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.silfko@med.unc.edu or Martha.carlough@med.unc.edu)

I. STUDENT INFORMATION
A. Student Name: Folafunmi Omofoye
B. Email: omofoye@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?
   FMME 271 __________________________
G. Faculty advisor: Evan Ashkin
H. Dates that you completed the elective: ________________________ Year: 2015
I. From the list below, select the one choice that best describes your motivation for taking this elective:
   ___ interest in global health ___ desire to get experience for CV/job opportunities
   ___ interest in travel ___ family of origin reasons
   ___ interest in helping others ___ other: __________________________
   X ___ desire to learn/improve Spanish skills

J. What was the major emphasis of this elective:
   X(1) medical Spanish and Latino health
   ___ global health research
   ___ clinical care in an international setting
   X(2) 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: Mexico _________________
B. City: San Miguel de Allende
C. Name of Program or Hospital where you worked: Proyecto Puentes de Salud
D. Website address (if available): http://www.med.unc.edu/ppps
E. From the list below, select the choice that best describes how you first learned about this program:
   X referral from a friend/personal contact
   ___ another student who went there
   ___ web site information from: __________________________
   ___ other: __________________________

F. Name of program person you worked with and contact information: Dr. Salvador Quiroz & The DIF: Social service agency
G. Costs
   Tuition: ____________ Roundtrip travel: $622
   Other expenses you incurred, including vaccinations, supplies (please list type and amount):
   Housing & Food - $875
   Other Expenses (Transport; Health Vaccination - $60
   __________________________

H. Did this program/hospital have a religious affiliation? ___YES  X NO
I. Did this program/hospital have an academic affiliation? ____ YES  x NO
If yes, with what institution: n/a

III. GLOBAL HEALTH EXPERIENCE CHARACTERISTICS
A. List three educational outcomes you achieved with this elective
1. Improved Confidence & Proficiency in understanding & speaking the spanish language
2. Improved ability to perform basic preventative health screenings in Spanish
3. Improved ability to work in team dynamic & atmosphere for prolonged period of time

B. Was the experience a good use of time for you during medical school?  x YES  ____ NO
C. Did you have adequate clinical supervision?  x YES  ____ NO
D. Did you have adequate opportunities for hands-on clinical work? x YES  ____ NO
E. Would you recommend this elective to other medical students?  x YES  ____ NO
   If YES, Why?  Allows freedom to improve basic clinical skills while learning spanish 24/7
   If NO, Why?  

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

G. Did you have appropriate arrangements for housing, food and safety/health issues?  x YES  ___ NO
   Please describe:  Home Stay Family was superb. Housing, Food, & Safety was incredible.

H. Did you have adequate information about what to expect in advance?  ____ YES  x NO
   What would have been helpful:  A day-2-day itinerary would have been nice

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

J. Please include any additional information or feedback you would like to include for students engaging in future international rotations:
   - Be Flexible & Excited each day
   - Make sure you get out and practice speaking the language
   - If in a group and others are more proficient at the language, it may be beneficial to be adventurous (when safe) and try to practice on your own without help from the more proficient members.
   - Be Careful with your belongings internationally (don't leave items without watching them)

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 shay_slifko@med.unc.edu
Office of International Activities – UNC School of Medicine
1066 Bondurant Hall, CB 9535
Chapel Hill, NC 27599-9535