



Health Careers in the Bush

Health Careers Workshop Research Evaluation Project Summary of Results

The overall goal of the Health Careers in the Bush Program is to increase the number of health professionals working in rural and remote Queensland. To achieve this goal there must be a progression of events starting with:

- generating an interest in the health professions;
- enrolment and education in a health program;
- employment in health, and finally
- to working in a rural or remote area.

One of the strategies being implemented in Queensland to support the goal is the Health Careers Workshops whose main objective is to provide students with a further understanding of the health career pathways available to them.

Health Careers Workshops have been conducted in Queensland for ten years. In terms of national statistics, we have the longest history in Australia of conducting such consecutive workshops and the only state / territory to maintain a state wide database of participants.

Since the inception of the workshop series in 1994, 832 students have participated in over 52 Health Careers Workshops.

The first research project conducted in Queensland, undertaken by Natalie Hindmarsh in December 2002, was a survey of 277 of the 327 past participants at the time who had attended a Year 10 Health Careers Workshop between 1995 and 1999. Of the 94 respondents to the questionnaire, 52% had completed or were in the process of completing a health related tertiary course. A further 23% intended to upgrade or gain entry to medical school.

In 2004, the Centre for Rural and Remote Area Health (CRRAH), University of Southern Queensland (USQ) was commissioned by the three Queensland Health Rural Health Training Units to undertake research into the outcomes of the past ten years of Health Careers Workshops conducted in Queensland. The purpose of the research was to provide:

- reliable assessment tools for the evaluation of future Health Careers Workshops;
- a unified approach towards data collection across the three workforce/training units;
- a centralised database; and
- to evaluate the Health Careers Workshops conducted between 1994 and 2002.

A total of 70 past workshop participants participated in the telephone interviews conducted by USQ, with a result of 90% of respondents either employed in the health industry or studying to do so.

The vast majority surveyed indicated that attendance at the Health Careers Workshops had a major impact on their course and career decisions by providing:

- information to assist them in their choice of tertiary course/s;
- information about life at university;

- information about individual health professions that supported career decisions;
- opportunities to meet people with similar interests; and
- an environment where individuals from remote and rural areas could gain confidence in communication and interaction.

Participants Tertiary Education Profiles

The following table provides a list of the tertiary education courses undertaken by the participants of the recent study.

TABLE 1 - Subject area of enrolment in tertiary education courses

Subject area for tertiary education	Current university status			Other Training Institutes Enrolled or graduated	Courses of those not interviewed
	Current enrolled at under-graduate	Graduated	Currently enrolled at post-graduate		
Health related subjects					
Biochemistry			1		
Biomedical Science		1			
Environmental Science					1
Exercise Science	1				
Food Science					1
Health Informatics		1			
Health Science		1			
Massage Therapy				2	
Medical Science		1			
Medical Imaging		1			1
Medicine	4		3		3
Naturopathy				1	
Nursing	1	19	1	3	3
Nutrition		1			
Pharmacy	2	4		1	
Physiotherapy	1	2			2
Podiatry		2			
Psychological Sciences		2			3
Occupational Therapy		1	1		
Research Methodology			1		
Science		5			1
Social Work		1		1	
Special Education					1
Speech Pathology	1	2			1
Sport & Exercise Science	1				
Ultrasound			1		
Vet Science		2			
Sub total	11	46	8	8	17
Non health subjects					
Arts		1			
Business		1		1	
Engineering		2			2
Commerce	1	1			1
Creative Industries					1
Hospitality					1
Justice Studies		1			
Law	1				
Music		1			
Textiles				1	
Theology	1				
Town Planning		1			
Sub total	3	8		2	5
Unknown					2
TOTAL	14	54	8	10	24

As at the 31st December 2004, 55 people had graduated from their first program of study. Eight of these were still enrolled at university where they were undertaking postgraduate programs. Three of these eight were studying postgraduate medicine at the University of Queensland after having completed a Bachelor of Science for their first degree. A further three were upgrading skills through postgraduate certificates in medical imaging, nursing and occupational therapy and two were in MSc and PhD programs. One person had already completed an MSc degree in psychology.

There were only three people who failed to complete a course for which they enrolled. However, in all cases they subsequently re-enrolled in another degree.

