of PA program respondents reported that they monitor and approve their international rotations similarly to their programs' clinical rotations within the United States. The remaining 32% of programs, however, which showed a more *laissez faire* attitude, are a cause for concern, and their students could be placed at substantial risk if accreditation standards for clinical sites are not followed regarding clinical placements.

After 8 years of experience placing PA students internationally for clinical experiences with variable results (based on student and preceptor rotation evaluations), the University of Utah Physician Assistant Program (UPAP) embarked on a comprehensive approach to preparing individuals to work internationally through its Thailand International Elective (TIE). The

following precepts were considered while developing TIE:

- To offer a professionally prepared curriculum that provides an exemplary international health learning experience
- To contribute constructively to the debate over what should constitute a clinician's international health curriculum
- To provide an opportunity for other PA programs to partner in new methods of educating the next generation of international PAs
- To offer an international health curriculum that can be standardized, evaluated, validated, and improved as time goes by

In November 2003 Thailand was chosen as the site for our new paradigm regarding the preparation of PAs to work internationally or to care for the ever-increasing international patient population in the United States. Several factors were considered in this decision:

- Travel to the new international site should be affordable.
- Travel and security risks should be minimal.
- Advanced expatriate (Western-style) medical care should be available in case of student illness or injury.

### Feature Editor's Note:

PA programs around the country are developing creative international opportunities for their students. In this edition, faculty involved with the University of Utah's innovative program in Thailand describe how the TIE elective integrates tropical medicine into the PA program. Other PA programs interested in submitting articles describing their international projects are encouraged to contact the feature editor.

— Christine Legler PA-C, DHSc

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The Global Perspectives feature focuses on global issues relevant to PA education. Appropriate topic areas include international clinical student placements, development of PA-type programs in other countries, global or immigrant health care curriculum issues, and first person reports of international PA educational activities. Articles are typically solicited by the feature editor from individuals with direct experience in international activities. Others wishing to submit manuscripts are encouraged to obtain prior approval from the Global Perspectives feature editor. Editorials will not be accepted. Authors desiring to contribute to Global Perspectives should forward submissions to:

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- Room and board should be affordable.
- National sanitation and hygiene practices should not overly jeopardize students' health.
- Medical-legal liabilities should not prohibit American practitioners from taking part in medical training activities (when such activities are properly approved).
- English-speaking lecturers should be available.
- Professionally supervised international health education should be readily available.
- UPAP personnel should be available to develop the program and mentor the activities of participants.

Thailand met all of these criteria. TIE accepts the invitation of government agencies, universities, foundations, and nongovernmental organizations (NGOs) to visit health care programs and receive lectures in topics relevant to international health from experts in their field. Updating of topics, current issues, and discussions are ongoing and included in lecture activities. Preparatory syllabus material is read for each lecture topic; the syllabus covers introductory material for each topic. This preparatory study means the TIE course requires a commitment from participants to engage in after-hours study, either daily (in the evenings) or before the course commences. TIE is guided by the global objectives delineated in List 1.

## TIE CURRICULUM

### Week 1

The scope of activities for the first week of TIE covers social and environmental problems, priorities, and programs in global health. The

### List 1. TIE Global Objectives

- Help participants attain a clear view of global health, based on an introduction to a broad range of topics in international health.
- Increase knowledge, skills, motivation, and advocacy for change in global health: opportunities are provided for in-depth exchange of cross-cultural experiences with clinicians and health professionals in Thailand.
- Increase awareness of the need for cooperation between the health and other professions globally, so that partnerships can be built. These partnerships should be based on equity, transparency, and accountability.
- Learn methods to improve communication and networking among various individuals, cross-cultural groups, NGOs, and government institutions in an international setting.
- Increase awareness of the importance of initiatives on behalf of unheard peoples to improve health and promote sustainable community development, including traditional and indigenous approaches.

