

▲ What Attracts Students to Interprofessional Education and Other Health Care Reform Initiatives?

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Background: An international consensus has emerged that interprofessional education (IPE) and other health care reforms are necessary to address the increasing complexity of patients' health needs. Despite overwhelming barriers to its system-wide implementation, health professional students worldwide have organized themselves to promote IPE and have achieved considerable attention. This study seeks to offer insights into what attracts students to IPE and other health care reform initiatives and how advocates of change can stimulate this interest. **Methods:** Using a qualitative research methodology, 69 students representing 25 disciplines from 22 institutions across North America were interviewed and surveyed on why and how they became interested in IPE. **Results:** Students were attracted to the possibility of enhancing patient care (n=17), advancing their careers (n=17) and learning more about the issue (n=15). The participating students first became involved in IPE after they joined a student organization (n=21), attended an IPE conference (n=10) or received personal encouragement to do so from a dean (n=2), instructor (n=3), school administrator (n=7) or peer (n=11). These findings point to several strategies that advocates can use to capitalize on the potential of student advocacy to gain support for IPE and new health care innovations. **Conclusion:** This study is the first of its kind to delineate how clinicians, educators, researchers and policymakers can attract students to health care reform initiatives. This work can inform the strategic efforts of advocates to make the idea of IPE and health care reform more attractive to students (as both learners and leaders) and enlist their help in achieving it in the future. *J Allied Health* 2009; 38:e75 – e78.

AS HEALTH CARE NEEDS become increasingly complex, an international consensus has begun to emerge that a new paradigm for providing health care services is necessary (1). One such paradigm endorsed by the World Health Organization is interprofessional collaboration (2), which is a patient-centred, team-based approach to health care delivery that synergistically maximizes the strengths and skills of each contributing health professional (3). While this approach has been largely accepted, curricular reform within health professional programs at universities and colleges remains one of its greatest challenges. Disciplinary faculty structures, uniprofessional reward systems, cross-departmental competition and professional accreditation demands are all significant barriers to its system-wide implementation throughout higher education (4,5).

Despite these obstacles, health professional students worldwide have embraced interprofessional education (IPE). National student networks in Canada and the United Kingdom have formed to promote IPE, and students have orchestrated hundreds of innovative academic, social and community outreach initiatives (3). While research shows that students largely enjoy individual IPE experiences (6-9), no study to date has identified what attracts students to IPE or the factors that influence their decision to champion it. This paper seeks to address this gap by offering insights into why and how students first become interested in IPE and how advocates of IPE and other health care reform initiatives can stimulate and capitalize on this interest.

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Methods

Sixty-nine students from across Canada (96%) and the United States of America (4%) were asked why and how they became interested in IPE at the 4th Annual Canadian Interprofessional Student Conference (18-20 January 2008, London, Ontario) via semi-structured interviews (n=34) and an open-ended questionnaire (n=35). The student participants were from 22 universities/colleges and represented 25 disciplines, including kinesiology (n=3), medicine (n=1), nursing (n=18), nutrition (n=3), occupational therapy (n=3), paramedic (n=3), pharmacy (n=4), physiotherapy (n=2) and social work (n=3). Hosted by the National Health

Sciences Students' Association – the world's first national student organization devoted to IPE – this meeting was an optional two-day event that was attended by students who were excited about IPE and health care reform. Students were randomly recruited between conference sessions and were not offered any incentives to participate. The verbal and written responses were analyzed using a qualitative research methodology, with two reviewers (SJH and DR) identifying themes first independently and then together through an iterative process. Descriptive statistics were extracted from the qualitative data through further analysis and representative quotations from the participants were identified.

Results

Table 1 describes the eight themes that consistently emerged from the students' responses for both why and how they became interested in IPE, ranked according to the frequency that each was cited. Several representative quotations have also been included.

Students reported that their interest in IPE stemmed largely from their desire to provide better patient care (n=17), enhance their future careers (n=17), and satisfy their personal curiosity on the issue (n=15). Several students also noted the significance of IPE to the success of the health care system (n=4) and its overall general importance (n=14). For example, one medical student explained that he believes “optimum patient/client care and efficiency of the health care system is dependent on interprofessional care” (Participant 14). Students also frequently became interested in IPE after previous experiences where they saw effective (or disastrous) teamwork/collaboration firsthand (n=15), especially in clinical settings (n=10). As one occupational therapy student explained, “at school and placements I learned that IPE is very important and necessary for providing best care for patients” (Participant 18). Frustration with poor collaboration among the health professions was mentioned as a motivating factor (n=5), including one social work student who “became interested in IPE after spending time in a hospital setting and seeing the redundancy and lack of coordination

Table 1. Self-reported reasons for *why* and *how* students become interested in interprofessional education

