

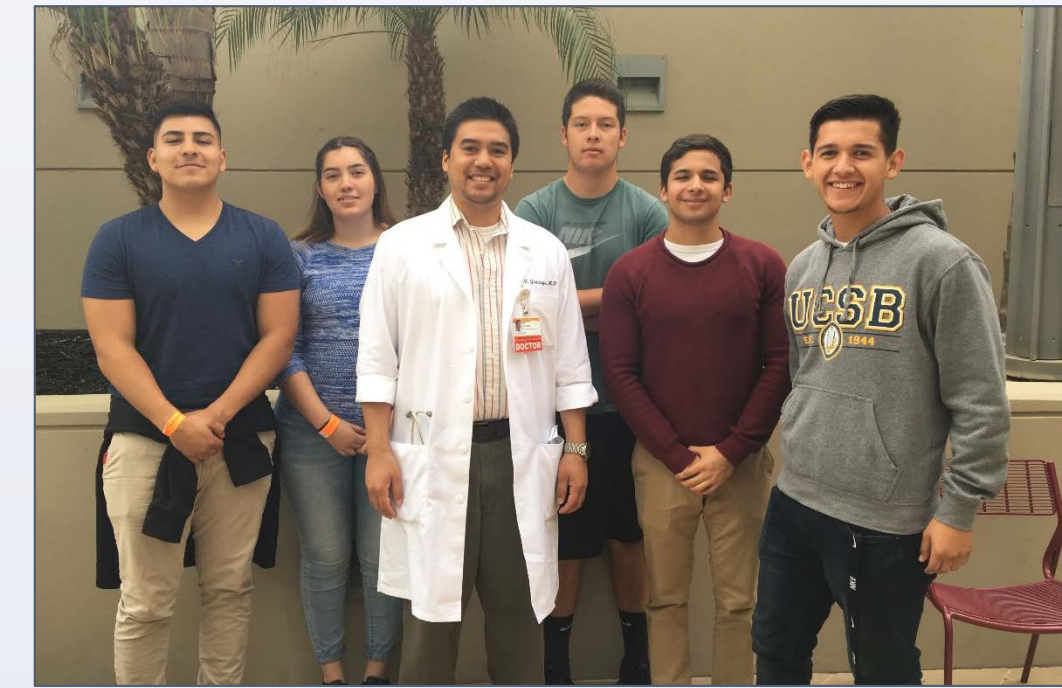
Family Medicine Residents Engaging Youth to Explore Health Careers in Low Income Communities

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1-Merced Family Medicine Residency Program, Mercy Medical Center Merced, 2-UC Merced , 3-Community Initiatives for Collective Impact

Background

- Primary care physician shortages affect low income communities throughout the US.
- Family Medicine Residency training programs in low income communities are one way to reduce shortages because physicians may remain in or near those communities post-residency.
- A new program was pilot tested to see if Family Medicine Residents may also encourage school students in their service area to consider exploring health careers and serving in their own communities.
- Few prior published studies were found illustrating resident physicians (of any specialty) as agents of career exploration for school-age youth.



Design of a Pilot Program: “Lunch with a Resident”

CBPR Conceptual Framework

- Program design, implementation, and evaluation used community-based participatory research (CBPR) principles and methods.
- Academic researchers, resident physicians, and students (from Middle School-to-college-age) provided input, implemented, participated, and evaluated the program.
- “Lunch with a Resident” engaged groups of students in a lunch-time conversation with a family medicine resident at the physician’s training hospital.



Program Components

- The program fit the schedule of busy residents and hard-to-reach students.
- Residents’ younger age made them more relatable, better role models, and overall more attractive to youth (relative to older physicians in practice).
- The visit to the hospital for lunch with a physician made for a special, more memorable experience for students, while exposing them to the health care environment.
- Residents and students were offered guiding questions to facilitate more meaningful career and life exploration.

Setting and Participants

- The Merced Family Medicine Residency Program is a non-competing program training 24 physicians in 3 cohorts.
- Program training includes Dignity Mercy Medical Center, the primary hospital for Merced County.
- Merced County is a HRSA-defined medically underserved area (MUA) and Health Professional Shortage Areas (HPSA).



- Students were selected from Middle and High Schools offering “medical academies” and programs for health career exploration.
- Bi-weekly lunches were scheduled for groups of 5 to 9 students from a given school with one resident physician.
- Lunches occurred in the hospital cafeteria.

Measurement

- Students completed pre-post surveys during their broader school program which included assessment of health career exploration.
- Students completed post-only surveys during the lunch-time program to understand their experiences, lessons, and recommendations for program improvement.
- Two focus group were conducted with participating students to understand their post-program reflections on the program’s influence, meaning, and recommendations for program improvement.
- One focus group was conducted with participating physician residents to understand their lessons about program implementation, value of the program to their residency training, and recommendation for program improvement.



