

Promoting health careers to rural students

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Encouraging rural secondary students to consider possible careers in health is essential to building a sustainable, future health workforce. This paper outlines successful strategies used in promoting allied health, nursing and dental health careers to rural secondary students. A targeted project was conducted in 2009 and 2010 to increase enrolments in new and existing health programs at a regional university campus. A major focus was on significantly increasing the percentage of students from rural and regional backgrounds. The emphasis on attracting local students was consistent with one of the major aims of the University's strategic plan, improving tertiary education participation for rural and regional communities. The University sought to develop authentic and sustainable relationships with regional communities, including local secondary schools. Attracting local students from lower socioeconomic and indigenous backgrounds was a priority.

Background

Previous research has explored the issues rural school leavers face when choosing to study for a career in health. Barriers to further study, motivations influencing choice, the role of careers teachers and where student's source information about possible courses have all been considered.^(1,2) While there is some research relating to when students make career choices, there are many inconsistent findings.⁽¹⁾ Research that explores the link between choices of health course and attrition rates have been explored.^(2,3)

As highlighted in the Bradley Report⁽⁴⁾, participation rates of Australian rural secondary students in tertiary education is significantly lower than secondary students from metropolitan areas. Several studies^(1,2) reported that often rural secondary students lack the confidence to undertake university study, believing that they do not have the academic capabilities. Cost of tertiary study for rural students is another significant factor that has been identified.⁽²⁾ Rural secondary students generally have a lower knowledge of the broad range of health careers available.⁽²⁾ Researchers have identified that the need for rural students to relocate to undertake tertiary study has a major impact and leaving family, friends and other social supports is perceived as a significant barrier for rural students considering tertiary study.⁽²⁾

A study in the United Kingdom⁽⁵⁾ reported that prospective university students choice of course was most influenced by the career opportunities available upon graduation. Prospective students' confidence or capacity to undertake the course was another major influence. Importantly, it was found that school teacher advice relating to career choice was significant. Features such as the prestige of the university or course had much less influence on students' tertiary education decisions. Having contact with a health professional was reported by several researchers^(1-3,6) to be a major influence on the choices that were made and provided prospective university students with a more realistic view of what the profession involved.

While careers teachers played a major role in assisting prospective students make choices about tertiary courses and careers, research has indicated that their knowledge of health careers, particularly related to the allied health professions was limited.^(1,6,7) Careers teachers in rural schools were generally under resourced with information relating to health professions and courses.⁽¹⁾ Secondary students reported that university information such as that gained from attending open days, web sites and course prospectuses were trusted and frequently used sources of information^(7,8) with Internet sources becoming increasingly a more popular modes of communicating with prospective students.

Some authors suggested that students start to form opinions about health careers in primary school with misconceptions common.^(6,9) Career advisors believed that students should be given career information prior to year 10 with further information provided in the final two years of secondary school.⁽¹⁾ Researchers have indicated that having information prior to year 10 work experience is important as most students make their career choice sometime between year 10 and 12. An Australian study reported that providing year 10 students with opportunities to engage in practical sessions relating to health careers was beneficial⁽¹⁰⁾ although no longitudinal data were available to determine if this translated into enrolments in health courses.

Researchers have identified the importance of giving prospective students reliable and realistic information relating to health careers.⁽³⁾ Attrition from health courses due to students believing that they had made the wrong career choice have been reported.⁽³⁾ Researchers argued that many students did not have a comprehensive understanding of what the health profession involved or what the responsibilities were. Some had been influenced by health professions glamorised in television programs. Some students found the scope of practice of some health professions too narrow and this particularly occurred for students undertaking allied health courses.⁽³⁾ Having exposure to the clinical environment early in the health course was recommended to address some of the factors influencing attrition.⁽³⁾ Other reasons for attrition were that students felt academically underprepared, academic demands being too high or not enough support.⁽³⁾

A strategic approach to course promotion

In this project there were a number of course promotion/stakeholder engagement strategies undertaken to increase enrolments in a broad range of existing health courses. Some of these courses in previous years had difficulty in meeting enrolment targets, had falling ATAR scores or had lower percentages of students from rural backgrounds. Some of the courses in allied health and paramedical studies were new.

In previous years visits to rural and regional schools were organised through career teachers and these were continued. The visits involved an academic who represented all courses speaking with year 11 and 12 students. However, this approach required a significant time commitment, and the success of these visits was unpredictable. Participation in University wide activities such as open days, information nights for mature age students, and come and try days during school holidays were undertaken, however, staff believed there was significant potential value in implementing new strategies that may be more meaningful for students and would support greater key stakeholder involvement.

