

		(2019
1.0 Degree Title		ering Faculty or GPS
Please specify the two degrees for con	ncurrent degree	
programs MSc	Graduate a	nd Postdoctoral Studies
MSC		
1.1 Major (Subject/Discipline) (30-char. m	ax.) Offering	Faculty & Department
Family Medicine	Faculty of N	ledicine & Health Sciences, Dept of Family Medicine
1.2 Concentration (Option) (30 char. max.) 3.0 Effective	Term of Implementation
	(Ex. Sep	t. 2019 or 201909)
Global Health	Term	
	202209	
1.3 Complete Program Title (info from bo>	kes 1.0+1.1+1.2+5.2)	
M.Sc. in Family Medicine; Global Health		
4.0 Rationale and Admission Requiremen	ts for New Program/Concentration	
Admission standards will be as for the fo	¥	
	or the current MSC in Family Medicine.	
For Rationale, see Annex 1 below:		
5.0 Program Information		
Indicate an "x" as appropriate		
5.1 Program Type	5.2 Category	5.3 Level
Bachelor's Program	Faculty Program (FP)	Undergraduate
X Master's	Major	Dentistry/Law/Medicine
M.Sc.(Applied) Program	Joint Major	Continuing Studies (Non-Credit)
Dual Degree/Concurrent Program	Major Concentration (CON)	Collegial
Certificate	Minor	X Masters & Grad Dips & Certs
Diploma	Minor Concentration (CON)	Doctorate
Graduate Certificate	Honours (HON)	Post-Graduate Medicine/Dentistry
Graduate Diploma Professional Development Cert	Joint Honours Component (HC) Internship/Co-op	Graduate Qualifying
Ph.D. Program	X Thesis (T)	5.4 Requires Centrally-Funded
Doctorate Program	Non-Thesis (N)	Resources
(Other than Ph.D.)	Other	Yes NoX_
Self-Funded/Private Program	Please specify	
Off-Campus Program		
Distance Education Program		
Other (Please specify)		
6.0 Total Credits or CEUs (if latter, indicat	te "CEUs" in box) 7.0 Consultatio	n with
	Related Un	
45	Financial C	

8.0 Program Description (Maximum 150 words)

The M.Sc. in Family Medicine; Global Health emphasizes the foundational values of global primary health care including health equity, cultural safety, social participation in health, and integrated, whole-person care over the life-span. The program provides comprehensive training in quantitative and qualitative methods, the participatory research approach, and integrated knowledge translation and exchange. Topics include primary health care policy and practice, decolonizing approaches, program management, social determinants of health and heath equity, and healthcare delivery innovations. The thesis must focus on an international or Canadian global health issue.

9.0 List of proposed new Program/Concentration

If new concentration (option) of existing program, a program layout (list of all courses) of existing program <u>must</u> be attached.

Proposed program (list courses as follows: Subj Code/Crse Num, Title, Credit Weight under the headings of: Required Courses, Complementary Courses, Elective Courses)

M.Sc. in Family Medicine; Global Health (45 credits)

THESIS COURSES (24 CREDITS)

FMED 697 Master's Thesis Research 1 (12 credits) FMED 698 Master's Thesis Research 2 (12 credits)

REQUIRED COURSES (9 CREDITS)

FMED 504 Family Medicine Research Seminars (1 credit) FMED 505 Epidemiology and Data Analysis in Primary Care 1 (3 credits) FMED 603 Foundations of Participatory Research (1 credit) FMED 615 Applied Knowledge Translation and Exchange in Health (1 credit) FMED 625 Qualitative Health Research (3 credits)

COMPLEMENTARY COURSES (7 OR 9 CREDITS)

7 or 9 credits from the following: FMED 506 Indigenous Perspectives Decolonizing Health Research (3 credits) FMED 527 Inuit Health in Canadian Context (1 credit) FMED 604 Advanced Participatory Research in Health (3 credits) FMED 611 Healthcare Systems, Policy and Performance (3 credits) FMED 619 Program Management in Global Health and Primary Health Care (3 credits) PHS 511 Fundamentals of Global Health (3 credits) PPHS 613 The Practice of Global Health (3 credits)

ELECTIVE COURSES (3 or 5 CREDITS)

3 or 5 credits at the 500 level or higher chosen in consultation with the thesis supervisor and the Director of the concentration, based on the student's area of interest.

