Review of existing training programmes and materials

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Migrants & Ethnic Minorities Training Packages

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CONSEJERÍA DE IGUALDAD, SALUD Y POLÍTICAS SOCIALES

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AIM AND SCOPE OF THE REVIEW

The main aim of this review is to **identify**, **select** and **assess** existing good quality training programmes for training health professionals in Europe, which address the particular issues related to improving access and quality of health care delivery for migrants and ethnic minorities.

Objectives

- To provide on overview of selected training materials developed and delivered between 2004 and 2013 in the 28 Member States of the EU.
- To analyse the training materials collected in order identify trends, gaps and success factors.
- To assess the training materials collected using a set of quality criteria
- To produce a directory of training materials selected with the quality criteria
- To propose recommendations and action guidelines.

REVIEW STRATEGY

Literature Review

- PubMed + MEM-TP National Contact Persons: number of references included 6
- Google + Google Scholar: number of references included 11
- Total of references included = 17

Survey

- 28 EU countries contacted: 19 responded
- 7 IOs and NGOs contacted: 3 responded
- 100 templates sent out: 65 received

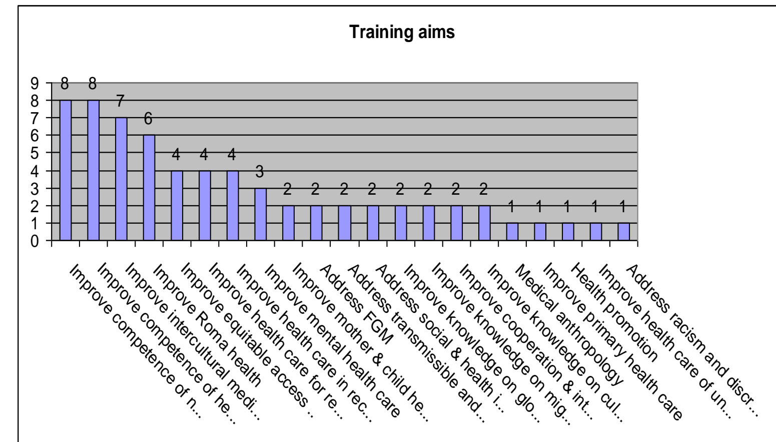
Both strategies used the same conceptual framework to collect information (7 domains framework)

CRITERIA FOR SELECTING AND ANALYSING INFORMATION

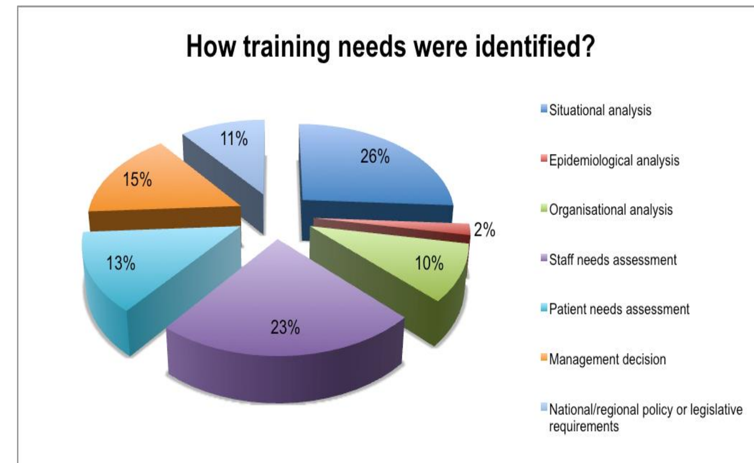
Conceptual framework adapted from Horvat, et al (2014) based on **seven key domains** that describe the core components of training programmes:

1. **Training description**: aim and training objectives, training needs, training modules.
2. **Training development and delivery**: general organisations; location, scope, setting and funding of the programme.
3. **Participant characteristics**: participants involved in training programmes, trainers and trainees.
4. **Training approach**: pedagogical approach; broad conceptual model; focus of the training.
5. **Educational content**: sensitivity and awareness; knowledge; knowledge application; skills.
6. **Structure of the intervention**: method of delivery and format; frequency and timing; organisational support.
7. **Evaluation and outcomes**: evaluation method used; types of outcomes measured (for patients, staff and organisation).

