**Transcription – Focus Group 1**

*05/11/18*

M – Ok, let’s begin. So, this is now recording.

Firstly, welcome, secondly, what did you all want to do when you first went to college? What was the career you had in the back of your mind, if you had one, you might not have had one at all?

B – Mine was just sport in general, so my first thought after leaving school was just sport, so my extended diploma was what reached out to me first and showed me there was a wide range of stuff that I could do after that including going to university, but then the second year, opened up massage therapy to me and that influenced it and then that’s what made me want to go down that path.

M – Yea, so you kind of knew, you had an idea in the back of your mind. Anyone else? Did anyone else kind of know?

C – I’ve got a mouthful

*(Laughter)*

L – I was going to do law then go into therapy, then I thought stuff all of that and did personal training then that was like a couple of years ago and now I’m back to doing sports massage.

M – Ok

L – To go to uni and study (inaudible)

M – Ok, cool. Anyone else:

C – I initially went to college to do dance, erm and be like a dancer in the West End right and in America and stuff but that like went downhill because I’m too small, but I always wanted to do something active that involved me being active and sport related, then I took/done sport science for two years. Erm, which really pushed me to think that I want to do sport therapy and sort of help people, treat people, and be really hands on. Sort of be involved in sport without playing it.

M – Yes, so you had more of the idea of a lifestyle you wanted with work rather than a career you wanted.

C – Yea I did not want to work behind a desk, that was one thing I did not want to do. And I didn’t want to participate in sport because it’s hard to make a living from it and to like succeed in it unless you’re like something amazing at it… so… sports therapy I could be involved with a team I could watch the games and like help the athletes and still be involved with it which I liked.

M – And stay active at the same time.

C – Yea and stay active yea

M – Ok, anyone else?

F – I wanted to be a publisher, and now I want to be a midwife

M – Oh nice

F – A nice little change

M – That sounds like a good change, it sounds nice. So, has anyone ever heard of podiatry or been treated by a podiatrist?

L – I didn’t know what podiatry was until just now

M - This morning?

B – I knew what was associated around it. It’s only like because my nans grandparents was the only reason I knew what podiatry was.

M – Yea, have they been treated by a podiatrist?

B – Yea

M – So you’ve heard the term floated before but you didn’t understand it?

B – I’d not seen it like hands on or up close and personal

M – Ok, but none of you have received any podiatry treatment?

C – I’ve had a little bit like, I’ve gone to the doctors and I don’t actually know if they were a podiatrist, podia… that one – but they got me to do the thing where you walk forward and walk back, they got me inner soles for my shoes because I’ve got low arches, but that’s all I’ve had really that’s the closest to it.

M – Nice, so today has been the first time for most of you that you have been kind of exposed to it. Perfect. And what do you want / we’ve kind of touched on this, but what did you want from a career so that’s not ‘what career did you want to do’ but were you thinking about a particular lifestyle in the back of your mind like having flexible working hours, or working for yourself? Did you feel like being self-employed was more important than working for someone? Was there anything like that that was influencing your career choices?

C – Mine was just being successful and being able to provide for myself and people in the future, really.

M – So just financial stability really.

C – Yea being financially stable and being able to do stuff and live comfortably

L – Mine was to get a sense of achievement and to leave something to be remembered by when I die

M – Yea, ok so to have a lasting impact on the future

L – Yea, yea you know to do something that could change someone’s life, you know that be giving them a really good sports massage and making them be able to walk again or podiatry or whatever it is. Just trying… to be better.

M – Yes to be part of a greater change. So, was anyone here looking for responsibility in particular?

*(Pause)*

M – Like a sense of responsibility?

B – What do you mean like a teacher or?

L – Yea?

M – Not like a teacher, just something… you know like in podiatry people come to you for help and you are responsible for their care, their treatment, so not like sitting at a desk doing a report, though that is a different type or responsibility, it’s a much higher level of responsibility in care.

 C – Yeah I do like being able to sort of help someone, to tell someone what to do which actually potentially helps them, it’s a nice feeling you get just helping someone.

B – It’s also the fact that you pass on knowledge to other people as well, obviously they’re not going to learn or understand the level that you do, but by just sort of explaining what muscles you’re working through, giving them a sense of knowledge, so then maybe like the second time they come through they are like more confident and can open up to you more or other people, especially when people have structural problems, a massage can actually help that, like loosening your shoulders with just a simple massage for half an hour can make such a difference in someone’s posture. So…

M – So knowledge, ok. And on the reverse, is there anything you definitely didn’t want from a job, so you definitely didn’t want to work behind a desk, you didn’t want a sedentary job

*(Many agree)*

M – Or anything else along those lines?

Q– I didn’t want to work odd times, just wanted set times what time I start in the morning and to be able to go finish at a certain time and go home, not stay at work every night.

M – Ok, so no night work. And similarly, shift work can be quite difficult as well.

Q – Yea

M – Anyone else?

B – I didn’t want to work in a hospital

M – No?

B – No, like the stuff you see, I’ve had other people talk to me about it and it’s not like my scene, that’s not stuff… so I want to work with athletes. I don’t like illness and diseases I don’t want to work in hospitals with therapy, more with fit and healthy athletes that just need a bit of maintenance

M – Ok,

C – same with me I think

M - So environmental factors.

D – My ideas have kind of changed because I previously did erm health and social care and then I wanted to do… and then afterword’s when I was doing to be a policeman I was like nah, that’s not for me

M – ok, so the environment is quite important, so the sort of place you are going to be working is important, that makes sense. Ok next question. Erm, has anything influenced your career choices? So, this could have been careers you currently have, maybe a Saturday job or a weekend job you are working on alongside your studies but has anything influenced that, such as social media, seeing social media, influencers, or even advert advertising certain career choices, or television or something you heard on the radio perhaps?

L – More for, well, more for me is family, err people near me influenced me a lot with career choices, erm especially with a history of mental health in my family, erm but I wouldn’t think a post, unless I’m really interested in a subject, I don’t think a post would make me think no that’s what I want to do.

M – Ok

L – Does that make sense

M – Even from an awareness perspective?

L – Being aware of. Yea but if I am already interested in let’s say in a medical field, if I’m interested in working with mentally, elderly, seeing a post about podiatry would then make me even more interested in thinking that’s what I want to do but it would need to have some relevance to what I wanted to do.

M – Yea ok, anyone else?

F – Social media like influenced me, because, obviously, I want to be a midwife and before I wanted to do that I was like watching this blogger person, and she had a hypno-birth

M – Oh ok

F – And I found that really interesting. I wanted to be a publisher, but then I work at like a book shop so I was like I’m already in that industry and it’s not as fun as I thought it was going to be. I like reading but that’s all I want it’s like a hobby, but I also really like babies and the whole beauty of being pregnant and like everything like that. So yeah, I was really inspired by that woman and she made me want to be a midwife and look into a bit more. Like I want to have my own like private, like I want to work in the NHS but eventually I want to have my own company doing hypno-birthing and advertising at home births and everything like that.

M – So you have a pretty clear idea, that’s good

F – Yea

M – Anyone else been influenced by anything they’ve seen?

C – I needed erm a massage, when I was training, and that’s really it, like sports massage I thought that was quite interesting, like learning all the things to do like doing acu-pressure and stuff like that really intrigues me, learning about how she could just point out to muscles and know what they were and know what was wrong with me just by getting me to roll down and stuff was just, having it done myself.

M – Anyone else?

B – Mine was just more from my course before, I did like a section of it, I did six weeks of it, erm then because like within the extended diploma in sports science you do two years, two years is like a multitude of things that you do so it covers a variety of stuff to do with sport, and like just that one just stood out to me. Like being hands on.

M – So getting to try it really helped? Ok, that’s interesting to know. Erm, what were your perceptions of podiatry, we kind of touched on this at the beginning but what were your perceptions of it before today?

Q – Just touching feet

M – So you just thought, feet

Q – Just feet, yea, didn’t really know that it was from the bottom half down, I just thought it was feet, so it was also the legs and like.

M – Ok so you realised it was a lot more. Ok, so does anyone else have any perceptions?

*(To L shaking head)*

M – Obviously, you’d never heard of it

*(Laughter)*

M – Anyone else?

C – I wasn’t really fazed by it, I didn’t think like, ergh feet, dutty toenails

B – Dutty?

