#7Q Short Communications: Community Oriented Medical Education

Location: Room 207

#7Q1 (2819)

Transformative teaching in the community to break negative stereotypes of first year medical students at the FMUL

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Background: Students’ stereotypes are frequently wrong namely when contacting with handicapped/vulnerable people. Each stereotype has associations/scripts which influence what people say/decide when interacting with others. To change subconscious negative stereotypes (conversion model) small groups (4-6/students) were sent for disconfirming evidence to community institutions considered excellent in the way they support vulnerability.

Summary of work: Back to FMUL, at the ‘Seminar for Sharing Experiences’, students share the 'main message they got as future doctors' after visiting institutions supporting handicapped people, mothers with AIDS, prisons, refugee centres, etc. Content analysis was used to classify the messages from 62 groups and near 350 final students' written evaluations.

Summary of results: Messages focused on accept diversity/difference/prejudices (17), social support (16), integration/inclusion/rehabilitation (11), vulnerability (9), living again (9). The visits allowed students to change attitudes after discovering a new ignored reality right next door. Average of last 5 year impact on personal/professional development and importance of humanized medicine was 4.4/5 and 4.7/5.

Discussion: The educational strategy used to break students’ negative stereotypes appears to be effective. Although we have no objective results (only students’ perceptions which will be exemplified at AMEE Conference through some videos presented at the Seminar) we expect the visits will impact on current and future students’ attitudes and behaviour.

Conclusion: Changing students’ negative stereotypes is of crucial importance as they subtly biases their decisions, attitudes and ultimately actions. Results show the stereotype conversion can be achieved (at least at conceptual level) through students' contact with vulnerable reality supported by excellent community institutions. More opportunities should be offered throughout the course.

Take-home message: Faculties should invest in Transformative Education as proposed in 2010 Lancet Report but for this they must invest in converting students negative into positive stereotypes. This is of fundamental importance if schools want to develop students' 

#7Q1 (185)

The Social Responsibility of Medicine – principles and emerging directions for the “Change A World” program: innovation, leadership through community engagement in Israel

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Background: Service Learning provides ample opportunities for active engagement with communities, while identifying needs, engaging in prioritization, enhancing skills, and increasing civic engagement. The “Change A World” program was developed both as a university course and as an NGO, designed to address health disparities while installing civic responsibility.

Summary of work: Thirty first-year medical students were selected through an application and interview process and divided into four groups, each assigned with student mentors (advanced years in Medicine), faculty and community mentors. Groups investigated four areas: Sexual health, Oral health, Mental health and Refugee health and developed programs addressing community-identified priorities.

Summary of results: Four projects were developed: “Window to the Soul”: designed to reduce mental health stigma; “Or-health”: oral health promotion and treatment including diversion paths for youth engaged in prostitution; “Safe and smart”: sexual health education with at-risk youth; “Little Me”: refugee children’s health focused on eradication of Tinea Capitis.

Discussion: Students were able to explore themselves first and apply entrepreneurship, public health and community engagement principles in order to “change self and the world” and develop long-term projects. The partnerships provided students ample opportunities to meet real-world challenges, consider stigmas, and work together with community members and leaders.

Conclusion: Service Learning pedagogy and action learning can be implemented in medical schools assisting in fostering goals of medical education: developing active, informed and skilled graduates who considers, responds and engages effectively with communities to address civic challenges. The course elicited commitment translated into time and effort beyond expectations.

Take-home message: Creating spaces for students to engage creatively is exciting! Centering communities and forming interprofessional teams can help build the foundations for a safe and more collaborative healthcare practice. The presentation will elaborate on the process, principles, and new aspects of the four programs.
leadership attributes so that they may act in future as enlightened society change agents.

#7Q3 (1760)
Community Health Center-Based Outreach Clinic: gained competences and learning experience

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Background: Outreach enables teaching dental clinics to provide students with a sufficient range of procedures and provide the opportunity to work in real-life situations. This study aims to summarize the experiences of the students who participated in the Outreach Clinic (OC) of the Helsinki University Dental Clinic, with a dedicated teacher.

Summary of work: This work is based on procedures carried out by the third to fifth year dental students, extracted from the patient record system. The students’ self-perceived benefits and free-text comments, of the OC were collected as part of the questionnaire survey at the end of each academic year.

Summary of results: The OC especially complemented learning pedodontic procedures, which are sparsely available at the University setting. The majority of the students were very motivated to participate in the training, and reported that the OC was a supportive environment for learning to gain and broaden clinical experience.

Discussion: These positive experiences are partly explained by the work in real-life context, with a constant assistance by a chairside nurse. This also means that this learning model is more resource intensive than that at the university setting. Thus the learning objectives have to be carefully selected and efficiently carried out.

Conclusion: OC is beneficial for dental students to gain satisfactory clinical experience and self-efficacy beliefs, and provides procedures that are hard to get otherwise.

Take-home message: OC offers meaningful clinical experiences to students but cannot substitute for university clinical training.

#7Q4 (1323)
How to engage medical students in interprofessional care by home-care visits

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Background: Teamwork and multiprofessional collaboration are essential in home-care. It is a well-suited environment for medical students to increase their knowledge and skills in those areas. We developed a new activity: students performing a home-care visit and interviewing the patient, care givers from the community service and other health professions involved.

Summary of work: Students’ task: 1. To explore how the patient’s needs were taken care of and what professions contributed to it. 2. Write a reflection about the role of their own and other professions involved. Students answered a survey about how the activity influenced their understanding of different professions’ roles in home-care.

Summary of results: From September 2016 the activity was compulsory on the fifth term of the medical programme; 138 students performed the activity, 131 handed in reflections and 87 answered the survey. Students reported that the activity developed their understanding of other professions’ roles and provided useful knowledge for their future professional work.

