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Article abstract

Implication Statement

Advocacy curricula in Canadian medical schools vary significantly. Expert-led, interactive workshops can effectively teach students how to address social determinants of health and advocate for patients. The Longitudinal Advocacy Training Series (LATS) is a free-of-charge, virtual program providing advocacy training created for Canadian medical students by students. The program was straightforward to implement and had high participation rates with 1140 participants representing 9.7% of enrolled Canadian medical students. As well, the program had high satisfaction reported by 87.6% of participants. The LATS toolkit enables health professional programs to develop similar programs for empowering effective health advocates.

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Longitudinal advocacy training for medical students: a virtual workshop series

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Implication Statement

Advocacy curricula in Canadian medical schools vary significantly. Expert-led, interactive workshops can effectively teach students how to address social determinants of health and advocate for patients. The Longitudinal Advocacy Training Series (LATS) is a free-of-charge, virtual program providing advocacy training created for Canadian medical students by students. The program was straightforward to implement and had high participation rates with 1140 participants representing 9.7% of enrolled Canadian medical students. As well, the program had high satisfaction reported by 87.6% of participants. The LATS toolkit enables health professional programs to develop similar programs for empowering effective health advocates.

Introduction

The Royal College of Physicians and Surgeons of Canada identifies the CanMEDS role of "Health Advocate" as fundamental to physicianship. Despite the physician's duties as a health advocate, there are significant gaps in advocacy curricula across Canada. Many students express frustration and hopelessness when confronting inequities and detrimental policies affecting their patients. Calls for a unified, competency-based and interactive

Énoncé des implications de la recherche

Au Canada, les programmes de formation en matière de promotion et de défense des droits varient considérablement d'une faculté de médecine à l'autre. Les ateliers interactifs dirigés par des experts constituent un outil efficace pour enseigner aux étudiants la façon aborder les déterminants sociaux de la santé afin de défendre les droits des patients. La Longitudinal Advocacy Training Series (LATS) est un programme virtuel gratuit de formation à la défense des droits, créé par des étudiants pour les étudiants. Le programme, facile à mettre en œuvre, a connu un taux de participation élevé, à savoir 1140 participants représentant 9,7 % des étudiants en médecine au Canada. En outre, 87,6 % des participants se sont dits très satisfaits du programme. La trousse à outils LATS permet aux programmes de formation des professions de la santé de mettre sur pied des modules similaires pour donner aux étudiants les moyens de devenir des défenseurs de la santé efficaces.

advocacy curriculum across Canadian medical schools are widespread, including from student organizations such as the Canadian Federation of Medical Students (CFMS) and the medical education literature. The CFMS's Longitudinal Advocacy Training Series (LATS) is the first ever national program designed by students, for students, to address this important gap in medical education.

Innovation

The LATS was developed in consultation with students, physician experts, and community partners across Canada. Program development was guided by principles of accessibility, interactivity, expert-led, and skills-based education. Workshop topics were selected to include essential advocacy skills based on consultations and current literature. Participants who completed at least three workshops and a reflection exercise received an official CFMS certificate. Workshops were offered approximately three times per month over eight months with average duration of 1.5-2 hours. The LATS organizers also developed an open access Advocacy Training Toolkit consisting of curriculum structure, learning objectives and resources to help guide any medical school or health professional program in developing their own advocacy education.² The annual cost of the program for the organizers was \$25 CAD per speaker honorarium (\$625 total). Logistical requirements included 10 medical student organizers, 25 workshop facilitators, and one graphic designer.

Evaluation

This study received a 'Review Exempt' letter from the University of Toronto ethics board. In its inaugural year (2020-2021), the program consisted of 25 expert-led workshops hosted virtually in the context of a global pandemic. There were 1,140 participants representing all Canadian medical schools and 233 certificates (20.2%)

completion rate) awarded. On average, 55 participants attended each workshop.