objective is for the participants to learn the basics of cross-cultural and global health care. Activities during this introductory week include both didactic lectures and field experiences. Lectures on topics such as the public health system in Thailand and primary health care strategies are coupled with visits to many rural and urban primary health care facilities. Lectures on malnutrition and micronutrient deficiencies are paired with a field visit to a health promotion center that is involved with nutritional remediation. And lectures from Thai Buddhist monks on the Buddhist patient's perspective and traditional medicine are complemented by visits to the Department of Thai Traditional and Alternative Medicine and the Chinese Traditional Medicine Hospital. Phytotherapy, acupuncture, Thai massage, and other traditional therapies are discussed, demonstrated, and experienced by TIE students. This first week, students also hear from experts about emerging and re-emerging vector-borne diseases, including dengue fever, avian flu, and malaria. A field visit to the Vector-borne Diseases Prevention

and Control Center brings a sense of reality and urgency to these issues in the context of the Thai health care system. Lectures in environmental and occupational health round out the first week of study, along with visits to both large factories and family-operated home businesses.

### Week 2

The second week of TIE expands on topics introduced during the first week and includes lectures and field experiences on traditional/alternative medical practice and diseases that present as fever in the tropics. The objective is to increase the knowledge of traditional and alternative medicine and diseases that present with fever that are emerging global challenges. Lectures on the current malarial situation in Thailand and the Northern Thailand control program are coupled with extensive practical malaria blood slide diagnosis in the lab. The control of dengue fever is presented along with practical field operations experience involving vector control strategies. Dealing with HIV/AIDS is introduced during this week with lectures and a field visit to an evening community-based



PA students at the Chest Disease Institute with SARS and bird flu expert Dr. Charoen Chuchottaworn

HIV/AIDS control program. Visiting an orphanage for those children losing parents to this disease is both heartwrenching and heartwarming. The AIDS Hospice unit is a daylong visit to a Buddhist temple—Wat Pra Bhat Nam Put—with patients that have end-stage disease. Beyond the multiple diagnoses—including Kaposi's sarcoma, cytomegalovirus, tuberculosis, scrofula, and pneumocystis jirovecii pneumonia—are the many compelling stories of the patients who share with the TIE participants how they came to be at this place of peace and tranquility.

### Week 3

Week 3 introduces participants to border health, care of displaced persons, and managing complex emergencies in Asia. The objective is to learn from programs caring for refugees, tribal cross-border groups, and the host country's impacted populations, as well as from migrant clinics. The experience underscores the reality of refugee care in Mae Sot on the border between Thailand and

Burma in the north of the country. Field visits to various locations in northern Thailand reinforce the value of primary health care and health promotion strategies utilized by the Ministry of Public Health. Health education and outreach activities regarding HIV/AIDS by various NGOs to those in the sex worker trade are explored, and participants interview prostitutes to gain an understanding of this complex culture and growing public health problem.

### Week 4

Week 4 introduces participants to selected diseases of the tropics, including tuberculosis, avian flu, and HIV/AIDS. The objective is to increase knowledge of emerging and re-emerging diseases in the tropics and in the community-based programs employed to combat them. At the Chest Disease Institute the participants see complex patients with concomitant diseases. At Wat Songthamkanyani, the only female monk in Thailand discusses women,

Buddhism, and health. The study of the effects of poverty on health are brought to life in the Klong Toey slum, Bangkok's largest pocket of poverty, where participants work with the Duang Prateep Foundation, an NGO serving the needs of those who reside there. Faculty of Bangkok's Leprosy Hospital, where participants also tour a 3,000-person leper colony, provide education in tropical dermatology and an introduction to leprosy.

