



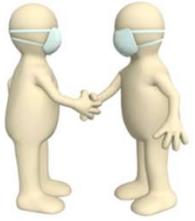
**AAFP GLOBAL HEALTH SUMMIT**  
*Primary Health Care and Family Medicine: Health Equity for All*

**BUILDING THE COLLABORATORY –  
 THE MALAWI / WWAMI PARTNERSHIP**

Patrick Chisepo, Martha Makwero, Anna McDonald,  
 Stanley Mwalwanda, Jacob Nettleton, John Parks,  
 Collin Schenk & Anne Marie Williams

**DEFINING PARTNERSHIPS**

How do you define partnership?  
 What are the key elements of successful partnerships?  
 How does this change when you apply the term “Global Health”?



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**OBJECTIVES**

- Participate in a discussion about the nuances of applying family medicine in a way that is both globally competent and locally relevant
- Discuss the challenges and successes encountered by family medicine trainees learning together in different contexts (examples of benefits and challenges of cross-cultural learning)
- Develop a better understanding of the complexities of partnerships and who sets priorities in global health
- Discuss challenges in developing collaborative programs that are local health system needs-focused rather than visiting learner-focused

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**DEFINING GLOBAL HEALTH**

“Global Health is a Northern concept...for the academic institutions of the Global South, everyday public health, medical, and nursing education and practices constitute ‘global health’” (Gautier 2018)



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**OUTLINE**

- Background
  - defining partnerships in Global Health
  - history of the Malawi / WWAMI partnership
- Case Discussions
  - partnership-oriented narratives of cross-cultural learning experiences
    - Learner perspective
    - System / Administrator perspective
- Improving Partnerships - Lessons Learned & Ways Forward



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**DEFINING “PARTNERSHIPS” IN GLOBAL HEALTH**



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## WHO SETS PRIORITIES IN PARTNERSHIPS?

- **RESEARCH:**
  - study of publications from Burkina Faso found that first authors were from Global North in 95% of papers (Ridde V et al, 2012)
  - 2008 PubMed search found 87% of authors affiliated with university global health programs were from N America (Macfarlane SB, 2008)
- **RESEARCHERS:**
  - "Why don't more African researchers speak up? Many do, but the real question is 'Why won't Western institutions/funders listen to us? My experience shows that junior indigenous staff are routinely disregarded. Senior academics on the project will instead turn to other prominent European 'experts', many of whom hardly visit the country of their expertise. The very foundation of these partnerships reinforces the power of those who bring in the funding. And the African early career researchers...know the flimsiness of their careers." (Kalinga 2019)

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## Building The "Collaboratory" – the Collaboration Laboratory



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## DECONSTRUCTING GLOBAL HEALTH PARTNERSHIPS

Deconstruction of our concept of global health is essential if want to create more balance between partnerships between Global North and Global South.

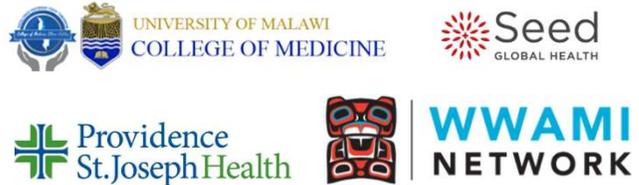
- This involves 2 major steps:
- 1) understanding problems inherent with traditional model
  - 2) moving towards more equitable partnerships



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## The Malawi/WWAMI Global Health Program



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## RETHINKING PARTNERSHIPS

**Zarowsky** - ingredients of successful partnership require "tolerance of disagreement, taking time to build and maintain trust, attention to detail of who participates in both financial and scientific decision making"

**Gautier** - "besides understanding cultural complexities, we recommend developing and strengthening teamwork skills in cross-disciplinary and cross-category contexts"

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## The Malawi/WWAMI Global Health Program: The history

- **2013:** Global Health Service Partnership (GHSP) formed



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**The Malawi/WWAMI Global Health Program:**  
The history

- **2013:** Global Health Service Partnership (GHSP) formed
- **2014:** academic partnership piloted in Blantyre, 1<sup>st</sup> GHSP volunteers to Mangochi to start MMED training



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**The Malawi/WWAMI Global Health Program:**

- **2013:** Global Health Service Partnership (GHSP) formed
- **2014:** academic partnership piloted in Blantyre
- **2015:** 1st WWAMI residents to Mangochi District Hospital
- **2017:** 1<sup>st</sup> Malawian residents to Seattle for elective
- **2019:** Partnership solidified and funding committed by PSJH



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**The Malawi/WWAMI Global Health Program:**  
The history

- **2013:** Global Health Service Partnership (GHSP) formed
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**The Malawi/WWAMI Global Health Program:**  
The components

- Bidirectional exchange
- Protection of host-country national resources (human & material)
- Prioritization of host-country learning needs



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**The Malawi/WWAMI Global Health Program:**  
The goals

- US residents visiting Malawi
  - Clinical support
  - modeling of family medicine principles
  - Building relationships, sharing values
- Teaching students of all disciplines; facilitating multi-disciplinary approach to patient care
  - Supporting QI projects
  - Building team leadership



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### The Malawi/WWAMI Global Health Program: The goals



- Malawian registrars visiting US
  - Exposure to clinical medicine /primary care in a different context
  - Self-identified clinical areas of interest (adolescent, geriatric, sports medicine)
  - Building relationships, sharing values (UW Global Health Leadership, AAFP GH Summit)
  - Learn about clinical teaching by shadowing attendings
  - Develop leadership skills
  - Observe multi-disciplinary care model

### Going forward

How do we make partnerships better/healthier/more equitable?



### Discussion

**PARTNERSHIP:** individual-level challenges

Post-graduate trainees reflect:

- learning in each others' contexts
- examples of healthy partnership at work
- experience with challenges



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### Discussion

**PARTNERSHIP:** systems-level challenges



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