



Review Article

A Scoping Review of Legislative Advocacy Training in Healthcare Professional Education

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Citation: Nguyen E, Wagoner R, Healey P, Adams J, Seignemartin B, et al. (2022) A Scoping Review of Legislative Advocacy Training in Healthcare Professional Education. J Hosp Health Care Admin 6: 161. DOI: 10.29011/2688-6472.000061

Received Date: 16 May, 2022; **Accepted Date:** 23 May, 2022; **Published Date:** 27 May, 2022

Abstract

To effectively support health advocacy efforts healthcare providers need to: 1) understand current legislative and regulatory systems in their communities; 2) learn how to effectively navigate established advocacy and policy processes; 3) educate legislators and administrative decision-makers about the complex healthcare system; and, 4) establish partnerships/coalitions that support community-guided change. The aim of this scoping review is to scope the published literature on *political advocacy training* programs offered to students in three healthcare provider disciplines (i.e., medical, nursing, and pharmacy). A final set of 41 articles are included. In the published literature, political advocacy training was more common in student nursing and medical programs than in pharmacy programs. Few interprofessional health advocacy student training programs were found, and most of these focused on teaching advocacy from an academic medical-legal standpoint. [1] The intensity of and the training received in each program varied significantly.

Keywords: Scoping review; Advocacy efforts; Policy change; Medical education; Nursing education; Pharmacy education; Community action; Curriculum development; Healthcare reform

Introduction

According to the World Health Organization, “Health policy refers to decisions, plans, and actions that are undertaken to achieve specific healthcare goals within a society. An explicit health policy can achieve several things: it defines a vision for the future, outlines priorities, and builds consensus and informs people.” [2] Politics plays a critical role in health affairs and policy change. Advocacy, the “act or process of supporting a cause”, involves policy action(s) aimed at reaching the selected goal. Health advocacy initiatives aim to protect, shape, and promote community health and wellbeing and are generally broken down into three main advocacy categories: (1) patient, (2) professional,

and (3) political advocacy.

Patient advocacy focuses primarily on the role of healthcare professionals (HCPs) advocating directly for their patients’ medical and health-related needs [3,4]. Professional advocacy refers to activities focused on the evolution of practice (e.g., scope of practice, rights and privileges, reimbursement structures). [5,6] Political advocacy refers primarily to individual HCPs or healthcare organization-level legislation and regulatory changes impacting professional scope of practice [6-8]. It is derived from a set of complex and dynamic processes, driven by belief systems, politics and regulations [6-8].

The legislative process is complex and daunting. Since translating information into policy and practice change is inherently political, HCPs must become skilled advocates. Professional organizations may provide a platform where HCPs

can come together, become more involved within their profession, and work towards the goals of their profession. [9-11] Most currently available training materials, such as those provided by the American Association of Nurse Practitioners, [9] are focused on HCPs engaging with national decision-makers to support health policy changes identified by the professional organization. However, the needs of the professional organization may not align with the needs of the individual HCPs. Health policy impacts healthcare delivery, outcomes, inequities, and disparities. [3,4,7] In order to make a difference in their community, HCPs have a professional responsibility to effectively advocate for specific, individual-level, policy, and legislative change that addresses the unique health disparities and inequities afflicting their community.

Legislators and policy makers often enact politically-driven health policies that do not utilize available medical evidence or address the healthcare needs of their constituents. [11] In order for HCPs to effectively advocate for health policy change, especially those in underserved and rural communities, most require additional evidence-based, structured training to feel adequately prepared to address the systemic healthcare needs of their communities. [1] To effectively support change, HCPs need to: 1) understand legislative and regulatory systems; 2) learn how to effectively navigate advocacy and policy processes; 3) educate decision-makers so they have a better understanding of the complex healthcare system; and, 4) establish partnerships and coalitions that support positive community-guided change. HCPs need comprehensive training and support while they are students teaching them how to engage, inform, and collaborate with legislators and policy makers to address health policy gaps. [1, 2, 4, 6] However, despite the need for healthcare policy, political advocacy and engagement are not part of most HCPs' curricula, necessitating they seek ad hoc training on their own. The aim of this scoping review is to determine the type and extent of *political advocacy training* that students of different HCP disciplines receive during their training.