L - That’s going to be quoted

*(Laughter)*

C – But I just, dunno, it’s just what it is, I wasn’t fazed innit, just podiatry it’s just about your feet, like you go to see a dermatologist about your skin you go to see a podiatrist about your feet it’s just what it is, isn’t it?

M – Ok, so the main thing here is feet.

B – Feet

M – So the stuff you’ve done today changed that perception, so you were thinking feet but now you (to Q) you’re thinking hip down, is anyone else thinking differently?

Q – Yea like how your whole-body impacts what’s going on in your feet

L – I feel like that, it’s quite a big thing, it helps a lot of people, especially because literally from old people to athletes, if you know you’ve got an issue with your foot you won’t be able to walk or do something, even simple tasks and that podiatry helps a lot of people basically

M – it’s a lot broader

L – Yea a lot of people get help from pod… podiatry, however you say it

M – It is a bit of a mouthful, anyone else?

B – I don’t know – I learnt more like I thought it was just feet but then looking around clinics and stuff it shown me how broader range of stuff they actually do like especially the medicines and stuff like it’s still not something that appeals to me, like I don’t think it’s not educated enough into young people because it mostly effects older people they’d be more likely to know about it than younger people and it, I just don’t think its spoken about enough.

M – You’ve not really been exposed to it?

B – Yea I don’t think its spoken about enough for us to really go out to it. Like you don’t go to college and talk about podiatry, it would just sport science or medicines, but it won’t be something to bring you up about podiatry and feet or whatever you have to go through college like a taster day and then think about it. Unless it’s you’re something you’re really fanatic about when you are younger then you’re not quite going to be like…

M – It comes up quite late along when you’re already choosing your career paths doesn’t it?

L – It’s probably, because a lot of people think, erm , they relate podiatry to older people, I think if they were to relate it to someone like athletes or higher sports people that could create a lot of interest, because, you know…

M - Glamorise it slightly

*(Many agree)*

L – Try and glamorise feet as much as you can I guess…

M – Ok, that makes sense and that kind of leads on to the next question which is, would any of you be attracted to podiatry as a possible career as a result of, perhaps what you’ve seen today?

B – I’m just quite set on what I want, so…

C – I’d say it has like opened my eyes a little bit to how interesting and how much it can actually help you out and just how much you can know from it. It’s not like just like feet and stuff it’s the whole leg. Its shown me how much more interesting it is, it has like sparked my brain if you would, in a way, but I wouldn’t change what I want to do though from today but it was interesting…

B – I think if a taster day like this, maybe not the dissection of the body, but was sort of shown and appealed to younger people even than us, because at this point we are in like our third year of college, we’ve got our mind set on sort of what we want, but if its shown to people slightly earlier, like first year or even year 11 before they choose their courses and stuff then it would appeal more.

M – Ok so we may need to raise it as a career option much earlier in school and education?

F – I feel like though in general, the whole health area isn’t highlighted enough in school. You finish school and they’re like do you want to do English, Science or Maths? It’s like if you go into science you don’t realise the wide option of everything, because like, you might enjoy a subject at school, like I enjoyed English, so I took that at A-level and I liked it and got good grades but at the end I was like, ‘what am I going to do with this?’ It was quite boring whereas like when I went into midwifery in my third year I was like, actually this is such a good career choice and I didn’t even know like doing biology I hated biology in school, I scraped my like science grades, but I think that if you know that if you’re taught in year 9 when you’re doing your GCSE’s that by doing this subject you can become a midwife, a nurse, a dietitian, anything you can get more young people wanting to that, go into the NHS, but because you don’t really know , because you’re drawn into art and things like that but if it’s a good subject you want to do it.

L – I think things are standardised in school

F – Yea, I feel like you should be able to like when you’re in school you should have people come in from like here and talk about what you want to do instead of just going like do you want to do this, and just very set topics, and kind of already what you do but they don’t explain it enough because they don’t tell you about the career paths afterword’s. Like doing maths you don’t know that you can be like an accountant, work really high up in a bank, you don’t know that you just know that you can do maths and that’s it.

M – So that is a wider issue of schools needing to do a lot more on educating you about possible career options?

*(Many agree)*

M – And there are so many careers out there, and even now I hear them and I think, ‘I didn’t even know that existed?’ We need someone to help you understand that there is a much broader spectrum than just doctor, lawyer, vet, teacher so… ok. That makes sense. So, as of today, has anyone changed your idea to definitely not want to podiatry?

(*D nods*)

D – Yea

M – Yea so for you the dead body

L - I think seeing dead bodies can put people off

M – Ok so that’s the sort of, maybe the hands on

D – I like the hands-on part more but just the dead body put me off

M – So that’s a way of learning, so that may be the teaching side of it you don’t think that is going to fit with the way you like to learn.

D - Yea but at the same time it was kind of helpful because you’re kind of get to see the inside of the body

M – You don’t think that could be something you could get used to? Maybe after a couple of times?

D – I’m not going back again

*(Laughter)*

F – I’m not a fan of feet in general, so seeing the dead person’s feet I found that quite awkward, I don’t really

L – I feel it could be quite beneficial to know some, know at least some ground knowledge of podiatry as it can help you with sports massages, it could help you with physio therapists, because if you’re walking or one foot is higher than the other it will affect how your whole body would work bio mechanically and you could probably suss out maybe the hips are raised because of this, so it’s probably beneficial to know about it and to know some of it, erm, so I’d say it’s an important thing for people who are interested in sports massage and sport to know.

F – I feel like any topic really, like being a midwife you need to know about the weight you can put on your legs and your feet because obviously like the pressure from carrying a human can // (cut off)

B – Yea, you always underestimate what you are going to be educate by no matter what career you go into, like with massage you think ah yeah just ‘der de der de der’ there’s just tons of stuff, the same with your career and whatever you do as well.

*(Laughter)*

B - I don’t know what you do, but you always underestimate what you are going to do.

M – So you think that podiatry is kind of an important thing to learn as a part of /

*(Cut off)*

*(Agreement, many people talk at the same time, inaudible)*

L – Because certain topics that will make it a lot more popular

M – Ok but not so much as an entire career. And other than the dead body was there anything else you did today that maybe made you think, no this isn’t for me?

L – I liked the dead body

B – The dead body was creepy

C – But the anatomy and physiology part of our course because it was so interesting being like ‘that’s where this is, that’s where this is’ you know it was really nice to see where the muscles actually were.

B – Yea to see the proper, proper inside, this is the exact point of where it starts and finishes runs through this…

C - Yea the tendons and all that stuff. It sounds relevant to like most courses that you need to know anatomy and physiology about really.

D - That was really good.

M – And would you think anything to do with. If you could change something about podiatry that would maybe make you want to do it, is there anything that you would think ‘oh well if it wasn’t that I had to work in a hospital then maybe? Or if perhaps the teaching methods perhaps weren’t around dissection, maybe?

F – I think like what we said at the beginning about maybe kind of glamorising it a bit more, instead of like when we were round the clinics, like I know it’s a hospital but it was just kind of old peoples feet, but if there was a sports, say you like went to a gym and you could go into the gym and someone has pulled a tendon, you could sort it out or watch them do it on younger people and like athletes rather than watch it on like an old woman’s foot kind of thing, its more us…

B – More our generation like yea

L – I think if there was more of a sporting base, let’s say paediatrics (meant podiatry) is really large in say football you know if you go through with it you could get a job in a club or something I think that would make it more appealing, even, not necessary for me as I’m set in a career path, but on people that are wanting to work in clubs, they could do paediatrics (meant podiatry) and then sports massage. Sports massage is a two-year course; they could just do that. But I think if they can evade just focusing on the old people that would make it more interesting, even though that’s the main target audience, it’s a bit cat and mouse really.

M – Yes, we’ve got an aging population so that’s adding a lot of people. More older people are coming, and we’ve got to treat them so…

*(Laughter)*

M – Ok I think that’s all the questions, so is there anything you want to add or any additional questions?

C – What do you do?

B – I was literally about to ask, what do you do?

*(Agreement and laughter)*

M – Ok, let me just turn this off.

A - “Ok, so we’ll start with, what did you all want to do when you started college? So if you wanted to go around the room and just say what you thought you wanted to do it’s fine not to have been sure. We’ll start this end.”

B - Occupational therapy

A - ok.

C - Paramedic

A - Paramedic

D - Nursing

A - Nursing, ok.

