The experiences of a student-led special interest group by occupational therapy students at Curtin University

M. Nguyen^{1, 2}, A. Young^{1, 3}, A. Armstrong¹, E. McBlane¹, J. McCann¹ & D. Parsons^{1, 4}

Abstract

Introduction: Tertiary education courses for health disciplines prepare students for work in a professional environment. However, there is difficulty in covering all content areas due to a saturated curriculum. As a result, in occupational therapy, a gap exists between current course curricula and the knowledge required for a full scope of practice. This gap can be bridged with student-led special interest groups as a form of continuous professional development to provide extra learning opportunities for students. This study aimed to evaluate the perceived effectiveness of a student-led special interest group for occupational therapy students at Curtin University, Australia.

Methods: The study utilised a concurrent triangulation mixed-method design. Pre- and post-session surveys collected data on students' experiences from three student-led special interest group sessions. A focus group explored themes regarding implementing the special interest group sessions. Descriptive statistics were used to analyse demographics, and Mann-Whitney U Tests were conducted on pre- and post-session data sets. Reflexive thematic analysis was used to analyse the focus group data.

Results: Students perceived that the student-led special interest group could effectively build their competence and confidence in the specific occupational therapy topics presented. Students perceived the student-led special interest group as an accessible means of continuous professional development and provided suggestions for future implementation.

Conclusion: This study's findings can be used to implement student-led special interest groups in other occupational therapy curricula, provide feedback to guide their implementation, effectively target student participation and encourage further research into the relevance of such groups in other disciplines.

Keywords: student-led; special interest group; lifelong learning; continuous professional development; occupational therapy

Correspondance: Dr Dave Parsons dave.parsons@nd.edu.au

VOL. 25, NO. 4, 2024 1 ISSN 1442-1100

¹ Curtin School of Allied Health, Curtin University, Perth, Western Australia, Australia

² Osborne Park Hospital, North Metropolitan Health Service, Western Australia, Australia

³ enAble Institute, Curtin University, Perth, Western Australia, Australia

⁴ School of Health Sciences, The University of Notre Dame Australia, Fremantle, Western Australia, Australia

Introduction

Lifelong learning is essential for all health professionals (Alsop, 2013). Learning and maintaining knowledge and skills may be achieved through continuous professional development (CPD) (Alsop, 2013). Similar to many health professional registration boards, the Occupational Therapy Board of Australia (OTBA) (2018) encourages a culture of lifelong learning for registered occupational therapists by ensuring the mandatory completion of at least 20 hours of CPD annually. While registered occupational therapists must complete the minimum hours of CPD, no such mandates exist for occupational therapy students, despite evidence suggesting the practice of lifelong learning and professional identity develops through experiences at university (Milic, 2013).

Tertiary occupational therapy courses prepare students for professional work by ensuring they meet professional competency standards (Fortune et al., 2013). However, the increased recognition of occupational therapy in healthcare has led to growth in branches of professional practice, resulting in increasing practice-specific content requirements (Nicola-Richmond et al., 2019). With saturated occupational therapy curricula, some practice areas cannot be covered in-depth, with minimal flexibility for additional learning. Alongside other factors that impact new graduates, such as lack of clinical experience and self-perceived inadequacies, the inability of the curriculum to cover all facets of occupational therapy has contributed to new graduates feeling underprepared as working professionals (Lim & Nadeau, 2016; Moir et al., 2022).

One strategy that could address this issue is implementing a student-led special interest group (SIG). A SIG is a voluntary, extracurricular group that provides opportunities to explore, learn and be exposed to information around a particular topic (Louw et al., 2018). Most SIGs aim to engage participants by stimulating interest and contributing to improved competence in a particular topic or skill (Louw et al., 2018). Student run groups are one response suggested by Patterson et al. (2017), who highlighted positive perceptions of these groups, which focused on facilitating independent learning and developing clinical skills. Student-led SIGs are groups facilitated by peers that provide learning activities, focusing on specialised topics that are not addressed within the curriculum, to build knowledge and develop skills (Short et al., 2017). SIGs can help bridge the gap between the current curriculum and the skills needed for professional practice but can also contribute to the continuous professional development of occupational therapy students as lifelong learners (Lim & Nadeau, 2016; Marvell et al., 2013).

Many CPD opportunities are available for practising occupational therapists to promote lifelong learning and further their knowledge and skills, such as conferences, seminars, workshops and web-based training modules, which are often also available for students to access (Ross et al., 2013). However, research has identified that students experience many barriers to seeking and engaging in existing CPD opportunities while studying, such as inconvenient times and locations, balancing busy schedules and roles and prohibitive costs

(Rizzolo et al., 2016; Zeldenryk & Bradey, 2013). Student-led SIGs have the potential to address these barriers by being coordinated by the students, for the students. Being student led allows for a more comfortable and approachable learning space for students, as it provides opportunities for students to work alongside peers, network and socialise (Lim & Nadeau, 2016; Short et al., 2017).