By far the largest undergraduate course enrolment was in nursing with 20 participants undertaking the Bachelor of Nursing / Bachelor of Health Sciences and three more in the enrolled nurse program at TAFE. The next highest enrolment was in medicine which attracted seven participants; three as undergraduates and four as postgraduates. This was followed by pharmacy (6) and science (5), with the latter taken by three as a prerequisite to medicine.

Tertiary Education Institutes

Most of the participants in the study enrolled in tertiary education in Queensland. The highest attendance was at the University of Queensland with 34% of the university degrees. This was followed by James Cook University (20%) and QUT with 14%.

Contributing Factors to the Courses Taken as an Undergraduate

Interviewees were asked to rate the factors which contributed to selection of their subject area for tertiary studies. Each of nine factors was rated independently from 1 to 5. A rating of 1 indicated that the factor played no contribution to their choice whilst 5 constituted a major contribution to choice. The results are presented in Table 2 below in order of mean rating.

Table 2 - Contributing factors to selection of subject to be studied at tertiary level

Factor	Mean rating	Number of participants giving the rating				
		5	4	3	2	1
Self interest	4.36	33	29	5	2	1
Health Careers Workshop	3.24	6	28	21	7	6
OP score	2.76	12	15	15	4	23
Family background	2.80	8	12	17	18	15
Tertiary institute prerequisites	2.68	8	13	15	10	23
Future financial benefit	2.68	3	14	18	15	18
Career advice	2.60	6	14	22	16	12
Cost of course	1.76	1	2	13	15	38
Cost of living	1.76	0	4	15	19	29
Other	4.32	13	8	3	1	0

Self interest was the most important with 89% rating it very high, with the second most important factor being *Other* with twenty-five people offering a variety of contributing factors to their course selection including pre-requisites, failure to get into first choice and the reputation of the college.

Attendance at a Health Careers Workshop had the next highest mean response (49%).

OP score had a mixed response with 39% rating it in the top two categories and also 39% in the bottom two.

Cost of the course and *Cost of living* whilst studying were not rated very important at all.

Reason for Attending the Health Careers Workshops

Seventy-seven (77%) percent of those interviewed said that they had already decided on a career in health prior to attending a workshop. They stated that the reason for attending was either to obtain more information about a specific health profession or to find out the variety and alternatives in the professions. However, half of all participants actually modified their career choice or narrowed the choices of interest during the workshop. Most changes were within allied health professions, for example from occupational to speech therapy. Comments from the interviewees revealed that this was because of information acquired during the workshop which enabled them to make more definite decisions.

Effect of Health Careers Workshops on Personal Development

In response to a question as to whether their participation at the workshop assisted in their own personal development, 56 participants (80%) said that they believed that it had. When asked as to the aspects of personal development that had been influenced, the most common answer given was the development of “people” skills such as networking and communication. Gaining confidence and independence by being away from home was also mentioned on several occasions.

Effect of Health Careers Workshops on Career Choice

Sixty-four (64) of the 70 people interviewed said that attendance at the Health Careers Workshop had helped them in their course and career choices. A further three were unsure if the workshop had made a difference and three said that it had made no difference. Five of these last six people selected health related courses / careers (medicine, nursing, pharmacy and physiotherapy) and said that they had already made their course / career decision prior to attending the workshop.

Attendance at the Health Careers Workshop helped participants to make choices and in half of the instances that decision was not to change from the plans they already had. In fact 36 participants indicated that their career choice before they attended the workshop and after the workshop was the same.

Thirty-four however, indicated that they made a change to their choice during the workshop including from a situation of “no idea” to a choice of a profession, from one health profession to another or by adding or removing professions from their list of possible careers.

The career with the most change pre and post workshop was medicine. Twenty of the 70 interviewees said that before the workshop they wanted to do medicine. This was reduced to 13 post workshop. The seven people who dropped their pre workshop choice of medicine to another discipline changed to nursing (5), veterinary science (1) and psychology (1).

Forty-seven participants stated that their career path had changed since the end of their attendance at a Year 10 Health Careers Workshop to the present day. This group included nine of the 13 people for whom medicine was their career of choice post workshop. The reasons for the change were varied and included academic, geographical and personal reasons.

Influence of Other People on Career Pathways

The vast majority (55, 78%) considered the support that they had received from their parents as excellent. The manner in which the support was offered varied but most noted both financial and emotional support.

Fifty-two of the 70 interviewees stated that their career decisions had been influenced by people other than their parents such as relatives, friends or role models. In many cases it was friends or friends of parents who were employed in the health professions and/or relatives who supported them.