Methods

We utilized a rapid scoping review approach in line with methods recommended by Tricco and et al. to establish the HCP-advocate scoping review protocol to “identify knowledge gaps, scope a body of literature, clarify concepts or to investigate research conduct.”[12]

Population of study

For the purposes of this study, the population of interest was HCP students, students in the medical (i.e., physicians, physician assistant, and nurse practitioner), nursing (non-prescribing), and pharmacy fields. Post-graduate learners (e.g., residents and fellows) were excluded.

Intervention

We focused on training related to engaging in the legislative and/or policy-making processes with pertinent stakeholders (e.g., legislators, agency staff, etc.), and not patient advocacy. We sought literature on health advocacy training that had been integrated into a curriculum, as either a required or elective course, and excluded accounts of extracurricular training provided by student-run or external organizations. No comparator was required for included studies. Descriptive studies without outcomes and studies with any outcomes were included.

Data sources and search strategy

Through EBSCOhost, we searched the following databases from inception through November 16, 2021: CINAHL Complete, Education Research Complete, ERIC, Healthy Policy Reference Center, Health Source: Nursing/Academic Edition, and MEDLINE Complete. These were selected in order to conduct a broad and comprehensive search of the health literature. No limits were placed on date or country of origin. Key words and phrases comprising advocacy, legislation, regulations, or policy, and the study population were employed (see Appendix for exact terms). We supplemented our database literature search with a Google Scholar search performed on January 8, 2022 (see Appendix for exact terms); the first 500 results were screened for applicability. Finally, backwards citation tracking was performed for all included articles.

Study review and selection

Title/abstract citations were independently reviewed by two investigators. Full-text articles of citations that passed initial title/abstract screening were retrieved and reviewed by two investigators for inclusion. Discrepancies with citation screening or article inclusion were resolved with discussion and/or a third reviewer. Articles were included if they met the following criteria: were about a HCP student of interest (as defined above in the population of interest); discussed an advocacy education or training program (as defined above in the intervention); involved participation in the legislative, regulation, and/or policy process. Non-English language articles and programs that focused only on being a patient advocate were excluded.

Data extraction

Data from included articles were extracted by two investigators and organized using a Google Spreadsheet. The following data were collected: healthcare profession group; citation information (author, journal, publication year, article title); program description (goal/purpose); deliverables/outcomes; training type; number of students; duration of training; and intensity of the advocacy experience in the course (categorized as application, simulation, reflection, or didactic).

Results

The initial database search yielded 1,792 citations. After removing duplicates, 1,209 citations were screened and 140 full-text articles assessed for relevancy (Figure 1). Forty-one articles met all inclusion criteria and were included in our review (Table 1).