For requirements of existing programs, see Annex 2.

10.0 Approvals			
Routing Sequence	Name	Signature	Meeting Date
Department	Dr. Marlon Dove. Department Chair	Maira Bre	2021-12-17
Curric/Acad Committee	Melissa Vollrath- FCC Chair	Wollrath	15 Feb. 2022
Faculty 1	Aimee Ryan- FMHS Assoc. Dean	Aimee Ryan Digitally signed by Aimee Ryan	17 March, 2022
Faculty 2			
Faculty 3			
CGPS			
SCTP			
APC			
Senate			
Submitted by			
Name	Kennedv Kanvand'onda	To be completed by ES:	
Phone	514-399-9143	CIP Code	
Email	Kennedv.kanvanoonda@mcolil.ca		
Submission Date	2021-12-20		

REMINDERS:

*Box 5.4 - Must be completed; see section 6.5.4 within the New Program Guidelines at: https://www.mcgill.ca/sctp/quidelines. **All new program proposals must be accompanied by a 2 - 3 page support document.

Annex 1:

4.0 Rationale and Admission Requirements for New Program/Concentration

The MSc in Family Medicine Global Health Concentration leverages the Department's extensive global health research expertise and partnerships in practice-based, people-centred and community-engaged research with disadvantaged populations internationally, and in Canada. Rooted in the principles of social justice, cultural safety and health equity, the concentration provides a strong grounding in decolonizing approaches to research that embrace the authentic participation of people and stakeholders in defining priority concerns, interpreting evidence, and developing locally relevant solutions. The concentration will attract graduate students and clinicians seeking a foundation in global primary care supplemental to the rigorous methodological training that the MSc program provides. Its focus on primary care policy and delivery in a global context (via required and complementary coursework, which engages with a range of topics and values in primary care theory and practice) distinguishes it from both the global health streams in Nursing, as well as the M.Sc. in Public Health offered by the Department of Biostatistics, Epidemiology and Occupational Health.

Annex 2:

9.0 List of proposed new Program/Concentration

If new concentration (option) of existing program, a program layout (list of all courses) of existing program must be attached.

Master of Science (M.Sc.) Family Medicine (Thesis) (45 credits)

Offered by: Family Medicine Degree: Master of Science Program Requirements Thesis Courses (24 credits) FMED 697 Master's Thesis Research 1 (12 credits) FMED 698 Master's Thesis Research 2 (12 credits) Required Courses (13 credits) FMED 505 Epidemiology and Data Analysis in Primary Care 1 (3 credits) FMED 509 Epidemiology and Data Analysis in Primary Care 2 (3 credits) FMED 603 Foundations of Participatory Research (1 credit) FMED 614 Foundations of Mixed Methods Research (2 credits) FMED 616 Applied Literature Reviews (1 credit) FMED 625 Qualitative Health Research (3 credits)

Elective Courses (8 credits)

8 credits at the 500 level or higher chosen by the student and the Department in consultation with the student's thesis supervisor(s) of which 3 credits may be chosen from another department at McGill.

