

Interprofessional Education, Lessons from Indonesia

Citation for published version (APA):

Lestari, E. (2021). *Interprofessional Education, Lessons from Indonesia*. [Doctoral Thesis, Maastricht University]. Maastricht University. <https://doi.org/10.26481/dis.20211005el>

Document status and date:

Published: 01/01/2021

DOI:

[10.26481/dis.20211005el](https://doi.org/10.26481/dis.20211005el)

Document Version:

Publisher's PDF, also known as Version of record

Please check the document version of this publication:

- A submitted manuscript is the version of the article upon submission and before peer-review. There can be important differences between the submitted version and the official published version of record. People interested in the research are advised to contact the author for the final version of the publication, or visit the DOI to the publisher's website.
- The final author version and the galley proof are versions of the publication after peer review.
- The final published version features the final layout of the paper including the volume, issue and page numbers.

[Link to publication](#)

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal.

If the publication is distributed under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license above, please follow below link for the End User Agreement:

www.umlib.nl/taverne-license

Take down policy

If you believe that this document breaches copyright please contact us at:

repository@maastrichtuniversity.nl

providing details and we will investigate your claim.

IMPACT

RELEVANCE

The healthcare system is becoming increasingly complex, requiring healthcare professionals to possess key competencies such as effective communication skills, teamworking abilities and the capacity to collaborate with other healthcare professionals in teams. Health professional education (HPE) institutions must prepare future healthcare professionals for their role in these interprofessional healthcare teams by offering interprofessional education (IPE). Several ministries in Indonesia acknowledged this need, including the Ministry of National Education (MONE) through the Directorate General of Higher Education (DGHE), and the Ministries of National Health and Religious Affairs. In Indonesia, thousands of health professionals graduate from health professional schools each year. IPE occurs when students from two or more health professional programmes learn with, from and about each other's professions and has been recommended for the training of healthcare professional students.

Nevertheless, designing effective IPE within health professional education requires specific attention to various factors that might inhibit sustainable IPE implementation, including leadership, coordination and organisation among health education programmes and schools, the health professional education curriculum which is quite packed, undermining flexibility and change, scheduling, logistics, and students and faculty members' attitudes towards interprofessional collaboration (IPC) and education. As a result, most IPE courses existing in Indonesia and some other countries are just optional and only a few of them have been sustainably implemented in the health professional curricula. Therefore, the results presented in this dissertation provide direction on how to implement IPE sustainably and offer suggestions on potential education formats for effective IPE.

TARGET GROUPS

There are several target groups that benefit from the results of this dissertation: health professional curricula and their leaders, faculty teaching within these curricula, the students of these curricula, and the healthcare facilities in which the students will work.

Implementation of IPE is difficult as it requires curriculum change, coordination among healthcare professional education programmes, a lot of logistics and resources, as well as positive attitudes of students and faculty members towards IPE. Consequently, many health professional education institutions have decided not to initiate IPE implementation yet, because coordination among programmes cannot be achieved and faculty members do not support the implementation of IPE. Moreover, some programmes cannot afford the logistics required to run IPE. The studies reported provide direction on how IPE could be successfully implemented within an Indonesian context by addressing students and faculty members' perceptions of IPE and evaluating two education formats for IPE: problem-based Learning (PBL) and community-based education

(CBE). Part of this dissertation was concerned with the actual development and implementation of the learning activities and learning tools such as modules and with validating evaluation tools for interprofessional PBL and CBE formats. As IPE is still new in Indonesia, so far there is no standard model for an education format that can be used as a reference for HPE institutions throughout Indonesia. The education formats and tools produced during these studies hopefully can inspire other health professional institutions in Asia in general and in Indonesia in particular to initiate and implement an IPE programme.

Furthermore, this dissertation shed light on the importance of addressing faculty perceptions of IPE as a key ingredient for successful and sustainable IPE implementation. As faculty members will play very significant roles in designing the curriculum, and facilitating and assessing learning in IPE, they should have a good understanding of the concept of IPE and good interprofessional healthcare team collaboration abilities. The findings also highlighted the fact that students learn from observing how healthcare teams collaborate in clinical practice. This finding can motivate all faculty members in both the preclinical and clinical phase to become role models of and perform good healthcare team collaboration in school as well as in clinical settings.