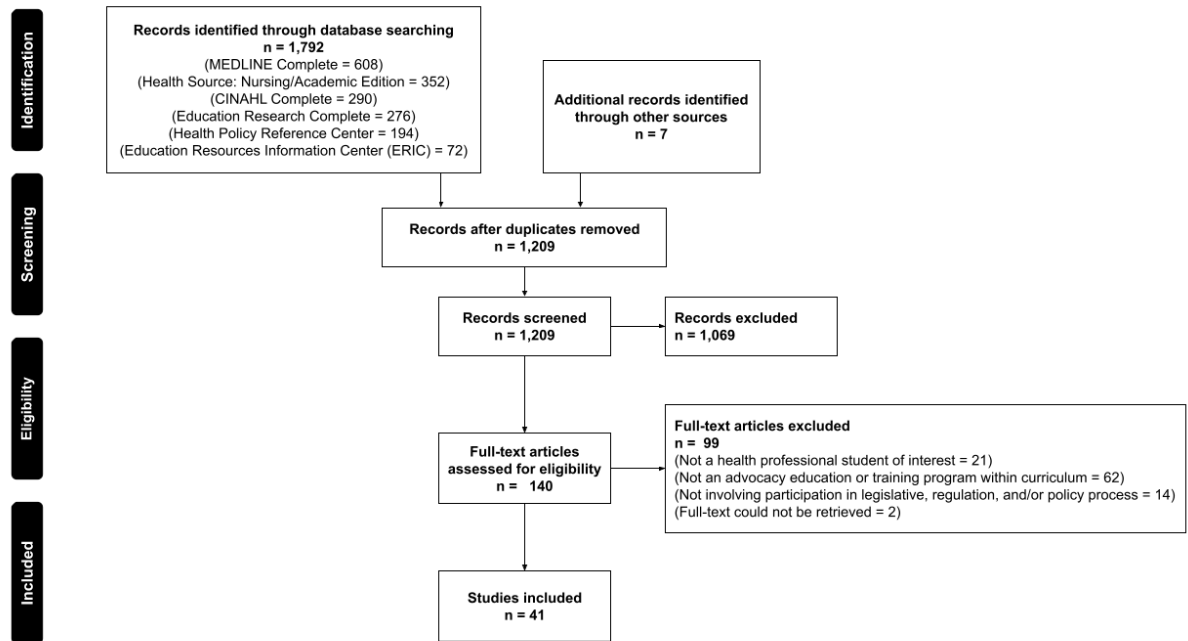


Figure 1: PRISMA Flow Diagram.

Last Name of First Author, Journal, Publication Year	Title	Goal/Purpose of Training	Deliverables / Outcomes	Training Type (# students, Duration)	Intensity
Medicine					
[43]	The “Sausage Factory” Tour of the Legislative Process: An Interactive Orientation	Develop a better understanding among the residents and students about the roles and responsibilities of key state leaders. Provide an understanding of the relationship between the Department of Health Services, the legislators, and their staffs in public health policy-making. Provide an understanding of the role of public health advocates and lobbyists in health policy-making at the state level. Establish functional relationships among residents, faculty, and key leaders in public health at the state level.	Day at the capitol with various educational presentations	Curriculum (n= 12, 1 semester)	Application

[30]	The Health Policy and Legislative Awareness Initiative at the Pennsylvania State University College of Medicine: Theory Meets Practice	A mini internship at the office of a Pennsylvania state legislature.	A practical assignment leading to authorship of a resolution to a national medical organization or assisting in drafting a bill	Elective (n=40, 1 semester)	Application
[14]	Description of a Research-Based Health Activism Curriculum for Medical Students	To develop physician activists by teaching medical students research-based health activism. The annual curriculum includes a student project and 4 course sections; health policy, research methods, advocacy, and physician activists as role models.	Two-part experiential student project, develop, write and present an advocacy plan; taught in 6 to 10 sessions each 90 mins to a half day in length	Curriculum (n=47, 6-10 sessions/1 month)	Simulation
[25]	The Health Policy Pathfinder: An Innovative Strategy to Explore Interest Group Politics	To inspire a generation of physicians who possess the skills and knowledge to advocate more effectively for their patients and the general public.	A mini internship state legislature. Deliverables include practical assignment leading to resolution authorship to national organization, assisting in drafting a bill	Elective (n=40, 3 months)	Application
[45]	A Medical Student Leadership Course Led to Teamwork, Advocacy, and Mindfulness	PRIME 3-week leadership program aimed to prepare medical students to work with underserved groups that fosters leadership, advocacy, and resiliency.	Completion of pre- and post-course relational coordination, leadership inventory, and mindfulness assessments, and advocacy project	Curriculum (n=20 selected students, 3 weeks)	Didactic
[21]	The Human Rights and Social Justice Scholars Program: A Collaborative Model for Preclinical Training in Social Medicine	Design and implementation of longitudinal policy and advocacy curriculum. Didactic course; Faculty and student mentorship; collaborative longitudinal service and advocacy project; A career seminar series; and research project.	Describe the results of a qualitative survey of inaugural participants, to understand how their participation in this service-learning component affected clinical experiences and self-perceptions, effect of service-learning experiences on participants' knowledge, skills, and attitudes; and community capacity	Didactic course (n=12, 1 year)	Application