FMED 504 Family Medicine Research Seminars (1 credit)

FMED 511 Introduction to Art in Healthcare: Making Art Accessible (1 credit)

FMED 525 Foundations of Translational Science (3 credits)

FMED 601 Advanced Topics in Family Medicine (3 credits)

FMED 604 Advanced Participatory Research in Health (3 credits)

FMED 605 AI and Analytical Decision-Making in Healthcare (1 credit)

FMED 606 Operational Issues in Survey Methods in Primary Care (1 credit)

FMED 607 Intro to Discourse Analysis & Interpretive Health Research (1 credit)

FMED 608 Advanced Mixed Methods Seminar in Health Research (1 credit)

FMED 610 Foundations of Family Medicine (1 credit)

FMED 611 Healthcare Systems, Policy and Performance (3 credits)

FMED 612 Evaluation Research and Implementation Science (1 credit)

FMED 615 Applied Knowledge Translation and Exchange in Health (1 credit)

FMED 618 Topics in Pharmacoeconomics, Drug Safety and Policy (1 credit)

FMED 619 Program Management in Global Health and Primary Health Care (3 credits)

FMED 621 Participatory Health Systems for Safe Birth (1 credit)

FMED 690 Advanced Ethnography: Context, Complexity and Coordination (3 credits)

Master of Science (M.Sc.) Family Medicine (Thesis): Medical Education (45 credits)

Offered by: Family Medicine Degree: Master of Science

Program Requirements

The MSc in Family Medicine; Medical Education option is a thesis option graduate program designed to provide research training to family physicians, and exceptionally other health professionals and other students interested in family medicine education research. This MSc Option has very close ties to the Family Medicine Educational Research Group (FMER), which integrates family medicine researchers deeply committed to the development of the family medicine education field of inquiry. The FMER's ultimate goal is to advance knowledge to: (1) constantly inform family medicine curricula innovations and continuing professional development to better family physicians' clinical practice, (2) significantly contribute to the development of the family medicine education field of inquiry, and (3) rigorously develop and inform medical education policy. This research agenda of FMER is articulated into four interrelated streams: (1) family physicians' professional identity formation; (2) information use

and technology in the learning episodes of practicing physicians and organizational learning; (3) mentoring in family medicine education, and (4) knowledge synthesis.

Thesis Courses (24 credits) Thesis subject should be related to medical education. FMED 697 Master's Thesis Research 1 (12 credits) FMED 698 Master's Thesis Research 2 (12 credits)

Required Courses (13 credits) FMED 505 Epidemiology and Data Analysis in Primary Care 1 (3 credits) FMED 509 Epidemiology and Data Analysis in Primary Care 2 (3 credits) FMED 603 Foundations of Participatory Research (1 credit) FMED 614 Foundations of Mixed Methods Research (2 credits) FMED 616 Applied Literature Reviews (1 credit) FMED 625 Qualitative Health Research (3 credits)

Elective Courses (8 credits)

8 credits at the 600 level or higher, chosen in consultation with the student's academic supervisor, of which 6 credits must involve educational issues and relate to the student's thesis topic within the medical education field – most of these courses are offered by the Faculty of Education. The additional 2 credits may be completed in any department at McGill.

Executive Summary

Proposed M.Sc. in Family Medicine, Global Health Concentration

Rationale for new program

McGill's Department of Family Medicine has longstanding expertise in global health, a rich history of international partnerships and a distinguished faculty of global health researchers. Across its education and research programs is a commitment to enable quality people-centred and culturally safe primary care services everywhere, with a special emphasis on reducing health disparities in underserved and vulnerable patients, their families and communities. The department is also recognized for pioneering achievements in the areas of blended learning, mixed methods, community surveillance, social determinants assessment, and digital innovation.

Since its launch in 2014, the M.Sc. in Family Medicine has graduated over 100 students. The program is recognized for providing rigorous methodological training and for the success of its students in securing competitive research scholarships and awards. The program's interdisciplinary faculty of epidemiologists, social scientists, anthropologists, clinicians, and statisticians, bring academic excellence and applied expertise across a broad range of topic areas, including cultural safety, infectious diseases, non-communicable and chronic diseases, safe motherhood, aging, HIV, community-engaged healthcare, and Indigenous health.

