
Enhancing Capacity for Self & Collective Care in Health Education and Practice

Work-in-Progress Presentation

Author(s): Elisabeth Bailey and Nassim Adhami

Presenter: Elisabeth Bailey

Time: 2:15 – 3:15

Health professional students face unique challenges to their wellbeing as they navigate the complex context of education in healthcare. Previous studies of Bachelor of Science in Nursing (BSN) students found that students' sense of belonging in their clinical and academic environments impacts their motivation, their developing self-identity as nurses, and their self-reported mental health and wellbeing.

These findings prompted our BSN program to develop an intervention designed to enhance belonging, critical resilience, and wellbeing among BSN students. A pilot project, the four-module BSN Self and Collective Care Series, was developed in consultation with the school's curricular committee and students. The overarching goals of the Self and Collective Care Series are to support students to 1) enhance skills related to self-knowledge, stress management, and self/collective care; 2) develop mindful awareness and reflective practice skills; and 3) increase opportunities for social support from peers and faculty in academic and clinical contexts. We have piloted this program and are in the process of evaluating outcomes. In this presentation, we will provide an overview of the series and observations from the first two cohorts of students. We will explore the value of building self and collective care skills into health professional educational contexts and share examples of strategies to bring evidence-informed practices into curricula.

From Strangers to Colleagues: Cultivating Belonging for International Medical Graduates in Canada

Work-in-Progress Presentation

Author(s): Kusai Alsalhanie and Jude Walker

Presenter: Kusai Alsalhanie

Time: 2:15 – 3:15

The journey of International Medical Graduates (IMGs) in Canada is strenuous and complex. Medical education literature has explored this journey from the perspectives of competence and cultural transition with little attention given to IMGs' sense of belonging. As Macmillan & Chavis (1986) noted, belonging "involves the feeling, belief and expectation that one fits into [a] group, feels accepted by that group and considers themselves an integral part of that group" (p.10). The authors of this CHES day presentation, reflect on the notion of a sense of belonging to the Canadian medical community as IMGs in relation to their experiences in undertaking exams, completing the application process, matching/post-matching, and residency.

The data was collected from the first author's reflective journal, which documented their experiences from the day they arrived in Canada until the end of the Transition to Discipline (TTD) training period of their first post-graduate year (R1). Additional data was gathered from IMGs' comments and posts on the social media platform, Reddit; and from a general literature review on IMGs and belonging. Preliminary results discuss factors that support and/or impede IMGs' sense of belonging to the medical profession and community during the pre- and post-matching stages. Supportive factors include community involvement (both clinical and non-clinical), reflective practices, practicing colleagues outside of Canada, fellow IMGs applying to training, IMGs who matched in previous years, non-profit associations like the Alberta International Medical Graduate Association (AIMG), and IMG-specific orientation programs such as the Clinical Assessment Program's (CAP) orientation. Factors that impede a sense of belonging include a lack of access to relevant information, difficulty in securing shadowing and observership opportunities, additional exam requirements, limited training positions and specialties, the push for standardization of admission within a diverse group, stereotyping of IMGs, and return-of-service obligations.

Enhancing the sense of belonging for IMGs can improve their integration into the clinical environment and support their wellbeing. As Baumeister & Leary (1995) asserted, we all have an innate need to belong. Given the current shortage of doctors in Canada, consideration of IMGs' sense of belonging is particularly important.

Fostering Belonging through the Formation of Instructor Assisted Study Buddy Partnerships

Author(s): Eden Fussner-Dupas, James Enns, Patrice Belleville, Warren Williams, Achol Jones, Al Rohet Hossain, and Gabrielle Reznik

Presenter: Eden Fussner-Dupas

Time: 2:15 – 3:15

Encouraging peer tutoring and support may provide a cost-effective and incentivized means to help both struggling students and top achieving students get more out of a course and their studies. In addition, encouraging peer tutoring and support may help offset the impact of the pandemic on student-led peer support networks by cultivating an environment where students learn invaluable lessons from one another to succeed in a particular course or field of study. Study buddy systems, where participating pairs or small groups, are all students from the same course have advantages over senior peer tutoring systems more prevalent in higher education across the country, facilitating enriched understanding of course material of all involved students. Student partnerships that form early on in students' academic careers can persist over the entire duration of their program and may even benefit from exchange of positions from tutor to tutee, depending on the subject matter. They also provide a mechanism for supporting the development of peer interaction skills. We invited over 1000 students at UBC to participate in the study buddy program in the 2023 academic year and monitored their success in the pilot study courses. We observed significant improvements in assessment performance in both high and low scoring students, relative to classmates who elected not to participate. With the support of a Faculty of Medicine strategic initiative grant we are now leveraging a matching tool developed by Dr. Bowen Hui at UBC-O to automate study buddy matching. Peer tutoring represents one way in which the quality of the learning environment may be enhanced without incurring additional costs. In addition to its cost-effectiveness and its ability to deliver in enriching both high and low-achieving students, an instructor-supported peer tutoring system may encourage students in re-establishing those vital peer support networks that were lost during the pandemic.

Identifying Supports for International Medical Graduates (IMGs) and New to Practice Physicians in Rural British Columbia

Author(s): Hadas Haf, Bruce Hobson, and Angela Wagner

Presenter: Angela Wagner

Time: 2:15 – 3:15

In rural British Columbia (BC), International Medical Graduates (IMGs) and new-to-practice physicians face integration challenges stemming from gaps in the local healthcare system and culture. (Lockyer et al., 2010).

Since 2018, Personal Learning Plans (PLPs) aim to support IMG and physicians with less than five years of rural practice experience, by pairing them with experienced Physician Advisors to co-create a plan with resources and support to optimize clinical practice, through goal setting.

A study analyzing 125 PLPs explores what topics were discussed to enhance support strategies based on learner experiences. Thematic analysis revealed common focus areas such as rural-specific skill development through comparisons between rural and non-rural settings, distinctions between IMGs and Canadian Medical Graduates (CMGs), specialties, training levels, and geographic regions within health authorities.

ED skills and pain management are common areas of focus. Discussions highlighted unperceived needs for coaching, mentorship, specialist connections and MOAs to bridge cultural differences to bolster confidence. Results underscore the relational approach of co-created PLPs, which unearth "hidden" needs for connection, validation, and guidance during the transition phase.

By identifying common areas discussed in PLPs we gain new insights into the types of desired supports IMGs/NtRP want, new resources we should develop, and suggests collaborative opportunities between UBC's CPD Rural program and entities like the Practice Support Program, Physician Services Commission, Physician Health Program, and The Guidelines and Protocols Advisory Committee. Addressing these needs may contribute to improve retention of new practitioners in rural BC communities, thereby strengthening healthcare delivery in these underserved areas.