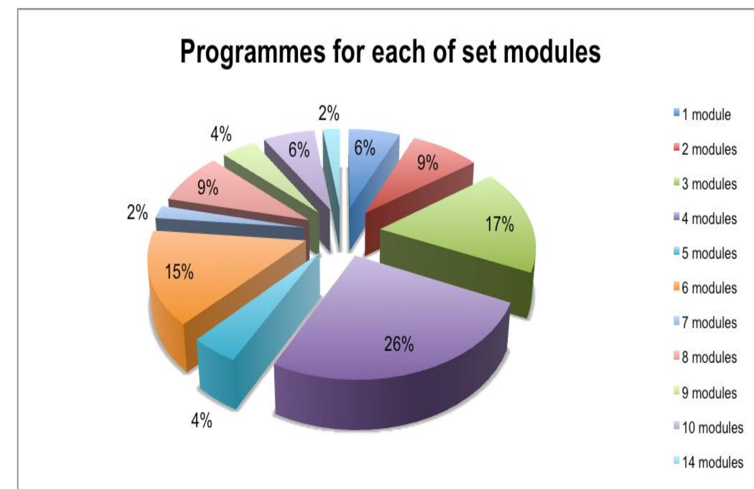
Findings
Domain 1: Training description



1. **Training aims:**
    - The most common focused on improving competence of health professionals (nurses) in dealing with specific health issues (mother and child care; mental health; transmissible diseases)

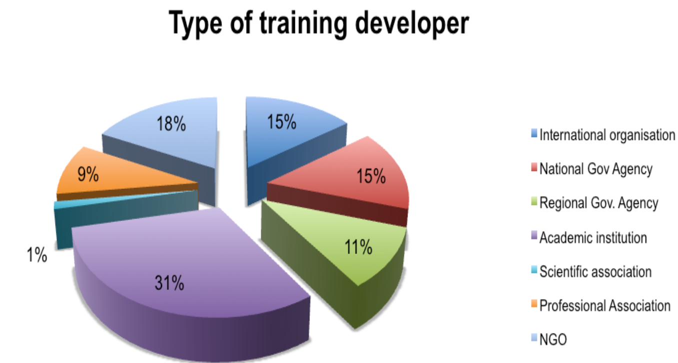


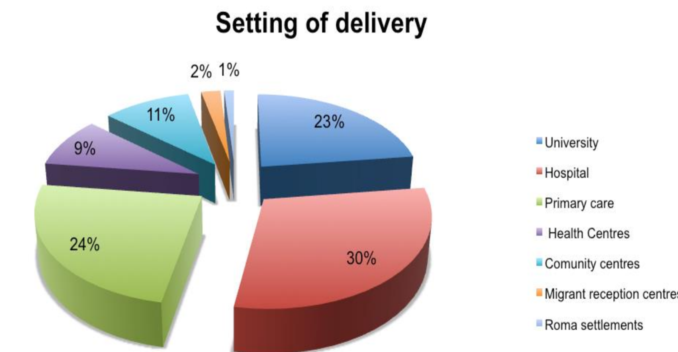
2. **Training needs:**
    - Various methods of analysis used (except epidemiological analysis).
    - Few attempts to integrate patient's needs with health professional's needs or organisation/context analysis)

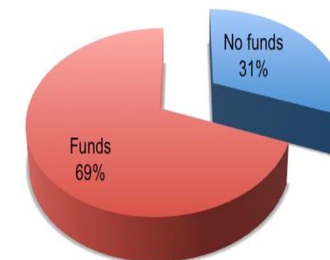


3. **Training modules:**
    - Mainly organised in a small number of modules (3 – 4 modules)

