

Defining Needs of Research Curricula in Residency Programs in Haiti

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Problem: Research training and activities are very limited in medical schools and residency programs in resource limited countries, including Haiti.

Intervention: To address the need for research training in a new family medicine residency program in Haiti, we developed a 32-hour research curriculum that included basic epidemiology and biostatistics, ethics, critical appraisal, and research methods. The goal was for residents to acquire skills to appropriately use medical literature and conduct small research project as clinicians. A New York-based team and local faculty co-facilitated bilingual bi-weekly training sessions using videoconferencing. Lectures, resident-lead sessions, and case-based learning assignments were used. Two face-to-face meetings were held. Both faculty teams mentored the two groups of three residents each while they were working on their research projects.

Context: In 2012, the non-governmental organization Zanmi Lasante (ZL)/ Partners in Health (PIH) with the Ministry of Health and the national medical school launched the second family medicine residency program in Haiti. The program was intended to bring innovations in graduate medical education in the country. The leadership of the program worked with their partners from Haiti Medical Education (HME) based in New York to ensure appropriate research training for the first class of six residents. There was no specific budget for the training. HME made in-kind contribution for the entire duration of the project.

Outcome: The training was completed in 18 months, longer than the planned 12 months. The residents needed more time to complete assignments because of both heavy clinical workload and their limited English skills. A few sessions were rescheduled because of internet connection issue. All six participants completed their research projects and presented their work at national and/or international scientific conferences; three of them are currently involved in research activities in their career. The curriculum has since adopted as a 42-hour mandatory course by all seven programs of the ZL network and is now being taught by local faculty.

Lessons learned: It is possible to increase medical research education in resource-limited countries by implementing well-designed curriculum delivered through an international partnership that values creativity, flexibility, and sustainability to offset uncertainty and resources scarcity.