UNC School of Medicine
Global Health Elective
Student Feedback Form

Information that you provide will be made available for future UNC students to use in planning educational electives in global health and international medicine. It must be completed in order to receive elective credit for your rotation OR funding through the Office of International Activities (Becton-Tannenbaum, Perkins Burke, Medical Alumni Loyalty Fund Global Enrichment Fellowships and International Health Fellowships). Please complete and return to the Office of International Activities (shay.slisko@med.unc.edu or Martha.carlough@med.unc.edu)

I. STUDENT INFORMATION
A. Student Name: Elizabeth Stephenson
B. Email: elizabeth.stephenson@med.unc.edu C. Phone/cell number (optional): ____________
D. Graduating year from UNC Medical School: 2018
E. Check when you took this elective:
   X Summer between 1st and 2nd year X 3rd year X 4th year ___ Other: ________________________________
F. What UNC Department and course did you register for this elective through? FFMA (UNC SOM)
G. Faculty advisor: Narges Farahi
H. Dates that you completed the elective: 7/20/2015 Year: 2015
I. From the list below, select the one choice that best describes your motivation for taking this elective:
   X interest in global health ___ desire to get experience for CV/job opportunities
   ___ interest in travel ___ family of origin reasons
   ___ interest in helping others ___ other: ________________________________
   ___ desire to learn/improve Spanish skills

J. What was the major emphasis of this elective:
   ___ medical Spanish and Latino health
   ___ global health research
   X clinical care in an international setting
   ___ community health/development
   ___ Other: ________________________________________________________________________________

K. Was this a X group experience or ___ individual experience?

II. ELECTIVE PROGRAM INFORMATION
A. Country where you completed the elective: Honduras
B. City: El Corpus
C. Name of Program or Hospital where you worked: Honduran Health Alliance
D. Website address (if available): www.med.unc.edu/hha
E. From the list below, select the choice that best describes how you first learned about this program:
   ___ referral from a friend/personal contact ___ web site information from: __________________________
   X another student who went there ___ other: ___________________________________________________________________

F. Name of program person you worked with and contact information: Juana Lainez, 9914-4131

G. Costs
   Tuition: ____________ Roundtrip travel: ____________
   Other expenses you incurred, including vaccinations, supplies (please list type and amount):
   $500 for travel expenses and host family expenses
   _______________________________________________________________________________________
   _______________________________________________________________________________________
   _______________________________________________________________________________________

H. Did this program/hospital have a religious affiliation? ___ YES ___ NO
III. GLOBAL HEALTH EXPERIENCE CHARACTERISTICS

A. List three educational outcomes you achieved with this elective
1. Better understanding of global health projects in Central America
2. Increased proficiency in Spanish and use of medical Spanish
3. Heightened knowledge of impact of cervical cancer and other women’s health issues in Honduras

B. Was the experience a good use of time for you during medical school? ___ YES ___ NO
C. Did you have adequate clinical supervision? ___ YES ___ NO
D. Did you have adequate opportunities for hands-on clinical work? ___ YES ___ NO
E. Would you recommend this elective to other medical students? ___ YES ___ NO

If YES, Why? Excellent learning opportunity, hands-on experience, direct interaction and helping others, Spanish immersion

If NO, Why?

F. Was the program responsive to your needs? ___ YES ___ NO

G. Did you have appropriate arrangements for housing, food and safety/health issues? ___ YES ___ NO
   Please describe: Host families and some hotels when in other cities

H. Did you have adequate information about what to expect in advance? ___ YES ___ NO
   What would have been helpful:

I. Did you feel that you had adequate support from UNC in setting up this opportunity? ___ YES ___ NO

J. Please include any additional information or feedback you would like to include for students engaging in future international rotations:
Highly recommend this elective. HHA is one of the highlights, if not the highlight, of my first year of medical school. HHA is an excellent way to work with a team in an education setting abroad, have hands-on clinical experience that is otherwise unavailable to MS1 students, learn about the burden of disease in Central America, and form meaningful relationships with patients across a language and cultural divide.

K. What could the OIA have done differently or better to support you in your international elective?:

THANK YOU!!! THIS INFORMATION WILL HELP FUTURE STUDENTS!!!

Return to: Shay Slifko, MA, Program Manager slifko@med.unc.edu
Office of International Activities – UNC School of Medicine
1066 Bondurant Hall, CB 9535
Chapel Hill, NC 27599-9535