[16]	The Urban Medicine Program: Developing Physician-Leaders to Serve Underserved Urban Communities	Assessed the seminar program’s effectiveness and evaluated early post-seminar assessments and longitudinal community project progress reports.	1) a seminar series, (2) a Web-based learning curriculum, (3) a longitudinal community project (LCP), and (4) a Policy and Advocacy Forum	Seminar (n=819, 4 years)	Application
[46]	The Evolution of an Elective in Health Disparities and Advocacy: Description of Instructional Strategies and Program Evaluation	Evaluate the impact of electives. Curricula has many deliverables, presentations, discussions, role-play, didactic lecture, letter to the editor.	Scores for knowledge, attitudes, and self-reported confidence on pre and post tests	Elective (n=48, 3 months)	Simulation
[26]	Health Policy and Advocacy for New Mexico Medical Students in the Family Medicine Clerkship	Describe the development, implementation, and evaluation of a Health Policy and Advocacy curriculum incorporated into our family medicine clerkship.	Survey administered to students before and after clerkship year measured attitudes, knowledge, and confidence about the role of a physician in seven areas: organization and financing, decision-making, policy analysis, identification of leaders, identification of special interest groups, advocacy, and framing issues for the media; focus group with students, used to identify themes	Curriculum (n=293, 18 hours)	Reflection
[47]	An Advocacy and Leadership Curriculum to Train Socially Responsible Medical Learners	Adaptable model for the training of socially responsible medical learners who are conversant in advocacy techniques.	Created a competency and milestone-based Open Peer Review Resource	n=not reported, program length not reported	Didactic
[24]	The JeffSTARS Advocacy and Community Partnership Elective: A Closer Look at Child Health Advocacy in Action	Advocacy training to self-selected trainees from area medical schools and residency programs to develop a cadre of physicians empowered to advocate for child health.	Reflection paper	Elective (n=not reported, 1 month)	Didactic

[48]	Increasing Awareness on Health Care Access in Florida: A Community-Based Medical-Legal Practicum Project	Describe a partnership between medical and law students in a community-based service learning, reciprocal learning project that combined a law clinic with a household-centered community medicine program; students promoted healthcare access and partnered with community members and Florida Legal Services to collect patient narratives, disseminated information on Medicaid expansion to community members, and presented patient stories to state lawmakers.	Included: attending legislative and media advocacy skills didactic sessions with faculty, interviewing households and writing 14 narratives on individuals' experiences of health and accessing the healthcare system, attending two face-to-face meetings with state legislators (a few medical students also attended an extra meeting at the state capitol with the Florida Medical Association), participating in community events, creating an advocacy media campaign	n=6 law students and 6 medical students (n=12), 1 year	Application
[29]	Engaging Medical Students in Health Policy through legislation	Empower and educate physicians to impact policy development	Students worked together to identify a health policy issue impacting their state and then drafted a bill	Student-directed service-learning project related to health policy development. (n=2, program length not reported)	Simulation
[44]	Introducing the Concepts of Advocacy and Social Determinants of Health Within the Pediatric Clerkship	Evaluate the impact that an advocacy lecture had on medical students	1 - 45-60 min lecture with 8-14 students at a time, pre and post assessment	Lecture + assessment w/ interactive discussion of advocacy (n=75, 1 hour)	Didactic
[1]	An Interprofessional Approach to Teaching Advocacy Skills Lessons from an Academic Medical-Legal Partnership	Assess the impact of adding IPE w/ law faculty and law students to help medical students understand and navigate the federal legislative process prepare them for Capitol Hill day	Post intervention survey of educational experiences and knowledge.	Pilot Curriculum (n=38, three 1-hour lectures)	Application
[49]	Advancing Health Policy and Advocacy Education in Medical School through a Student-run Elective	Near-peer educational model where students through hands-on educational program increase policy knowledge and advocacy skills.	Novel, non-validated mixed method survey used to assess health policy and advocacy knowledge garnered during 4-week elective	Elective (n=6, 4-weeks)	Didactic

