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Transforming Students into Healthcare Professionals: A Literature Review Exploring the Interrelationships Between Work-Integrated Learning, Belongingness, and Health Professions Students

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Abstract:

This integrative literature review examines the interrelationships between health professions students, work-integrated learning (WIL), and belongingness. The review was conducted by a multi-institutional, multi-national research team consisting of four researchers from the United States and the United Kingdom. Literature from the years 2005–2021 was appraised. Thirty-nine studies were found that considered the key terms.

Belongingness was not found to be directly connected to WIL in the literature regarding health professions students other than those in nursing. Emerging links were found between belongingness and professional identity development. These findings make it imperative that belongingness be explored in future research studies regarding health professions students to advance the growing interest in this concept as part of diversity, equity, and inclusion in healthcare. Findings from this review will inform the future understanding of the interrelationships between WIL, belongingness, and health professions students.

Keywords:

work-integrated learning, belongingness, belonging, health professions students, professional identity

Introduction

Education in the health professions and among pre-health undergraduates commonly involves variations of work-integrated learning (WIL) experiences. WIL is an umbrella term that encompasses multiple pedagogical strategies and experiential learning approaches, all designed to integrate theory with practice. The definition of WIL in the context of this paper is:

An educational approach involving three parties—the student, the educational institution, and an external stakeholder—consisting of authentic work-focused experiences as an essential component of the curriculum. Students learn through active engagement in purposeful work tasks, which enable the integration of theory with meaningful practice that is relevant to students' discipline of study and/or professional development (Zegwaard et al. 2023, p.39).

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WIL experiences may be mandatory curricular elements, volunteer positions, job shadowing, or paid work opportunities. However, these experiences share the common goal of educating pre-health or health professions students about their chosen or considered healthcare profession by immersing them in the process of healthcare. The purpose of any WIL experience is to enable the students to have the opportunity to situate their learning by contextually applying their knowledge and skills to the practical work environment (Lave & Wenger, 1991). Drawing on the theory of reflective practice (Schön, 1983), research has shown that professional practice is not only determined by knowledge of theory and skills but also by the reflective journey that people undertake to shape their future actions (Kolb, 1984).

"Health professions students" refers to any student across the healthcare education continuum who is studying to become a healthcare professional (ACCME, 2021; HPSA, 2023). The scope of this review was transdisciplinary across healthcare professions and included students at different stages in their training. For pre-health students (who do not yet participate in clinical placements), forms of WIL can include unpaid job shadowing, healthcare volunteering/service learning, medical scribing, undergraduate research, and health-related study abroad experiences. With the proper training and certification, in the United States (US), pre-health students can join the job force clinically as certified medical assistants (CMAs), emergency medical technicians (EMTs), patient care assistants (PCAs), and more.

The WIL experiences integrated into health professions curricula are commonly referred to as fieldwork, clinicals, rotations, or practicum placements. A growing number of pre-health and health professions students are actively seeking out interesting new or additional WIL experiences to prepare for an uncertain, evolving post-pandemic workplace, which has led to increased competition for placements (Kay et al., 2019).

One assumption behind the integration of WIL experiences for health professions students is that this immersion will assist in the student's feeling of belongingness, thus shaping the development of their professional identities. The terms belonging and belongingness are often used interchangeably in the literature. As defined by Levett-Jones and Lathlean (2008), belongingness is:

> A deeply personal and contextually mediated experience that evolves in response to the degree to which an individual feels (a) secure, accepted, included, valued, and respected by a defined group, (b) connected with or integral to the group, and (c) that their professional and/or personal values are in harmony with the group (p. 104).

The purpose of this integrative literature review is to explore how WIL in healthcare facilitates the development of students' sense of belongingness within their chosen healthcare profession (**Figure 1**).
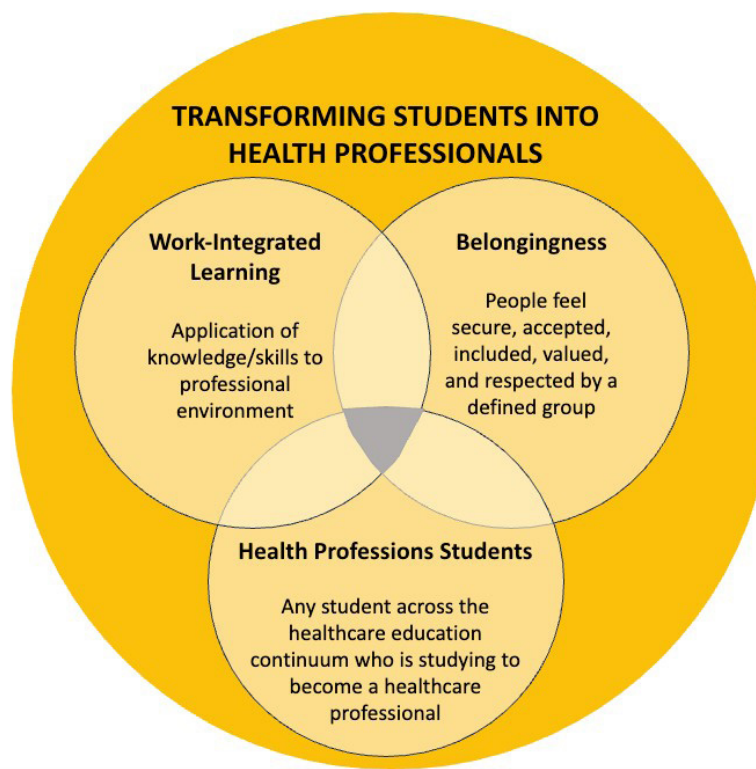