Upon program completion, a survey assessing program satisfaction and skill acquisition using a 5-point Likert scale was distributed to all participants who registered for at least one workshop. Descriptive statistics were used to analyze data of 113 respondents (9.9% response rate). Overall, 87.6% of respondents were satisfied with LATS, 83.2% would participate again, and 86.7% would recommend LATS to a friend. 87.6% and 83.2% of respondents agreed they would apply the knowledge and skills learned respectively in their future careers. 78.7% of participants agreed LATS filled a gap in their medical education.

Next steps

The Longitudinal Advocacy Training Series is an accessible, free-of-charge intervention providing Canadian medical students with practical advocacy skills. With high uptake and satisfaction, this program will be offered annually by the CFMS. Similar programs can be implemented by medical schools and other health professional programs. Limitations include low survey response rate (9.9%) and moderate program completion rate (20.2%). Future directions include assessing barriers to program participation, implementing, and reassessing participant feedback, and evaluating advocacy skills application in clinical settings.

Table 1. Participant responses to Post-Series Survey using a 5-point Likert scale (n = 113)

Question	Strongly Agree (%)	Agree (%)	Neutral (%)	Disagree (%)	Strongly disagree (%)	Mean score /5 (±SD)
Overall, I feel satisfied with my experience participating in the Longitudinal Advocacy Training Series program.	33 (29.2)	66 (58.4)	13 (11.5)	1 (0.88)	0	4.16 (0.65)
I would participate in the Longitudinal Advocacy Training Series program again.	46 (40.7)	48 (42.5)	18 (15.9)	1 (0.88)	0	4.23 (0.74)
I would recommend the Longitudinal Advocacy Training Series program to other medical students.	47 (41.6)	51 (45.1)	15 (13.3)	0	0	4.28 (0.69)
The Longitudinal Advocacy Training Series program filled a gap in my medical education.	45 (39.8)	44 (38.9)	23 (20.3)	1 (0.88)	0	4.17 (0.78)
I will apply the advocacy knowledge learned during LATS to my future training and/or career.	39 (34.5)	60 (53.1)	13 (11.5)	1 (0.88)	0	4.21 (0.67)
I will apply the advocacy skills learned during LATS to my future training and/or career.	42 (37.2)	52 (46.0)	18 (15.9)	1 (0.88)	0	4.19 (0.73)
CanMEDS defines a health advocate as physicians who contribute their expertise and influence as they work with communities or patient populations to improve health. Health advocates work with those they serve to determine and understand needs, speak on behalf of others when required, and support the mobilization of resources to effect change. Based on this definition, the Longitudinal Advocacy Training Series provided adequate training in the CanMEDS Health Advocate competency.	35 (30.9)	62 (54.8)	14 (12.4)	2 (1.77)	0	4.15 (0.70)

Conflicts of Interest: None

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Authorship: Courtney Hardy and Mary Ellene Boulos are co-first authors.

References

- Luft LM. The essential role of physician as advocate: how and why we pass it on. Can Med Ed J. 2017 Jun;8(3):e109. https://doi.org/10.36834/cmej.36925
- Canadian Federation of Medical Students. Advocacy training toolkit. Ottawa: 2020. 31p. Available from: https://www.cfms.org/files/CFMS%20Advocacy%20Training%2 0Toolkit.pdf

- Stull MJ, Brockman JA, Wiley EA. The "I want to help people" dilemma: how advocacy training can improve health. *Acad Med.* 2011 Nov 1;86(11):1349. https://doi.org/10.1097/acm.0b013e3182308e14
- Bhate TD, Loh LC. Building a generation of physician advocates: the case for including mandatory training in advocacy in Canadian medical school curricula. *Acad med*. 2015 Dec 1;90(12):1602-6. https://doi.org/10.1097/acm.0000000000000841
- 5. Earnest MA, Wong SL, Federico SG. Perspective: physician advocacy: what is it and how do we do it?. *Acad Med*. 2010 Jan 1;85(1):63-7. https://doi.org/10.1097/ACM.0b013e3181c40d40
- Benrimoh D, Hodgson E, Demko N, et al. Policy paper: advocacy and leadership in Canadian medical student curricula. 2016 Mar. Available from: https://cfms.org/files/position-papers/2016 advocacy%20and%20leadership.pdf [Accessed Sep 9, 2021].