Editorial

Communities of Practice: Global and Local Principles, Policies, Practicalities and Participation

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This edition positions communities of practice as a significant place-based enabler for successful placements, partnerships and practices in rural and remote contexts. A global backdrop for this issue is provided by the Organisation for Economic Co-operation and Development (OECD) *Principles on Rural Policy* (Fig.1). Government directed policy reforms shaping Australian Rural Health (Fig.2) and Rural Education (Fig. 3) provide a national context for the journal, whilst the papers within this issue of AIJRE provide research driven, place-based exemplars in rural and remote contexts. The interconnectivity between global and local health and education policy and practices are revealed.

Figure 1. OECD Principles on Rural Policy (www.oecd.org/rural/)

The OECD categorise the 11 principles on rural policy in terms of scale, strategy and stakeholders (OECD, 2019). This issue localises the OECD dimensions and their call for countries to embrace a holistic place-based lens on rural development policies for the well-being of rural areas. It provides a better understanding of the resilience level of individuals involved in living and working in rural health and education practicums, boarding options and outreach programs. The importance of key stakeholders and their civic roles and responsibilities to support the individuals

within each of these learning contexts are highlighted and form a rural community of practice. The practicalities, participation, perceptions and personal pressure of those involved within these diverse learning contexts are presented and recommendations provided. Common issues and strategies surrounding personal and community resilience are revealed within these uncommon contexts.

The focus on health and education in this issue is purposeful. Both are essential government services within a rural community and both attract associations and organisations that have a desire to support the rural endeavours including but not limited to the incorporated National Rural Health Alliance (https://www.ruralhealth.org.au) and Society for the Provision of Education in Rural Australia (SPERA). Over the last two decades a range of frameworks, reports and recommendations have targeted rural, regional and remote contexts for Health and Education resulting in a National Framework for Health Reform (Fig 2) and National Framework for Education Reform (Fig.3).
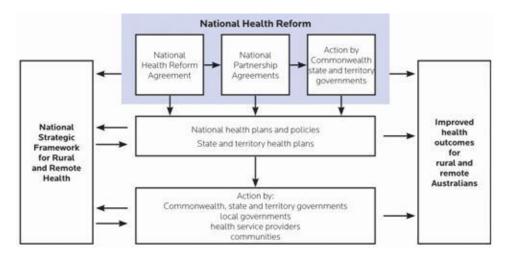

Figure 2. National Health Reform including national strategic framework and its relationship to national and state policy and planning (Source needed here)

NATIONAL FRAMEWORK FOR RURAL AND REMOTE EDUCATION						
Vision	By age 18 each young person residing in rural or remote Australia will receive the education required to develop their full potential in the social, economic, political, and cultural life of the nation.					
Principles	• Students and families living in rural and remote Australia have specific needs which are the direct result of living in particular geographic locations. • The needs of rural and remote students should be met through local commitment and ownership as well as through predictable and sustained government funded initiatives.			• There is a high degree of variability in the characteristics of rural and remote communities, both within and between states and the Northern Territory. • The provisions of education in rural and remote Australia requires creative and flexible approaches that utilize leadership capacity at all levels, innovative technology and methodology, and whole of government approaches.		
Essential Enablers	**P**ersonnel	**R**elevant Curriculum	**I** information Communication Technologies	**M**ultimode Delivery	**E**nvironments	**R**esourcing
Key Challenges and Requirements	Training & Development / Leadership/Succession / Recruitment/Retention Diverse & reliable supply Success plans Incentives Family assistance	Pathways / Standards / Outcomes Programs consistent with national goals Articulated planning for lifelong learning Access to VET Enterprise Education	Quality / Access / Content Broadband provision Affordability and accessibility Reliable infrastructure	Flexibility / Innovation / Structures Support of current modes ICT Training and Development for staff Broadening of best practice networks	Cultural Sensitivity / Partnerships / Community Support of industry, civic, education, government and nongovernment collaboration Identification and use of local expertise and leadership	Predictability / Assuring Quantity / Building Capacity Support for local for social capital building Funding for equitable access Disseminate best practice Whole of government approaches

RURAL AND REMOTE CONTEXTS AND CONSIDERATIONS:

Population Size & Diversity, Community Opportunities, Social Capital Building, Distance, Flexibility, Leadership, Cooperative Action, and Sustainability

Figure 3. National Framework for Rural and Remote Education (MCEETYA)

The National Framework for Rural and Remote Health (NSF, 2011) promotes a coordinated approach to policy, planning design and delivery for rural and remote communities (www1.health.gov.au). It was prepared by the Australian Health Ministers Advisory Council's Rural Health Standing Committee to address the systemic issues that require attention to improve health outcomes in rural and remote contexts. The framework supports effective service delivery whilst enabling flexibility to address local delivery.