Findings
Domain 2: Training development and delivery



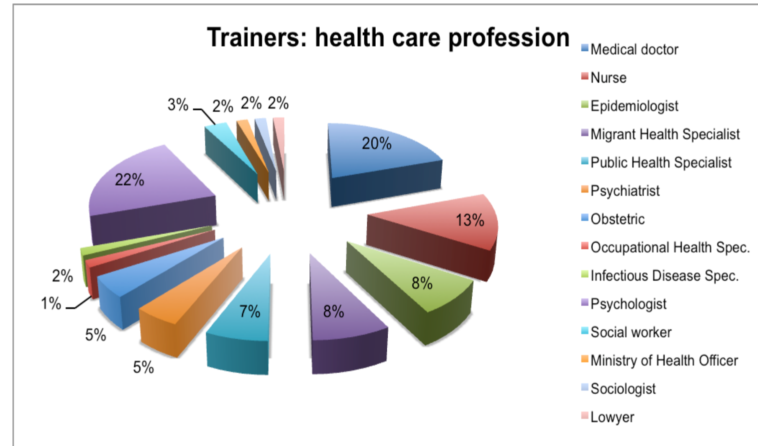


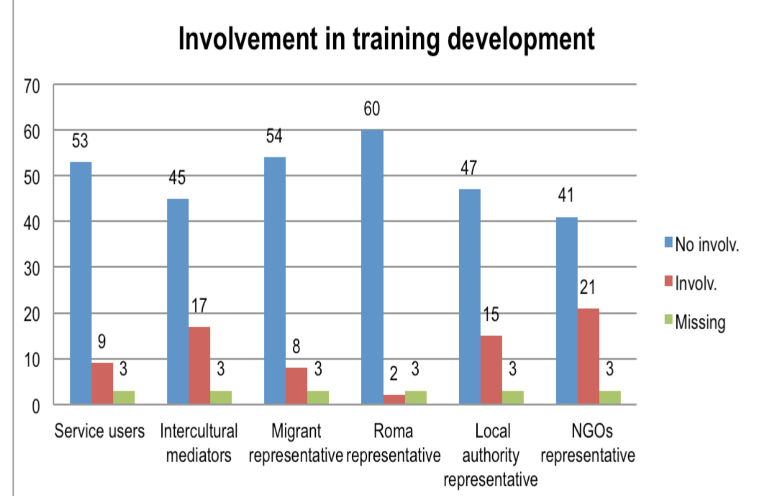


1. **Developer and deliverer:**
   - Mainly academic institutions and national/regional government agencies, to a lesser extent NGOs, international organisations and professional associations.
2. **Setting:**
   - Traditional and typical, such as university, hospital and primary care; little evidence of atypical or innovative training settings.
3. **Funding:**
   - 1/3 had no funds. The majority received funds from national or regional governments and in some cases from International Organisations as well as European funds.

Findings
Domain 3: Participant characteristics

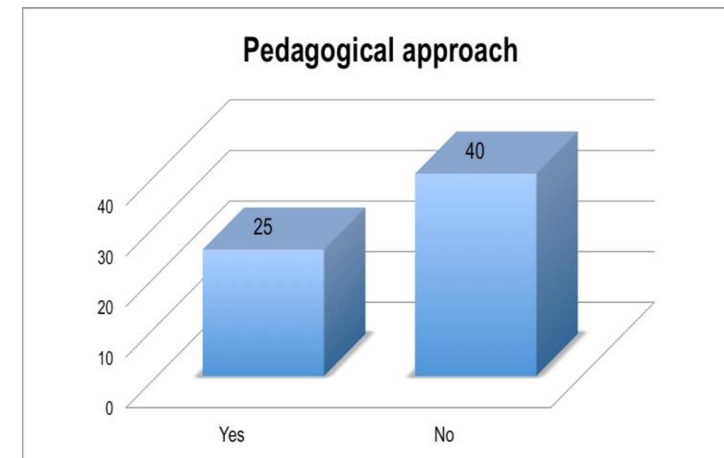
1. **Workforce targeted:**
    - Training usually directed exclusively to health professionals (MDs, nurses,..). Health managers and decision makers are underrepresented.
2. **Trainers:**
    - The largest group of trainers belonging to the health profession were MDs, nurses, psychologists, others were anthropologists, intercultural mediators, experts, ..
3. **Involvement:**
    - Low level of involvement of service users, MEMs' representatives, and local authorities both in the development and in the delivery of training programmes