E - Midwifery

F - I don’t know

G - Counsellor

A - Ok

H - Nursing

A - Yeah

I - I don’t know

J - Nutrition

A - Nutrition

K - Social worker

A - Ok

L - I’m still not really sure.

A - Still not sure, ok, and you’re all studying the same thing at the moment?

*(Nodding)*

A - Yeah, and what are you studying?

*(Combined answer)* - Health and social care level 3

A - Ok, so is that quite a broad course?

(Nodding)

A - Yes, perfect. Did any of you maybe not know what you wanted to do but have an idea of what you wanted from a career, so perhaps you knew you wanted to work within health and social care but not sure where, or perhaps you wanted to work for yourself. Did you have any idea at all, as to what career you wanted to go into?

C - I’ve known I wanted to be in the paramedics for ages which is why I came in this class

A - Ok

E - Yeah same with me

A - And for the people who said they didn’t know was it more of ‘I don’t know what to do but this sounds interesting’?

L - I just know that I want my job to be in health and social care just to help people

A - Ok, and anyone else that didn’t know?

(Pause and a little nervous laughter)

A - Ok, that’s fine. So has anyone had any podiatry care before?

E - I have insoles in my shoes

A - Ok, so did you go to see a podiatrist to have those fitted?

E - Yeah

A - Ok, anyone else?

C - I don’t know sorry

A - No, ok, shall we go one step back, does everyone know what a podiatrist is?

C - A broad outline I don’t know exactly

E - Feet isn’t it?

A - So what comes to mind if you think of podiatry?

C - Feet

*(Laughter)*

A - Yes, so like toenails, insoles as you said?

*(Murmured agreement)*

A - Yeah and any of you go to the University of Brighton taster day?

*(Yes)*

C - Yea

A - All of you?

*(Murmured agreement)*

A - And was that something you chose to go to?

*(Laughter)*

A - Would anyone have chosen to go to it if it was optional?

C - No

A - No

I - Yeah maybe

A - Maybe. And do you feel that your perception changed at all from going on that day?

C - Yea

A - Ok, so what did you think of it before and how did you think of it after?

C - I mean I thought it was quite gross at first because I didn’t really know what it was. And then when I went there, I mean I still kind of think it’s gross but, it’s a bit more broader than just gammy toenails.

*(Loud laughter)*

A - Ok, so there’s a bit more to it than just toenails, yea. So actually podiatry covers everything from the hip down, so that’s your leg all the way through to your feet and depending on where you go you can go into various parts of it, such as forensics, you can look at people’s footprints and catch the bad guys based on the print of the imprint of their feet on the floor. So there is a very broad aspect to podiatry rather than just toenails. Did anyone else's perceptions change after going to the taster day?

*(Long pause)*

A - No? Or did it even reinforce your thoughts that it was just gross and feet? You can say anything.

*(Pause)*

A - No, ok. As we briefly mentioned earlier about what you wanted to do as a career was there a particular thing in mind? When you think of yourself in the future do you have a particular image of yourself in mind? So I always used to look at myself and think, I have no idea what I want to do but I want to be wearing my own clothes and I want to be able to get a Starbucks in the morning, and that seems ridiculous but that's what I wanted, to be able to get my coffee in the morning and wear my own clothes. Is there anything when you think about your future career that you think of? Maybe you want to have a certain amount of money? Maybe you want to work for yourself? Maybe you don’t want to work in an office or you do want to work in an office? Was there something in mind that drew you to a particular career?

*(Muffled laughter)*

C - I wanted to be very hands-on

*(Loud agreement)*

E - Yeah practical, not sitting down, practical.

C - I didn’t want to be sitting down

A - Ok, so not wanting to be sitting down and tied to an office desk or a computer, was that kind of unanimous for everyone?

*(Agreement)*

A - Was there anything else? Is anyone particularly interested in the possibility of being self-employed? Or…?

*(Pause)*

A - No? Ok. What about financially, obviously money is important to everyone but was anyone after a high paying career? Looking at a certain career because of the money?

*(Many agree)*

A - Ok that’s quite interesting. And what has influenced your career choices so far? So, obviously, this is difficult if you didn’t know what you wanted to do. But if you were sure, like you were sure you wanted to be a paramedic was that because you’d seen something on television, was it because you’d had an experience with medicine or paramedics that made you want to follow in their footsteps?

C - Er, my whole family has been like in the health care, so my auntie was in the ICU and stuff like that. I just kind of wanted to follow it but I kind of liked the idea anyway.

A - Ok, a family tradition of being in medicine. Has anyone else had an influence? Midwifery, nothing to do with Call The midwife?

E - Yeah definitely!

A - Definitely? But stuff like that is very interesting as people spend a lot of money advertising possible careers to people through television, radio, media, bloggers, influencers and it’s interesting to know what influenced you guys into your future careers.

E - One Born Every Minute definitely, that’s the best programme ever.

*(Laughter)*

A - Was anyone else influenced by anything?

L - Well I’m a carer for my mum, so I’ve been doing it for ages anyway but I wanted to carry on caring, basically. Just carry on.

A - So something you’ve already been doing but to get a qualification in it would be useful. Yeah. Anyone else been influenced? Is there anything you think that would influence you in particular? Do you think you would be influenced by television or radio or social media even if a campaign went out about a certain job, do you think you would be influenced by it?

C - Yeah depending on how detailed it was and stuff like that.

A - Ok so depending on the detail in it or is it about how they portray it? So if they did a campaign about podiatry and they positioned it that podiatry was all about sports and looking after footballers feet and you could earn £100,000 a year on a football pitch for Manchester United is that going to be more appealing than say doing feet in a nursing home?

C - Yea

*(Long pause)*

A - Ok, so I'm just trying to gauge if you think you would or wouldn’t be influenced by a social media campaign. Ok. Obviously a lot of you have all already said that you’ve chosen your careers and those of you that haven’t have also said that you weren’t interested in podiatry but would anyone ever consider podiatry as a future career?

C - I’d consider it but probably wouldn't go through with it

J - Yeah, same with me. I would consider it because I’m really weird like, I really like massaging people’s feet I know it sounds really weird but yeah. So I would consider it, I know it sounds really weird but yeah, I enjoy it.

A - That’s nothing weird. So a few of you would consider. Is there anyone that definitely wouldn't, 100%?

E - Yeah

*(A few muffled agreements)*

A - Yeah?

*(Pause)*

A - Feel free to honestly say anything, it’s fine. And so is there anything that would make you consider podiatry as a future career?

C - The flexible hours

A - Flexible hours. Anyone else?

J - It links to a lot of things that you don’t realise. Like a lot of other job roles link to it which I didn’t know.

A - Yeah, like what?

J - Like to do with my nutrition it links up to people with eating problems also have feet problems and things so it links quite well. And what I found out about the open day like I was talking to the teacher a bit and it was quite interesting to find out.

A - Yeah that’s true. So it does link into a lot of things so it could be one of those careers that maybe you don’t start in but you go into later, when you realise that it could influence / so for paramedics it could be useful in the future to know that you have a specialism in a certain part of the body. And it’s quite common for people to come to podiatry as a second career as something later in life. Does it appeal to anyone that it’s a field of medicine? So that it is a medical degree? Is that appealing?

C - Like it’s a medical degree, yea, I like that idea but not the whole working in that.

A - And if we go back to what it is that people don’t like, so we’ve got to be really clear for the recording, is it the feet? Is it the people you might be working with? Is it the training that needs to go into it? The fact that it’s quite a hard course to do? Is there anything, in particular, that’s just really off putting about podiatry?

C - Genuinely just the feet

*(Many at once)* - Just the feet

*(Laughter)*

A - Ok, is there anything in particular about feet we don’t like?

E - Just feet in general

C - Just other people’s feet in general.

E - Other people’s feet and justgrim

C - I don’t know what they’ve been doing with their feet.

*(Laughter)*

A - So hygiene and touching feet?

*(Agreement)*

A - Even though it’s in a clinical setting?

C - Still

A- Is there anything else? No?

*(Pause)*

A - Ok, so we’ve spoken a little about midwifery and kind of the fact that a lot of you want to go into careers that are in some ways very similar to podiatry in a medical sense, they’re in health and social care, they’re caring for people, those are all things that podiatry has within it and yet it’s still not appealing. Is there anything else within your careers that you think your career has that podiatry doesn’t have? I know that’s a bit of a weird question.

C - Well because in paramedics you go from head to toe, it’s not just from head to foot.