Student-led initiatives allow the unique characteristics of the student cohort to be acknowledged, in turn permitting the learning activities covered to be tailored to meet students' specific needs and interests. This is achieved by students acknowledging their learning needs and sharing them with their peers to then shape the activities organised by the student-led group. In relation to clinical content, student-led SIGs can also present extracurricular learning opportunities on new topics or topics that have only been briefly covered in formal tuition activities. Research has shown learning opportunities like these have increased students' competence and confidence in their abilities (Highet et al., 2021; Marvell et al., 2013; Song, 2017). Beyond covering clinical content, student-led SIGs can build on non-clinical skills, such as critical thinking, professional responsibility and teamwork (Lim & Nadeau, 2016; Marvell et al., 2013; Williams et al., 2015). Evidence from nursing, radiology and surgical medicine suggests that students who engage in SIGs perform at higher levels in fieldwork settings and in a professional working environment (Dobson et al., 2021; Highet et al., 2021; Song, 2017). However, there is scarce research on student engagement in interest groups within occupational therapy.

A student-led SIG was created in 2021 at Curtin University, Western Australia, as a student's honours' research project, with the goal of providing extra learning opportunities for students to engage in, in addition to their formal studies. This study aimed to evaluate the implementation of this student-led SIG with respect to the perceived effectiveness and satisfaction of occupational therapy students who participated.

Methods

Research design

This study utilised a concurrent triangulation mixed-method design. Researchers completed quantitative and qualitative data collection, an independent analysis of the two strands and then merged the data (Creswell & Plano Clark, 2011). The mixed-method design provided a rich understanding of the students' experiences in a SIG by collecting quantitative and qualitative results and combining them into one interpretation (Creswell & Plano Clark, 2011). Ethical approval for this study was obtained from the Curtin University Human Research Ethics Committee (HRE2021-0060). All participants provided written consent prior to data collection.

Participants

Convenience sampling was used to recruit occupational therapy students at Curtin University in Western Australia who participated in a student-led SIG. Inclusion criteria

required participants to be over 18, enrolled in an occupational therapy course and have participated in at least one session of the SIG.

Procedures

The SIG was comprised of multiple 1-hour lecture-style sessions. They were held once a month and were organised by a group of six students who self-nominated to form the SIG organising committee, which was independently formed from within the occupational therapy cohort. The students advertised sessions on campus and organised the logistics of booking rooms, setting up presentation equipment and inviting guest speakers. The sessions were run on campus by qualified health professionals—two of whom were university academic lecturers and another external to university staff—and provided opportunities for in-person or online attendance. Topics involved networking and employability, managing burnout and emotional intelligence. Topics were chosen through discussion between the organising committee members and researchers based on the topics they felt the cohort would be interested in and the availability of presenters for each topic.

The SIG sessions and data collection occurred from February 2021 to October 2021. The research team comprised six members, four final-year occupational therapy students and two experienced researchers. The student researchers were peers of the participants.

The occupational therapy cohort was invited via Eventbrite[©], email and BlackBoard[©] announcements to complete online surveys before and after attending each session. Participants who had chosen to watch recordings of the sessions online were encouraged to complete surveys in their own time. The final question in the survey asked participants to engage in a focus group, and those who accepted were subsequently contacted to participate.

After the three sessions, a 1-hour focus group was held via Zoom[©] (Zoom Video Communications, Inc., 2021) to explore the themes students identified from their experience of the SIG sessions. Three of the four student researchers facilitated the focus group with the participants, utilising guiding questions, which are expanded on within the data collection section. The remaining student researcher was unavailable for data collection however was actively involved in data analysis. The meeting was audio and video recorded via Zoom[©]. To encourage participants to speak freely, researchers were not involved in the organising committee for the SIG, and both negative and positive perceptions were invited by the facilitators.

Data collection

Researchers created the self-report surveys using the secure web-based survey application Qualtrics® (Qualtrics, 2021). Bespoke survey questions were created by the researchers to address the aims of the research as no validated tool existed. Questions were related to demographic information and attendance at sessions and prompted participants to

provide their self-perception of their clinical occupational therapy skills, knowledge and professional practice and their confidence in their ability to apply their knowledge prior to attending the session/s. Scales ranged from 1–10, with 1 being "very poor" and 10 being "excellent". A similar scale, with 1 being "highly unlikely" and 10 being "definitely", was used to gather perceptions on the impact of SIGs on their continuous professional learning and on their learning being facilitated by extra opportunities outside of the university curriculum.

Focus group questions were informed by the data accumulated from the pre- and postsurveys. Questions allowed participants to elaborate on their survey answers and included: likes and dislikes of the SIG; thoughts on the presentation, content and relevance of topics; and perceptions of the frequency and location of the sessions.