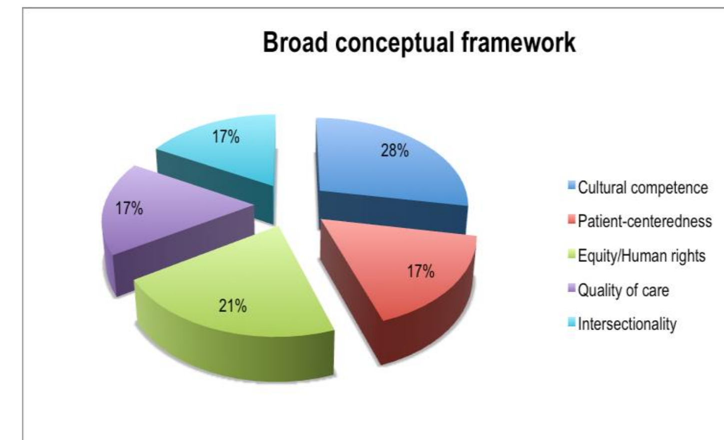


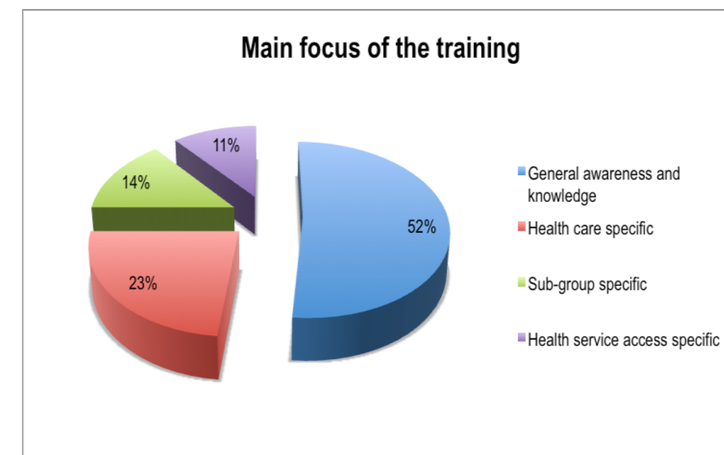


Findings
Domain 4: Approach

1. **Pedagogical approach:**
    - Only one third of the training programmes described their pedagogical approach and the theoretical constructs and principles that underpinned it.
2. **Conceptual framework:**
    - Whilst cultural competence continued to be the most frequently adopted framework, alternate approaches such as intersectionality, equity and person centeredness did emerge.
3. **Focus of training**:
    - General focus on improving awareness and expanding knowledge and capacity of health professionals to be more informed about migrants' health and situations. Few programmes focused on barriers to healthcare access