The M.Sc. in Family Medicine is known for its strength in community-based and participatory research–especially with respect to marginalized and minority communities, including those subject to ongoing systemic racism and colonialism. In addition, the program has ongoing strong partnerships with research and teaching institutions in Bangladesh, Botswana, Brazil, China, Colombia, Ecuador, Guatemala, Mexico and Nigeria. Approximately 30% of M.Sc. student theses have had an international focus, and many of these were studies conducted by international students. The proposed M.Sc. in Family Medicine; Global Health consolidates and further develops teaching around this important theme.

The proposed Global Health concentration fills an urgent gap in graduate primary care research capacity in the context of escalating global health challenges including climate change, aging populations, migration, conflict, and pandemics. The importance of primary health care (PHC) as the foundation of health systems is clearer now than ever before, as are systemic limitations in the global capacity to deliver affordable, quality frontline care and ensure universal health coverage. Similar challenges are also apparent in Canada which faces system-wide challenges in meeting the health needs of its diverse populations.

There is a critical need for research that supports accessible and effective primary care systems, as well as context-specific innovations in prevention and treatment to improve health equity in patients and populations worldwide. This is true in Low- and Middle-Income Countries (LMICs) and for disadvantaged and underserved populations in Canada. Important areas of research include the study of upstream political, social economic and environmental forces that create and perpetuate health inequities, and the testing of new strategies to strengthen preventive and treatment services

such as tech-enabled and team-based models of care. A key element in achieving health equity, and an important focus of the concentration, is the engagement of populations and patients in authentic participatory research, so that their voice is heard in defining priority concerns, interpreting evidence, and developing locally relevant solutions. The proposed Global Health Concentration nurtures research capacity in these areas, rooted in the principles of equity and cultural safety.

Finally, the concentration aims to leverage the extensive global health research capacities and partnerships of its faculty, both internationally and among underserved, multicultural and disadvantaged populations and patients in Quebec and Canada. M.Sc. students in the global health concentration will have opportunities to engage with this research for their thesis work.

Program structure

The concentration in Global Health will be available within the 45 credit M.Sc. in Family Medicine. Unlike the methods-focused standalone M.Sc. program, the concentration will provide a specific orientation to global health concerns in primary care including topical issues, values and approaches. These are developed through 3 required courses (1 credit each) that lay the foundations of global primary healthcare delivery and policy (FMED 504), and the principles of ethical engagement and partnership in research conduct (FMED 603) and knowledge translation (FMED 615). All three courses have a global health focus. In addition, six credits of introductory methods courses round out the required portion of the concentration. This will inform the development of student's global health related thesis.

Also distinctive to the concentration are 7 or 9 credits of specified global-health related complementary courses available within the Department of Family Medicine and the School of Population and Global Health (SPGH). This list is anticipated to grow in collaboration with SPGH and new Department of Global and Public Health Practice. The concentration further specifies that 3 to 5 elective credits be completed that are relevant to the student's thesis topic. Thus 16 credits out of 21 non-thesis credits are related to Global Health. Additionally, the 24-credit thesis must focus on a global health topic in Canada or internationally. In sum, the global health orientation of the concentration is apparent across all aspects of program content and approach, differentiating it from the standalone M.Sc. in Family Medicine, whose primary focus is research methods in Family Medicine.

Program learning outcomes

Students completing the M.Sc. in Family Medicine; Global Health should be able to:

- 1. Identify how family medicine and primary care are foundational to health systems, population health and health equity, globally and in Canada
- 2. Implement the principles of cultural safety, researcher reflexivity, and participatory research in conducting research globally and in Canada
- 3. Apply a decolonizing approach to research that interrogates systems of power and privilege when reviewing the literature, conducting research, and communicating research findings
- 4. Conceptualize primary care research with attention to theory, context, process, desired impact, and the social determinants of health

- 5. Demonstrate basic competence in quantitative and qualitative research methods relevant to global health in diverse cultural settings
- 6. Communicate research evidence to a range of knowledge users in different cultural settings.