[50]	Medical Advocacy Training for Virtual or Flipped-Classroom Learning	Provide virtual access to education in medical advocacy training during the COVID-19 pandemic.	Attend the legislative health committee meeting, meet with state representatives, and complete a position paper. Create SMART goals for ongoing learning and competency-based skills development	Curriculum (n= not reported, 1 week)	Application
Nursing					
[38]	The Effect of Health Policy Education on Self-Perceived Political Competence of Graduate Nursing Students	Investigate the effect of a grad level health policy course on the self-perceived political competence of MSN students master science nursing.	Affairs discussions, group analysis of policy issues, a federal budget exercise and an individual policy analysis paper	Curriculum (n=35, 1 semester)	Simulation
[51]	Advancing Health Policy in Nursing Education through Service Learning	Describe a curriculum based on the overlap among health policy, the role of the nurse as consultant, and community-based care aimed at fostering political development in nurses and advanced practice nurses	Deliver a plan addressing a policy issue, implement the plan, and evaluate the impact of the plan for the community agency in which they were placed	n=not reported, 3 semesters	Application
[52]	Preparing Nurses to Promote Health-Enhancing Public Policies	Required course aimed at preparing nursing students to advocate for public policy change, helping students' understanding of the policy process, and analyze issues within the broad context of influencing factors.	Develop 2 papers first on problem ID and analysis, practicum experiences 6 hours per week - working for advocacy coalition	Curriculum (n= not reported, 13 weeks)	Application
[36]	An Active Learning Experience in Health Policy for Baccalaureate Nursing Students	Provide students with the political skills and perspective, knowledge, skills, and tools needed to influence public health policy.	Learning experiences, Legislative assignments, public policy group project	Curriculum (n=142, 1 semester)	Simulation
[17]	Advanced Nursing Training in Health Policy: Designing and Implementing a New Program	Prepare students to assess the policy dimensions of issues in the clinical practice, teaching, and research environments and to translate nursing practice issues into policy issues.	Academic work, practicum, and exam	Curriculum (n=32, 2 years)	Didactic

[17]	Legislative Advocacy Skills for Baccalaureate Nursing Students	Examines the theoretical underpinning of leadership knowledge, principles, skills, and competencies needed to lead interprofessional teams and healthcare system change to improve the health of society.	The student engages in a collaborative experience to apply leadership, health system, health economics, and policy. Student interns were expected to research issues, support effective policy decision-making, attend and testify at relevant public hearing, develop a position paper on an issue, and present a verbal report.	Elective (n=7, 1 semester)	Application
[19]	Innovations in the Public Policy Education of Nursing Students	The project goal is to achieve core competency in public policy and the legislative processes through Integration of an innovative, curricula-wide, public policy initiative.	Involve students in the legislative process. Students will draft an evidence-based newspaper article / letter to legislators, develop a fact sheet and present to legislators on lobby day	Curriculum (n=45, 3 semesters)	Application
[40]	Changes in Political Astuteness After a Health Systems and Policy Course	Describe levels of political astuteness in graduate students at 1 university in the Pacific Northwest to determine if political astuteness changed after students completed a required 10-week graduate course in health systems and policy and to identify the specific changes that occurred.	Examine political astuteness in grad students before and after a required health policy course	Curriculum (n=57, 10-week course)	Didactic
[53]	Going the Extra Mile: Beyond Health Teaching to Political Involvement Going the Extra Mile: Beyond Health Teaching to Political Involvement	Working in small groups, students complete a student-directed, health policy related, service-learning project. Supplemented by lectures and consultation.	Assess the health needs and resources of a geographically defined community using a structured community assessment guide	Elective (n=4, 12 weeks)	Simulation
[28]	United We Stand: Preparing Nursing Students for Political Activism	Prepare for lobby day in capstone course by educating fellow nursing students on the health crises they were planning to discuss with their legislators	Civic engagement: attend a state or national conference, develop materials to support lobbying, discuss issues with legislators, and complete a reflection paper	Curriculum (n=64, 1 semester)	Application

