

UMMS Rural Health Scholars Student Attends National Rural Health Association meetings

Hannah Melnitsky, MS 2010

RME Conference, Spring, 2009

In May, 2009, I attended the Rural Medical Educators (RME) meeting, followed by the National Rural Health Association (NRHA) conference, in New Orleans, Louisiana. As a member of the Student Caucus that serves to advise the RME (a special interest group of the NRHA whose goal is to promote and advocate for rural health education, especially in the nation's medical schools), I was awarded a stipend to attend the RME conference and to speak on a student panel about rural medical education. The panel was comprised of student representatives from the University of California San Francisco, the University of North Dakota, the University of Iowa, the University of Arizona, as well as three other student caucus members. We answered conference attendees' questions that ranged from why we wanted to practice in a rural area, what kinds of rural health programs were available at our respective schools, and what suggestions we had for expanding interest in rural health among medical students.

Some of the suggestions for change have been put into motion by the student caucus. For example, we have begun working on a webpage through the NRHA website which will provide information to students interested in rural health, including nationwide rural health training programs, conferences and internships, a toolkit for establishing a rural health interest group/program at a medical school, and opportunities for students in rural health. One of the questions that arose at the conference regarded how loan repayment responsibilities affect students' decisions about practicing in rural areas, given that physicians tend not to earn as much money in rural areas and the amount of medical student debt is ever-increasing. This concern prompted us to include on the website information about loan repayment programs in rural health.

As a result of the RME conference, we have also developed a means of ensuring that the student caucus continues. We have expanded the caucus to include eight members, including four senior and four junior members. The senior members will serve as mentors to the junior members for a period of one year, at which point the junior members will become senior members and will choose four new junior members to mentor. This ensures continued student input to the RME, with the position of RME liaison included among caucus members to facilitate effective communication between the student caucus members and the RME.

In addition to the student panel, many other topics were discussed at the RME conference. For instance, one presentation addressed the effect that hurricane Katrina had on medical education in Louisiana. Another spoke about the variety of programs in rural West Virginia aimed at bringing health care into the community. Small group sessions that facilitated discussion about the state of rural health in the U.S. proved very informative as well. Overall, the conference provided a comfortable forum to discuss a wide range of rural health topics, especially in the context of medical education.

The annual NRHA conference took place on May 7-10, and I was fortunate to be able to cover expenses to stay for the meeting using the stipend that I had received to attend the RME conference. I attended a variety of informative sessions, including a workshop on incorporating palliative care into rural hospitals based on a model in practice in rural Vermont. I also attended a small discussion on rural medical ethics, which proved to be very interesting and informative, as I had not given much thought previously to the differences between a rural and an urban practice with respect to ethics in medicine. The impact that hurricane Katrina had on the medical system as a whole was also presented, and it was somewhat different from the presentation that had been given at the RME conference. I listened to talks about the Geisinger Health System in Pennsylvania, the economics of health care, and the Surgeon General's plan to combat obesity.

Both conferences proved to be wonderful experiences. I met many other students with similar interests in rural health, and I also was able to network a bit with residency program directors and family practitioners. As a result of the RME conference, we student caucus members have a more defined role as student advisors to the RME and as promoters of rural health education. I am currently serving as the communications coordinator for the caucus. I will be attending the RME conference on May 4, 2009, in Miami Beach, FL, with a stipend from the NRHA, to speak again on a student panel. I am working with the other caucus members to finish the website, to expand the student caucus, and to help make the next conference a valuable learning experience for all.