

Primary Care and Population Health, UCL

SPCR medical student internship in Primary Care Research

The NIHR School of Primary Care Research (SPCR) is currently supporting at least two Primary Care research internships within UCL Research Department of Primary Care in Summer 2020, open to all UK medical students. These placements will be for 3-6 weeks with funding of £1000 for each of the two posts.

The aim of these internships is to encourage talented medical students to consider a career in academic general practice by gaining hands-on experience in primary care research. During the placement, students will join an established research team and gain skills in primary care focused research.

Programmes will be tailored in advance according to departmental and student interests, but may include research methods training, attendance at workshops and seminars, secondary data analysis, literature reviewing, etc., depending on availability. At the end of the placement the intern will submit a brief report detailing their experience. A successful applicant might also work towards the production and submission of a publication based on their work during this internship.

In order to maximise academic exposure within a short time, these posts will not include clinical experience.

Timing of these internships will be negotiable depending on your medical school curriculum requirements, and could form part of an elective programme.

Please fill in the application form below, and send it with your CV and covering letter to pcphmeded@ucl.ac.uk.

Deadline for submissions: 22nd May 2020

Internship application form

You might like to include information about whether you would like to join an existing research project within one of the Primary Care Research Groups (check this [website](#) to find out more), or your own project ideas (if feasible within the time period and relevant to Primary Care).

You might also like to include information about what you would like to get out of the internship e.g. knowledge about a particular topic; experience of a particular sort of research method; particular experiences within an academic department of Primary Care, etc.

**Full
name**

Click here to enter text.

**Email
address**

Click here to enter text.

Please answer the following questions (max 150 words for each section).

1. Why are you applying for this internship?

Click here to enter text.

2. How will this internship support your future career or professional development plans?

Click here to enter text.

3. What contribution do you think you can make during the internship?

Click here to enter text.

Applications last year were competitive. Last year's interns were very productive and successful in terms of paper and conference publications, as well as submission of further grant applications.

Selection is based on criteria including evidence of:

- Commitment to a primary care scholarship
- Critical thinking and reflexivity about how this award will support your future professional growth
- Creativity and commitment to making an active contribution during the internship to the primary care knowledge field.

Project 1: Re-design and Organisation of Primary Care: Evidence

Synthesis

This placement offers the opportunity to work with members of the NIHR School of Primary Care Research Evidence Synthesis Working Group (ESWG) on a systematic review. We are conducting several reviews at present about the re-design of primary healthcare, and its impact on the sustainability and training of the primary healthcare workforce. One on-going review, in collaboration with Calgary in Canada, examines Generalism and how this is taught, learnt and practised across clinical disciplines. Other reviews examine the delegation of traditional GP-work to other healthcare professionals and the impact on patient care; training; and the nature of clinical work. The specific review and students' contribution can be discussed with the successful candidate. The participant will be supported to learn about evidence synthesis methods and apply this to the review topic context. There will be opportunities to contribute to dissemination of review findings with user stakeholders and at national and international conferences.

<https://www.spcr.nihr.ac.uk/eswg/service-redesign-in-primary-care-realist-reviews-and-mixed-methods>

Project 2: Transformative Learning

This is a qualitative research project using focus groups and interviews. It examines the learning experiences of medical students during general practice placements. Analysis uses a learning theory called 'threshold concepts', to explore how students learning shifts and transforms over time, and how students integrate and use campus-based and workplace knowledge. The participant will be welcome to join the research team; contribute to focus groups and interviews; and will be supported in developing their qualitative analytical skills to contribute to data analysis using a framework approach. There will be opportunities to present this work with user stakeholder groups and submit to national and international conferences.

Project 3: Paternal Depression

While postpartum depression in women is a more commonly researched and recognised area of mental health (1), there has been increasing evidence over the past years that fathers in the post-partum period are also at increased risk of developing depressive symptoms (2, 3). Estimated prevalence of paternal postpartum depression (PPPD) vary greatly from 4 % - 25%, depending on study location and methodology (4, 5, 6). Overall, PPPD appears to be more common than previously recognised, and numbers may still underestimate the real extent of the problem. Reasons for this may include 'masked symptoms', which are male-specific (7). The literature suggests that PPPD is a clinically relevant problem for fathers, their families, and their healthcare systems. The UK National Institute for Health and Clinical Excellence recommends routine postnatal depression screening for mothers. No such policy is in place for fathers. Identifying risk factors associated with PDDD and treatment patterns may help the clinician to understand which fathers are at higher risk of developing PDDD, and thus which men to invite for PDDD screening.

This project (systematic review) will serve as an important starting point of a research programme exploring duration and efficacy of pharmacological and non-pharmacological treatment (and risk factors for requiring treatment) of PPPD which may longer-term inform policy regarding screening and management of PDDD. Moreover, we plan to develop and evaluate a digital non-pharmacological intervention to support new fathers pre- and post-natally.

- (1) O'Hara, M.W., & McCabe, J.E. (2013). Postpartum depression: current status and future directions. *Rev Clin Psych (Suppl 1)*, 379 – 407.
- (2) Bradley, R., & Slade, P.A. (2011). A review of mental health problems in fathers following the birth of a child. *J Reprod Infant Psychol., Suppl 1*, 19 – 42.
- (3) Wee, K.Y., Skouteris, H., Pier, C., et al. (2011). Correlates of ante- and post-natal depression in fathers: a systematic review
- (4) Dave, S., Petersen, I., Sherr, L., & Nazareth, I. (2010). Incidence of Maternal and Paternal Depression in Primary Care. *Arch Pediatr Adolesc Med*, 164 (11), 1038 – 1044.

- (5) Goodman, J.H. (2004). Paternal post-partum depression, its relationship to maternal post-partum depression, and implications for family health. *J Adv Nurs*, 45 (Suppl 1), 26-35.
- (6) Paulson, J.F., & Bazemore, S.D. Prenatal and postpartum depression in fathers and its association with maternal depression: a meta-analysis. *JAMA J Am Med Assoc.*, 303 (Suppl 19), 1961-9.
- (7) Azorin, J.M., Belzeaux, R., Fakra, E. et al. (2014). Gender differences in a cohort of major depressive patients: further evidence for the mal depression symptom hypothesis. *J Affec Disord*, 167, 85-92.