Results

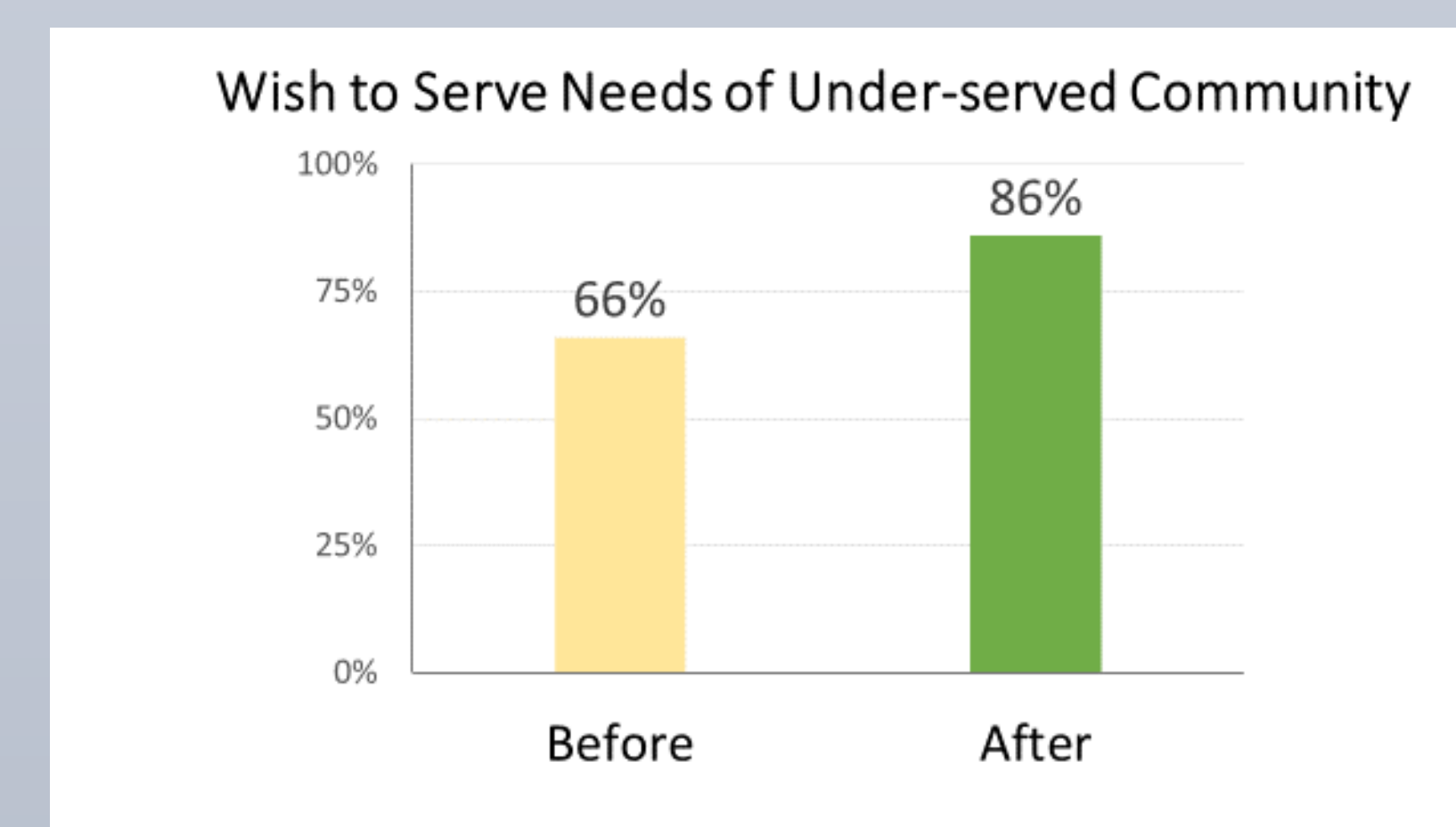


Student Demographics

- 74 students were in grades 8 to 10 participated in a lunch.
- 75% of Mexican/Hispanic ethnicity
- 98% were born in the US with 73% reporting parents were born outside of the US
- 51% spoke English at home (most speak Spanish)

Factors Important to Health Career Exploration

- 98% believe it is important to get a university degree
- 91% were encouraged by adults to attend school
- 82% were encouraged by adults for science classes
- 66% were encouraged by adults to become a health professional
- 22% had family relatives or close friends who work in healthcare settings (most in non-clinical roles)



97% of students would recommend program to their friends

Results (continued)



- Students recognized the shortage of doctors in their community as noted in discussions with residents and in focus groups.
- Most students were excited to learn about the period of “residency” as part of the physician career path.
- Most students learned, for the first time, what a resident physician is and does, and their service to lower-income communities.
- Students reported learning from the residents about
 - the length of medical education,
 - difficulties of balancing life and a medical career,
 - the arduous and lengthy journey of becoming a doctor, and
 - the amount of motivation needed to see through to completion in reaching a medical career.
- Perceived barriers by students interested in health careers included financial burden, the potential for error, time commitment necessary to see through to completion, difficulty with patient loss, competition, and difficulty of exams.
- Future improvements to the program might include adding internships or shadowing, additional time with residents, and providing a handout about residency/residents to ensure all students left the program with this information.

Conclusions

- A “lunch with a resident” program may be an easy, brief career exploration activity connecting physician residents with younger students in Middle and High School.
- Younger students seem interested in and comfortable with interacting with resident physicians as part of their health career exploration.
- Resident physicians may play an important role in health career exploration for younger students from lower-income communities by encouraging students to serve those communities.

Recommendations

- More resident physician programs should examine ways to help younger students explore health careers to serve lower-income communities.
- Program similar to “Lunch with a Resident” should be at least one hour, provide a uniform handout regarding topics discussed at the lunch and other career exploration resources, and possibly be followed-up with opportunities for internships or shadowing experiences with residents.
- Health career exploration program led by resident physicians should address academic, social, and financial challenges of medical education, offer ongoing guidance through medical school entry, and provide mentorship regarding work-life balance.

Contacts & Acknowledgements

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