A - So the fact that it’s the full body

C - And the fact that there are loads of different things rather than just feet

A - So it’s not as specialist in one area.

C - Yeah

A - Is there anyone else?

*(Pause)*

H - I think if I wanted to specialise in adult nursing, like being a diabetic nurse that would be interesting to me and be quite useful.

A - And what was it that drew you to nursing as a possible career?

H - I don’t know, I just wanted to help people out I guess and apart from the fact that most of my family are just ill anyway, so…

*(Laughter)*

A - Ok

H - So yeah.

A - Ok, that’s interesting. And so you always knew you wanted to be a nurse or did you know it when you started this course?

H - Pretty much always, yeah.

A - Ok. Does anyone feel that if they were introduced to podiatry earlier they would have been more influenced or would have possibly considered it more?

*(Agreement)*

A - Ok and what age would you say that would have been useful to have known about podiatry?

C - I don’t know around about 12, because that’s when I knew I wanted to be a paramedic.

A - Ok, so around secondary school time, when you’re choosing your GCSEs?

C - Yeah

J - Yeah

*(Agreement)*

A - And why do you feel that an earlier introduction to podiatry would have been beneficial?

C - Because I only found out about podiatry when I went to the erm, the Sussex, erm Brighton College

A - So you’ve already picked your options, you’re halfway through a course. UCAS is obviously approaching for those of you who are going to do uni, is that something else that influenced your decision? The fact it’s a university course? Is there anyone here that knew that they didn’t want to go to university so that’s out the window?

C - I don’t want to go to uni. There’s been a lot of education and I'm more of a just go out and do it rather than learning. So after college, it’s just like doing it.

A - So with paramedics do you finish college and then go straight into a placement?

C - Well you can do a third year and then go into a like placement kind of thing and do it from there.

A - Ok, that’s interesting. That’s really cool. And does anyone else definitely want to go to university?

B - Yeah

*(Pause)*

A - Ok, there are a few people here that are definitely going to go? Or you’re going to apply? And why do you want to go to university? What’s interesting about university?

B - Well you have a qualification it’s always there. I don’t know what else I want to do so.

A - And what are you going to do at university?

B - Occupational therapy I think

A - Ok so university lets you take that further. So for the people that want to go to university is it because you want that extra level of qualification?

E - Well you kind of have to for midwifery

A - Yes, if you want to do certain things you do need that qualification, yes. Do you feel that there’s a financial implication of going to university that’s off putting to some people?

*(Agreement)*

A - If university was free do you think it would be more appealing?

C - Yeah

E - Definitely

*(Agreement)*

A - So podiatry used to be a free course, you didn’t have student debt by doing podiatry. Do you feel that now that it’s a paid course do you feel that it reduces your likelihood of ever doing it?

*(Many agree)*

C - Definitely

A - Ok. And I guess this will probably be a little shorter than it could be because we’ve established that no one is interested in podiatry and it doesn’t seem to be something many of you will be swayed into so maybe that side of the conversation isn’t going to happen. So if we just bring it I guess back to what it is your doing now, and what it is you do enjoy and then as we touched on earlier, what was influencing you, what could possibly influence you to do podiatry. In order to really help the people listening to this, they are going to be wondering what they could have done to have attracted you guys into podiatry if there is anything else you can think of that could have attracted you?

J - Maybe put the course around the schools and things while we were in school, so we knew a bit more about it? Maybe like a leaflet or something because you don’t really see much on some of those things (referring to tv, radio, social media) . Like, for me with the nutrition course that I wanted to do, they stopped it at a lot of colleges because there weren’t enough people which is why I came onto this course so I can do it afterwards. So like if I'd known about the podiatry a bit earlier and there was like more information, then maybe it would have changed my mind.

A - Ok, anyone else?

E - Maybe like make it clearer that it’s not just feet and then probably like let people know the different options and things that actually come out of doing it.

C - And maybe like the different routes that podiatry can lead to as well so you don’t just think that it’s just podiatry and that’s that. Like it can lead to something else.

A - Do you think that having your taster day session a lot earlier would have been more beneficial?

*(Agreement)*

C - Yeah a lot

B - Yeah a lot earlier because you literally have to apply like this month, next month.

A - Ok, so it’s a bit late. But would you consider it in clearing? So obviously we want you to get your first choices, no one wants to think about not getting their first choice but now you know that podiatry exists would you say that the taster course has made you think that you have another option maybe, that’s similar to what I wanted to do if for whatever reason plan A doesn’t work out?

*(Hmm)*

C - It depends on how closely it links to everything I want to do. Because it’s not your first choice then you're not going to go into it because it seems interesting. You kind of want to do close choices.

J - You enjoy it like. It’s quite committed to do it for a long time, so you want to do something that you definitely enjoy and really want to go into.

A - Yes that is true, it is a long time. And in terms of qualifications do you feel that it’s off putting in that it requires quite a lot of maths and science?

*(Agreement)*

C - Yes.

A - And so do you think it’s quite a difficult course?

*(Agreement)*

A - Ok, but what if you could do an access level, so you maybe you could add an extra year on but you come in with an easier transition. Would that be something more interesting?

C - I just can’t do maths end of.

A - Ok, full stop no maths. Ok.

*(Pause)*

A - Ok. Well, that’s all the questions I have, so unless there’s anything else anyone wants to add? It can be anything at all, any thoughts? Passing thoughts.

*(Long pause)*

A - No, then I will conclude the session there.

**Focus group**

*12/03/19*

A - Welcome, we have a few questions today, but I may probe a little deeper into certain ones if we find there’s an interesting topic to talk about. So, let’s start with what attracted you to podiatry as a possible career choice? On a very basic level. Had you even heard about podiatry before researching university courses or was it more of a, you didn’t really know what to do and it just popped up one day as an option?

B – Shall we go around the room?

A – You start?

B – Ok. I’ll start. So originally I applied for physiotherapy, but because I went through college and went back to my country and back I didn’t have GCSE’s properly, I had the UCAS equivalent for physiotherapy, but I couldn’t get in with the higher levels, and as a secondary, they offered me podiatry. And from there I started looking into podiatry and after that I realised that you can branch out into so many things, and that was pretty much my only way because I didn’t have any GCSE’s because I kept moving back and forward. And yea, that’s how I got into podiatry.

A – Did you feel, not forced, but kind of led down that route rather than it being as much a choice?

B – In a sense, yes, I realised that it, you get likes loads of, it branches out a lot and I looked into it and that’s why I did it. But in a sense, more of… forced… sounds so… but yea in a way.

A – Anyone else?

C – For me, it was the after part of university, because if we be successful with a degree we will come out with a profession, you don’t have to have a piece of paper that you then have to do other things with, which I found with a lot of other degrees. So I did a lot of research, about it and I think the most appealing thing with podiatry was that it was still a medical professional, however you aren’t working nights, you’re not doing extortionate amount of hours but you are still getting that, that side of It which was very appealing, but I think it was the job security so to speak after it, that you’ll walk out and if you’re good, you’ll walk into a job and then you can progress, because there’s such a limited amount of people that actually have it, you can move quite far up the chain very, very quickly without having to do a ridiculous amount of other things. Because now I think degrees, I think a bachelor’s degree, is not necessarily worthless but in certain careers you have to progress further into your masters to get a job because people are coming out in huge quantities and because with podiatry there are only 13 or something schools doing it, it’s such a niche thing that there are only going to be so many people coming out that year with you and there’s obviously a stupid amount of jobs, so you’ll be able to go into that job process very, very quickly, which was my reasoning behind it rather than anything else,

A – And you mention the whole idea of not wanting to do night shifts, like it’s quite a 9-5 in that you can be in control of your hours, especially if you go and do your own practice, so is that something that a lot of people echo? That it’s actually quite a flexible job?

*(Many agree)*

A – Ok, how else did other people hear about it?

D – I was told like, I had all my sisters in the NHS profession, and I wanted to be a dietitian pretty badly because I am really interested in diabetes and working with older people. Ern but I did talk about it and, as was said before, I realised that erm later on in my life if I want to be a mother and stuff then obviously, it’s not going to fit in with that. As if you go privately you can just be working whenever you want, so that’s kind of what led me to that instead.

A – Yes, ok, anyone else?