### Portable Topics

This unique feature of TIE addresses the many aspects of health maintenance in the tropics. Since large amounts of time are spent traveling around the country in passenger vans, time spent transporting participants from place to place is put to good use with lectures on various issues one might encounter during a remote site deployment. These include

- Personal health maintenance
- Potable water treatment
- Waste disposal
- Vector control
- The clinician's medical cabinet
- Itchy skin lesions in the tropics
- Venomous bites and stings

The relaxed atmosphere in the vans lends itself to lively, interactive sessions covering a wide variety of topics.

### TIE Requirements

The academic rigor of the TIE curriculum, coupled with the inherent risk of overseas travel, dictate that all TIE participants comply with the tasks delineated in List 2.



PA students observe a patient with leprosy at the Leprosy Hospital in Bangkok with Dr. Kowit Kampirpap

island with white sand beaches and inexpensive beachside bungalows.

### SUMMARY INFORMATION

A Web site for TIE ([www.tie-thailand.net](http://www.tie-thailand.net)) is maintained and updated regularly and contains useful information on the course. A photo gallery of prior trips provides a good pictorial review of what to expect. Graduate PAs and MDs have also attended the rotation and have received 48 credits of CME for their involvement. Currently TIE is conducting two trips per year—in March/April and June/July. This timing allows PA students to use their elective time near the end of their clinical year of training. Given that the bulk of their education is completed, they are much more able to benefit from the TIE experience and represent their profession well as clinicians and ambassadors. Students from other health professions programs are welcome to join this unique, comprehensive learning

Additional academic requirements include:

1. **Pre-test** — completed immediately upon acceptance to the TIE course.
2. **Class Paper** — one page, to be completed and received by due date before travel to Thailand.
3. **Daily journal** — upon arrival in Thailand, students must keep a private daily journal that can be verified by TIE.
4. **Class presentation** — students must give an approved 25-minute presentation on the last day of class.
5. **Post-test** — completed two weeks after returning home from TIE.

### Cross-Cultural Excursions

The TIE coursework takes place on the weekdays while in Thailand. During the weekends various excursions are arranged to enhance the cross-cultural experience.

Destinations include Chiang Mai—Thailand's second largest city, in the north; Pattaya—a beautiful, thriving beach town 2 hours south of Bangkok; and Koh Samet—a popular

### List 2. Participant Requirements

- Complete the TIE Application Form and send to TIE by e-mail 6 weeks before course begins.
- Receive e-mail confirmation of acceptance to course from TIE coordinator.
- Read the TIE Orientation Manual before travel to Thailand.
- Send signed TIE Release Form to UPAP by express surface mail, to be received by due date.
- Send signed TIE Medical Clearance to UPAP by express surface mail, to be received by due date.
- Pay the administration fee by due date.
- Have airline or travel agent itinerary e-mailed to the TIE coordinator.
- Complete the TIE Workbook before travel to Thailand.
- Attend Orientation I session before travel to Thailand.
- Attend Orientation II session, first day of TIE, in Thailand.
- Read syllabus material before lectures.
- Attend all lectures and actively participate in class discussions and class work.
- Complete all academic requirements and learning and performance objectives.
- Complete the TIE Class Evaluation Form on last day of class.

experience. Ideally a minimum of 8 participants to a maximum of 16 works best, considering in-country travel and accommodations.

Additionally, a mix of health professions students (eg, PA, public health, medical, doctor of pharmacology students) enhances the experience for all. For the future, additional hands-on experiences are being arranged for clinical students—new sites will

include the emergency room of Rajavithi Hospital, the largest (1,000 beds) Ministry of Public Health Hospital in Bangkok.

Participant evaluations have been universally positive and our networking and partnerships with the Ministry of Public Health, various universities, and numerous NGOs have allowed us to establish a sustainable offering of substance to our stu-

dents and others interested in international health and health care.

### REFERENCES

1. Pedersen KJ, Hooker RS, Legler CF, Kortyna DE, Harbert KR, Eisenhauer WA, Baggett A. A report on the findings of the Ad Hoc Committee on International PA Education. *Perspective on Physician Assistant Education*. 2003;14(4):220-232.