Figure 1. Interrelationships in three key terms. This figure represents the interrelationships between three key terms: work-related learning (Lave & Wenger, 1991), belongingness (Levett-Jones & Lathlean, 2008), and health professions students (ACCME, 2021; HPSA, 2023).

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Methods

This integrative literature review was conducted by four researchers from different health-related disciplines and academic institutions within the US and the United Kingdom (UK). The research team was formed during a WIL-focused research seminar sponsored by the Center for Engaged Learning at Elon University. This project was supported by a Central Association of Advisors in the Health Professions (CAAHP) research grant. In contrast to a systematic review, this integrative literature review includes various research designs to better understand the terms being studied (Whittemore & Knafl, 2005). It was not the goal to conduct an exhaustive review or to appraise article quality.

A literature search was conducted utilizing databases including PubMed, CINAHL, EBSCO, and ERIC using the terms "belonging," "belongingness," "work-integrated learning," "health professions," and "healthcare students." Articles were considered if the study populations were either pre-health or healthcare students. Each of the researchers focused on one term within the literature. As a next step, the scope of the search was refined to examine the interrelationships between health professions students, WIL, and belongingness. The search was limited to articles in English published between 2005 and 2021. Reference lists from the initial findings were reviewed to identify additional relevant studies. A total of 39 articles were selected for inclusion in this review.

Literature Review Findings

WIL: Integral for Transforming Students into Healthcare Professionals

This review first focused on WIL. The literature search revealed multiple definitions for WIL, though the words can mean different things depending on context and geographical location. In a large national study, Patrick et al. (2008) discovered over 40 different terms (e.g., preceptorship, internship, clinicals, clerkship, fieldwork, and placements) that were used to describe WIL in Australia alone. This finding fits with Connor and MacFarlane's (2007) observation that there is a lack of consensus about the words and activities that are categorized as WIL. What is undeniable, however, are the pedagogical concepts that underpin WIL and the principle that it is an authentic learning experience that situates the student in a real-world professional context for the purpose of learning (Billett, 2009; Lave and Wenger, 1991).

Specifically, WIL is a mechanism by which students learn and develop the professional skills needed to be successful in the workplace and bridge the artificial gap between academics and life. The most important direct desired outcome of WIL is enhanced student work readiness (Kay et al. 2019). WIL draws on the experiential learning theory outlined by Kolb (1984),

whereby students endeavor to put their learning into action. In many health professions programs, WIL takes the form of structured placement experiences embedded in the curriculum (Aprile & Knight, 2020). For health professions students, WIL is not optional but integral to professional development. Pre-health programs take a less structured approach but remain situated in practice. Each WIL experience, however, incorporates objectives and structured planning designed to expose students to the vital skills they will need to become practitioners.

WIL experiences can be optional or mandatory, paid or unpaid. "Internships, co-ops, field experience, student teaching, or clinical placements have unique formats, regulations, and educational goals, rendering them distinct types of co-curricular experiences" (Hora et al., 2020, p. 236). Internships are a specific form of WIL that benefits many stakeholders and has seen increased interest, and thus increased use, in recent years (Kuh, 2008). According to the National Association of Colleges and Employers, the hiring of interns increased by 9.1% during the 2022–2023 post-COVID pandemic year (Gray & Koncz, 2023). While internships can be transformative for the career readiness of some students, barriers exist to accessing these WIL opportunities for students who lack financial and social capital, and research on the overall impact of internships on student outcomes is limited (Hora et al., 2020), particularly regarding health professions students.