E – Erm, I err, I had a rugby injury in my foot, so I had to go and see a podiatrist myself and that was as I was applying for erm university, I applied for physio, and at that time I didn’t get in and the guy was talking to me about podiatry and what you can do in podiatry, so I looked into it more and then I shadowed a podiatrist and really enjoyed it and so thought I’d give it a go. And yea…

A – So you got an opportunity to shadow someone before choosing to do it?

E – Yea, yea it was a good experience.

A - How did anyone else come across it for the first time?

F – Well I wanted to be a physio as well…

*(Laughter)*

A – Is this a common theme?

*(Laughter)*

F – So I wanted to be a physio, standard physios, I’d done applied science, extended… erm I can’t even remember what I did?

G – BTech?

F – A BTech, it was I think in applied sciences and I got a erm, Distinction, Distinction, Merit but I think I needed erm Distinction, Merit, Merit to get into physio at most universities that I applied for so I thought I’d be alright but I got so many different… I went to two interviews and they rejected me and gave me options to do alternative courses for stuff like social work erm, can’t remember the others, I didn’t really care, I was like, it’s physio or nothing. And erm, I applied, I rejected each and every single offer that I got and then applied to Brighton and they were like, ‘nah, sorry, but podiatry might want you?’

*(Laughter)*

F – And I was like, what’s podiatry? So, I searched it up and then was like ok so it’s basically physio for the lower limb and was like cool and then was probably like the best choice I made, I like it.

A – So did anyone actually come to podiatry wanting to do podiatry?

H – I didn’t know what it was. I didn’t know what it was.

G – I had no idea what I wanted to do at uni, I was just there, and then someone said to me, ‘Oh you should consider podiatry?’ and I was like ‘no’ but then since I had no other options I thought why not do it?

*(Laughter)*

B – Seems like you were forced in a sense

G – Sorry?

B – Seems like you were forced in a sense?

G – No it wasn’t because seriously when I was at college everyone had already applied for uni I had to like, I don’t know what I wanted to do. I wanted to do pharmacy though, but then my mum told me that was stupid because you just stick in the prescriptions.

*(Laughter)*

G – But I like it now, I would have chosen it if I had known what it was before.

A – So do you think there might be a lack of awareness as to even what podiatry is?

*(All agreeing – many yeah’s)*

A – So you didn’t really know about it until someone says, ‘have you thought of this’ because you couldn’t get into your first option?

*(Many yeah’s)*

A – There’s this other one that you’ve never heard of and your like ‘oh ok…’. Ok so we need some more awareness. So, a lot of you didn’t hear about it until applying for university?

*(Many yeah’s)*

E – I feel like everywhere it’s just like physio, physio whereas there’s not a lot of podiatry.

H – There needs to be more promotion.

B – It’s like a common problem, you can ask anyone and they…

C – They don’t know what it is.

B – They say ‘what is podiatry?’

C – Are you a paediatrician? Are you a foot doctor?

B – Or you start with the older version, Chiropodist, ‘oh yeah, chiropodist’. Especially the older people, I work in a care home and they always say ‘podiatry?’ And I say chiropodist and they say ‘oh yeah’.

A – So had anyone had any podiatry care or knew a podiatrist prior to applying to the course?

*(Many no’s)*

I – Again, I applied to do physio, but I actually got into it but I went to Brazil which is where I am from for a holiday and at the time I was applying for some volunteering work for Kings College Hospital, so when I got back I wanted to be allocated within the physio department where there was no availability, so they put me in the diabetic foot clinic at the hospital. I didn’t know podiatry then but obviously when I went in there I found it quite interesting, so I asked them to change me to do podiatry. I wasn’t too sure, but then I thought (shrugs).

A – Yea, ok. So you were the other way around, you switched from physio to podiatry.

I - In a sense yes.

A – And do you think that was because out there in Brazil there was more, it was a more glamorous job, it was more respectable, well not respectable because I am not saying it isn’t a respectable carer but I do feel like from what you said people don’t talk about it, it isn’t glamorised, it isn’t published across social media, it isn’t spoken about, as physio is, especially with football and all of that.

I – For me like, there’s no podiatry in Brazil, you don’t need to go to uni to become a podiatrist, so it’s a bit like it isn’t a profession, well in my culture anyway. But its more about physio and being a physio therapist. But when went to, when I was volunteering at Kings College Hospital at the diabetic foot clinic I actually got to see it. It’s quite invasive, it’s very similar to medicine in a sense because you do surgery, you do all these other things that you wouldn’t do as a physio therapist, that’s what I liked in a sense.

A – Was that true for anyone else? The invasiveness? The fact that it was quite similar to surgery and medicine but without being medicine and five years.

E – There’s more to it than just massage.

*(Laughter)*

A – Ok, let’s see what else we have. So, no-one knew any podiatrists?

*(Many no’s)*

J – My sister, well she’s a podiatrist now. So, one of the reasons I do podiatry is that honestly, physio therapy being my number one choice at the time but my sister kind of, she didn’t tell me not to do it, but she definitely advertised podiatry to me and got me to research it and from there I thought, let me change some of my choices and go to some of these interviews for podiatry and physio and I feel like podiatry just won me over. Especially going to certain places like sort of Southampton, Northampton, coming here as well especially, so I feel like podiatry won me over and now I’m here.

A – What was it that won you over?

J – I think it was just in comparison, just going through some of the clinics and seeing some of the senior lecturers and just the differences in between them I just felt like a lot better working around The Leaf and I felt a lot better just talking to some of the senior lecturers, that’s sort of the difference.

A – Yea, and you said you saw a podiatrist? *(To E)*

E – Yes, yeah he was basically trying to get me to do it, he was like, ‘You should do it because it is really good’, he had his own private practice and he was saying how much he was earning and I was like ‘Ah wow’ I got quite friendly with him and then, yeah he was the one that got me really into it and I don’t regret it.

A – So you mention financials there, has anyone else thought of this financially as an option to be earning a lot of money?

G – Oh yeah…

K – But then you have to be a professional and passionate…

A – And the appeal of the private side rather than the public sector?

G – But the money yea…

*(Laughter)*

A – But physios can earn a lot as well?

G – It’s true.

F – But we’re better than physios…

*(Laughter)*

A – There’s a bit of a rivalry there I’m sensing. So, in terms of influencing your decision, a lot of you have already said that it was your second choice, but did anything else influence you? Did you see it on social media, did you see any campaigns like perhaps done by the universities around podiatry?

*(Many no’s)*

J – Not one

I – I did – because I went to the university of East London for a year to do biomedical Science, because, again, I wanted to do physio therapy and they do podiatry there as well, so one of my, one of the physio lecturers used to advertise both courses because he was the head of both of them, so that was quite good, but other than that I didn’t know podiatry.

A – Did anyone else see anything? Radio? TV? Social media? Nothing?

F – Nothing – to this day!

*(Laughter)*

A – Ok, so do you think that is something that would help bring people into the profession? Raising its profile somewhat?

*(All agreeing)*

E - Definitely, young people are like ‘it’s just feet’.

E – It needs to be marketed in a good way.

L – A lot of people are put off because they just think it’s toenail cutting.

E – Yeah smelly feet.

J - Yea

E – You’ve got to remember that we are helping people to get better, improving people’s lives, there’s more to it than just feet.

A – Do you think there’s an ageism side to it as well? Like it’s just old people?

E – There’s a lot of mature students in our cohort as well, so, definitely.

A – Ok, how would you, if you could improve the marketing of podiatry what would you do?

K – It’s not just feet.

C – Yea.

J – That’s a tough one.

A – That’s the title ‘It’s not just feet’.

B – Yeah, you’ve got to make the people understand that there’s more to it, because they just think, oh yeah they understand it. You’ve got to make them understand there’s more to it, such as surgery, there’s so many things you can do!

C – Yeah the scope of practice is huge, and is a lot bigger than what they portray. The only reason I saw podiatry was because I was trolling through like the health sciences course and I saw it and was like, ‘what the hell’, clicked on it obviously had a research, but even at that, from the universities like own description of the course, it’s nothing in comparison to what the course actually is.

B – Definitely,

J – Yea

C – Like I know I’ve been surprised. I knew there was an element of surgery but I didn’t know like the local anaesthetic and things were going to come in, so, but if I’d have known that, and I don’t know about anyone else, but if I’d have known that erm, I wouldn’t have bothered applying for any other courses because that’s what I was genuinely interested in. So I don’t know, if they just amp that up, and push that it’s not just nail cutting, there’s loads of different things, loads of different avenues you could go down because a lot of people don’t know that there’s like sports podiatry and things like that, which I think would change loads of people’s minds from physio.