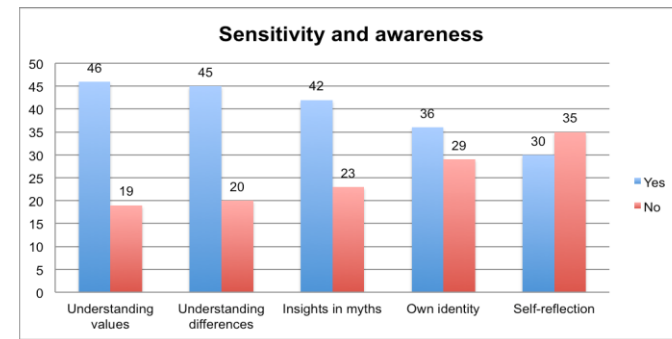


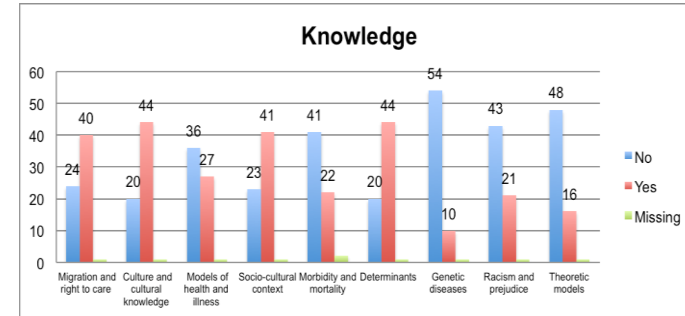


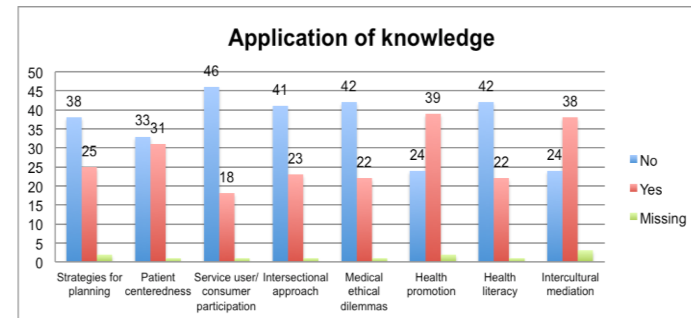


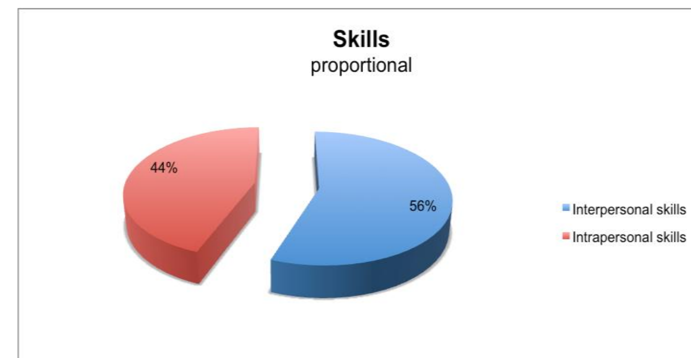
Findings
Domain 5: Educational content

1. **Sensitivity and awareness:**
    - Only half of the trainings covered “self-reflection and self-critique” although high reporting of “understanding individual values, beliefs and differences”. Low correlation
2. **Knowledge:**
    - Mostly migration and right to health care but insufficient focus on racism and discrimination and its impact on health and health care.
3. **Application of knowledge**:
    - Intercultural mediation, health promotion and patient centeredness mostly reported; user participation strategies and intersectoral approach featured less
4. **Skills**
    - A focus on both interpersonal and intrapersonal skills, mainly communication skills.