	Identified Themes	Frequency (n)*	Representative Quotations
Why?	A) To provide better patient care	17	“...I realized how important it is to work interprofessionally for patient-centred quality care, and how this needed to start at the education level” (Participant 24, Nursing).
	B) To enhance their future careers	17	
	C) Personal curiosity	15	“Collaboration among different professionals seems [to be] the main key to meet and improve the...health care system” (Participant 26, Nursing).
	D) Previous experiences	15	
	...in clinical placements (10)		
	...with IPE that were positive (4)		
	...as a patient (1)	“...I think it's important to branch out and ... interconnect to the other professions. I want to raise awareness of what we [optometrists] do, but also to get education about the other professions” (Participant 53, Optometry).	
	E) Believe it to be important		14
F) Frustration with existing poor communication among professionals	5		
G) To improve the health care system	4		
H) To bridge knowledge gaps among professions	3		
How?	A) Personal Encouragement	23	“When I heard about IPE from a few friends I just thought it makes sense” (Participant 20, Nursing).
	...from a School's Administration (7)		
	...from a Fellow Student (6)		
	...from a Friend (5)		
	...from an Instructor (3)		
	...from a Dean (2)	“IPE has been emphasized in classes so I wanted to learn more about it” (Participant 18, Occupational Therapy).	
	B) Opportunity to Join IPE Student Group		21
	C) Opportunity to Attend IPE Conference		10
D) Email Announcement	7	“I became interested in IPE last year when I joined the London Interprofessional Healthcare Students' Association. Prior to joining LIHSA, I had no previous experience with IPE, and joining the group allowed me to be able to gain more experience with interprofessional education” (Participant 16, Genetics).	
E) Via Other Extracurricular Activities	7		
F) Participation in an Optional IPE Experience	4		
G) IPE Clinical Placement	2		
H) Participation in a Mandatory IPE Experience	2		

* Number of the 69 participating students who gave responses related to each theme.

that occurs when professionals do not work together” (Participant 23).

With regards to how students first become interested in IPE, our results indicate that students respond favourably to leadership opportunities, as well as occasions to network with like-minded individuals. The opportunity to join student groups devoted to promoting IPE was a very common way that the participating students first became involved in this area (n=21). As in other contexts, this study suggests that engaging students through conferences can be an effective way to draw them into various initiatives (n=10). The influence of friends (n=5) and fellow students (n=6) also emerged from our respondents, as did the power of personal encouragement from professors (n=3), deans (n=2) and school administrators (n=7). One kinesiology student, for example, reported that “a friend of mine told me about the whole concept and explained it to me, and then I got the email about the [IPE] conference and I wanted to see what it was all about” (Participant 59). A nursing student, on the other hand, mentioned that “in one of our classes, our dean spoke to us about interdisciplinary education” (Participant 10) which seemed to be a particularly influential introduction to this issue. Simple actions like emails from faculty and/or student organizations were also surprisingly effective at catalyzing students’ interest in IPE (n=7).

Discussion

This study is the first of its kind to delineate how clinicians, educators, researchers and policymakers can attract students to IPE and other specific health care reform initiatives. While results for the first research question (i.e., why students become interested in IPE) point to three broad motivations to which advocates of health care reform can appeal, responses to the second research question (i.e., how students first become interested in IPE) tell us how advocates can communicate these messages most effectively.

Firstly, advocates of health care reform can appeal to students’ optimism by highlighting how they can improve patient care and/or enhance the health care system through the relevant initiative. In the case of IPE, it is clear that students were attracted by the perception and hope that inter-professional collaboration can improve patient outcomes. Secondly, advocates can focus on students’ self-interests. Indeed, this study shows that students may be more likely to become engaged in a health care reform initiative if they see direct benefits to themselves, their colleagues, and/or their future clinical practice. Highlighting the personal benefits of promoting health care reform, such as opportunities for career advancement, may therefore be an effective strategy. Finally, it is clear that advocates of IPE and other health care reforms can appeal to the curiosity of students, who may be ignorant about particular reform efforts and interested in learning more.

In terms of how advocates can engage students, our results indicate that strong encouragement from prominent mem-

bers of the academic community (including student leaders) may be a very influential factor in whether students become interested in health care reform. Role modeling such behavior may also influence students to engage in these efforts (10-12). Supporting or facilitating the creation of student groups at educational institutions through mentorship can also yield particularly significant returns (13) as it may spawn an entire grassroots movement with which to partner. Finally, the creation of opportunities to personally experience the benefits of IPE and other health care reforms can be particularly powerful.

Strengths of this study include both the sheer quantity of students that were interviewed and their diversity in terms of health professional program and educational institution. The results are limited, however, by the use of self-reports which – particularly for sensitive matters such as personal motivations – necessarily increases the risk of introducing social desirability bias into the results. The impact of such bias, however, must not be overstated as participating students were rather blunt about their self-interests. The sample of participants was also limited to those who invested both the time and money necessary to attend a national conference. This weakness, however, is also a noteworthy strength as it demonstrates how the participants in this study are among the most highly attracted to health care reform such that they are willing to devote their time and creative energy to it. This is indeed the exact type student that health care reform advocates would want to attract to their initiatives.

Conclusions

As the need for transformational change within health care systems becomes progressively more acute, advocates of health care reform will increasingly want to build support, recruit allies and nurture champions among students who can not only promote specific policy solutions among their peers but also champion them in the future. This analysis of students’ responses not only identifies some of the factors that attract students to health care reform but also what stimulates their interest in it beyond the formal curriculum environment. This work can no doubt inform the strategic efforts of advocates to make the idea of IPE and health care reform in general more attractive to students (as both learners and leaders), and enlist their help for achieving it in the future.

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