

Community Partners' Perceptions of Emory's Community Learning and Social Medicine Course

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Maura George MD, School of Medicine

Abstract

In 2016, the School of Medicine implemented the Community Learning and Social Medicine (CLSM) course. First year medical students engage directly with a community partner site to better understand the organization's work and the needs of the community. In total, 30-40 community organizations are represented, each with 1-2 site leads who coordinate students' activities and communicate directly with the course instructors. In this study, we will explore community site leads' experiences regarding participation in the course through focus groups and surveys. Specifically, we hope to explore barriers and facilitators to implementation of the course and opportunities to optimize student contributions to the community site.

Background & Purpose

Over the past decade, graduate schools across the country have increasingly implemented service-learning courses; courses in which trainees work directly in the community to foster and facilitate relationships in the community. The purpose of such courses is to train future healthcare providers that are responsive to community needs and more generally enhance academic-community partnerships to improve the health of the community writ large. As service-learning programs in graduate schools continue to expand, it is critical that we better understand best practices surrounding student-community training and engagement, and community partner site needs

Methods

This is both a focus group study and survey study. Site leads will be invited to participate in focus groups. Those who are unavailable to participate or wish to provide further feedback beyond the focus group will be given the option of completing a survey. The end point is completion of 4-6 focus groups (5-7) participants per group. The endpoint for survey completion is dependent on the number of focus group participants. As there are 30-50 site leads (1-2 per site), we anticipate completion of 4-6 focus groups and 15-20 surveys.

SAMPLE QUESTIONS FROM THE FOCUS GROUP SCRIPT:

What are some benefits of having medical students engage with your organization?

Probe: What value do the students add? Are there any unique contributions from students you have observed?

Probe: Are there certain factors that facilitate student engagement, specifically with your organization

What are some of the benefits medical students bring to the community you serve?

Probe: What value do the students add to the community? What are some unique contributions to the community?

Probe: Are there certain factors that facilitate student engagement, specifically engagement with the community?

What are some challenges and/or barriers you have experienced engaging medical students with your organization?

Probe: Can you think of any examples of specific challenges you have observed?

Probe: Can you think of any solutions to these challenges?

Focus groups will be led by someone unaffiliated with the course who will ask open-ended questions using an interview guide to explore barriers and facilitators to site lead/community participation and opportunities for improvement. After the focus groups, we will invite all site leads to complete an anonymous online survey. Subjects will receive a gift card for their participation in either the focus group or the online survey.

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Conclusions

- Our project is well underway, thanks to the guidance and education received in this WHEA fellowship.
- The IRB process is less daunting than it previously seemed
- Dedicating time to meet regularly with a team of peers gave me the push to continue making progress on this scholarly work despite a hectic clinical and teaching workload.

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References

Carney PA, Schifferdecker KE, Pipas CF, Fall LH, Poor DA, Peltier DA, et al. A collaborative model for supporting community-based interdisciplinary education. *Academic Medicine* 2002;77(7):610-620.

Villanueva AM, Hovinga ME, Cass JL. Mater of public health community-based practicum: students' and preceptors' experiences. *J Public Health Management and Practice* 2011;17(4):337-343.

Okayama M, Kajii E. Does community-based education increase students' motivation to practice community health care? – a cross sectional study. *BMC Medical Education* 2011;11:19.