Data analysis

Ouantitative

Quantitative analysis was conducted using IBM SPSS 27 $^{\circ}$ (IBM Corp., 2020). Only complete survey responses were included, and incomplete survey data were removed from the analysis. Demographic data were organised via frequency count equations. Descriptive statistical analyses were completed for each data set. Due to the ordinal nature of the outcome measures (1 to 10 rating scale), Mann-Whitney U Tests were conducted on preand post-session data sets to determine significant differences. The level of significance for statistical tests was set at p = 0.05.

Qualitative

Recordings from the focus group were transcribed verbatim. Researchers utilised a thematic analysis process similar to Braun & Clarke's 6-phase framework (Maguire & Delahunt, 2017). Researchers ensured credibility, confirmability, dependability and transferability to improve trustworthiness within the data analysis (Ahmed, 2024). NVivo® (QSR International, 2021) stores and manages the data. Once transcripts were thoroughly read through and organised, the student members of the research team collaboratively generated initial codes and organised these into broad themes. The experienced researchers in the team then cross-checked these themes.

Next, all research team members collectively reviewed and discussed themes until a consensus was reached. Four themes were defined and named. Member-checking procedures were conducted by emailing the participating students a finalised list and describing themes derived from the focus group. No feedback from participants was received.

Results

Phase 1: Survey

Demographics

A total of 228 pre-survey responses and 155 post-survey responses were completed across three sessions. Between 34 and 92 students completed a survey for each of the three SIG sessions, with the exact number varying per session. Although exact cohort numbers from the year of data collection were not available, this represents approximately 8% participation, assuming an approximate quota of 1,100 students (combining undergraduates and graduate-entry master's students). Most responses were from female and third-year undergraduate students. See Table 1 for a summary of the participant demographics.

Outcomes

Students' self-reported knowledge, skills and confidence in the specific SIG topics of networking and employability, managing burnout and emotional intelligence saw a statistically significant increase between pre- and post-surveys for all three SIG sessions, as shown in Table 2. Students' confidence in applying occupational therapy concepts related to these topics also saw a statistically significant increase in all three sessions. However, statistically significant increases were not identified between the pre- and post-surveys for all three sessions in relation to students' perceived level of clinical occupational therapy skills and knowledge surrounding occupational therapy concepts, as well as professional practice following the first session, which focused on networking and employability. However, a positive trend was observed over the three sessions related to these questions.

Students' beliefs that SIGs can provide extra learning opportunities and that the practical experience provided by the SIG session can contribute to their learning was highly rated for each of the three SIG sessions, as shown in Table 3. A positive trend can be observed over the three sessions relating to these questions. Students highly rated their belief that student-led groups are more approachable than other forms of CPD. Students rated that they would be highly likely to return to student-led SIG sessions and recommend them to their peers. A positive trend is apparent for the survey question regarding students' likeliness to return to SIGs across the three groups.

Phase 2: Focus group

Five occupational therapy students volunteered to participate in the focus group. Participants were asked to discuss their experiences of SIG sessions and how these aligned with their learning. The four themes generated were: "By students, for students"; "How does it fit into my life?"; "Our needs are all different"; and "Preparing for life after university". Student quotes are included to illustrate each theme.

 Table 1

 Demographic Distribution of Students Who Completed Each Survey Pre- and Post-Participation in SIG Sessions

		Session 1		Session 2		Session 3	
		PRE n = 71 (%)	POST n = 62 (%)	PRE n = 92 (%)	POST n = 59 (%)	PRE n = 65 (%)	POST n = 34 (%)
Gender	Male	12 (16.9)	8 (12.9)	4 (4.4)	7 (11.9)	7 (10.8)	3 (8.8)
	Female	59 (83.1)	54 (87.1)	88 (95.7)	52 (88.1)	58 (89.2)	31 (91.2)
	Other	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Age	18-20	34 (47.9)	32 (51.6)	41 (44.6)	29 (49.2)	20 (30.8)	14 (41.2)
	21–24	27 (38)	24 (38.7)	38 (41.3)	23 (39)	40 (61.5)	17 (50)
	25+	10 (14.1)	6 (9.7)	13 (14.1)	7 (11.9)	5 (7.7)	3 (8.8)
Year of Study	1st-year UG	12 (16.9)	7 (11.3)	11 (12)	8 (13.6)	3 (4.6)	1 (2.9)
	2 nd -year UG	12 (16.9)	12 (19.4)	23 (25)	18 (30.5)	25 (38.5)	10 (29.4)
	3 rd -year UG	37 (52.1)	36 (58.1)	48 (52.2)	25 (42.4)	28 (43.1)	13 (38.2)
	4 th -year UG	5 (7)	4 (6.5)	4 (4.4)	1 (1.7)	5 (7.7)	5 (14.7)
	1st-year GEM	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	2 nd -year GEM	4 (5.6)	1 (1.6)	4 (4.4)	5 (8.5)	4 (6.2)	4 (11.8)
	3 rd -year GEM	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Multiple units	1 (1.4)	2 (3.2)	2 (2.2)	2 (3.4)	0 (0)	1 (2.9)
Study Load	Full time	64 (90.1)	59 (95.2)	84 (91.3)	57 (96.6)	58 (89.2)	32 (94.1)
	Part time	7 (9.9)	3 (4.8)	8 (8.7)	2 (3.4)	7 (10.8)	2 (5.9)
Student	Domestic	58 (81.7)	50 (80.7)	81 (88.0)	49 (83.1)	57 (87.7)	32 (94.1)
	International	13 (18.3)	12 (19.4)	11 (12.0)	10 (17)	8 (12.3)	2 (5.9)
Mode of Advertising	Social Media	31 (43.7)	29 (46.8)	46 (50.0)	23 (39.0)	37 (56.9)	22 (64.7)
	Email	12 (16.9)	8 (12.9)	14 (15.2)	9 (15.3)	7 (10.8)	2 (5.9)
	Blackboard	6 (8.5)	5 (8.1)	7 (7.6)	7 (11.9)	6 (9.2)	3 (8.8)
	Posters	6 (8.5)	4 (6.5)	6 (6.5)	3 (5.1)	0 (0)	1 (2.9)
	Peers	12 (16.9)	11 (17.7)	11 (12)	12 (20.3)	14 (21.5	5 (14.7)
	Lecturers	4 (5.6)	5 (8.1)	3 (3.3)	1 (1.7)	0 (0)	0 (0)
	Other	0 (0)	0 (0)	5 (5.4)	4 (6.8)	1 (1.5)	1 (2.9)