[54]	Doctor of Nursing Practice Students Advocating for Health Care Access, Quality, and Reform: From the Virtual Classroom to Capitol Hill	The trip to Capitol Hill provided a framework for the students' developing roles as leaders in health care policy development, analysis, implementation, and evaluation, and created an atmosphere of collegiality among the students.	Assignment combining comparative effectiveness research with experiential learning (i.e., congressional visit)	Didactic and Experiential (n=6, 15 weeks)	Didactic
[37]	Population-Focused Nursing: Advocacy for Vulnerable Populations in an RN-BSN Program	Foster advocacy for vulnerable populations in RN-BSN students.	Develop a policy statement designed to address health disparities impacting local, national, and global populations	Curriculum (n=not reported, 1 semester)	Simulation
[18]	Advocacy Days Sparked Interest in Political Advocacy	Become more comfortable with and to encourage participation in the legislative process.	Developing talking points for and attending advocacy days day at the capitol researching legislators	Curriculum (n=19, 2 semesters)	Application
[32]	Policy-Focused Service-Learning as a Capstone: Teaching Essentials of Baccalaureate Nursing Education	Policy-based, dynamic, capstone service-learning project applying the American Association of Colleges of Nursing's Essentials of Baccalaureate Education for Professional Nursing Practice.	Students act as nursing consultants to help clients address systems based problems w/ reflective assignments	Service Learning (n=not reported, 1 semester)	Application
[33]	A Staged Approach to Educating Nurses in Health Policy	To propose a more focused and staged approach with level-appropriate content introduced at each level of nursing education. Innovative teaching strategies and activities from the previously cited publications can be incorporated in this approach.	Variable by degree: Encourage membership in professional nursing association. Explore and identify community health issues. Conduct a community assessment Identify local leaders. Attend a town hall or city council meeting, school committee or other meeting of local political or civic organizations. Research and disseminate findings about health issues in local media outlets. Write papers and lead classroom discussion on local health and community issues Track federal legislation. Prepare written analyses on health issues Write policy briefs on health care issues	Curriculum (n=not reported, program length not reported)	Simulation

[15]	Advocacy Through Education	Determine effectiveness of focused educational presentations in correcting misconceptions, increasing awareness, and providing clarification of the roles in identifying related policy implications.	Pre and post awareness and knowledge assessment survey scores. Assess potential contributions to the political and advocacy processes	Curriculum (n=137, 1.5 hours)	Didactic
[20]	Leveraging Technology to Enhance Doctor of Nursing Practice Student Health Policy Engagement	DNP hybrid, health policy course includes readings and other learning activities including navigating health policy websites, completing online competency biweekly modules, visiting professional organization websites, posting public comments, and developing a 30-second persuasive speech on a policy issue.	4 assignments, 1) video discussion board 2) international policy analysis 3) Advocacy in action 4) interprofessional policy	Curriculum (n=102, 5 semesters)	Didactic
[27]	Public Health Policy Simulation	Public health policy simulation for students in the university's undergraduate and accelerated graduate nursing program. Goal to be more knowledgeable, confident, and likely to advocate for public health policy change.	Visit legislative offices and discuss public health issues, convene for mock committee hearings to practice oral testimonies, and complete student reflections	Didactic and Simulation, n=47, 1 semester)	Application
[42]	Empowering Students and Influencing Policy	Purpose to review public health advocacy education and present an example of an innovative public health advocacy course that may be used in undergraduate or graduate nursing education programs.	Execute a social media advocacy campaign engaging elected officials and community-based organizations, in development and dissemination of evidence-based educational materials	Elective (n=12, 12 weeks)	Simulation
[35]	Leadership, Health Systems and Policy: Doctoral Education and Integrated Clinical Education	Discuss our approach to leadership, health systems, and health policy curriculum in nursing PhD education.	Develop a proposal in which a system change in each student's own area of research is identified and an intervention that is student led to effect change is described	Curriculum (n= not reported, 1 semester)	Simulation
Pharmacy					

[41]	Effective Leadership and Advocacy: Amplifying Professional Citizenship	Develop doctor of pharmacy students leadership and political advocacy skills.	Students submitted portfolios documenting participation in key activities. Participated in debates and class discussion	Elective (n=not reported 1 semester)	Didactic
[39]	“Fix the Law” Project: An Innovation in Students’ Learning to Affect Change	Teach students how to positively affect change while learning about the pharmacy practice regulatory and policy analysis processes.	Student projects not only actively involve students in the pharmacy practice regulatory and policy analysis processes, but also help them to be a part of changing how pharmacy is practiced in the state	Curriculum (n=77, 1 quarter)	Simulation
[34]	Hybrid e-Learning Approach to Health Policy	Assess the impact of a hybrid teaching methodology on improving critical thinking in the health policy elective course. Secondary objectives included assessment of students’ perceptions on healthcare policy in the field of pharmacy and the use of those perceptions to design and deliver an elective course incorporating e-learning strategies.	Complete 2-page position statement, draft and send letter to legislator, attend 2 meetings, present policy brief, and submit electronic portfolio	Curriculum (n=not reported, 14 weeks)	Simulation
[55]	Developing Students as Advocates through a Pilot Advocacy Curricular Thread within a PharmD Curriculum	Describe an approach to legislative advocacy education, our experiences in developing innovative core curriculum exercises, how we move advocacy education forward with greater emphasis in curricula, and methods for inquiry into successful educational strategies and their impact	Initial observations from a piloted curricular thread at 1 school, and implications for the academy. Interested and experienced faculty within this curricular area should establish a task force to establish, assess, and advocate for effective curricular models to create awareness of the legislative process and advocacy skills within student pharmacists	Pilot Curriculum (n=not reported, 1 semester)	Didactic