E – And sports science…

C – And those sorts of things like that, it would help a lot more. But it’s the fact that there’s just like foot care, but what actually is ‘foot care’? Because people think that foot care is just toenails. That’s all people think, they don’t think of everything outside of that that we now know. Erm but the general public isn’t going to know that.

G – Because you get told that you can just go to the salon and get my feet done, why do I have to pay someone?

C – It’s very different…

G – But they don’t know that, because no one tells them that, they’re just like ‘Oh a podiatrist just cuts my toenails’.

B – But did any of you when you were researching podiatry did you go on YouTube and look at any videos?

*(Some no’s, some yea’s)*

B – I went to watch what it is, literally, again, the scope is very narrow, just like in the Brighton Universities description itself. If there was like a wider video, but more creative like it could film a little bit more, people would get like more of an understanding. I think that would attract really well. I don’t know but personally I find that videos always go well.

K – I think like the advocism for this course is way bigger in countries like America and stuff because that’s where I looked at and was like, ‘Oh ok’, that’s where I got the surgery element from, I never thought there was anything like that here. So, thinking about propaganda and stuff, it’s way better in America, compared to here because there’s more acknowledgement of the course.

A – So you think we might have something to learn from abroad with regards to how we market things?

*(Agreement)*

A – Are there any other countries people have noticed?

H – I looked at Australia.

K – New Zealand.

A – So Australia, New Zealand and the US in particular, ok.

C – Yea, someone actually said to me when I erm, said I was studying podiatry and they lived in Australia they said that here when you mention that you’re a podiatrist people are like ‘Oh gosh, feet, like eww’ but if you were to say you were a podiatrist in like Australia, it’s a really, like loved profession, people go like ‘Wow, you’re a podiatrist, that’s pretty cool’ and I don’t know it’s just their lifestyle in Australia.

B – It just has more recognition there really.

C – They like it as a degree, they see it as a very… what’s the word, sought after profession, they love it. So, I don’t know why it’s so different there to here. But yeah.

I – Adding to what you said as well with regards to watching YouTube videos to see what podiatry is, because I kind of like looked at the, you know description of the course on the uni website, and I obviously because I was at Kings volunteering as well, I had to ask the podiatrist, like ‘Is this what you do?’ because it didn’t make sense because it is so basic with regards to what we actually do within the course.

B – Why don’t they extend the video, because obviously, you’ve got, I can’t remember, the main lecturer talking about the brief scope but you could actually physically recall what we do, get content from the patients and the lecturers and record a bit in the cubicles, what we do. The surgical aspect, the padding, everything, all those little components and add them up into a 10, 15-minute video, I think people would watch that and you would get many views on YouTube and I think that would attract loads of future podiatrists.

I – Things like local anaesthetic, being able to prescribe, like no one would think that you would be able to.

A – And do you think that the more sort of medicinal aspects of podiatry are the more attractive parts?

*(All agree)*

A – The bits that make you a doctor but without needing to do the five years?

C – Yea.

*(Agreement)*

B – Then you can branch out to so many things as well, there’s such a wide scope. Sports podiatry, erm surgery….

A – Is there not forensic podiatry as well?

*(Agreement)*

H – That’s a really good one.

B – We had a few lectures about it, but it wasn’t like, very in depth but yeah.

F – The descriptions online for certain universities definitely don’t do the course justice, because they only give just sort of not even a summary, even shorter than that. But when you’re on this course it definitely sort of opens you up to the things you could do and they don’t give you that on the website or any prospectus or anything like that.

B – Is that a part of marketing? That they put short summary’s so you would be forced to research? I don’t know.

D – I feel like it’s a bit like if you were looking into dentistry and they just said like ‘yea we’re just pulling teeth’ It’s a bit like that, they just say, cutting toenails. Done.

B- It’s like they mention a little bit and they put a number and you need to phone to ask. So…

J – They’re looking for people who are really, really interested. But if you were given all the information you would have formed more of a conclusion or not. They’re looking for people that are really, really interested, like if you’re still here after looking at the brief description then you are definitely interested in this.

B - Maybe they are afraid to give a lot because you could definitely be inclined not to go to podiatry, but then people are like, I don’t know, let me try, just go. That’s the concept under the marketing.

A – So obviously, we have established that none of you saw anything on radio, social media or television, but if they were to put something out there for people to see where should, where would you want to see it and at what stage in your career choices would you want to start seeing ‘Have you thought about podiatry?’ Is there a particular point where you think, that’s it…?

*(Some murmur GCSE’s)*

A – So quite early

G – No, UCAS applications.

C – I would say UCAS, because I don’t know but when I was at GCSE level I wasn’t really thinking, yeah, I would have known I would have gone into some sort of career but again they don’t really, when it comes to university pending, there isn’t a massive push that you need to study this, this and this A level to get in here, there’s loads of different avenues to get in there now. But I think if there was a massive push more coming to the end of A levels or any other road to get to university, if it was that point, that critical point when you are actually scrolling through and starting to make those final decisions and picking them last five, at that point push it because that’s when my whole thing changed and that’s when I pushed it and was forced to do the research and was more invested in the research because this was a huge decision, rather than when at GCSE, I don’t really care as a 15 year old what’s going to happen when I’m 19 because that’s not where… but when I am there and that’s starting to be the big life decision then I’m more understanding in that point because I am more mature. I think at that point that really, really critical point where stuff is starting to hit the fan then, I think that’s the best time to push it and push it well.

A – Yes, I think you’d almost want to split it into two campaigns really, you’d have an awareness where you’d drip feed from a young age ‘there’s this thing called podiatry, it’s not just feet, bla bla bla,’ and then when you get to UCAS it’s suddenly ‘That thing you’ve heard about before, this is it in detail – this is the time to choose your career’.

J - Basically…

A – Ok, in terms of as a career, we’ve already established some things, money, flexible hours, what else was attractive about podiatry in particular? Is it the responsibility aspect? Was it perhaps you know working around family as you mentioned?

K – I think just helping people and facilitating people in their daily lives, I think that’s quite a big point on this course as well.

A – So wanting to help people is pretty important?

*(Agreement)*

G – And you get to do loads of things for people, if that makes sense.

I – For me, personally, it was being able to work in a hospital, that’s what I wanted to do and I don’t know that podiatrists work for the NHS in hospitals, I thought it was more of a private thing, and from obviously being to the diabetic clinic at Kings College, it’s really busy, you get to see so much things, and you get to work with so many different allied professions as well, so you get to work with surgeons, you work with consultants…

A – So that kind of crossover…

I – You’re very involved.

C – I think also a caring aspect. I think we’re all here, we all have a very similar trait that we care. You don’t go into a health profession if you don’t care and what I think pushes podiatry out and is different from the rest of them is… you have that constant contact with your patient, you just don’t see them and then they’re gone and it’s just going to be one appointment, you don’t really care how they feel because you know as a podiatrist you’re going to have to follow it up, be that in a hospital or wherever. You’re going to have to keep seeing them again and you are invested in that patient and you should care rather than just they’re in they’re out, I don’t really mind, which I think the other medical professions doctors, nurses have. They don’t have to form that really deep relationship. Erm. That’s just…

A – Anyone else at this end? Any particular reasons why it appeals to you as a career?

L – I think just like the flexibility of it, being able to do like loads of different things… so you can go form one thing to another if you like. Let’s say if you’re bored of one aspect of it, you can re-train in another. I think it’s juts a lot of flexibility.

E – There’s always something for someone.

G – There’s also like the satisfaction of knowing that you made someone feel better. So, say you do someone’s corn and they say ‘oh my god I feel so much better than I felt when I came in’. That just makes me really happy.

C – The progression of the career as well. You’re not, you don’t just graduate and then have to wait five or six years before you can move up the pecking order, food chain, so to speak, you can move up quite quickly erm and you can become a specialist very quickly in your field, so it’s not like you are having to dedicate your entire life just to get to a certain point, you can get to that point a lot quicker, you can start earning a lot of money a lot quicker, erm which I thought was very appealing also, that you weren’t stuck in such like a rut, that you can’t get out of it and you have to wait, wait and wait your turn because there’s such a high quantity of people trying to get to the same goal. Because there’s less people, there’s less people fighting for that specialist spot, you are going to be able to get there quicker.