From the study findings we learnt that students were less confident when collaborating with medical and dentistry students, both in interprofessional PBL and in community-based interprofessional education (CBIPE). These findings can be a reference for HPE institutions to make efforts to bolster student confidence by increasing their respective knowledge and clinical skills and providing leadership education. Leadership education can be implemented uniprofessionally through the HPE curriculum. Moreover, leadership skills can also be fostered by means of extracurricular activities that require various health professional students to work together to carry out activities. Getting students from various professions accustomed to interacting with each other and working together in various activities will at least increase the confidence, interpersonal closeness and trust that collaboration requires.

The findings also indicated that CBIPE stimulates students' collaboration and teamwork skills. CBIPE involves many community health services such as community counselling and education which are considered the responsibility of the public health centre. Considering these findings, healthcare professionals at the respective public health centres can be involved in CBIPE learning activities. To qualify for such involvement, however, they must understand the concepts of IPE and IPC so that they can become role models for interprofessional collaboration in public services, because their collaboration as a healthcare team will be seen, learnt and experienced by students of all health professional backgrounds.

To ensure that HPE institutions implement IPE within the HPE curriculum, and to ensure that IPE is properly implemented with the aim to stimulate student collaboration skills, the accreditation body of HPE institutions, the Indonesian Accreditation Agency for Higher Education in Health, can consider making the implementation of IPE a standard to be evaluated as part of the institutional accreditation process.

ACTIVITIES / PRODUCTS

The IPE education formats that were applied in these studies, namely interprofessional PBL and Sultan Agung community-based IPE, along with all the learning materials, evaluation tools and questionnaires that have been translated into Indonesian and have been validated, are accessible from the <https://fkunissula.ac.id> website and can be used by other HPE institutions in Indonesia or other Asian countries to initiate IPE implementation.

The author presented the research findings of this dissertation during workshops and faculty development programmes on IPE at several HPE institutions in Indonesia. The author also presented the findings of her research in various national and international conferences and webinars. The materials presented in the workshops, conferences and seminars are expected to inspire faculty members and staff from other HPE institutions in Indonesia attending the workshops or conferences to initiate IPE implementation.

INNOVATION

This dissertation resulted in the design of two important educational innovations: interprofessional PBL and interprofessional CBE fit for the Indonesian context.

PBL is reported to be an effective education format for gaining knowledge. PBL is experiential, reflective and designed to be interactive and affords students the opportunity to discuss, argue, present and hear their group members' viewpoints, thereby contributing to students' intellectual growth. However, so far PBL has mostly been used in a uni-professional context only. The application of PBL in IPE programmes has not been previously reported in Indonesia, nor is it widely diffused in Asia, so the use of PBL in IPE can also be considered innovative.

The IPE literature in the Asian context reported that the education format most commonly used for IPE is interprofessional CBE which takes a variety of designs. Sultan Agung community-based interprofessional education (SACBIPE) is innovative as it combines classroom training with various interprofessional health services in the communities, from surveying the community health problems to planning and implementing intervention projects aimed to solve the respective health problems. Its various activities range from counselling, education and home visits to community service, enabling students to develop various skills such as leadership, communication, problem-solving, planning, division of tasks and conflict management skills.

IMPLEMENTATION

The research in this dissertation has informed the implementation of IPE in Sultan Agung Islamic University, the institution where the author serves and where IPE has been implemented since

2016. Since 2014, the Directorate General of Higher Education of the Ministry of National Education (MONE) and the Ministry of National Health have socialised and promoted the importance of IPE to all health professional education institutions in Indonesia. In 2014, the Directorate General of Higher Education of MONE also supported the initiation of the Indonesian Young Health Professionals' Society (IYHPS) in organising the 'Nusantara Health Collaborative' (NHC) programme which aims to foster an understanding of education and interprofessional collaboration among students and young health professionals across the archipelago. It is hoped that within the next two or three years, HPE institutions in Indonesia will implement IPE in their HPE curriculum taking into account their strengths, resources and context. The Indonesian Accreditation Agency for Higher Education in Health has included standards for implementing IPE in HPE institutions since 2020. These standards will be used to assess IPE implementation in HPE institutions in the next two or three years.