In 1999, a taskforce was established by the Ministerial Council on Education, Employment Training and Youth Affairs (MCEETYA, 1999), the following year the Human Rights and Equal Opportunity Commission tabled its national Inquiry into Rural and Remote Education report in Federal Parliament which called for a national rural education policy to be constructed by MCEETYA (See Figure 3). Over two decades later, another Independent Review into rural, regional and remote education in Australia (Halsey, 2018) was conducted. Although the latter review did not explore the implementation of the original framework it did provide a set of recommendations and policy guidelines for education in rural Australia.

Health and Education are intrinsically interconnected yet extrinsically independent. Pathways into training for these professions are varied for rural and remote students and similarly pathways to work in rural and areas are also varied. Successful programs and practices that address these pathways are included in this issue. We draw from these health and educational experiences to inform future practice in rural contexts.

The first paper is representative of the contextual underpinning of this issue as it highlights the importance of key stakeholders and community of practices. It introduces the important concept of a 'whole of community facilitator model of support' (WOCF) for health student placement experiences in rural Tasmania. The paper evaluates the first phase of implementation of the WOCF model and emphasizes the importance of a structured and supported community of practice for the sustainability of innovative programs. Sandra Astill, Helen Zournazis and Annette Marlow stress the need for health professionals to have a broad range of skills and attributes to work and reside in rural environments. They highlight the need for students to have positive professional placements and multidisciplinary learning experiences within these placements (Smith et al., 2017). The WOCF model engages a dedicated health profession responsible for learning, teaching and supporting students and supervisors whilst building capacity and capability of organisations to host the students. The authors' evaluation of the program revealed the importance of the role to link healthcare organisations, the university and the student (Zournazis et a., 2017). Several factors were identified as needing refining and issues of time constraints and competing demands of the workplace acknowledged. The authors were concerned about the nurse-centric focus of the initial trial however; this will be addressed in the next iteration involving modifications to support allied health students, supervisors and the placement facilities. The WOCF model is axiomatic in enabling organisations and facilitators opportunity and time to support and develop an allied health care 'community of practice'. WOCF offers a coordinated approach to improve the preparedness of rural health nurses as promoted in the National Framework for Rural Health.

The second paper by Brittany Brown, Samantha Avitaia, Kylie Austin and Jaimey Facchin from the University of Wollongong, also highlight the importance of community collaboration for successful engagement in programs. The mixed methods study investigates the experience of rural students and how they imagine and access higher education. It examines the extent to which local school implementation of outreach programs impacts students' intention for university. The University of Wollongong's *Ruralin2Uni* outreach program is a pedagogical model that places rural schools and students at the centre of tailored outreach programs. Geographic location is strongly linked to an individuals' likelihood to participate in higher education. ABS data show that almost 45% of people aged 25-34years from major cities held bachelor degrees or

above, whereas inner regional areas only 20.5% and outer regional 20.6% (ABS, 2017). Many factors impact these statistics including level of parental education (Vernon, Watson & Taggart, 2018), trust in educational delivery (Kilpatrick & Abbot-Chapman, 2002) and encounters with individuals that have experienced successful pathways into higher education (Bok 2010). This study involved surveys with 221 students and interviews with university 3 mentors, 3 teachers and 2 principals in rural areas. It was designed to address the impact of reciprocal university-school partnerships, specifically those which offer stakeholders equal roles in the approach to pathway progressions into higher education for rural students. Their findings highlight the importance of programs that embed local knowledge and strong collaborative relationships between universities, schools and communities to foster progression and access. Four themes emerged from their study: importance of collaborative school and university partnerships that are locally driven and school focused; contextualised and place-based programs that draw on local knowledge for program design; aspirations and trust; and increased awareness of higher education options. The authors reiterate the importance of collaborative and mutually beneficial programs such as the *Ruralin2Uni* to enhance the capacity of rural and remote students to make informed post-school decisions.