Relationship building through mentoring and a health careers expo

A significant project to build a sustainable and authentic relationship with a major local senior secondary school commenced in 2009 with a variety of activities occurring. A mentoring program that matched university students studying health courses with secondary students in year 11 commenced in 2009 and continued into 2010. Sixteen secondary students expressed interest in being involved and were paired with university students studying the course they were most interested in. Mentoring training and frequent visits to the University campus, including campus tours, occurred that provided students with a more realistic view of university life. This program enabled greater information relating to health courses to be provided and ensured that prospective students were aware of facilities and supports. The program provided a strong focus on preparation for the transition to university.

This initiative was evaluated and while response rates to evaluation surveys were low, generally there was positive feedback from students and from the secondary school teachers involved. The mentoring program will continue in 2011 with recruitment of another cohort of year 11 and 12 secondary school students who will be matched with university students. The mentoring program will expand to include secondary school students in other rural and regional schools. The program has attracted interest from other non health faculties and it is likely that the program will be expanded to other areas of the University.

Consistent with the aim to build strong University/secondary school relationships a major strategy involved the staging of a health careers expo at the school during a pathway assembly. This expo involved local health professionals, current university students, academics and student administration officers. Over two hundred secondary students attended. This has now become an annual event and a partnership has developed with another university which has a regional clinical school of medicine. Follow-up presentations at assemblies by academics and current university students that previously attended this secondary school were made to secondary students in the science pathway or those interested in health careers.

These strategies appear to have had an impact, with enrolments from the secondary school involved in the project increasing from 31 in 2009 to 83 in 2010. Although some of this growth in numbers may be related to the introduction of three new health courses in 2010, the relationship with the secondary school has been considerably strengthened. International students enrolled in the secondary school have visited the campus to meet current international university students, and second year undergraduate occupational therapy students have undertaken professional placements in the secondary school to support the learning of refugee students. The secondary school teaching staff are now promoting the University as a positive tertiary education option whenever possible.

A comprehensive visiting program for rural and regional secondary school students

A program was piloted that involved campus visits and a comprehensive program for rural and regional year 10 secondary students. To date, seven secondary colleges and over 500 students have visited. These visits have provided students with exposure to university life, and opportunities to engage in practical activities that have profiled nursing and allied health professions. Students have engaged in health skills laboratories sessions, tours of campus facilities and experiential library tours. They have received information about possible health careers including the positive aspects of these careers. Each visit was finished with a pizza lunch and each student took away a show bag of university information.

The major aim of this program was to break down the perception that tertiary education is out of the reach of these students, highlighting university life as being very positive and expanding their knowledge of what health careers are available including the pre-requisites needed. Attendance at other university activities such as open days and come and try days was also encouraged. Feedback from career teachers has been extremely positive with several commenting that they had never been approached by universities for sessions or visits for year 10 students. It is yet to be determined if these visits will result in future increased interest and enrolments in health courses in later years. Visits for students in year 8 and 9 from a neighbouring school were also undertaken, however, a different format was needed to maintain engagement.

Building relationships with careers teachers

Building relationships with career teachers has been a major aim of this project. Several presentations and tours of facilities were organised for careers teachers. Over fifty careers teachers have visited the University in 2010. To highlight the attractiveness of health careers and courses, tours of the facilities were organised, interactive sessions in the dental laboratories organised and general course information provided. These visits sought to educate careers teachers about why regional campuses often had lower course ATARs. Information about the recently introduced rural bonuses for prospective rural and regional students, particularly for dentistry and allied health courses, was given to careers teachers. This approach has sent a strong message that the University wants local students from rural and regional backgrounds.

Utilising current students as role models

There has been a focus on the utilisation of university students studying health courses in community course promotion activities. Students who had completed secondary studies in the region were targeted to provide assistance as it was believed they provided strong role models and demonstrated that tertiary studies were possible for rural young people. Wherever possible, ex-students from local rural and regional secondary schools were included in school expos, school visits, open days or career information nights in their previous school. Positive role models who can give prospective students credible and realistic information are perceived to have a significant impact. Often they relate personal stories of feeling anxious about going to university, being the first person in their family to attend university or the positive experiences of undertaking professional practice placements in local health services.

Relationships with health clinicians

Establishing relationships with local health clinicians has been vitally important in promoting courses to the community, providing work experience to secondary school students and supporting other promotional activities directed at potential students such as career expos.

