Providing socially accountable medical education: student perceptions from two Australian medical schools.

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Robyn Preston*, Karen Johnston - James Cook University
• Two Australian medical schools Flinders University, SA and James Cook University Nth Qld participated in the international THEnet study “Accounting for Learners’ Perceptions of Social Accountability in THEnet Schools (ALPSATS)”.

• The Training for Health Equity Network (THEnet) is an international community of health profession educators collaborating with community stakeholders with a shared vision for health equity through socially accountable education for health professionals.
Social accountability is the obligation to orient education, research, and service activities towards priority health concerns of the local communities, the region and/or national (schools) one has a mandate to serve. These priorities are jointly defined by government, health service organizations, and the public, [and especially, the underserved].

(adapted from WHO, 1995)
Training for Health Equity Network

- Flinders University
- James Cook University
- Walter Sisulu University
- Ateneo de Zamboanga University
- University of the Philippines
- Gezira University
- Patan Academy of Health Sciences
- Escuela de Medicina Latinoamericana
- Physician Assistant Program, Utah University
- Northern Ontario School of Medicine
- Sherbrooke University
- University of New Mexico
- James Cook University
- Ghent University
- Northern Ontario School of Medicine
- Walter Sisulu University
- Flinders University
- University of the Philippines
- Ateneo de Zamboanga University
- James Cook University
**THEnet’s Values**

**Equity:** The state in which opportunities for health gains are available to everyone.

**Quality:** The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.

**Relevance:** The degree to which the most important and locally relevant problems are tackled first.

**Efficiency:** This involves producing the greatest impact on health with available resources targeted to address priority health needs and incorporates the principle of cost-effectiveness.

**Partnerships:** with all key stakeholders in developing, implementing and evaluating efforts is at the core of THEnet schools’ activities.
1. Education, research, and service programs are designed to meet the health and social needs of underserved communities.

2. Students are selected from the communities that have the greatest health needs.

3. Programs are located in or near the communities they serve.

4. A significant part of the learning experience takes place in primary care settings.

5. The curriculum integrates basic, clinical, population, and social science, including the social determinants of health.

6. Teaching methods are student-centered and service-based, emphasizing teamwork and benefiting from information technology.

7. Schools recruit and train community-based practitioners as teachers and mentors.

8. Programs emphasize a commitment to public service, with faculty members serving as role models.

9. Social accountability is reflected across all departments and in the commitment from school leadership.
<table>
<thead>
<tr>
<th>Traditional Medical Schools</th>
<th>Socially Accountable Schools</th>
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<tbody>
<tr>
<td>Disease management focus</td>
<td>Health promotion, prevention and disease management</td>
</tr>
<tr>
<td>Individual health focus</td>
<td>Individual and population focus</td>
</tr>
<tr>
<td>Bio-medical model</td>
<td>Bio-psycho-social-cultural model</td>
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<tr>
<td>Specialty-driven</td>
<td>Comprehensive team primary care focus</td>
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<tr>
<td>Reactive to needs</td>
<td>Proactive to needs</td>
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<tr>
<td>Separation between health and education systems</td>
<td>Symbiosis between health and education systems</td>
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<tr>
<td>Hospitalo-centric</td>
<td>Community engagement with diverse placement opportunities</td>
</tr>
<tr>
<td>Accountable to peers</td>
<td>Accountable to society</td>
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Aims

- This study aims to describe how medical students perceive and engage with the social mission of their school.
- Developing a robust understanding of learners’ perceptions to inform curricular development.
Flinders University School Vision

Local wellbeing. Global influence.
By 2018 we aim to be the medical school of first choice in Australia’s central economic corridor, and connected via Asia to the world. We will be:

- **recognised globally for our socially accountable work with the underserved, particularly in rural, remote and Indigenous communities**
- vibrantly embedded in high quality health services, utilizing advanced internet-based connectivity, across a 3,500km north-south span
- organised into inspiring translational research and teaching teams of distinguished scholars and students actively contributing to the current and future knowledge and technology explosion, and leveraging the links from theoretical to basic science through clinical to community and population health, influencing education, then driving change in practice and policy
- enhancing the lives of our staff and students, and building sustainable social, economic, and intellectual capital of the communities we serve.

(Flinders University, 2013)
JAMES COOK UNIVERSITY COLLEGE OF MEDICINE AND DENTISTRY SOCIAL MISSION

The College aims to promote health and strengthen medical care for communities of tropical Australia and beyond through socially accountable medical education, discoveries, partnerships, advocacy and leadership.

Underpinning our work is a commitment to social justice, passion for innovation and dedication to excellence in all that we do.

We see a future where people of the tropics, our wider region, rural and remote communities and Aboriginal and Torres Strait Islanders can be confident of good health and access to quality healthcare for themselves, their families and future generations.

