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Integration of Women's Healthcare and Health Systems Science

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Abstract

The intricate relationships in the delivery of healthcare are addressed by health systems science. Health systems science, which helps patients navigate the complex and frequently confusing US healthcare delivery system, focuses on the minute elements needed to give high-quality care to specific patients. In order to give patients with efficient, affordable, and high-quality care, modern doctors must have a solid working knowledge of health systems science. This is due to advancements in technology, informatics, and communication.

Keywords: Women's healthcare • Health systems science • Integration

Introduction

Along with the basic scientific and clinical science courses presently offered in medical school, medical educators are prepared to add health systems science principles. Women's health medical educators are needed since there is a lot of crossover between the areas of women's healthcare and health systems science, such as interdisciplinary cooperation, ethics, advocacy, and quality improvement. Here, the writers explain the idea of health systems science and go over why and how it ought to be incorporated into the curriculum for undergraduate medical school. Future doctors must be produced by medical schools who can actively contribute to the development and enhancement of the healthcare delivery system in addition to providing top-notch patient care. Here, the writers explain the idea of health systems science and go over why and how it ought to be incorporated into the curriculum for undergraduate medical school. Future doctors must be produced by medical schools who can actively contribute to the development and enhancement of the healthcare delivery system in addition to providing top-notch patient care [1].

Description

To adapt to the changing needs of healthcare systems, experts in the sector are urging reform of medical school programmes. Innovative health systems science (HSS) curricula have been developed by U.S. medical schools, and they contain skills in value-based care, population health, system improvement, interdisciplinary collaboration, and systems thinking. The need for new curricular techniques, assessments, teachers, and resource allocation makes it difficult to adopt HSS curricula successfully. The students' variable receptivity, however, may be the most noticeable of these difficulties. While many students are actively participating, others are not happy with the amount of time in the curriculum devoted to skills that aren't seen as being highly productive [2].

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The authors examine student receptivity challenges, such as marginalisation of HSS coursework, infancy of the HSS field, relative nascence of curricula and educators, heterogeneity of pedagogies, tensions in students' perceptions of their professional role, and culture of HSS integration. They have over 11 years of experience in global HSS curricular reform in 2 medical schools. The authors urge a re-examination of five factors, including student recruitment procedures, faculty development, creating an academic "home" for HSS, assessment measures, and open collaboration amongst medical schools that affect HSS receptivity. The fundamental problems with HSS developments must be understood by educators in order to meet the societal commitment of meeting patients' needs [3].

In the literature, difficulties with student receptivity to HSS curriculum are not well described. In our experience, the difficulties are frequently discussed in private, private conversations amongst educators from various medical schools. Medical education must encourage constructive discussion about current issues and speed up its own modifications to meet these demands if health systems are to continue to develop. We explore the successes and difficulties of student engagement in HSS curricula and call for a re-examination of 5 key issues that may address the broader understanding of underlying challenges. We represent 2 U.S. medical schools with more than 11 years of combined experience in global HSS curricular reform. Faculty with the expertise and abilities necessary to be excellent instructors and leaders and who have major responsibility for, or anticipate having responsibility for, implementing and/or teaching themes linked to health systems science. The programme specifically gives participants' local institutions an overview of how to design, administer, and assess a health systems science curriculum. Two days of faculty development training are provided as part of the 12-month Health Systems Science Scholars programme, which is taught by nationally renowned health systems science specialists. Over the course of a year, these professionals advise the academics as well. Scholars also become a part of a national network of faculty scholars with comparable interests [4].

Health Systems Science, the original book on the subject, has been completely updated to reflect the current problems and answers. This rapidly growing area of healthcare investigates how care is provided, how healthcare professionals collaborate to provide it, and how the health system might enhance patient care and healthcare provision. Health systems science is quickly developing into an essential "third pillar" of medical science, alongside basic and clinical sciences, with a focus on understanding the role of human factors, systems engineering, leadership, and patient improvement strategies that will help change the course of healthcare and ensure increased patient safety [5].

What is the study of health systems? The critical competences required for us to provide the best quality value-based health care in a way that is both patient and population-cantered are referred to as the science of health care delivery, which is another name for it. It is how we may put the education

required to achieve the Triple Aim of healthcare into practise. Many of the popular subjects being discussed right now in both graduate and undergraduate medical school already include some Health Systems Science competencies.

What are some of the early results of the study of health systems? Innovative change without programme assessment impedes significant distribution, as it does with any change in how medical education is approached. The incorporation of the elements of health systems science into undergraduate medical education programmes is one of the early outcomes that speaks to the significance and utility of health systems science. Several instances include:

- Development of Health Systems Science curriculum
- Early inclusion of medical students in the provision of healthcare by including them in the healthcare team as a component of their educational experience
- Students who have had prolonged exposure to health systems science competencies in their curricula would be better equipped to handle the demands of residency

Conclusion

These abilities include inter professional skills, value-based care, health care policy and economics, population health (social determinants and healthcare equality), informatics, and health system improvement. Why is the study of health systems so crucial? We need to start thinking about foundational information and clinical knowledge in a synthetic way and get away from the conventional 2+2 medical education model in order to get beyond Flexner and genuinely embrace the continuum of medical education. We have a chance to use pedagogical strategies that will make it easier for our students to integrate their foundational and clinical learning, and to make sure that they develop the knowledge and abilities required to be excellent doctors. Our learners need to integrate the foundational sciences and clinical knowledge. Clinical reasoning, leadership, professionalism, and reflection are all crucial sub competencies of each of the Health Systems Science competency areas that are currently included in many curricula.

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Conflict of Interest

None.

References

1. Chen, Huijun. "Clinical characteristics and intrauterine vertical transmission potential of COVID-19 infection in nine pregnant women: A retrospective review of medical records." *The lancet* 395 10226 (2020): 809-815.
2. DeSisto, Carla L. "Risk for stillbirth among women with and without COVID-19 at delivery hospitalization—United States, March 2020–September 2021." *Morb Mortal Wkly Rep* 70 (2021): 1640.
3. Liu, Huanhuan. "Clinical and CT imaging features of the COVID-19 pneumonia: Focus on pregnant women and children." *J Infect* 80 (2020): e7-e13.
4. Manti, Sara. "Detection of respiratory syncytial virus (RSV) at birth in a newborn with respiratory distress." *Pediat Pulmonol* 52 (2017): E81-E84.
5. Di Mascio, Daniele. "Outcome of coronavirus spectrum infections (SARS, MERS, COVID-19) during pregnancy: A systematic review and meta-analysis." *Ame J Obste Gynec MFM* 2 (2020): 100107.

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