How program meets the needs of students, department and faculty

The Global Health concentration will allow future M.Sc. graduates in Family Medicine to identify their global health training more visibly. It will also provide additional focus and identity for faculty in the department with interest and expertise in global health. Global health is a historic strength in the Department of Family Medicine witnessed by the high-quality research and global collaborations of its faculty both past and present. The creation of a concentration will attract students who can contribute to the scholarly and research activities of the Department's global health program. It will fill a gap in the repertoire of global health offerings across the Faculty of Medicine and Health Sciences in the area of global primary care delivery and policy. We anticipate rich opportunities for collaboration with the newly formed Department of Global and Public Health Practice, including the creation of courses that students from both units will be interested in taking.

Demand for the program (e.g., student interest, growing markets)

Strong student demand for the proposed global health concentration is evident in the large number of graduate theses in our department with a global health focus, and a recurring request that this focus be formally recognized on their McGill diploma. A robust interest in graduate-level global health learning is similarly apparent across the Faculty of Medicine and Health Sciences and the broader university, exemplified by the popularity of McGill's Global Health Scholarship Program. Yet existing global health content is spread across a range of currently disconnected courses across multiple departments and schools, making it difficult for students interested in global health to construct a specialization in this area. There is a clear market for the concentration; the complexity and urgency of global health challenges requires a next generation of researchers and policy makers who embody diversity, and who are prepared to listen, collaborate and innovate solutions across disciplines, sectors, and social divides. The global health concentration will attract students who see front-line healthcare and its linkages with other sectors as central to future global health and wellbeing. The program's specific focus on primary care is distinctive to existing global health concentrations/streams in Nursing and Public Health.

Alignment with University or Faculty strategic plans

The proposed concentration responds to the key objectives of McGill University's Strategic Academic Plan (2017-2022)¹ by creating a learning opportunity that fosters openness, diversity, connectedness across disciplines, and respectful collaboration with communities and local and global partners. The learning outcomes of the concentration align with the Faculty of Medicine and Health Sciences mission: "to educate health care professionals and scientists based on a commitment to excellence, social accountability and lifelong learning, together with the pursuit of novel research and clinical innovation, to improve the health of individuals and populations worldwide."

¹ https://www.mcgill.ca/provost/article/mcgill-university-strategic-academic-plan-2017-2022

Scan of similar programs / peer institutions

Over the last decade, opportunities for graduate primary care research training have grown in Canada these include the Transdisciplinary Understanding and Training of Research-Primary Health Care (TUTOR-PHC) Program at Western University, the creation of McGill's M.Sc. in Family Medicine and PhD program in Family Medicine and Primary Care, and family medicine-related training at Western University (PhD only), and the Dalla Lana School of Public Health, University of Toronto (M.Sc. in Community Health). McGill's M.Sc. program is unique in Quebec and is unmatched across Canada in terms of its focus on the application of interdisciplinary and innovative, mixed- method and participatory approaches to address primary healthcare in local and global settings. The proposed Global Health Concentration is the first to be established within existing M.Sc. programs focused on primary care and family medicine in Canada.

Target audience

The program is designed to provide research training for: 1) non-clinicians with a strong interest in global family medicine and/or primary health care delivery or policy; 2) clinician scientists and primary care providers and/or family physicians with global health interests.

REQUIRED COURSES (9 CRED	ITS)	Number of credits
FMED 504D1 Family Medicine Research Seminars	Global Primary Health Care delivery and policy challenges and innovations, with a focus on underserved and disadvantaged populations globally and in Canada.	.5
FMED 504D2 Family Medicine Research Seminars	Global Primary Health Care delivery and policy challenges and innovations, with a focus on underserved and disadvantaged populations globally and in Canada.	.5
FMED 505 Epidemiology and Data Analysis in Primary Care 1	An introduction of epidemiological concepts, data analysis, and methods applicable to primary care research.	3
FMED 603 Foundations of Participatory Research	Principles and main applications of modern participatory research in health organizations.	1
FMED 615 Applied Knowledge Translation and Exchange in Health	Intended for health care practitioners, planners, and researchers, especially in resource-poor settings in Canada and internationally, students will be exposed to behaviour change models; techniques for critical evaluation of existing evidence; accountability in health services; and scientific writing and presenting, using a blended learning approach.	1
FMED 625 Qualitative Health Research	Discussion and practice of qualitative methodologies for conducting rigorous and reflective qualitative research projects with a family medicine and primary health care focus, including ethnographic fieldwork and community interviews.	3
COMPLEMENTARY COURSES		
FMED 506 Indigenous Perspectives Decolonizing Health Research	An examination and reflection of traditional Indigenous world view and ways of knowing; the Canadian colonization and assimilation	3