Table 1: Articles included in Scoping Review.

Seventeen articles featured medicine students, [1,14,16,21,24-26,29-30,43-50] 20 featured nursing students, [15,17-20,27-28,31-42,51-54] and four featured pharmacy students.[34,39,41,55] The earliest article was published in 1999 (medicine), followed by a 2000 article (nursing). Goals/purposes, deliverables/outcomes, and training types varied widely between articles. Most articles described an applied program (n=15), [1,16,18,21,25,27-28,31-32,40,48,50-52] followed by simulation (n=13), [14,19,29,33-39,42,46,53] and didactic [15,17,20,24,41,44-45,47,49,54-15] (n=12). There was one article that was categorized as reflection[26] for learning type.

The time devoted to teaching political advocacy also ran the gamut from low to high. The actual number of hours spent training students was not reported in most studies, making it difficult to assess the level of integration into existing HCP curriculums. Among the studies that reported the amount of time allocated to teaching advocacy, nine programs lasted a month or less. [1,14-15,24,26,44-45,49] Most studies (n=12) described semester-long programs, [17,27-28,30,32,35-38,41,43,55] while eight reported including advocacy in the curriculum for a year or more. [16-21, 48,51] Five of these programs were for nursing students, [17-20,51] while the longest program was integrated into all four years of an undergraduate medical curriculum. [16]

Discussion

HCPs have a personal responsibility to ensure appropriate stewardship of public health dollars so that community health needs are met. When it comes to key issues, it is important that HCPs participate in discussions with legislators, as policy change is sometimes required to enact public health campaigns and to ensure that policy makers make evidence-based policy decisions that support the needs of constituents. However, not all HCP curricula prepare individuals to advocate for the health policy changes.

Provider differences

Political advocacy has long been emphasized in a number of nursing and medical programs. Training both within and across nursing programs has ranged from elective shadowing experiences participating directly in legislative events and advocacy initiatives to multi-year, integrated, didactic curriculum and practicum experiences that focus on translating nursing practice issues into regulation and/or statutory changes. Similar training differences were seen across identified medical school programs, ranging from a one-hour lecture introducing the concept of advocacy and the importance of social determinants of health, a one semester elective working with the national medical organization to help draft health legislation, and a year-long longitudinal policy and advocacy curriculum that involved a clinical, social justice-focused service-learning project. Fewer advocacy training programs were found in the pharmacy curriculum, [34,39,41,55] and most were more

didactic in nature and focused on teaching doctor of pharmacy students about the pharmacy regulatory and policy analysis processes and the development of advocacy skills. Lastly, the only interprofessional health advocacy, student training programs we found focused on teaching advocacy from an academic medical-legal standpoint. [1]

There are a number of likely reasons for the increased number of training programs offered to HCP students, particularly those engaged in direct clinical practice, as they are more likely to be aware of the unmet health needs of their patients, have a broad understanding of the healthcare system, and recognize the importance of policy making to support practice guidelines that support improved patient outcomes. The commitment to and professional responsibility of HCPs is evident in the American Medical Association's (AMA), the American Nursing Association, and Oath of a Pharmacist. Activism, item 8 in the *Declaration of Professional Responsibility: Medicine's Contract with Humanity*, focuses on the "...social, economic, educational, and political changes that ameliorate suffering and contribute to human well-being [emphasis ours]". [22,23] In fact, the American Nursing Association believes legislative and political advocacy is no less important to advancing the profession of nursing than patient care. [22, 23] It is the experiences of many practicing nurses that has motivated them to take on some form of an advocacy role; however, many nurses do not feel prepared to operate effectively in the legislative/advocacy setting, resulting in increased student training. [22,23] Moreover, in 2018, the American Society of Health System Pharmacy Statement on Advocacy as a Professional Obligation encouraged pharmacists to serve as advocates for the profession, [5] and spoke directly to the importance of preparing doctor of pharmacy students at several different levels, including standards incorporated in the Accreditation Council for Pharmacy Education (ACPE) standards, to advocate for change. [5]