Developing a strong media profile

The overall course promotion project has included a major increase in media profiling of the University and particularly the health courses. The commencement of new health courses, the opening of new facilities or the announcement of additional funding for courses or infrastructure was accompanied by press releases. Being situated in rural and regional communities provided the University with more opportunities to utilise local media and increase its profile within local communities. This has assisted in increasing the community's perceived ownership of the University and its courses and has been particularly effective in reaching prospective student populations such as mature age students, who are often a difficult group to engage with.

In 2010, most health courses exceeded their enrolment targets and increased the number of rural and regional students enrolled. High profile courses such as dentistry and physiotherapy continue to attract metropolitan students; however, there is a commitment to using strategies such as increased rural bonuses to ensure greater numbers of students from rural and regional backgrounds. In courses such as occupational therapy strategies to attract regional students have been highly successful with almost one hundred per cent of students in 2010 from a rural and regional background. In 2010, the ATAR for this course was higher than the program based at the metropolitan campus dispelling the myth that all regional health courses have lower course ATARs. Other courses such as nursing which had not met enrolment targets in 2009 had full enrolments and a higher course ATAR in 2010.

Discussion

While this project coincided with significant expansion of health course offerings and increased places for existing courses, ongoing effective course promotion will be needed to sustain the gains made. The project sought to develop long term relationships with local schools and this requires a commitment to planned activities that will strategically benefit all involved. Activities such as school visits are particularly beneficial in developing relationships with career teachers; however, they require significant time and staffing resources. There is a need to have multiple approaches to suit various prospective student populations.

Reaching students before they choose subjects for final years of secondary schooling is important for a number of reasons and is recommended in the literature.⁽¹⁾ In year 10, students undertake work experience; therefore giving them information relating to health careers is important to encourage them to consider work experience with local health and human services. Support to provide work experience opportunities in local services is necessary and appears to be often restricted, with many careers teachers reporting difficulties finding work experience places in regional services. This highlights the need to engage with local clinicians and health services.

School teachers and especially careers advisors are very influential in raising the profile of a university or course within a school student population. If a teacher advising students on potential tertiary courses perceives that a particular university provides quality courses that will suit students from that school, this will have a major impact on prospective enrolments. Providing incentives for students to consider courses such as rural bonuses, early entry and offering courses in regional locations is attractive for rural students. Inviting prospective students and career advising teachers to visit the University, view the facilities and meet former students from that secondary school are powerful influences, often turning around negative perceptions of the University or courses.

Ensuring that students select pre-requisite subjects is essential, particularly if science subjects are required. Encouraging students to keep options open for possible careers in health is needed from university marketing staff and also careers teachers. Reducing the perception that university is academically beyond the reach of rural and regional students needs to be addressed by the secondary schools, universities and the community. With lower tertiary education participation rates in rural and regional areas, fear of the unknown is common and the use of positive role models such as current university students from rural and regional backgrounds is a significant strategy to overcome this negative perception. To highlight and promote the benefits of tertiary study, the successes of rural and regional university students need to be celebrated by the community and developing positive relationships with local media is vital.

For some time medicine has adopted the regional clinical school model to encourage students to consider a possible future career in rural practice, however, early indications are that the strongest factor influencing choice of rural practice is where the student was educated and lived prior to university.⁽¹¹⁾ Targeted

recruitment of rural and regional students appears to be the most effective strategy for growing a long term stable health workforce for rural and regional areas. While most regional university based health courses do provide rural bonuses for academic entrance, more needs to be done to increase rural student confidence and aspirations. Programs such as mentoring with university students, contact with local health professionals and encouragement from careers teachers are all effective methods of building confidence amongst young people.

While this project was specifically targeted at the secondary school population, it is important to consider that enrolment rates of mature age students in regional areas are higher than metropolitan based courses. Therefore the university profile within the community and support for students returning to study is important. Articulation pathways with the TAFE sector are important. Providing opportunities for graduates to change career direction should be encouraged and the development of graduate entry programs should be promoted.

Conclusion

Increasing tertiary education participation rates within rural and regional communities requires multiple and long term strategies. Recruiting rural and regional students is a sustainable and strategic method of ensuring that health and human services will have a quality workforce in the future through recruitment and more importantly retention of health professionals. With changes to higher education to be implemented in 2012 in response to the Bradley Report⁽⁴⁾, academics, local health professionals and health organisations will need to ensure that health courses are appropriately marketed and are attractive for prospective students. Universities need multiple entry points into health courses to cater for school leavers, mature age and graduate entry students in addition to flexible learning and teaching approaches to meet the needs and expectations of future students.

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