Course Titles and Descriptions – Department of Family Medicine 21 CREDITS (+24 thesis credits for a total of 45 credits)

PPHS 511 Fundamentals of Global	This exciting and interactive course	3
	systems for sustained impact.	
	coverage while strengthening health	
	interventions towards universal	
	scale-up of effective health	
	health care in order to achieve rapid	
	settings, with a focus on primary	
Giobai ficatui anu i finiary ficatui Cale	both domestic and global health	
FMED 619 Program Management in Global Health and Primary Health Care	Program management design, theory, methods and practical applications in	3
EMED 610 Drogroup Monogeneration	performance of healthcare services.	3
	and addresses methods for evaluating	
	improve primary healthcare systems,	
	evidence to influence policy and to	
	options and approaches for using	
	indicative global settings. Explores	
	systems, focuses on Quebec and	
and Performance	systems, especially primary care	
FMED 611 Healthcare Systems, Policy	A critical review of healthcare	3
	actual participatory projects.	
	roleplay, and guest presentations from	
	discussions, small group work,	
	project with the help of group	
	students have an opportunity to work through aspects of their participatory	
	and data collection methods, while	
	focuses on participatory engagement	
	organisational stakeholders. Content	
Research in Health	with community, clinical, and	
FMED 604 Advanced Participatory	Overview of participatory research	3
	region of Quebec.	
	Particular focus on the Nunavik	
	and the paths to regain better health.	
	of navigating modern health systems;	
	colonial institutions; the complexity	
	introduced by imported disease and	
Context	Europeans; the risks to health	
Context	Inuit health prior to the arrival of	1
FMED 527 Inuit Health in Canadian	Exploration of the cultural roots of	1
	and practice into the field and to future studies.	
	bringing Indigenous ways of knowing	
	Indigenous health research landscape	
	impacts; and the contemporary	
	experience and their outcomes and	

PPHS 613 The Practice of Global Health	to broaden their understanding and knowledge of global health issues, including global burden of diseases, determinants of health, transition in health and drivers of such transition, challenges in healthcare delivery in resource-limited settings, and the variety of agencies and actors engaged in addressing global health challenges. The course consists of lectures, case studies, debates, discussions and small group work. Introduction to core competencies in the practice of global health,	3
	including historical, colonial roots of global health, project planning and implementation, equitable and ethical conduct, building partnerships, working within interdisciplinary teams, effective communication and personal-social skills.	

APPENDIX 1

CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

DATE: 13 December 2021

TO: Rebecca Fuhrer (Professor and Interim Chair)

FROM: Alayne Adams (Associate Professor, Family Medicine)

The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted.

Program Title: M.Sc. in Family Medicine; Global Health

Would you be good enough to review this proposal and let me know as soon as possible, on this form, whether or not your department has any objections to, or comments regarding, the proposal. Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses.

<u>X but with provisos</u> NO OBJECTIONS _____ SOME OBJECTIONS

COMMENTS:

We have reviewed the proposal and have the following comments to make.

PPHS 511 – This is a course open to wider McGill community and in its current form not eligible for the students in our Department. **Hence no objections.**

PPHS 613 – This coure is required for the students in the MScPH Global Health Stream, and is recommended to all the students in out department interested in Global Health or wishing to take this course as an elective. The present cap is **30 students** as per the instructor's request.