One study, conducted by Hay and Fleming (2021), considered the risks to the success of WIL from the perspectives of the university, the host organization, and the students. The authors found students to be the most at-risk among these stakeholders, with the absence of professional identity development being one of those risks. This study found that students' level of readiness to undertake WIL, as well as their personal characteristics, presented the most significant barriers to the successful development of belongingness. These risks threaten a student's ability to develop belongingness, both personally and professionally, within the WIL environment.

WIL: Factors That Affect Student Learning

In healthcare, the goal of WIL-inclusive curricula is to create a well-rounded education in which classroom concepts are practically applied. There are many factors that impact the level of learning that takes place during WIL, and these are well documented in the nursing literature (Berndtsson, 2020; Walker, 2014). For instance, Berndtsson et al. (2020) reviewed 16 articles on WIL in nursing education to identify models that successfully integrated theory and practice during WIL. Three major themes for success were identified: 1) supervisor support; 2) variety in teaching modalities; and 3) collaboration between academic lecturers and clinical supervisors.

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While many different teaching methodologies can successfully integrate theoretical knowledge into the workplace, this review emphasized team acceptance and belongingness as key to the development of professional identity. The study determined that student confidence and self-esteem were important factors in the development of critical thinking skills in the clinical setting. Finally, a partnership approach was found to be highly successful in developing student confidence and authority.

Not surprisingly, the environment in which learning occurs and the behaviors of the staff can positively or negatively impact student learning. Organizations that have strong learning cultures are often noted to be non-hierarchical and open to innovation with a team-based approach (McLaren et al., 2008). However, there is also a cultural element to professional behaviors that may differ across a wide range of healthcare professions and at different stages in the student's learning journey. Williams (2010), for example, outlines that for WIL to be truly effective, student nurses must be in control of their own learning, supported to critically reflect on their practice, and empowered to make changes to that practice as needed. Registered nurses need to foster a learning culture to empower change and ensure an ongoing commitment to supporting learning (Williams, 2010).

Belongingness: Critical for Professional Development

Belongingness is a contemporary buzzword in colleges and universities (Lu, 2023). Moreover, higher education institutions are actively creating jobs in diversity, equity, and inclusion (DEI) in an effort to increase the sense of belongingness and address this cultural trend. Strayhorn (2012) popularized the addition of belongingness and built on the concept of inclusion in DEI frameworks. The National Survey for Student Engagement (NSSE) began asking about students' sense of belongingness in 2020. The idea was further prioritized during the COVID-19 pandemic, as the pivot to online learning challenged student motivation and shifted learning environments.

Belongingness is created through inclusive social systems and institutions and describes how individuals feel about their place within that (often) hierarchical system. This might include having difficult conversations about identity (Lu, 2023). As such, inclusion is a large part of creating belongingness. When organizations prioritize inclusion over hierarchy, belongingness is more easily facilitated (McLaren et al., 2008).

In his keynote speech at the 2023 Health Care Professionalism and Bias Reduction: Sharing Global Strategies Conference, Rosenzweig highlights the interconnections between belongingness, inclusion, and professional identity: "Professional identity is formed out of craft knowledge, forged through ethical principles and duties, illuminated through our practice of virtues, and fully realized only through experiences of essential belonging, common humanity, and interbeing" (para. 2). Rosenzweig's observations represent a deviation from the traditional definition of professional development, which focuses on employer performance expectations and the development of strategies and skills for effective participation in the employment process. In other words, developing as a professional goes beyond clocking in, receiving financial compensation, and fulfilling the needs of the job description (Cassuto, 2015).

The term belongingness was originally used by Maslow (1968) as a source of human motivation. Maslow (1968) described how the need for safety, belongingness, relationships, and respect can only be satisfied by other people, i.e., only from outside the person. This means considerable dependence on the environment. For health professions students developing a sense of belonging within their chosen profession, the people and environment in question are largely found within the students' WIL experiences.

WIL: Fostering Belongingness for Health Professions Students

It is essential to recognize the factors of WIL that foster belongingness. Research on this concept across most health professions is limited (Qureshi et al. 2019)—according to Mohanna (2018), there is a "dearth of research on the concept of belongingness in medical education" as a whole (p. 276)—with most of the research focused on nursing students. The literature that does exist on this topic recognizes the importance of having someone to rely on, the desire to feel accepted, and the need to feel comfortable seeking guidance without judgment.

Borrott et al. (2016) found that for nursing students, belongingness and workplace satisfaction are strongly correlated. Nursing students also report a need to feel accepted and supported by WIL supervisors to develop belongingness and professional identity (Berndtsson et al., 2019; Levett-Jones & Lathlean, 2008). Sedgwick & Rougeau (2010) found that for some nursing students, relationships with their WIL mentors/supervisors significantly influenced the outcomes of their WIL experience. In other words, connectivity leads to student learning, engagement, and belongingness (Roberts et al., 2017).