 $\mathsf{UG} = \mathsf{undergraduate}$, $\mathsf{GEM} = \mathsf{graduate}$ entry masters

Table 2

Students' Self-Perception of Their Competence and Confidence, Pre- and Post-Participation in SIG Sessions

		Session 1			Session 2			Session 3	
	Network	Networking & Employability	bility	Emoti	Emotional Intelligence	ce	Mana	Managing Burn-Out	
	PRE	POST Mean (SD)	zscores	PRE Mean (SD) $n = 92$	POST Mean (SD) $n = 59$	zscores	PRE Mean (SD) n = 65	POST Mean (SD) $n = 34$	zscores
Level of clinical occupational therapy skills	4.20 (2.01)	4.76 (2.37)	-1,28	4.46 (1.98)	5.24 (2.05)	-2.30*	4.8 (1.64)	5.68 (1.51)	-2.53*
Level of knowledge surrounding occupational therapy concepts	5.28 (0.23)	5.31 (2.23)	09'-	5.46 (1.93)	6.00 (1.84)	-1,81	5.91 (1.51)	6.35 (1.39)	-1,38
Level of professional practice	4.61 (2.38)	4.80 (2.56)	-1,14	4.88 (2.29)	5.78 (2.29)	-2,40*	4.78 (2.06)	5.88 (1.74)	-2,64**
Knowledge on topic of the interest group in which you attended	4.24 (2.05)	6.63 (2.17)	-5.76**	4.20 (2.27)	6.25 (2.23)	-5,14**	5.15 (1.67)	7.09 (1.16)	-5,40**
Level of skill on the topic of the interest group in which you attended	4.13 (2.07)	5.87 (2.24)	-4,33**	4.02 (2.21)	5.73 (1.97)	-4.60**	4.78 (1.70)	6.65 (1.22)	-5.03**
Confidence in your abilities in applying occupational therapy concepts	4.77 (2.18)	5,71 (2,23)	-2,27*	5.05 (2.05)	5.97 (1.81)	-2,98**	5.51 (1.43)	(09'1) 9'3	-3,08**
Confidence in your abilities on the topic of the interest group in which you attended	4.37 (2.12)	6.45 (1.84)	-2,26**	4.32 (2.07)	6.27 (1.90)	-5.67**	5.25 (1.80)	7.03 (1.22)	-4,67**

For the reported means, *p < .05, $^{**}p$ < .01; SD = standard deviations

 Table 3

 Students' Perceptions of Student-Led SIGs, Post-Participation in SIG Sessions

	Session 1 n = 61	Session 2 n = 58	Session 3 n = 34	All Sessions n = 153
	Mean (SD)	Mean (SD)	Mean (SD)	Mean (SD)
If you believe SIG's can provide extra learning opportunities, in addition to your current studies	8.51 (1.82)	8.55 (1.52)	8.62 (1.35)	8.55 (1.61)
If you believe the practical experience provided in SIGs can help contribute to your learning	8.33 (1.93)	8.33 (1.65)	8.35 (1.14)	8.33 (1.71)
If you believe student-led groups are more approachable for students than other forms of continuous professional development	8.31 (1.89)	8.52 (1.48)	8.35 (1.59)	8.40 (1.67)
How likely would you be to return to student-led SIGs in the future?	8.61 (1.88)	9.07 (1.25)	9.15 (1.23)	8.90 (1.54)
How likely would you be to recommend attending student-led SIGs to a friend?	8.66 (1.73)	9.02 (1.25)	9 (1.21)	8.87 (1.45)

By students, for students

Students expressed that they felt more comfortable attending SIG sessions knowing that their student peers had facilitated them than they otherwise would have if organised by university academics: "I like the fact that it's run by students, for students ... it just makes it a little bit more comfortable to attend" (S1). In addition, students felt that the topics presented in the SIG sessions aligned with their formal learning and were well suited to the knowledge level of students across all cohorts. They also appreciated that some SIG sessions were presented by lecturers with whom they were already familiar: "I found that topics were really suited to [us as] students and also [liked] that it's given by lecturers that we know as well" (S2).