On only nine occasions were any comments made about school staff and only two specifically about school guidance officers.

TABLE 3 - People who had a major influence upon career-making decisions

Influence	Number
Work colleagues	4
Relatives	17
Friends	14
School teachers	9
University lecturers	4
HCW personnel	1
Other	3

Employment

Of the 70 people interviewed 49 were in employment and a further 17 were enrolled in either undergraduate or postgraduate courses. Table 3 provides a breakdown. One person had just graduated from a non-health related area and was job hunting, two were taking time out from employment to travel and one was raising a family.

TABLE 4 - Professions of those people employed

Health Profession	Number	Non health profession	Number
Dietician	1	Accountant	2
Intern	1	Brother	1
Medical Scientist	2	Engineer	1
Nurse	18	Music teacher	1
Occupational Therapist	2	Retail	2
Pharmacy	4	Town planner	1
Physiotherapist	2		
Podiatrist	2		
Psychologist	2		
Reflexologist	1		
Social Worker	2		
Speech Pathologist	2		
Veterinarian	2		
Sub total	41	Sub total	8
TOTAL	49		

Thirty-eight of the 49 who were employed were in their first job post graduation. A further 11 were in either their second or third jobs. For the latter group the reasons for leaving included to be with a partner (2), move to a more desirable or more permanent job (7), to move closer to home (1) and less shift work (1).

The geographical distribution of those 49 in employment was divided among rural, regional and metropolitan locations. The reasons for working in the particular geographical area are given in Table 5.

TABLE 5 - Reasons given for working in a rural, regional or metropolitan area

	Rural	Regional	Metropolitan
Number	15	18	16
Gain experience		3	5
Career opportunities			4
Family or partner	5	5	3
Lifestyles	8	5	5
Job availability		3	
Financial considerations		1	
Scholarship obligation	1		

The vast majority had moved from those areas to either regional or metropolitan areas for their tertiary education. They were asked what type of person they thought they were now. Four of the 16 people working in the metropolitan area said they considered themselves now to be metropolitan people in their outlook and four stated that they were regional. However eight still considered themselves to be rural people just working in a metropolitan area. Of those working in regional areas nine said they considered themselves regional people and nine said rural. All those working in the rural areas said they still considered themselves rural.

Participants in the study who were working in metropolitan or regional areas were asked as to the likelihood of them working in regional/rural or rural areas, respectively. Their responses are given in Table 6.

TABLE 6 - Likelihood of people moving employment into rural or regional areas

	Current location of employment	
	Regional	Metropolitan
Number	18	16
Likelihood of moving	Would work rural in future	Would work rural or regional in future
Definitely	4	4
Probably	4	6
Possibly	5	4
Unlikely	2	2
Non-committal	3	0

Value of Health Careers Workshops

At the time of the follow up questionnaire in 2002 only six of the respondents reported that the workshops had not been useful to their career decision process. However, all went into health related professions and in later free comments on the questionnaire two indicated that attendance at the workshop had helped. In 2005 only one of 55 people said the Health Careers Workshop had not helped them in their course selections.

Themes on value of the Health Careers Workshops

Seven major themes as to the value of the Health Careers Workshops emerged from the comments that were offered:

- Provided general information about tertiary education;
- Encouraged, guided and motivated an interest in the health professions;
- Showed opportunities for rural student;
- Provided a general overview of health professions and what they entailed;

- Gave insight into various options to support decisions on what to take;
- Gave information as to what to exclude and to narrow choices down;
- Recognised importance of the health requirements in Indigenous communities.

Conclusions

As a result of the selection process for workshop attendance, the study could not demonstrate definitively that the Health Careers Workshops Program contributed to the recruitment of health professionals. However, it has shown that the Program contributed significantly not only to the retention of those interested in the health industry but to the return of trained health professionals to rural and regional areas. The benefit to the health industry from these workshops has been substantial in relation to the small amount of funds invested.

Without question, participants to the workshops were provided with valuable information that improved their understanding about careers in the health industry and encouraged their enrolment in tertiary health courses. Without the information offered by the workshops we suggest that many of the students would not have retained their interests and not pursued a health career.

Furthermore, the data suggests very strongly that the workshops do contribute to the overall objective of the Health Careers in the Bush program in that they are instrumental in encouraging the majority of students to return to a rural/remote area when they graduate from the higher education sector.