A – Does the academia side of it appeal to anyone? Like going into lecturing or research?

G – No…

C – Research, no, lecturing, yes. Research just nah.

G – Yeah, lecturing maybe…

C – But the research is not my thing.

A – So for most of you, you want to be on the front line?

*(Agreement)*

A – So in terms of environment, just quickly, you said (looking at I) that you wanted to work in a hospital, is there anyone here that though ‘I don’t want to work in a hospital, but that’s why I like podiatry, because I don’t have to.’ You can work at home, you can visit people in their homes?

D - Yeah I like the private aspect, definitely, it’s nice that you can work around your own hours and do your own kind of thing and then you can have your own patients in your own local area and have that relationship with them kind of things. I think that’s really nice.

A – Like a community relationship?

D – Yeah.

L – I think it’s good because you can do both at the same time. If you want a bit of hospital, you can do a bit of hospital, and if you want private you can do that as well. That’s what I like about it.

B – There’s so many positive things coming out, literally all the positives.

A – I know, keep them coming. Is there anything else in particular that you think is a negative? Or comes across negatively about podiatry to prospective students? Do you think the way it is described, as we said, on the website is dull and doesn’t do it justice or do you think perhaps the way the teaching structure is presented? Could it be improved? Does there need to be more hands-on stuff?

L – I think it’s the way people think about it, because when I was applying some people tried to put me off it because they thought it was just toenail cutting and you could do so much better than that, just…

A – So more like a nail technician?

L – Yea…

J – Yea.

C – I think it’s just the initial perception of the course, because when you’re actually on it, like I don’t know when I listen to all the physios and they’re only doing their placement block in third year they’ve had to slough through two years before they can get proper hands on contact with patients. The fact that we have got that from first year is massively appealing and it just makes the whole course more engaging and it breaks it up and it’s not completely all academic and you’re stuck in a lecture room which is really tedious, and you’re out experiencing it, and I feel I learn so much more from actually doing it rather than it being on a PowerPoint.

A – Yes that’s what I was struggling to verbalise, that it’s a positive rather than a negative that you get hands on experience from year one.

C – Yes and a lot of courses aren’t like that, and just because, like I don’t know if it’s just insurance or whatever but that’s why I love The Leaf Hospital, not being cheesy but I do learn something every day and I come out knowing something more, which is not the case when I come out of a lecture. Not the case at all.

*(Some laughter)*

C – So, yea, I just think that if more people knew, though it is a daunting aspect because you’re like ‘crap I’m going to be sitting with a patient in front of me very soon’, but if people knew that they were going to have that hands-on experience from word go, and you were going to be trusted to do all these things I think it would appeal to them, because it breaks the degree up. It doesn’t seem as, not as hard, but it doesn’t seem as draining as that typical university experience – I’m going to be sitting in a huge lecture hall with a hundred people and it’s going to be diabolical from word go. It’s nice that we have that opportunity, which I don’t think a lot of them have.

B – All those beautiful positive points we are going to have to make it stand out.

E – Especially like with the course, they throw you in at the deep end from year 1. You get all that experience as *(C said)* straight away from year 1, you don’t have to wait around. You just learn the basics and you’re in.

G – But that can also scare some people away, that you get to start treatment like half a year or a year into study. Is a challenge. Some people don’t like that, it’s a lot of responsibility on your shoulders.

C – But at the same time you can’t hide it. You can’t just say ‘oh it’s going to be great’ because then you are completely misleading people. At the same time, I think it’s going to appeal to some people and maybe if they don’t like that then podiatry may not be for them and this teaching of podiatry is just not for them. Erm… yeah.

G – I’m not going to lie, when I was applying to do this course I was telling myself “Oh it’s going to be so easy, waste like three years and come out with a degree like eh’. But it’s not that.

A – Did anyone else think it was going to be easy?

H – NO!

*(Many no’s)*

H – No degree is easy.

E – PE, that’s quite easy…

G – It’s harder than I thought it was going to be. It’s harder, well not harder, but more challenging than I thought it would be.

C – A lot of people around time ask us like, why don’t we see a lot of the podiatry ones out, like why don’t we do a lot of these things and it’s because it’s such a demanding course. And they’re like ‘just take a day off’ and I’m like, ‘I can’t like I have an attendance thing to meet’ and they are so confused as to why they don’t have it but we do. And I think that if you’re in this degree you are invested from word go. You can’t take time off, like we have to 100% everything erm which again is good, it disciplines us, but it is so different to everyone else and people go ‘Wow your degree is hard, because you have to be in all day every day learning intense work’ and it’s not just learning the anatomy of the nail and getting on with it, it’s all completely holistic thing which they don’t grasp. Which is why we are in all the time, because we aren’t just learning the lower limb we are learning everything and specialising in that.

B – But then that’s what people don’t understand that.

J – Some people from other courses like they show up once a month.

A – When I did my final year of a humanities course I had six hours contact time a week, and you could just not turn up. So… but it was a very different type of degree being humanities. But do you think that the difficulty could be quite appealing, like this isn’t just an easy peasy, ‘oh I didn’t get into physio course’, it’s its own thing and its medicine and its hard. Is that going to be more appealing or put people off? Or could it do both?

D – If I had known that you had to have 80% attendance thing, then I think I would have passed.

J – Yeah attendance, you don’t want to highlight that…

*(Laughter)*

G – If you want to challenge yourself then yeah, if you want more of the university experience of going out every time and not having any responsibilities, then it’s not for you.

C – I think, yeah exactly. I don’t think you pick this degree because you just want to go to university and live life as a student, you are completely invested in this degree if you are here and if you’re not then you’re just going to find it awful and draining and you are going to hate every minute of it, because if you aren’t in love with it and you’re not wanting to get to that end goal you’re not going to put the effort in as well.

J – It needs to be in the back of your mind that it’s going to be tough, I mean, even in terms of the location we are at. I know that at least some of the people here thought we were going to be in Brighton/

*(Cut off – many agreeing)*

A – Is that the Falmer campus? Is that a common feeling.

G – I actually went there for my interview and got told ‘Oh it is the Eastbourne campus.’

C – You’re going to be stuck with OAP’s.

B – It’s a weird thing when you don’t know and you realise and now do you think you would want to be in Brighton or here?

*(Mixed response)*

J – I don’t think I would do well in Brighton.

B – Why’s that?

J – There’s just too many things out there.

G – It’s the gay capital *(Whispered)*

J – Looking back I am glad that I am in here, I’m glad I am in Eastbourne.

A – But initially did you think that was a bit of a let-down?

*(Mumbling from F)*

A – What did you say (F)

F – I said I don’t really care I just thought not too bad.

A – So, just going back a bit, you’ve logged into UCAS, you’ve decided you are going to do podiatry, did you then do a taster day? Other than reading that little blurb, maybe picking up the phone and ringing someone did anyone actually have any hands-on experience? I know you have (I and E) but did anyone else?

L – I did, I went to shadow someone.

A – Did anyone else?

F – I had a taster day but it was like on my interview day.

J – Yeah I done that as well.

F – So when I came in for the interview I was quite scared it was like a competition and I had a little taster thing after, we had a tour.

A – Ok, did anyone else do any of that?

J – I walked through the leaf hospital and then they drove us to Robert Dodd.

C – I found it difficult, like I’m not from England so, I… when I asked can I shadow you? They were like, no, with insurance policies I’m not allowed. So, I was like, oh well I’m signed up for it now.

A – A bit of a leap of faith

C – Yeah I hope I like it because I couldn’t know, if that’s allowed elsewhere in the world but I don’t know, but I wasn’t allowed.

A – Would you have liked like a taster day at college or towards UCAS?

K – Yeah when I heard about it, it was too late to actually to go in and have a little taster session. I literally just heard about it, got into it and that was it. I didn’t really have an opportunity to actually go in and have an experience.

A – Which then brings us back to the idea that if the rules and regulations on insurance and shadowing are so strict then maybe the video idea is the next best thing to show what you will be doing.

J – For sure.

A – Ok, does anyone else have anything thing else they want to add, any glaring positives or negatives that they feel the just want to put out there?

M – Can I say something like, I don’t know but I’m an international student, but for them they said they have to pay for it now, and you weren’t supposed to pay for the course before and that’s why…

A – So are you all paying for it?