How does it fit into my life?

Students expressed the importance of SIG sessions being easily accessible and able to fit into their already busy schedules. They liked having the option to participate in SIG sessions either online or face to face. Students found the face-to-face session on campus convenient and "quite a nice atmosphere [to] listen to the presenters" (S3). Others identified that having the video recordings on the online platform made the session content more accessible. However, issues with accessing the content, internet connection interruptions, poor sound quality and difficulty asking questions to presenters through the online platform were experienced.

Students found the monthly scheduling of the sessions suitable, however some found the third session difficult to attend as it was scheduled during a busy time of the semester for students with assignments and exams. Students indicated they would be happy to engage in SIG sessions more frequently during quieter university weeks at the start of the semester.

The students agreed the 1-hour length of each session was manageable with their workload and that having the SIG sessions in the occupational therapy building made them easy to attend. Students expressed that consistency and convenience with location and time were desirable: "I think keep it at the one spot and ... have it at the same time ... just making sure it's a bit consistent" (S1).

Students thought advertising through posters distributed around the occupational therapy building on campus and on social media (Facebook®) was informative and created discussion between students. Students identified the SIG sessions as an opportunity to meet and connect with other students across different year levels. However, it was agreed they would like more opportunities for socialising and networking before or after the sessions.

Students liked that the SIG sessions were free, and some emphasised that they would be disinclined to attend future events if there was a small fee. One student expressed, "As someone that's had to pay for ... CPD this year, I would say no [to attending]" (S4). Another student agreed, saying, "I wouldn't really pay for it" (S4). Students identified that they would like to be given a form of evidence for attendance to put towards compulsory CPD hours.

Our needs are all different

Topics of the SIG sessions were brought up in discussion throughout the focus group, with students identifying the topic as an important motivator for attending and a need for it to align with their current occupational therapy curriculum and personal interests.

Overall, students expressed that the topics presented in the SIG sessions were relevant and that they enjoyed the variety, as they were well suited to their role as students. They appreciated how they were linked to their current curriculum, with one participant reporting, "The topics are very diverse ... but they're still actually linking back to us as students" (S2). Students believed these topics came at a reasonable time of the semester but that reconsidering the timing of the session on managing burnout may have assisted them to be more prepared for exam weeks.

Students thought the topics and presenters were engaging, however it was expressed that they would have liked access to slideshow presentations to follow along: "I think the presentation was quite engaging, to be honest. I was engaged enough to listen the whole way through" (S2).

Students requested future topics to help them prepare for clinical placement and CPD portfolio development: "I think maybe some topics on preparing for prac and some things you can do to help you develop more skills" (S3). Students also suggested topics relevant to specialist areas of practice, e.g., hand therapy, gerontology and mental health:

I think those topics [included in the sessions] kind of help us manage our workload. But in terms of helping our learning, I think maybe some more interest groups on specific topics throughout our units ... because some people might find certain topics more interesting and want to go into more depth on any content we do. And it might also just help us understand a little bit more. (S4)

Preparing for life after university

Students believed the topics were well suited to their studies but gave them some further insights, not covered in their studies, into the need for future practical professional skills that would be valuable when working as an occupational therapist. Students found the sessions gave them "a sense of what it's like to sort of work as an OT [occupational therapist] and to … learn a bit about the more practical skills, things like managing burnout [and] how to manage that" (S5). Students found the topics helped them better understand how to manage their workload and, with the emotional intelligence presentation, transferable to communication as a future occupational therapist.

Discussion

This study evaluated the perceived effectiveness of, and satisfaction with, a student-led SIG for occupational therapy students at Curtin University. Findings demonstrated that occupational therapy students are interested in participating in student-led SIGs, that they perceived the SIG as providing further opportunities for networking and learning outside what is covered in the curriculum and that it contributed to their perceived knowledge development. In addition, students perceived that the student-led aspect made the group more approachable and accessible, encouraging their participation. They were mostly satisfied with the sessions but had suggestions for future content to help prepare them for practice broadly and in particular areas of speciality.

Students reported an interest in engaging in student-led SIGs in addition to completing the required coursework within the curriculum. This study has shown potential for SIGs to provide positive extracurricular opportunities for students to engage in when they want to further their learning in specific content areas (Lim & Nadeau, 2016). The survey data indicated that participants held a belief that the content and skills presented in the sessions contributed to their understanding of occupational therapy concepts. This finding strengthens the notion of lifelong learning as one that requires engagement in more than just a formal curriculum and suggests that SIGs have the potential to foster this attribute at the earliest stages of one's health professional career by providing extra opportunities for learning (Alsop, 2013).