We would recommend that the 30 remain for the students in our Dept'l programs, but will request that the instructor increase capacity to 5 specifically for the students in the FMED Global Health Option. Clearly that number can be revised if need be. Hence, no real objections – just a request for this proviso.

Rebuce Futur

Signature:

Date:



School of Population and Global Health École de santé des populations et de santé mondiale

December 16, 2021

Dr. Marion Dove Chair, Department of Family Medicine Faculty of Medicine and Health Sciences McGill University

Re: Letter of support – Department of Family Medicine Global Health Concentration

Dear Dr. Dove

I am writing to offer my strong support for the establishment of a global health concentration in the thesis based MSc in Family Medicine within the Department of Family Medicine (DFM). I am very encouraged by this prospective development as it corresponds closely with the direction of the strategic and operational plan 2021-2026 of the SPGH that envisages and supports efforts across the FMHS to enhance opportunities for training in global health. More specifically, with newly established Department of Global and Public Health (DGPH) in the School of Population and Global Health (SPGH), there are prospective opportunities for education efficiencies related to shared faculty, course cross-listing and other research and partnerships that are very exciting.

The proposed concentration builds on the DFM's strong track record of offering high quality training to students interested in global primary health delivery, policy and innovation internationally as well as in Quebec and Canada. The need for larger numbers of appropriately trained experts in this field is growing rapidly and as such the program will help make a timely contribution to outstanding workforce needs. Further, the explicit global designation will help attract a more diverse student enrolment that is very likely to strengthen the learning opportunities for all in the concentration and beyond.

As such, I am highly supportive of this proposed concentration and look forward to including this as one of a growing number of collaborative opportunities between the DFM and the SPGH.

Sincerely yours,

Dr. Tim Evans Director and Associate Dean, School of Population and Global Health, Faculty of Medicine and Health Sciences Executive director, COVID-19 Immunity Task Force

Cc: Dr. Alayne Adams

McGill University 2001 McGill College Avenue, 12th Floor Montreal, Quebec, Canada H3A 1G1 <u>https://www.mcgill.ca/spgh/</u> Université McGill 2001 avenue McGill College, 12^e étage Montréal (Québec) Canada H3A 1G1 <u>https://www.mcgill.ca/spgh/</u>



GLOBAL PROGRAMMES DE HEALTH SANTÉ PROGRAMS MONDIALE

12 Dec. 2021

Dr. Marion Dove Chair, Department of Family Medicine Faculty of Medicine and Health Sciences McGill University

Dear Dr. Dove

I am writing in my capacity as Interim Director of McGill Global Health Programs to offer my strong support for the establishment of a global health concentration in the thesis based MSc in Family Medicine within the Department of Family Medicine (DFM). The concentration will capitalize on the DFM's recognized strengths in providing rigorous methodological training to students wishing to contribute to the field of global primary health delivery, policy and innovation internationally as well as in Quebec and Canada. The proposed GH concentration will provide a long overdue identity to the historic strength of the Department of Family Medicine in global health. This includes academic excellence and applied expertise across a broad range of topic areas, including cultural safety, infectious diseases, non-communicable and chronic diseases, safe motherhood, ageing, HIV, community-engaged healthcare, and indigenous health, as well as respectful ongoing partnerships with research and teaching institutions. I view this as having enormous potential for strengthening collaboration between the DFM and the newly established Department of Global and Public Health (DGPH) in the School of Population and Global Health (SPGH). This could include the cross-listing of courses as well as joint research and capacity building partnerships with Canada and internationally. I strongly encourage the DFM and the FMHS to support this proposal. The proposed concentration is an exciting opportunity for the DFM and one I look forward to collaborating with.

Sincerely yours

Charles P Larson, MC, FRCP(C) School of Population and Global Health Interim Director, McGill Global Health Programs

cc Dr. Alayne Adams