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Commentary

Public Health Student Internship: An Opportunity to Explore System, Self, and Society

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Emerging public health challenges require attention to self and society, beyond the classroom and exposure to the health system. The sensitisation of the future public health community is crucial to cover the last mile of the marginalized population. However, in general, public health education focuses on the health system and sciences and lacks a central focus on community-based internships. This short essay is an amalgamation of immersive field experiences of two young public health students with a renowned non-governmental organization called Self Employed Women's Association (SEWA) in Gujarat, India. It argues that immersive internships can help students rise above the need of advancing job prospects and revisit their very purpose of learning by realizing their accountability as future members of the PH community. This perspective of a developing country like India would be immensely valuable to the global community elsewhere too.

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The COVID-19 pandemic reignited the interest in the multi- and inter-disciplinary field of Public Health (PH) education. (Armstrong et al., 2022; Revel Chion & Adúriz-Bravo, 2022) Although the nucleus of PH actions lies in community interventions, community insights occupy lesser importance in PH academia that prioritizes bio-medical knowledge and managerial competencies for improving access to health benefits. There is a limited focus on community engagement to learn about health-seeking behaviours and collective health actions of community members. In most PH courses, the students are exposed to the community either through health awareness campaigns and community-based medical camps or through visits to healthcare facilities. These camps are merely extensions of outpatient clinics wherein 'the PH system/provider' expects the 'society/beneficiaries' to passively receive diagnosis, treatment, and referral.

With predominant emotions of 'helping' the communities that need information, goods, and services, such exposures fail to teach about the complex web of determinants of health and healthcare. (Bangdiwala et al., 2011; Miller et al., 2022; Wells et al., 2012)

When providers focus on only symptoms at the cellular level – and avoid exploring causes at the societal level – they avoid confronting the sociocultural sources of the symptoms. Such pedagogical approaches perpetuate power hierarchies by widening the information asymmetry between future providers and communities. Therefore, while consultation and medicines cure the symptoms, the community needs to address their sufferings all by themselves in the very surroundings that make them ill. The systemic preference for biomedical and management subjects also influences PH students to incline toward these disciplines manifesting in the dominance of the singularity of the ideal, in contrast to the plurality of belief systems.

Idolizing their professors, the PH students normalize the existing power hierarchies and learn to put themselves on a higher pedestal. Not actively taught to question the status quo in bio-medicine, the PH students also tend to overlook social science-related disciplines that are founded on the epistemologies of addressing the struggles of the community by questioning one's social position. Instead of questioning the realities in which health decisions are taken, the students learn to question the community itself. When the PH students use the plight of these communities as an "exposure," the power imbalances get exacerbated, and the communities continue to remain confined to where they are, i.e., the margins. In such an academic environment, the students who chose to represent the communities hold vulnerable positions, compared to those who represent the biomedical sciences and health systems. And, this perpetuates the vicious cycle of lack of deeper exploration of the health of the marginalized, minorities, tribal, and women at the intersections thereof.

The PH academia needs to confront and disrupt this status quo constructively to make future PH providers more empathetic towards communities. (Caron, 2014; Johnson, 2016) This requires attention towards patronizing clinical sciences and respecting social sciences. The PH students, unlike medical students, need to reimagine their interaction with the community to widen their horizons from cells to society. They need to explore a range of determinants of health viz. caste system, gender, cultural sensitivity, disability, and inclusion through a deeper exploration of the lived experiences and realities of the communities that shape their health. As the classroom-based PH curriculum falls short of providing deeper insights and practical exposure to the community, focused PH internships can offer an invaluable opportunity to explore this crucial but missing element.

Through internships in community settings, PH students can create a conducive space for generating and valuing the expressions of the community by sensitively connecting with them. (Anderson et al., 2011; Crowell, 2018) Beyond labelling certain behaviour as 'noncompliance or hesitancy', PH students can deepen their understanding of the cultural barriers that could be an outcome of generational trauma and suffering. (Caron, 2014) Take an example of a woman who is unable to receive COVID-19 vaccination despite having her home 200 meters from the centre. A deeper exploration may make one realize that she may have recently delivered a newborn and couldn't afford to stop being a sole caretaker at any time. Another woman who

complains of renal pain is advised to consume more water. Through immersive inquiry, PH students can learn to appreciate her concerns of walking many kilometres to draw and carry water not merely as 'helplessness' but as an important determinant of her deteriorating health. Such exposure can help PH students to acknowledge and rise from a position of privilege and go beyond their ontological position before intellectualizing sufferings as "risk factors", and "social exclusion and loss of employment due to exploitation of lower castes and minorities leading to the seclusion of communities into slums and ghettos" as mere "poor living conditions of certain communities".