Based on students' perceptions, participation in the SIG positively impacted their opportunities to connect with peers. Participants highlighted how the SIG provided an opportunity to meet peers within their cohort and across different year groups. This provided a sense of socialisation in an education setting that typically does not address the need for peer collaboration over different year groups. Presentations by qualified health professionals also provided opportunities for students to connect with clinicians in the topic areas to explore clinical learning opportunities further. Literature suggests the importance of making social connections early on to improve graduate employability and secure opportunities for career progression (Badoer et al., 2021). Universities, therefore, play a pivotal role in preparing students to enter the workforce with the necessary opportunities to network and develop their skills (Badoer et al., 2021).

Findings identified that students perceived they gained transferable skills and knowledge of emotional intelligence and managing burnout from participating in the SIG sessions. Transferrable skills are deemed highly desirable for students, especially for new graduates. For example, the literature highlights adaptability as an important skill for future employees, as it showcases their flexibility in the workplace (Olesen et al., 2021).

While students perceived improvements in their confidence and skills related to all sessions, some increases between pre- and post-surveys were not statistically significant. This was particularly evident in the domains of clinical occupational therapy skills and knowledge surrounding occupational therapy concepts, as well as professional practice following the first session, which focused on networking and employability.

Clinical practice comprises utilising discipline-specific theories and models, clinical reasoning and appropriate contextual approaches (Knecht-Sabres, 2010). Given that the students were at different stages of the course, and some were yet to experience placements or simulated scenarios that help develop particular clinical skills and knowledge, it is possible that a lack of understanding of the concepts used in the session by students at earlier levels of training could account for the variation in responses.

It is suggested that some clinical competencies are acquired only after graduation, with adequate support and supervision (Gray et al., 2012; Nicola-Richmond et al., 2019). However, studies also note that students can still perform adequately with skills learnt in university (Nicola-Richmond et al., 2019). This suggests there is value in offering students opportunities to extend their learning, which can be done through SIGs, to support bridging the gap between competencies acquired through formal education and the more advanced skills typically learnt in the workplace.

Students were satisfied with the sessions but were open to further improvement in the facilitation of the presentations. Students identified that, overall, accessibility was key to improving engagement, and the student-led aspect, specifically students organising, communicating and advertising the sessions, was a large contributor to this. Evidence

suggests that student-led initiatives are more likely to meet student learning needs, as they cater to the students' level of understanding (Furmedge et al., 2014). Participants felt that student-led SIG sessions were more approachable than traditional forms of CPD would be for them and that they were more comfortable having peers as the first point of contact, rather than lecturers. The fact that sessions were organised with consideration of students' time commitments and routines and relevance to their coursework was also highly valued. Research suggests that understanding and meeting student needs are important in facilitating effective education sessions to support the differences in how students learn and take on information (Driessnack et al., 2011).

Students face growing financial, employment and family demands that affect their learning and daily lives. Flexible learning options enable students to still engage in learning when placed in situations outside their control that hinder their studies (Zeldenryk & Bradey, 2013). Findings from this study highlighted that logistics and accessibility were important aspects to consider when planning SIG sessions. Students mentioned that having different delivery modes made them more accessible, especially for those studying abroad or those with fixed employment schedules. With a rise in the use of technology, online platforms for learning offer flexibility (Glogowska et al., 2011). Blended learning combines traditional teaching methods with online forms and allows for more self-regulated learning, with students working at their own pace and with minor impacts on achievement and engagement (Al-Fodeh et al., 2021). Another aspect of the SIG sessions that was highly valued by students was the lack of cost associated with attendance. This differs from traditional CPD offerings, which often come with increased financial costs, frequently deterring participants from engaging in them (Samuel et al., 2021). In this way, SIG sessions run in this format can ensure equity in student access, which could be a critical aspect of such a group's future success.

Limitations

Given the study was cross-sectional, the long-term impacts of the SIG for students post-graduation are unknown. Thus, the actual rather than perceived effect SIGs might have on the competence and confidence of new graduate occupational therapists requires further research. The study was completed at one university, focusing on occupational therapy. Therefore, the findings cannot be generalised to other universities or disciplines. Due to ethical considerations, students who completed surveys were not tracked. Therefore, pre- and post-surveys could not be paired, and it was not possible to compare perceived improvements for individual students. In addition, due to inconsistencies in attendance numbers for each SIG session, variations in participation in pre- and post-surveys were observed, which altered sample sizes. This has the potential to skew results favoured towards sessions with higher survey completion, which can inaccurately record higher ratings simply due to a larger number of participants. Similarly, with only one focus group with a small sample size, the data collected may not accurately reflect the experiences of all participating students.

