Family Medicine as a Career Choice A scoping review of interventions used in Latvia and Beyond in affecting medical students' choice of residency

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Introduction

This scoping review examines interventions implemented by governments and institutions to encourage medical students to remains a less popular residency choice among medical choose family medicine as their residency specialty in Latvia and other countries.

Despite the critical role of family medicine in healthcare, it students worldwide. This study aims to identify interventions described in the literature and assess their outcomes.

Materials and methods

Articles, published in U.S. National Institutes of Health's National Library of Medicine database, have been chosen as materials for the comparison.

Interventions have been grouped for comprehensibility and compared.

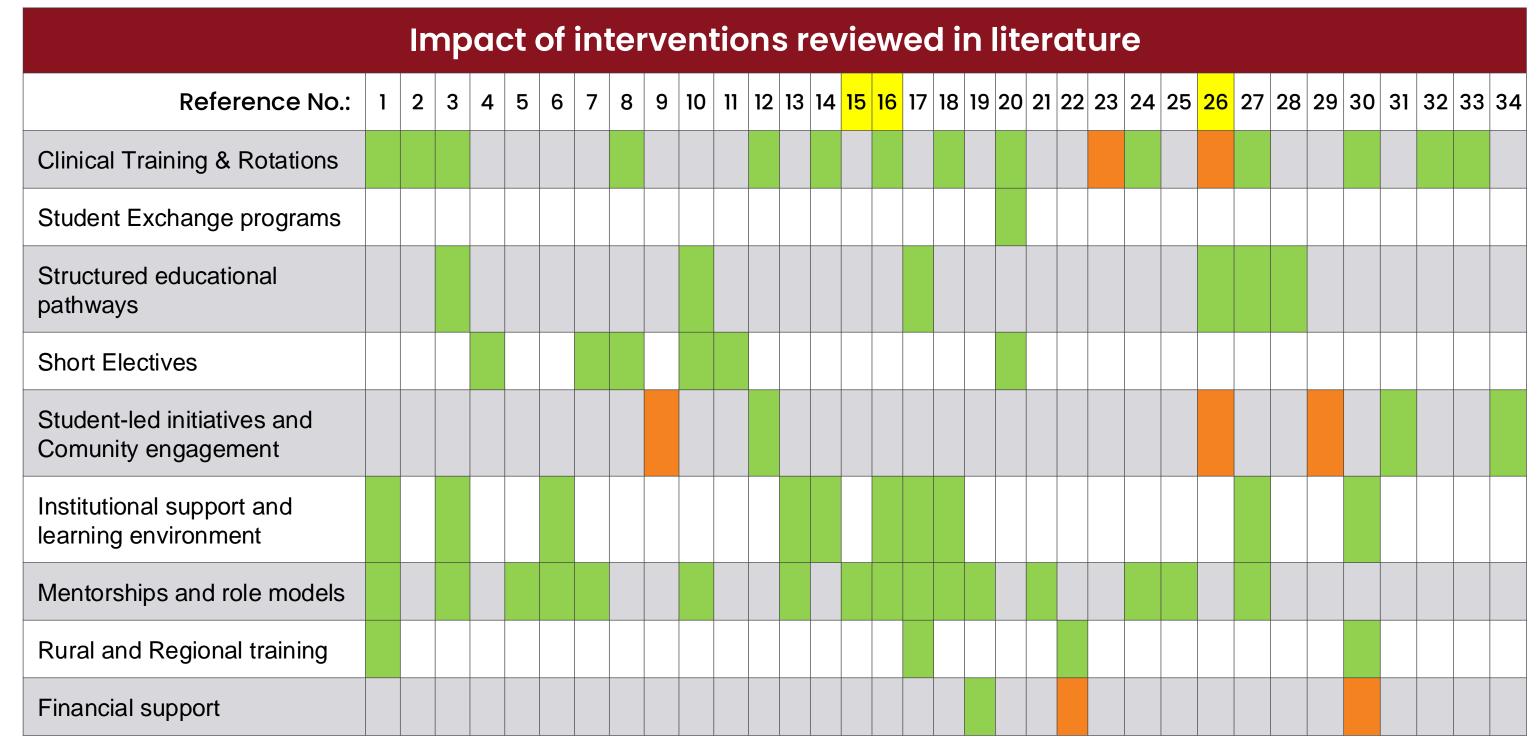


Table 1. Articles and their described interventions categorized into groups, with their related impact highlighted in color. Green – interventions in group are generally associated with a positive impact on attracting students to family medicine. Orange – interventions are with mixed results or without clear positive or negative impact.

Systematic review reference numbers are highlighter in yellow.

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Results

No research articles were found on interventions used in Latvia and their impact analysis.

Globally, the most reported interventions include clinical rotations, institutional changes, and mentorship programs.

Clinical training and rotations in primary care offices have been shown to improve students' perceptions of primary care providers. Additionally, the length of the rotation correlates with an increased likelihood that students would choose to practice in these likelihood of choosing primary care as a residency specialty. Student exchange programs were associated with a broader perspective on medicine and a higher likelihood of selecting a broad specialty. Similarly, student-led clinics provide a wider exposure to medicine, but their impact on specialty choice remains mixed. Interestingly, participation in student primary care interest groups showed no significant effect.

Structured educational pathways and the integration of primary care into various parts of the curriculum have been linked to a

higher percentage of students choosing primary care as their specialty.

Mentorship and role models were emphasized as the most effective tools for guiding students toward a career in primary

Rural and regional training were associated with a higher areas.

Literature also highlights the significant role of institutional support. The hidden curriculum and the perception of primary care by secondary care doctors and fellow students can discourage from pursuing family medicine.

Addressing these issues has a positive impact. Financial support is considered a short-term measure. While it increases interest in primary care, it does not effectively retain doctors in the long term.

Conclusions

Many countries are implementing and researching the most effective interventions to influence students' choice of family medicine as a career. Creating and implementing such interventions requires careful planning, research, and significant resources.

To prevent the decline of primary care, these steps are of utmost importance.

In Latvia, such research is necessary and has yet to be conducted

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