Most healthcare providers ask their vulnerable patients to remove their slippers filled with mud outside their rooms to protect their polished floors. The mud on the slippers could be a metaphor for the patient's traumatic oppression – due to their caste, disabilities, social class, and gender – that the system is averse to.

Closer interactions with the marginalized in their settings enable students to re-evaluate their place in the social hierarchy. They can acknowledge and question the hegemonic PH structure that reinforces heteronormative and patriarchal interventions in the presence of sparse political advocacy. The community-focused internship help PH students challenge their preconceived notions of wisdom and encourage them to reflect on whether the community is an end in itself or a means to an end. (Versluis et al., 2022) While internships can enhance compassion and improve empathic values in work, they also help to understand that the communities' sufferings and poverty should not be patronized by developmental efforts. The closer, deeper and more meaningful community interactions make one appreciate that the knowledge curated and created out of people's lives and experiences solely to boost one's career aspirations can also potentially assault the dignity of the disadvantaged.

Through immersive fieldwork experiences, PH students can realize the importance of community-based organizations in eliminating power inequities by seeking to bridge the gap between providers and beneficiaries. The PH students can appreciate the organizational efforts of guiding and helping the community through acting as political advocates, complex manoeuvring of public facilities, schemes, and services in a multifaceted approach, and addressing

financial and credit needs to improve access to healthcare.

At the end of such an invaluable experience, the students must learn to ask themselves: “Are we complying to strengthen the existing unequal structures or shatter them?”. A meaningful internship opportunity makes one realize that it is simpler to talk about systemic discrimination than to experience it; to make a presentation about women’s health-related agony and concerns while benevolently contributing to them; and, to analyse data on poverty while inadvertently benefitting from it. Through such experiences, PH students can rise above the need of advancing job prospects and revisit their very purpose of learning by realizing their accountability as future members of the PH community.

References

- Anderson, L. S., Royster, M. O., Bailey, N., & Reed, K. (2011). Integrating Service-Learning into an MPH Curriculum for Future Public Health Practitioners: Strengthening Community-Campus Partnerships. *Journal of Public Health Management and Practice*, 17(4), 324-327. <https://doi.org/10.1097/PHH.0b013e3182140bcc>
- Armstrong, R., Mantel, M., Walraven, G., Atwoli, L., & Ngugi, A. (2022). Medical education and population health—A framework in the design of a new undergraduate program. *Frontiers in Public Health*, 1.
- Bangdiwala, S. I., Tucker, J. D., Zodpey, S., Griffiths, S. M., Li, L.-M., Reddy, K. S.,... Tang, J.-L. (2011). Public Health Education in India and China: History, Opportunities, and Challenges. *Public Health Reviews*, 33(1), 204-224. <https://doi.org/10.1007/BF03391628>
- Caron, R. M. (2014). *Preparing the Public Health Workforce: Educational Pathways for the Field and the Classroom*. Springer.
- Crowell, T. L. (2018). Academic Internships: To Take or Not to Take? Students Assessments of Public Health Fieldwork. *Pedagogy in Health Promotion*, 4(1), 19-34. <https://doi.org/10.1177/2373379916684850>
- Johnson, D. R. (2016). Emotional intelligence and public health education: A prescriptive needs assessment. *Pedagogy in Health Promotion*, 2(3), 193-200.
- Miller, E., Reddy, M., Banerjee, P., Brahmabhatt, H., Majumdar, P., Mangal, D. K.,... Schleiff, M. (2022). Strengthening institutions for public health education: results of a SWOT analysis from India to inform global best practices. *Human Resources for Health*, 20(1), 19. <https://doi.org/10.1186/s12960-022-00714-3>
- Revel Chion, A., & Adúriz-Bravo, A. (2022). In Sickness and in Health. *Science & Education*, 31(2), 269-291. <https://doi.org/10.1007/s11191-021-00258-3>
- Versluis, M., Jöbsis, N., Tuinsma, R., Jaarsma, A., & Duvivier, R. (2022). Learning Outcomes of an International Health Elective: defining learning outcomes for a unique experience.
- Wells, K. J., Preuss, C., Pathak, Y., Kosambiya, J. K., & Kumar, A. (2012). Engaging the Community in Health Research in India. *Technology & Innovation*, 13(4), 305-319. <https://doi.org/10.3727/194982412X13292321140886>

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