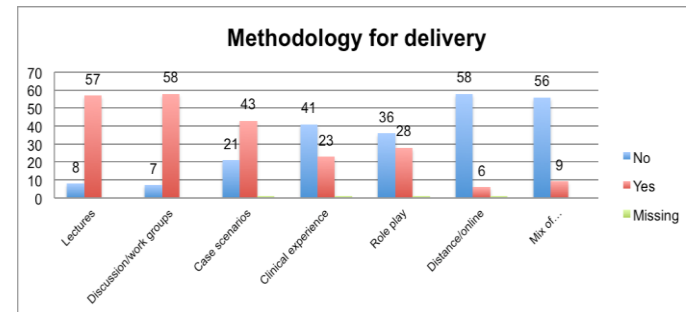


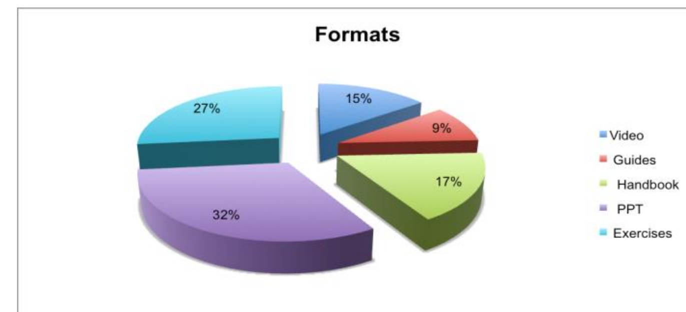


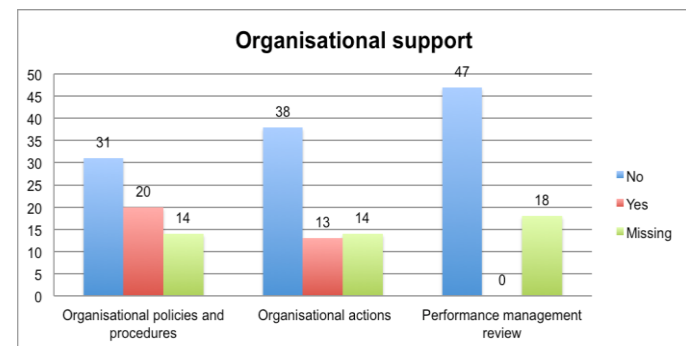


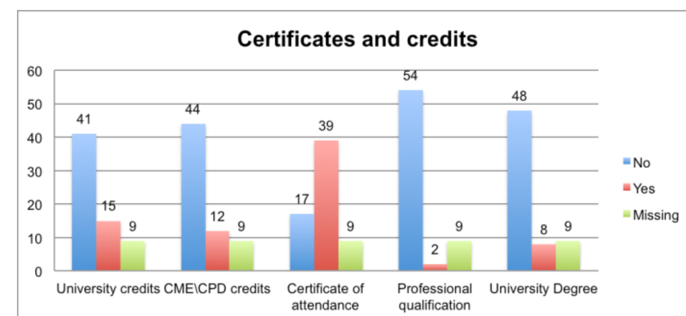


Findings
Domain 6: Training course structure



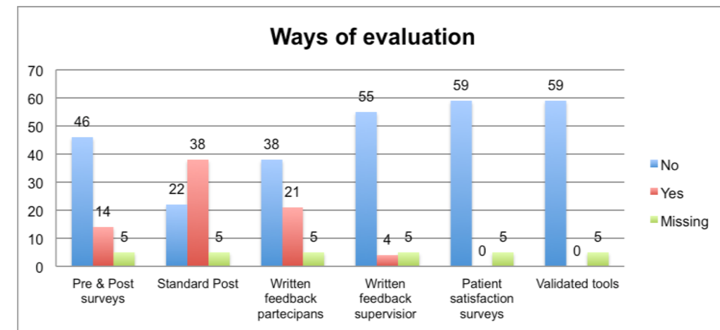


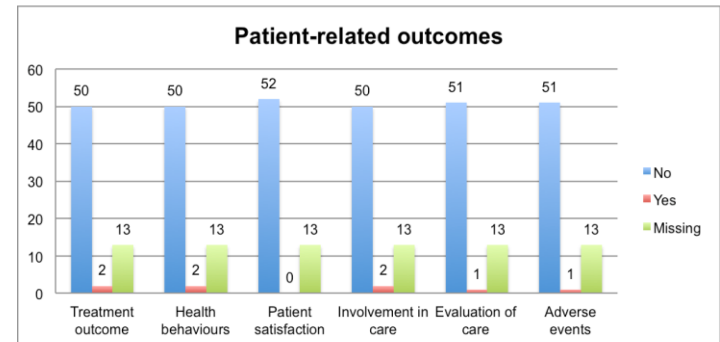




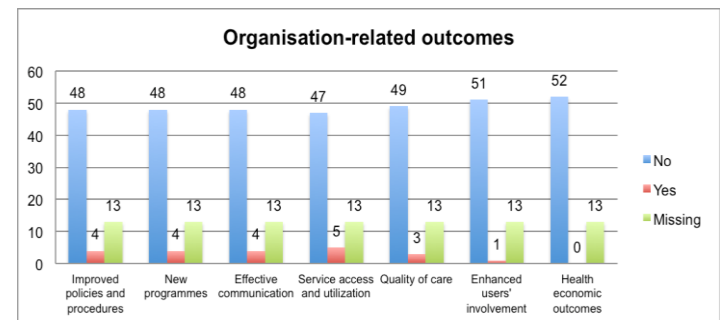
1. **Methodology for delivery:**
   - More traditional methods of delivery were employed such as lectures, discussions, case scenarios; less used were distance online and mixed methods.
2. **Formats and duration:**
   - The majority of training sessions were conducted over 1-3 days.
3. **Organisational support**:
   - Little reporting on the existence of links between the training with organisational policies and procedures, or performance management review.
4. **Certificate and credits**
   - Low level of CME credits were reported demonstrating a low level of organisational support.

Findings
Domain 7: Evaluation and outcomes





1. **Evaluation:**
   - Training programmes were generally under-evaluated, and when evaluated, were generally reliant on pre-post survey. Absence of validated tools.
2. **Outcomes:**
   - Training programmes did not systematically focus on outcomes; if they did, they generally focused on staff-related outcomes.



