UNC/H Resident Physicians
Global Health Elective
Experience Evaluation Form

Information that you provide will be made available for future UNC/H residents to use in planning electives in global health and international medicine. Please complete and return in electronic form to the Office of International Activities (shay.slifko@med.unc.edu) and martha_carlough@med.unc.edu

I. BACKGROUND INFORMATION

Resident Name: Laura Willing
Email: laura.willing@unchealth.unc.edu
Residency Program: Psychiatry
Year of training: PGY-5
Date/month of projected completion of residency: 06/2016
UNC faculty advisor for this elective: Amy Ursano, MD
Dates of elective (months/year): 02/2016-03/2016

From the list below, select the one choice that best describes your motivation for taking this elective:

X interest in global health clinical experience
   interest in global health research experience
   desire to get experience for CV/job opportunities
   desire to learn/improve Spanish language skills
   interest in travel
   family of origin reasons
   interest in service opportunity
   other: ______________________________________

What was the major emphasis of this elective:
   medical Spanish and Latino health
   global health research
   X clinical care in an international setting
   public/community health
   Other: ______________________________________

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

II. PROGRAM INFORMATION

Country where you completed the elective: Haiti
City: Williamson
Name of Program or Hospital where you worked: Haiti Children
Website address (if available): ________________________________

From the list below, select the choice that best describes how you first learned about this program:

   referral from a friend/personal contact
   referral from internal UNC contacts (faculty or other resident)
   X web site information from: ________________________________
   Other: ______________________________________

Name of program person you worked with and contact information:
Craic Katz, MD craigkatz@gmail.com

Costs
Any fees: ______ Roundtrip travel expenses: $748
Other expenses you incurred, including vaccinations, supplies, visa (please list type and amount):

- Lodging $1500
- Vaccinations $150
- Supplies $100

H. Did this program/hospital have a religious affiliation? ____YES
   X NO
If yes, with what group: ________________________________

I. Did this program/hospital have an academic affiliation? X ____YES
   ____NO
If yes, with what institution: Mt. Sinai

III. GLOBAL HEALTH EXPERIENCE CHARACTERISTICS

List three educational outcomes you achieved with this elective:
1. Diagnose and treat psychiatric conditions in this special population in Haitian Orphan
2. Identify cultural differences and sensitivities related to mental health in children and
3. Identify barriers and access to care in underdeveloped countries, such as Haiti.

Was the experience a good use of educational time for you during residency? X ____YES
   ____NO
Did you have adequate clinical supervision? X ____YES
   ____NO
Did you have adequate opportunities for hands-on clinical work? X ____YES
   ____NO
If this was a research experience, did you have adequate supervision and support? X ____YES
   ____NO
Were the duty hours expected of you appropriate for a UNC/H resident? X ____YES
   ____NO
If no, please explain: ____________________________________________
Would you recommend this elective to other residents? X ____YES
   ____NO
If so, from what disciplines? (e.g. primary care only, surgery?) Psychiatry and Child Psychiatry

   If YES, Why? Large clinical volume, acute trauma, requires creative problem solving

   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: hotel with safe food and water, driver for transportation

H. Did you have adequate information about what to expect in advance? X ____YES
   ____NO
   What would have been helpful: ____________________________________________

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:

   This is an excellent experience to practice international psychiatry with children. I worked
   in the school setting, in the orphanage, and in community clinics.

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

   Funding to cover all costs would have been helpful. Of course, I was happy to receive
   any amount!

THANK YOU!!! THIS INFORMATION WILL HELP FUTURE RESIDENT PHYSICIANS!!!

Return to: Shay Silifko, MA, Program Manager shay_silifko@med.unc.edu
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