Implications and future research

This study opens the opportunity for further research into the impact of SIGs on the skills and confidence of occupational therapy students across different years of a tertiary program and their potential to improve new graduate preparedness. Longitudinal studies, spanning the entire occupational therapy degree of 4 years and 1 year into post-graduation work, would better investigate the impact of SIGs on new graduate preparedness. There is also an opportunity for future research in other disciplines to utilise these findings to guide the implementation of student-led SIGs. The students' perspectives offer suggestions for how future SIGs can be run to suit student needs by considering academic schedules, providing consistency in how sessions are conducted and introducing topics that correspond with and extend course learning.

Conclusion

Occupational therapy students at Curtin University perceived that student-led SIGs presented opportunities to receive extra learning on course-relevant topics, promoting an accessible means of CPD and building on their confidence to work in clinical occupational therapy settings. The findings of this study have the potential to be used to improve SIGs and more effectively target student participation. Future evaluation in other disciplines is recommended, as are longitudinal studies to capture the long-term impact of student-led SIG attendance on new graduates' preparedness when entering the workforce.

Conflicts of interest and funding

The authors would like to acknowledge Curtin University's support for the use of resources throughout the study. The authors declare no other conflicts of interest.

References

- Al-Fodeh, R. S., Alwahadni, A. M. S., Abu Alhaija, E. S., Bani-Hani, T., Ali, K., Daher, S. O., & Daher, H. O. (2021). Quality, effectiveness and outcome of blended learning in dental education during the COVID pandemic: Prospects of a post-pandemic implementation. *Education Sciences*, 11(12), Article 810. https://doi.org/10.3390/educsci11120810
- Alsop, A. (2013). Continuing professional development in health and social care: Strategies for lifelong learning (2nd ed.). John Wiley & Sons. https://doi.org/10.1002/9781118782859
- Ahmed, S. K. (2024). The pillars of trustworthiness in qualitative research. *Journal of Medicine, Surgery, and Public Health, 2*, Article 100051. https://doi.org/10.1016/j.glmedi.2024.100051
- Badoer, E., Hollings, Y., & Chester, A. (2021). Professional networking for undergraduate students: A scaffolded approach. *Journal of Further and Higher Education*, 45(2), 197–210. https://doi.org/10.1080/0309877X.2020.1744543
- Blake, C., Gordon, S. C., Kimel, L., Minchella, L., Shannon, R. A., & Shepherd, R. (2019). NASN special interest groups: Their growth and development through the years. *NASN School Nurse*, 34(2), 118–123. https://doi.org/10.1177/1942602X18823352
- Creswell, J. W., & Plano Clark, V. L. (2011). *Designing and conducting mixed methods research* (2nd ed.). SAGE Publications.

- Dobson, J. L., Fenwick, A., Linehan, V., & Hartery, A. (2021). Radiology interest groups: A recipe for success. *Canadian Association of Radiologists Journal*, 72(3), 343–351. https://doi.org/10.1177/0846537119899551
- Driessnack, M., Mobily, P., Stineman, A., Montgomery, L. A., Clow, T., & Eisbach, S. (2011). We are different: Learning needs of accelerated second-degree nursing students. *Nurse Educator*, *36*(5), 214–218. https://doi.org/10.1097/NNE.0b013e3182297c90
- Fortune, T., Ryan, S., & Adamson, L. (2013). Transition to practice in supercomplex environments: Are occupational therapy graduates adequately prepared? *Australian Occupational Therapy Journal*, 60(3), 217–220. https://doi.org/10.1111/1440-1630.12010
- Furmedge, D. S., Iwata, K., & Gill, D. (2014). Peer-assisted learning—beyond teaching: How can medical students contribute to the undergraduate curriculum? *Medical Teacher*, *36*(9), 812–817. https://doi.org/10.3109/0142159X.2014.917158
- Glogowska, M., Young, P., Lockyer, L., & Moule, P. (2011). How "blended" is blended learning? Students' perceptions of issues around the integration of online and face-to-face learning in a continuing professional development (CPD) health care context. *Nurse Education Today*, *31*(8), 887–891. https://doi.org/10.1016/j.nedt.2011.02.003
- Gray, M., Clark, M., Penman, M., Smith, J., Bell, J., Thomas, Y., & Trevan-Hawke, J. (2012). New graduate occupational therapists feelings of preparedness for practice in Australia and Aotearoa/New Zealand. *Australian Occupational Therapy Journal*, 59(6), 445–455. https://doi.org/10.1111/j.1440-1630.2012.01029.x
- Highet, A., Gomez-Rexrode, A. E., Barrett, M., Santos-Parker, K. S., Santos-Parker, J. R., Cassidy, D. E., Herman, A. E., Kulick, A. A., Brown, C. S., Montgomery, J. R., Wakam, G. K., Englesbe, M. J., & Waits, S. A. (2021). Fostering passion and skills in surgical research across the medical education continuum: The transplant research, education, and engagement group. *Journal of Surgical Education*, 78(1), 356–360. https://doi.org/10.1016/j.jsurg.2020.07.006
- Knecht-Sabres, L. J. (2010). The use of experiential learning in an occupational therapy program: Can it foster skills for clinical practice. *Occupational Therapy in Health Care*, 24(4), 320–334. https://doi.org/10.3109/07380577.2010.514382
- Lim, F. A., & Nadeau, C. A. (2016). Student-led interest groups: An adjunct to learner-centered nursing education. *Nursing Education Perspectives*, 37(4), 232–235. https://doi.org/10.5480/14-1495
- Louw, A., Turner, A., & Wolvaardt, L. (2018). A case study of the use of a special interest group to enhance interest in public health among undergraduate health science students. *Public Health Reviews*, 39(1), Article 11. https://doi.org/10.1186/s40985-018-0089-4
- Marvell, A., Simm, D., Schaaf, R., & Harper, R. (2013). Students as scholars: Evaluating student-led learning and teaching during fieldwork. *Journal of Geography in Higher Education*, *37*(4), 547–566. https://doi.org/10.1080/03098265.2013.811638
- Maguire, M., & Delahunt, B. (2017). Doing a thematic analysis: A practical, step-by-step guide for learning and teaching scholars. *All Ireland Journal of Teaching and Learning in Higher Education*, 8(3), 3352–3359. http://ojs.aishe.org/index.php/aishe-j/article/view/335
- Milic, S. (2013). The twenty-first century university and the concept of lifelong learning. *Australian Journal of Adult Learning*, 53(1), 159–179.
- Moir, E. M., Turpin, M. J., & Copley, J. A. (2022). New graduates' experiences in paediatric private practice: Learning to make intervention decisions. *Canadian Journal of Occupational Therapy*, 89(4), 395–405. https://doi.org/10.1177/00084174221102716