Discussion: The majority of students performed the home-care visit together with a district nurse. This made them switch perspective from their own profession. It seemed to be important in order to increase their understanding of teamwork in home-care. Students seldom meet a patient in their home environment, which they appreciated here.

Conclusion: Home-care visits in primary care performed together with different professions can be an effective teaching and learning activity for medical students in order to deepen their knowledge about other professions’ roles in home-care and learn about collaboration and teamwork in a real clinical setting.

Take-home message: The opportunities for medical students to learn about teamwork and collaboration between different professions in home-care are rare. An activity with home-care visits together with other professions is appreciated by students and promotes their learning about different professions’ roles. Such an activity can be implemented as part of the curriculum.
#Q5 (2507)
ETGAR – Training students to tackle health inequalities. Evaluation of a novel student-delivered service that bridges transition between care settings

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**Background:** Effective ways to train medical students to address health disparities are yet to be found. Most attempts are conducted during the pre-clinical years, community or primary care rotations. The ETGAR course aims to increase competence in dealing with health inequalities through experience-based learning in hospital and home settings.

**Summary of work:** The student-delivered service includes recruiting patients in a hospital, a post-discharge home visit, checking treatment, a simplified personalized discharge letter and liaison with community services. A structured report-form guides students to examine social determinants of health (SDH). Peer and tutor feedback complete each learning session. Post-visit phone interviews explored patients’ views.

**Summary of results:** Forty students served 158 patients, most >60 years with chronic conditions. Evaluation indicated significantly increased student confidence in handling encounters, and appreciation by patients of visits. Qualitative analysis of reports revealed good identification of SDH with themes regarding patients’ circumstances, the hospital-community gap and ability/willingness to learn from patients.

**Discussion:** Meeting in both settings, home and hospital, exposed students to patients’ cultural and social world ensuring patients are not seen as just "someone with a patient gown, ID and a disease". Home visits raised awareness of the role/importance of community services. Preparing simplified letters and feedback meetings encouraged clinical reasoning.

**Conclusion:** ETGAR is a feasible student-delivered service, with potential to contribute to encouraging a holistic perception of the patient, understanding of social determinants in health and patient centeredness, and gaining skills to assist disadvantaged patients.

**Take-home message:** An experience-based educational program during the clinical years is a feasible and powerful tool to teach social health determinants, cultural competence and community-based medicine.

#Q6 (3215)
Learning psychiatry in primary care settings, from the perspective of fourth year medical students in Penang, Malaysia

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**Background:** The potential of primary care as a locus for undergraduate learning in psychiatry has been recognised, especially in recognising common mental disorders, but rarely evaluated. Our study aimed to determine the educational value of clinical psychiatry placements in primary care settings, from the perspective of fourth year medical students.

**Summary of work:** 113 students, in small groups, accompanying an academic psychiatrist to two primary care centres, performed supervised history-taking and diagnostic assessments. Learning experiences were evaluated through an anonymous questionnaire and four focus groups, each with 8-10 participants. Quantitative statistical analysis used Stata (version 13) and focus group transcripts were thematically analysed.

**Summary of results:** Of 93 (82%) questionnaire respondents, 79 (85%) felt the primary care experience exceeded their expectations. Focus group thematic analysis revealed advantages over other learning settings arising from contact with patients with undiagnosed common mental disorders with medical comorbidities. Students reported improved confidence in diagnosing mental disorders in primary care patients.

**Discussion:** Academic psychiatry has been criticised for its overreliance on secondary and tertiary care settings in undergraduate clinical teaching. Our findings suggest that undergraduate supervised clinical placements in primary care are feasible and provide added educational value, from the student perspective, in comparison to those offered in traditional psychiatric care settings.

**Conclusion:** Active participation in a primary care psychiatry consultation/liaison service provided added value, as perceived by medical undergraduates, in recognising common mental disorders, mental disorders that present as co-morbid conditions in primary care and general medical settings and are often undiagnosed or masked by physical symptoms.

**Take-home message:** As only approximately 4% of medical graduates pursue psychiatry as a career, undergraduate learning opportunities should prioritise the recognition and management of common mental disorders. Our findings suggest that supervised learning opportunities, on-site, in primary care settings should be provided as a routine component of the undergraduate psychiatry curriculum.
Nursing students’ perceptions of community care and other areas of nursing practice – A review of the literature

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Background: Healthcare is changing from care delivery in institutions to community care. Despite increasing labour market shortages of well-educated community nurses, few bachelor nursing students orientate on this area for a future profession, as they do not see this area as an attractive line of work.

Summary of work: We systematically reviewed recent literature on student nurses’ perceptions of different healthcare areas between January and August 2014, using the databases PubMED®, CINAHL®, ERIC® and PsychINFO®. A synthesis of 39 included articles was performed.

Summary of results: Students prefer hospitals as workplace, regarding mental health and elderly care as less appealing. Perceptions of community care vary widely, the most common being that it is unattractive because of its chronic care profile. However, another view is that it offers challenging, varied and meaningful work.

Discussion: Many nursing students begin their education with a layperson’s conception of the profession, shaped by media representations such as Grey’s anatomy. Gaining experience through education and during work placements reduces stereotyping by allowing nursing students to develop a richer and more nuanced view of the variety of work settings.

Conclusion: Students are not fully aware of the challenges involved in a community nursing career. They have a limited and often mistaken view of community care, especially underestimating the field’s complexity because it is less visible than in the environment of acute care in the hospital.

Take-home message: Understanding students’ perceptions of this field is key to positively influencing their willingness to consider community nursing as a future profession. Providing them with specific curricular content and employing a structured approach to preparation for work placement might help build a positive perception of community care.