The third paper provides an evaluation of staff perceptions and affordability of a school-based integrated intervention for improving the resilience of Aboriginal and Torres Strait Islander boarding students. Each year over 5000 Indigenous students leave their remote communities to attend boarding school or residential colleges in order to complete secondary education (ABS, 2017). The research team consisting of Tessa Claire Benveniste, Alexandra Van Beek, Janya McCalman, Erika Langham and Roxanne Bainbridge from the Centre for Indigenous Health Equity Research at Central Queensland University recognise the need for "supporting and improving outcomes of students, particularly those facing a multiplicity of challenges". They highlight a lack of literature in the field particularly with regard for ways of supporting the resilience of indigenous students when attending schooling beyond their geographic place of residence.

The processed based evaluation involved 14 boarding and teaching staff, eight female and four who identified as Aboriginal at eight Queensland boarding sites where the intervention was delivered. The findings provide evidence that the school based participatory action research interventions aimed at improving culturally appropriate support structures for Indigenous boarding students are achievable. The focus on an integrated approach that incorporates ongoing peer-to-peer learning, face-to-face meetings, initial training processes and the development of a community of practice provide positive outcomes for both staff and students. Initiatives that build cultural capacity, shift staff attitudes, enhance context-specific strategies through a process of collective learning and relationship building is considered effective. The role of leadership is important in these contexts. Good decision making will prioritise appropriate resourcing of resilience building strategies and ultimately impact the sucessful outcomes for students, staff and schools.

The fourth paper begins by introducing us to the chronic workforce shortage in Australia's rural health service. Donna Bradley, Lisa Bourke and Catherine Cosgrove from University of Melbourne focus on the barriers and enablers affecting the satisfaction levels and well-being of allied health students undertaking rural placements. The purpose of their study was to identify modifiable factors that could improve future rural placement experiences. The findings from 18 participants in hospital placements throughout rural northeast Victoria strongly align to findings from extant literature. They also align and have utility for the development of positive rural placements for student teachers. The modifiable factors relate to finances, inflexibility of placement allocation process and lack of psycho-social support during times of stress. The enablers relate to positive friendly and supportive workplace, exposure to broad clinical practice and enhanced learning opportunities. Frequent reference to the physical environment including the food, people were among the enjoyable aspects of rural placements. Many participants commented on the strong sense of community in the towns and workplaces, and hinted that

these factors encouraged them to get further involved in professional and personal development. Addressing the modifiable factors impacting rural placements as outlined in this study should improve the positive experiences of our future teachers and health workers.

The final paper by Alice Herbert at James Cook University provides an overview of contemporary literature regarding the contextual factors that affect policy enactment in regional, rural and remote Australian schools. She critiques 54 journal articles, national reviews, books and policy documents. Her review affirms findings from previous studies that context is an important consideration in policy enactment. She identifies four major contextual factors based on Braun et al., (2011): situational context; professional context; material context and external context. She uses these categorisations to thematically organise the findings from her literature review. She calls for contextualisation of policies, pedagogy and practice when addressing policy enactment in RRR schools. Herbert's paper highlights the uniqueness of rural, regional and remote contexts and geographies and the impact they have on policy implementation. She suggests that overcoming geographic disadvantage has become a national goal for policy makers, however the analysed literature revealed a consensus that state and national policies are largely standardized and placeless (Ledger, 2018). Herbert calls for improved contextualisation of policies through a enactment aligned to a school's unique situated, professional, material and external context. This call from Herbert reflects key outcomes embedded in both national health (Figure 2) and educational (Figure 3) frameworks for rural contexts.

Rural Connections: Celebrating Schools and Communities

This issue also marks 12 months since the Australian International Journal of Rural Education (AIJRE) introduced a new section entitled *Rural Connections: Celebrating Schools and Communities.* The articles directly relate to teaching or educational innovations in rural and remote schools and communities. The personal lives of those living and working in rural areas are also sought. This issue introduces *Paul Natale*, a highly successful metropolitan soccer player who took the opportunity of being involved in a 12 month rural internship (Ledger & Vidovich, 2018) which took him to a large remote community in the Pilbara. It highlights the many benefits of working in a rural school for a young graduate. The article maps his personal journey and reveals the transformation made as he transitions from preservice teacher to successful graduate. His reflective narrative highlights many perceived and actual benefits of working in rural schools.

Finally, the editorial team would like to thank the wide range of contributors and reviewers to the journal, your advocacy and support for rural education is valued and invaluable. The AIJRE is well positioned as the leading journal in the rural education space. Recent changes to online publications, increased quality of papers, and application for Scopus inclusion reflects our editorial commitment to continual improvement and quality contributions to the field.

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