- Nicola-Richmond, K., Pépin, G., Larkin, H., & Mohebbi, M. (2019). Threshold concept acquisition in occupational therapy: A mixed methods study of students and clinicians. *Australian Occupational Therapy Journal*, 66(5), 568–580. https://doi.org/10.1111/1440-1630.12595
- Occupational Therapy Board of Australia. (2018). Australian occupational therapy competency standards. https://otaus.com.au/publicassets/e15160a1-f1e5-ec11-9452-005056be13b5/Occupational-Therapy-Board---Standards---Australian-occupational-therapy-competency-standards-2018%20%201.pdf
- Olesen, K. B., Christensen, M. K., & Neill, L. D. O. (2021). What do we mean by "transferable skills"? A literature review of how the concept is conceptualised in undergraduate health sciences education. *Higher Education, Skills and Work-Based Learning*, 11(2), 616–634. https://doi.org/10.1108/HESWBL-01-2020-0012
- Patterson, F., Fleming, J., Marshall, K., & Ninness, N. (2017). Student perspectives of a student-led groups program model of professional practice education in a brain injury rehabilitation unit. Australian Occupational Therapy Journal, 64(5), 391–399. https://doi.org/10.1111/1440-1630.12382
- Rizzolo, S., DeForest, A. R., DeCino, D. A., Strear, M., & Landram, S. (2016). Graduate student perceptions and experiences of professional development activities. *Journal of Career Development*, 43(3), 195–210. https://doi.org/10.1177/0894845315587967
- Ross, K., Barr, J., & Stevens, J. (2013). Mandatory continuing professional development requirements: What does this mean for Australian nurses. *BMC Nursing*, 12, Article 9. https://doi.org/10.1186/1472-6955-12-9
- Samuel, A., Cervero, R. M., Durning, S. J., & Maggio, L. A. (2021). Effect of continuing professional development on health professionals' performance and patient outcomes: A scoping review of knowledge syntheses. *Academic Medicine*, 96(6), 913–923. https://doi.org/10.1097/acm.0000000000003899
- Short, N., Bain, J., Barker, C., Bolton, Z., Dammeyer, K., Fahrney, E., Hale, K., & Maples, C. (2017). Student-led special interest groups as a model for inclusion of specialty hand content in OTD curriculum. *Journal of Occupational Therapy Education*, 1(3), Article 6. https://doi.org/10.26681/jote.2017.010306
- Song, J. S. A. (2017). Evaluation of the influence of student-led surgery interest groups: A pan-Canadian survey. *Canadian Journal of Surgery*, 60(6), E7–E8. https://doi.org/10.1503/cjs.013017
- Williams, B., Olaussen, A., & Peterson, E. L. (2015). Peer-assisted teaching: An interventional study. Nurse Education in Practice, 15(4), 293–298. https://doi.org/10.1016/j.nepr.2015.03.008
- Zeldenryk, L., & Bradey, S. (2013). The flexible learning needs and preferences of regional occupational therapy students in Australia. *Higher Education Research and Development*, 32(2), 314–327. https://doi.org/10.1080/07294360.2012.675572

Articles published in Focus on Health Professional Education (FoHPE) are available under Creative Commons Attribution Non-Commercial No Derivatives Licence (CC BY-NC-ND 4.0).

On acceptance for publication in FoHPE, the copyright of the manuscript is signed over to ANZAHPE, the publisher of FoHPE.