(James Cook University, 2016)
Methodology

• Participants: Final year medical students
  Flinders University (4th year) & James Cook University (6th year)

• Interview proforma: the seven Engeström activity theory components; subject, object, outcome, mediating objects, rules, community, and division of labour (Engeström, Miettinen, & Punamäki, 1999)

• Ethical Approval: Flinders University Social and Behavioural Ethics Committee and James Cook University Human Research Ethics Committee
### Participant Characteristics

<table>
<thead>
<tr>
<th></th>
<th>Flinders University n=7</th>
<th>James Cook University n=7</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
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<td>6</td>
</tr>
<tr>
<td>26-30</td>
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<td>31-35</td>
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<td>&gt;35</td>
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<tr>
<td><strong>Gender</strong></td>
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<tr>
<td>Male</td>
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<td>2</td>
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<tr>
<td>Aboriginal/Torres Strait Islander</td>
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<td><em><em>LOTE</em> at Home</em>*</td>
<td>1</td>
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</tr>
<tr>
<td><strong>Official Representation on school committees and interest groups</strong></td>
<td></td>
<td></td>
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<tr>
<td>Yes</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>3</td>
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</tr>
</tbody>
</table>

*Language other than English
Data analysis

• Based on grounded theory including deductive and inductive coding, memo-ing, and provisional theory building (Kennedy & Lingard, 2006).

• Data was analysed deductively according to factors derived from the research proposition and interview questions, termed ALPSATS factors.
Results

**ALPSATS factor**
Student knows/understands the social mission

Students from both schools understood their institutions’ missions.

...urban as well as rural health, but also looking at indigenous health, gay and lesbian health, international health as well.

*(FU-01)*

I think the mission of the school is to provide medical graduates who are capable of and interested in working in you know, the more rural and remote areas of Australia who don’t just want to go to the metropolitan part and be super specialists, so they really want to get out and help the people who don’t have access to medical care.

*(JCU-02)*
Results

**ALPSATS factor**
Student agrees or disagrees with the social mission

Most agreed with the social missions of their institution and perceived the value of practising medicine with social awareness.

*I like to think that I am working towards being a professional with social accountability*  
(FU-02)

*...if we weren’t to look after them, then who would?*  
(JCU-07)
Results

**ALPSATS factor**
Student perceptions of their peers’ response to the social mission

Variable with the majority of students agreeing with the missions of the schools.

...If you have an issue with it, you shouldn’t have come really and I don’t know of anyone who’s particularly upset with it.

(JCU-06)

...pockets of people who are more in tune with it

(FU-04)
**Results**

**ALPSATS factor**
Student perceptions of their teachers’ response to the school’s social mission

- Diverse with varied commitment.
- Clinical teachers committed to rural or Indigenous health role modelled this in teaching.
- Rural areas on board with social mission
- Regional areas focus on clinical medicine

...people that you really admire because of their knowledge. People that you really admire because of their willingness to teach. People that you really admire other than for their values, who are strong advocates for their interests, their passions, so different people for different things”.

(FU-04)
Results

ALPSATS factor
Training influenced by social mission

- At FU, students undertook course with intention to work in rural or remote regions.
- Clinical placements reflected schools social mission through exposure to rural/remote context and patient diversity.

- At JCU, training was recognised as aligned with curriculum with some students comprehending importance of topics later in course

... in younger years I, we would complain about...the Rural Remote Indigenous and Tropical [module in 2nd year], like why are we learning this? It’s so stupid, I just want to learn about cardiovascular medicine, and go do anatomy. But I do think it’s really important now, I’m glad we were taught it... (JCU-02)
Results

**ALPSATS factor**
Career choice influenced by social mission

- Mix in career choices.
- Career choice was about location.
- While some were unsure of return to rural areas, appreciated rural disparities.

...it’s impossible to go do your training in any of these things without going to a massive tertiary centre in Brisbane....

(JCU-01)

...it’s important to be aware of that (rheumatic heart disease) because not everyone lives in a metropolitan centre and your patients will be from different areas of the country...

(JCU-02)
Externalization of social mission

- FU and JCU are very explicit about their social mission
- Curricular externalization; include placement opportunities
- Academics and health professionals are role models
- SM layered and influenced by externally accredited models
Internalization of social mission

• Three core concepts:
  – Community as a unit of engagement and responsibility
  – Social justice issues
  – Workforce distribution issues
Type A: Committed  
FU n=4   JCU n=1  
- Already committed to rural practice  
- Pre-existing vocational interest in rural health, reinforced by SM of the medical school  
- The SM provided an opportunity to deepen and to express a sensitivity that already existed

Type B: Converted  
FU n=2   JCU n=4  
- Persuaded to become clinicians working in underserved communities  
- Influenced by clinical placements and teachers as role models, developed an interest in rural medicine or Indigenous health  
- Experience of SM was an ‘eye-opener’, especially when clinical placements were positive yet confronting experiences that changed their career choices and attitudes.

Type C: Consigned  
FU n=1   JCU n=2  
- Uncommitted, neither persuaded nor constrained by their choice of vocational training  
- Several expressed values aligned with the medical school SM, however, few were neither sensitive nor interested in social accountability.
Recommendations

• Our research can guide schools defining or pursuing a SM, and guide staff and students in programs that are informed by a SM.

• Raising the awareness of health professional educators about how students may experience a SM should allow for the development of more nuanced and effective strategies and programs in support of a SM.

• We also hope that this work will stimulate critical thinking and inquiry regarding the use and impact of social missions in health professional education.

• Collaborative international qualitative research is challenging but worthwhile!
“Social accountability of medical schools is initiated and driven by students themselves” (Woollard 2006: 310).
Where to from here?

Results from just 2 schools is limited by small participant numbers but all THEnet schools data is being published.

1 paper has been submitted for publication and 2 papers are in development.
References


Thanks

...and acknowledgments

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