Fostering Socially Accountable Rural Health Research through Longitudinal Faculty Development

Presenter: Cheri Bethune
Shabnam Asghari, Tom Heeley, Wendy Graham, Anna Walsh
No Conflicts of Interest
Rural Physicians

Uniquely in tune with patients, community.

Know where research can make a difference in their local health system.

This research is socially accountable.

Lack skills, supports to conduct this research.

Longitudinal Faculty Development
'Rural scholarship is not bench science. It is purposeful in addressing community needs with evidence-based solutions.'
- Graham et al., 2017

Key Features

6 Rural Physicians

for

6 Sessions

Research Assistant
Individual Mentorship
Face-to-Face Workshops
Online Content
Small Group Learning
Peer-Review
Curriculum History

Needs Assessment

2013

2014

Program Start

2017

Rural360

2018

Graduate Courses

2019

Summit

Mitacs
Outcomes

Maximising Investment

$13.11/ $1

In grants Invested

Disseminating Outcomes

97 Other Outputs

'6for6 gives rural research a voice, and rural physicians a voice in research'

18 Publications

30 Alumni
Impacting Health Systems

Dr. Chris Patey
Alumnus 2016-17

$4.8 M

62 mins. Average wait time
Impacting Communities

Dr. Daniel Hewitt
Alumnus 2015-16

247 Citizens Surveyed.
98 Residents at Town Halls.

Areas of Potential Arsenic Concentration in Well Water

Legend
Public Water Supply Wells
- between 0.010 and 0.025 mg/L
- greater than 0.025 mg/L

Areas of High Arsenic in Lake Sediments

- 80 ppm
- 25 ppm
- 10 ppm

mg/L (milligrams per litre)
ppm (parts per million)
Impacting Medical Education

Dr. Amy Pieroway
Alumnus 2016-17

Published on early-career physicians' mentorship needs.

Figure 1

Mentorship Survey Highlights

- 57% do not have a mentor
  - 74% do not know an available mentor or how to find one
  - 18% do not want a mentor

- 43% have a mentor
  - 75% of these mentor-mentee relationships started organically
  - 81% report an apprenticeship model
  - 58% report a mentoring model

- 46% think they would benefit from a formalized mentorship program
  - 36% were unsure if it would benefit them

- Worthwhile incentives (top 3)^*
  - 79% Ability to report Masgro+ credit for participation
  - 35% An honorarium for participation
  - 32% No incentive needed

- Beneficial mentorship models*
  - 83% Apprenticeship
  - 68% Mentoring
  - 26% Peer mentoring
  - 14% Close

- Preferred mentorship program
  - 36% want one-to-one mentorship
  - 52% want both one-on-one mentorship and group mentorship

- Identified benefits (top 3)*
  - 99% Career coaching and support
  - 94% Increased confidence in personal and professional success
  - 73% Networking opportunities

- Perceived challenges (top 3)*
  - 72% Time commitment required
  - 63% Personality difference
  - 60% Unclear roles and expectations

*Select all that apply.
Impacting Patient Health

Dr. Charlene Fitzgerald
Alumnus 2016-17

Remote Innu community.
Group approach to perinatal health.
$40K grant.
Added to 2017-20 strategic plan.
Performance Monitoring

- Pre-Post Surveys
- Focus Groups
- Spidergram

Graduate Projects

- Learning & Outputs (MSc)
- Social Capital (Post-Doc)

Evaluation 2019-2020

Findings

- Learning improved pre-post
- Social capital improved pre-post
ENHANCES RESEARCH SKILLS

To

FOSTER FIT-FOR-PURPOSE SOLUTIONS

That

ADDRESS LOCAL HEALTH NEEDS
Thank You!
References


6 Principles

- Legacy/Network
- Needs Assessment
- Participatory Action
- Learner Centered Approach
- Stakeholder Engagement
- Communication

Secret Sauce