Intensity

The intensity of each program, in terms of the amount of political advocacy content and the time allocated to the subject, whether it was an elective or required course, etc., varied significantly. While some courses explored political advocacy within the context of patient or community health advocacy, others included it in a policy or activism focused curriculum. This approach frames political advocacy as a natural outgrowth of HCPs' traditional role to improve their patients' health by learning about the social determinants of health, working closely with community organizations to further their goals, or championing particular health issues. For example, the program described by Chung et al. prepared medical trainees to be child health advocates [24]. Nannini and colleagues [25] reported a program designed to give physicians the skills and knowledge to effectively advocate on behalf of their patients and the general public, while the course described by Jones et al. sought to foster advocacy for

vulnerable populations in RN-BSN students. [37] In contrast, programs focused on policy change were more generally focused on preparing students to appeal to legislators and regulators. For example, the program described by McGrew and colleagues taught medical student's organization and financing, decision-making, policy analysis, identification of leaders and special interest groups, advocacy, and communication with the media. [26] Smith et al. reported a course teaching pharmacy students how to effect change through learning about the pharmacy practice regulatory and policy analysis processes. [39]

The programs varied widely in the degrees to which students were expected to participate in political advocacy during the course, from direct application of skills, to simulation of advocacy activities, to didactic content and outcomes (see Table 1). For example, while some had students engage in face-to-face meetings with legislators; [1,13,17-19,27-28,43,48,50,54] draft bills; [13,25,29,30] give public testimony; [31] or work with community organizations/advocacy groups, [16,21,31,32,51,52] other programs described a quasi- or total classroom learning experience in which students had to attend a town hall or city council meeting; [33,34] develop a proposal or public policy position paper; [14,35-39,42,46,53] or complete academic work and sit for an exam or deliver a written final project. [15,17,20,26,40-41,44-45,47,49,55]

Interestingly, the variance in the amount of time devoted to advocacy training does not seem related to whether the class is an elective or a required course. For example, the month-long, required course described by Cha, et al. [14] teaches health policy, research methods, advocacy, and physician activism over the course of six to ten sessions lasting between 90 minutes and half a day. In contrast, another required course described by Marsh [44] and colleagues featured one 45- to 60-minute lecture and a discussion of advocacy. In contrast, an elective course described by Morris and colleagues lasted 12 weeks and had the students execute a social media advocacy campaign engaging elected officials and community-based organizations as part of the development and dissemination of evidence-based educational materials. [42] On the other end of the spectrum, Chung et al. described an elective course aimed at training medical trainees in child health advocacy, which lasted one month and resulted in a reflection paper. [24]

Conclusion

Political advocacy of HCPs refers to the set of complex and dynamic political and/or regulatory processes, impacting professional scope of practice. [6-8] In order to impact healthcare systems and practice, HCPs need to know how to advocate for necessary political changes in an environment with conflicting political agendas; however, these skills are not explicitly taught in all health profession programs. A number of medical and

nursing programs provide some didactic and/or experiential health advocacy training; however, the training intensity and application varies both within and across curricula. In order for all HCPs to more effectively advocate for patients, we need to provide more consistent, extensive, and applicable political advocacy training in their academic programs to better prepare them to advocate for their communities and profession.

Acknowledgments

The authors would like to thank the Alaska Pharmacists Association for supporting the Sustainable Education and Training Model under Pharmacist Provider Reimbursement (SETMuPP) CDC-1815 funded demonstration project and their contributions to the pharmacy profession in Alaska. We appreciated the contributions of Jasmeen Gill and Christopher Nicolet in assisting with citation screening, and Kristin Whitman in assisting with the search strategy.

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