Studies of nurses (Arvidsson, 2005) and medical students (Adams, 2020) also found that positive role modeling through interactions with patients and staff during WIL experiences is important to the individual's own professional development. Thus, the literature suggests that an enhanced sense of belongingness, which can be fostered through WIL, enables health professions students to align with their larger community of practice and allows professional identity to flourish (Adams, 2020; Arvidsson, 2005; Berndtsson, 2020;

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van den Broek, 2020; van der Riet, 2017). Similarly, when Radford and Hellyer (2016) examined belongingness in dental education, they identified four themes as impacting belonging: 1) interaction with pre-existing people in the environment; 2) developing collegiality; 3) being in a clinical environment; and 4) leadership.

Likewise, in their review of the term belongingness in healthcare education literature, Vivekananda-Schmidt and Sanders (2018) found that while no single definition of belongingness was present in the literature, the definitions they found had multiple commonalities: the need for feeling valued and included, the feeling that one has importance in the professional task, and the sense of being connected/integral/respected within the health care team. Their review also found that the presence of belongingness has a significant impact on the performance and well-being of learners.

Studies also exist showing the converse to be true: when support, communication, collaboration, and respect are lacking, professional identity struggles to form or does not form at all (Albloushi, 2019; Sedgwick & Rougeau, 2010). Albloushi et al. (2019) used semi-structured interviews with 16 female Saudi nursing students to elicit the factors affecting student belongingness in clinical settings. Students felt distressed, disempowered, anxious, unmotivated, isolated, and excluded because of language barriers and other cultural factors. Therefore, Alboushi et al. (2019) concluded that the absence of belongingness is a detriment to professional identity formation.

Having a sense of belongingness leads to increased empowerment, self-confidence, motivation to learn, well-being, and identity development (Qureshi et al., 2019). However, feeling more confident can also lead to questioning healthcare practices in a manner that might compromise patient or client safety (Levett-Jones & Lathlean, 2009). Therefore, belongingness can also have an impact on ethical decision-making, which is critical in the health professions. Increasing belongingness to a specific health profession can lead to a more inclusive, collaborative team approach, potentially improving patient outcomes.

Conclusions

This review found that a sense of belongingness for health professions students is more than a feeling of being welcomed or not being excluded. It is also more than a retention strategy for universities to save money (Lu, 2023; Sedgwick, 2013). Rather, belongingness is a critical part of professional development.

Becoming a health professional is as much about the feeling of joining a supportive and collaborative group of professionals as it is about learning the technical skills needed for the profession (Adams, 2020; Sedgwick & Rougeau, 2010). When this support, respect, and collaboration are present, the literature indicates that professional development can flourish (Adams, 2020; Arvidsson, 2005; Berndtsson, 2020). It can be argued that professional identity shapes the feeling of belongingness as individuals develop interpersonal relationships and construct their identities in a way that affirms their place in their chosen profession (Bowen, 2018).

Finally, the literature reviewed also demonstrates that belongingness has only been studied in relation to a particular curriculum, population, WIL model, or practice setting (Sedgwick and Rougeau, 2010; Sedgwick, 2013; Sedgwick et al., 2014; van den Broek et al., 2020; van der Riet et al., 2017). While WIL is an essential component of skill development in healthcare, it is less certain whether WIL is essential in developing the sense of workplace belongingness that is important to professional identity in health professions students. There is a clear need for further research to determine how these concepts have been explored in depth and detail across the continuum of healthcare education.

Building an Informed Research Agenda: Future Studies

This integrative literature review is a narrative summary focused on the interrelationships between health professions students, work-integrated learning (WIL), and belongingness to inform a proposed research agenda. The selected publications revealed that existing studies have focused predominantly on nursing education, indicating a need to focus more on the breadth of healthcare professions to identify how students develop their belongingness in the widest sense from and with each other. This review also demonstrates that there are tentative links between belongingness and professional identity development in health professions students. Future research should advance our understanding of these concepts. As educational institutions and workplaces strive to reduce barriers to accessing WIL and support improvements in DEI and student well-being, future research must emphasize these important concepts.

Future studies should also inform an understanding of how shortcomings in the development of belongingness in health professions students can be addressed. Thus, going forward, WIL can be intentionally created to allow students the opportunity to perform at their best and thrive in their chosen healthcare profession. To address this gap in the literature, this research team will focus next on the exploration of how WIL fosters belongingness for students at various points in their educational journey toward a healthcare profession. This new study will address a critical missing component in the research.

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