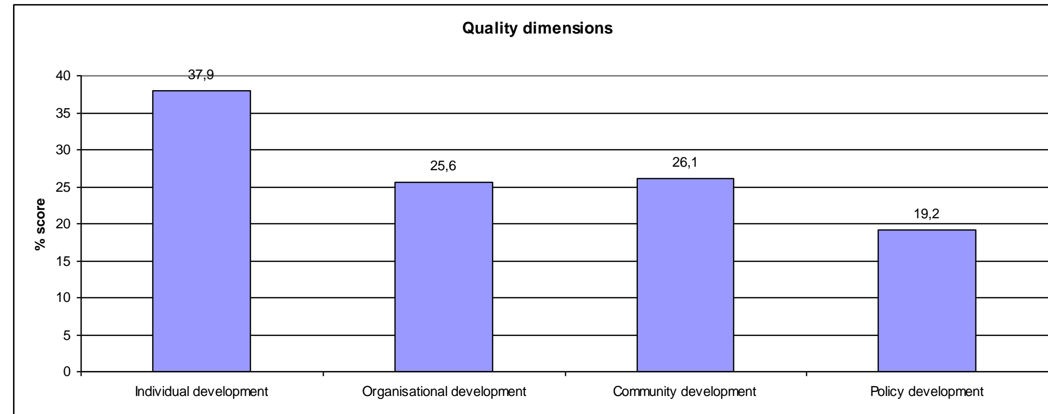
Quality assessment of training programmes

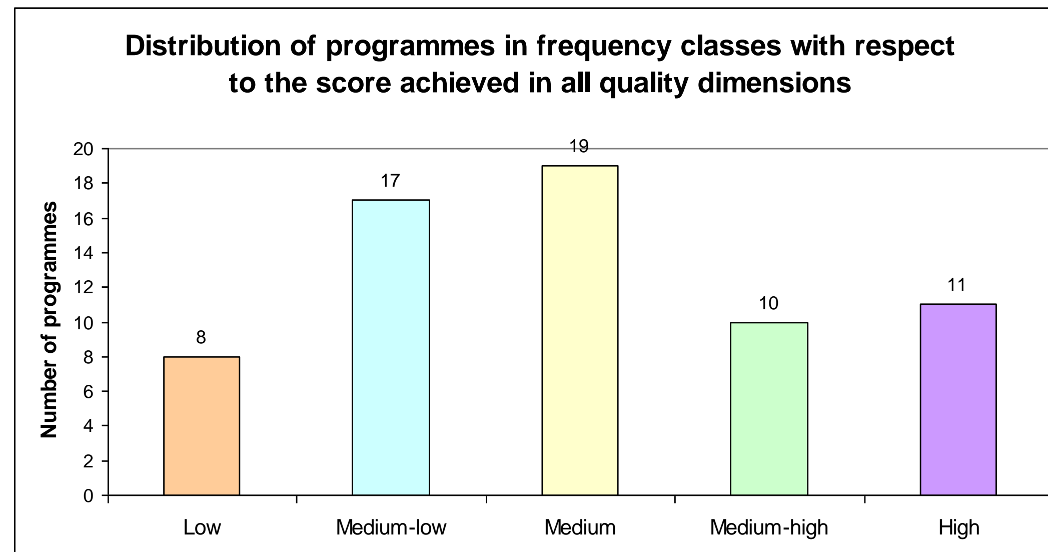
QUALITY DIMENSIONS:

- **Individual development** . Correlations demonstrating that the programme made an effort to inter-relate individual awareness, knowledge, skills and behaviour (37,9%).
- **Organisational development.** Correlations demonstrating that the programme made an effort to link individual improvements to organisational development (25,6%).
- **Community development.** Correlations demonstrating that the programme fostered the involvement and cooperation with other professionals and services in the community (26,1%).
- **Policy development.** Correlations demonstrating that the programme made an effort to connect health professional improvements with existing or improved policy measures (19,2%).

DIRECTORY OF QUALITY PROGRAMMES:

- 40 programmes out of 65 scored medium, medium-high and high and were included in the Directory.





Main suggestions for MEM-TP

- Adopt a holistic and systemic approach when defining training objectives.
- Involve service users and stakeholders in training development and delivery.
- Address training to a multiprofessional audience, including health managers and decision makers.
- Develop a clear rationale and pedagogical approach in defining teaching and learning methods.
- Avoid a “recipe” approach with an emphasis on the passive acquisition of knowledge of different ethnic groups.
- Integrate cultural competence with alternate approaches such intersectionality, equity and person centred care.
- Link training programmes to key organisational support mechanisms such as quality improvement planning, policy and procedures.
- Use a participatory and experiential method of training delivery
- Focus on outcomes (for patients, staff and organisation) in training design, implementation and evaluation.

Thank you

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