Mapping the Health Advocate Role Across Postgraduate Medical Education

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INTRODUCTION
BACKGROUND

• PGME programs struggle to formally embed health advocacy (HA) into the day-to-day curricula\textsuperscript{1, 2}

• Limited access to HA role modelling, experiential learning, and explicit teaching\textsuperscript{3-5}

• Many learners consider HA less important to master than other competencies\textsuperscript{2, 6}

• Few physicians and learners identify as advocates or perceive that they regularly engage in advocacy\textsuperscript{3-4, 7}
STUDY PURPOSE

- Explore how HA is conceptualized in the curricula
- Investigate how residents are expected to demonstrate their HA competence
- Determine how PGME programs develop learning objectives and activities to support learners’ development of HA
Review of publicly available curricular documents

Review of private curricular documents

Semi-structured interviews with residents (n=9) and clinician-teachers (n=6)

Iterative content analysis and group discussion
INTERVIEW RESULTS
Participants described misalignment between desired HA competencies and the methods used to teach and evaluate HA.

Various challenges to teaching and evaluating HA.

Lack of constructive feedback and robust evaluation criteria contributed to unclear expectations.
“‘You advocate; however, you should be really careful about burnout.’ It felt as though they were trying to tell me that sometimes advocacy may be futile, and so being careful of the battles you choose to advocate for or not”
DETACHMENT AND LACK OF FEEDBACK

- Trainees’ acquisition and integration of HA knowledge, skills, and attitudes varied across programs

- Both residents and staff reported that the formal HA objectives are rarely used during rotations

- Clinicians described that residents are unlikely to fail a rotation purely for poor performance as an advocate
“I cannot recall [or] even imagine that would happen. Where somebody would hit all the [other] benchmarks...but end up failing a rotation because they were just a really poor advocate. Not that it’s not important...but realistically...I just I haven’t seen that happen.”
“They think: ‘advocacy, yes it’s important, but I’m not going to kill anyone because I don’t know how to advocate well’. So, they get frustrated when it’s kind of tacked on to other assessments when they’re just trying to focus on those things first and foremost.”
DISCUSSION
DISCUSSION

• Learners require a clear plan for learning and demonstrating competence throughout residency

• Lack of clarity about the relevance of some advocacy objectives coupled with variable assessment criteria and the absence of feedback adds to learners confusion about the importance of the HA role\textsuperscript{5,8}
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REFERENCES


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