*(Agreement)*

J – Because it was an NHS funded course and we’re the first year that has to pay for it

C – but at the same time, I don’t know if anyone else, I know nine thousand is quite a lot, but when I look at the other courses, and like you said, don’t have to actually turn up, when I think of podiatry I think, ‘Do you know what, I can kind of justify the nine grand?’ Like you think of how much stuff we open, all those individual packets that we open at The Leaf, they all cost money erm so I’m like yeah ok, for the amount of contact I get and the experience I get with those sessions a week, I can justify paying that, whereas if the likes I was sitting in a huge lecture hall and the person didn’t even know my name, then I would have a problem with just a power point, a few PowerPoints and you’re paying nine-grand for that. Yes, I think it’s crap that you have to pay now and they didn’t the year prior but you can kind of still justify it. Would it be more appealing if it were free? Absolutely. I don’t know why it’s not free considering theirs such a massive lack of us, but yeah, out of all the courses I think you can very much say that, nine-grand I don’t mind. Especially on the other side of it, you know that you’re going to get a job, so the worrying about have to pay all that off shouldn’t be there because you aren’t going to be struggling for a job on the other side.

M – But that brings back to like awareness, people need to know that, which they don’t… which is like, the two of us (F & M) were talking to this podiatrist who was like learning 20 years ago who said they had 51 people in their class which is quite a lot compared to what we have now, and of course it could be a factor, I’m not saying that’s why but paying your fees now and not paying your fees then could be why there are not many students now.

*(Agreement)*

M – So you need to tell them you are actually paying for this. You are not justify.

A – Ok, anything else to add on the financial side of thing ring any bells for anyone else?

G – Is it worth it?

 A – But you don’t really need to worry about it, it’s not like when you put your card in the machine it comes up with a big minus nine-thousand pounds.

H – But that letter, that letter is waiting for me…

C – But we are studying a degree to get to that higher level of education so the money shouldn’t be a problem on the other side, so I don’t see why people focus so much on ‘oh crap I am going to have to pay this off’ I’m like ‘yeah but you are not going to be working in a minimal career on minimum wage’.

*(Agreement)*

C – So it shouldn’t be a problem, you’re putting the hours in, you’re paying all this extortionate amount of money but you will be rewarded and be able to pay it off.

A – It’s a change in attitude as well. So, for you guys you may be the first year but for most other degree courses you do have to pay and that’s the way it is, there has never been an option to not.

G – I don’t think that paying for a degree should be a problem as long as you are gaining something from it.

J – Yes.

G – Good education is good education, even if you have to pay for it…

H – Yeah that’s actually true…

J – And this definitely gives you something, because every year there’s a bunch of third years who have already secured jobs for when they graduate, so it definitely pays off, there’s definitely a lot of jobs waiting for all of us when we graduate… so…

G – Hopefully.

J – Hopefully, yes. It’s reassuring.

G – Optimistic, that’s the one.

A – Any other particular points? Pros or cons?

H – The lecturers are good, I’d say.

A – Aww, they’d like to hear that.

J – Actually I’m not sure if anyone views this as a pro or a con but the course is still changing rapidly. Even now, we’ve had some talks with Tarryn about how they are going to change some of the courses and yea, just trying to incorporate some assistance to work at The Leaf. So, you know it’s still changing, our course, so it’s not you know set in its way.

C – I think it’s a really nice thing as well, because it’s not a huge course and there’s only so many people that it’s quite intimate in regards to time with your lecturers, like they know you by name, they know you. Where it’s completely different to sitting in a lecture hall with 180 people where you don’t even know all the people in your class. And I like that because there’s some cohesion there, you’re quite a close group, so I think that’s a very appealing aspect, you don’t feel alone on your course, you have a lot of people to go to and you can ask them all questions and work together which is quite nice as well. But yeah, the one on one contact with your lecturers is good and if you ever need anything they have no problem dedicating time to you because there’s not 180 people to do it with. And plus, they are passionate about their careers because they’re trying to push it just as much as everyone else. So, they’re not going to not help us, they’re trying to win us over.

G – What if the awareness works and loads of people apply to podiatry and get in? Would you lose the intimacy?

C – But it can’t be because it’s so, because of the practical aspect you can’t have a huge course, you can’t have 180 people studying because you can’t fit them in The Leaf, it can only ever get so full.

J – They’ll find a way to put people in though…

C – But where?

B – They’d build new universities…

*(Inaudible)*

A – It would probably just become a harder course to get into.

G – Not our problem though because we are already in.

*(Laughter)*

A – Ok, if no one has anything else to add I think we’ll end it there. Thank you very much.

**Focus Group 13/05/19**

A - Ok, so the first question is kind of had you heard about podiatry, or had anything to do with podiatry before researching your university options?

B – Ok, erm I personally, because I live locally, I knew that - well they held like a taster day where they came and showed us, we had a day at Leaf where they showed us what podiatry was all about, because I originally was on a course in Eastbourne for nursing and healthcare and I was originally going to become a nurse, went through all the nursing interviews and everything and didn’t get in, and then they did this taster day and then that’s how I found out about podiatry and then basically just podiatry appealed to me more, because there’s a lot more control that you have, in comparison to nursing, you’ve got a consultant that you have to answer to sort of… whereas podiatry, you are the consultant but it’s not… you know like a GP role, or a doctor role where it’s so you know intense, whereas podiatry is sort of an umbrella underneath healthcare, but I can’t say the same for the other girls.

A – So with the taster day, did you find that yourself or did you get sent a notification that there was going to be a taster day or was it just that you were aware of the area and so you saw it pop up?

B – We actually specifically got sent emails directly to our, for our cohort/our course, so it was aimed to us.

A – Ok, perfect, anyone else?

C – I did not know about this thing ever, I did not know that there was something called podiatry also. When I graduated from high school, I was looking for something to study for university and my mum told me about it and I was, what is this? And I read about it and go through everything and I like it, that’s why I chose it.

(Giggling)

A – Ok, ok, that’s a good enough reason.

D – I didn’t know about podiatry before results day. Because before results day I was going to do medicine and then my grades weren’t good enough for medicine and then my sister was like, well “You can still do podiatry”. Because I wanted to do surgery even if I didn’t do medicine and then with podiatry I can still go into surgery. So, that’s why I did podiatry and I read about it and I was like, oh yeah actually, it’s kind of similar to medicine which is why I picked it. It’s just a different route for the same thing.

A – Yea, you’re kind of specialising in a particular area of the body and you still get to do a lot of surgical procedures and have a lot of responsibility, yeah.

E – Erm, I’d heard of podiatry before I came to uni, but only because I have been to a podiatrist, but I kind of always knew it as Chiropody, like I would say I’d been to the chiropodist, not to the podiatrist, so it took me a little while to like… When my mum said do you want to do/ My mum brought up the idea to me/ and I didn’t know what it was and then I looked into it and realised it was originally called chiropody, that caused a bit of confusion to me. But I also have an interest in biomechanics. And I knew I wanted to go into something to do with biomechanics and I saw that there was a link between podiatry and biomechanics so that kind of confirmed my choice as well.

A – Ok, so you’ve had podiatry treatment, has anyone else had podiatry treatment before coming to podiatry?

(Head shaking)

D – No

A – No, ok and no one else saw a taster day?

B- Just me

A – Ok, erm so was podiatry anyone’s first choice? You did nursing and then switched, and you were going to do med school…

E – It was my first choice

A – Ok, not your first choice? (To C)

A – No? Ok.

A – Do you think that there’s a lack of awareness as to what podiatry is? So, we touched on that there’s a chiropody-podiatry confusion perhaps, but do you think in general that there’s a lack of awareness as to what it entails and what it actually is?

D – Yea, I feel like everyone has this perception that podiatry is just feet

(Agreeing )

D – Like when you tell someone you’re doing podiatry, they’re like “You’re doing feet?” It’s like you have to explain to them what it is, because it’s not just feet it’s the whole lower limb.

A – and you mentioned the surgical side as well, do you think people don’t quite understand how much the job entails.

D – Yea…

B – And it’s frustrating as well when you are doing it and every person, like every person you say is like “Oh so you’re doing feet?” and you know it’s astonishing even when I’m talking to my family they’re like, “What is it you’re doing?” “you what?” “So you’re just doing feet?” and you’re like, no, there’s a lot more involved than just feet. So, I think for us as well coming into the course and being on it, it’s like you’re always fighting to justify your profession, you’re always fighting to justify what you are doing. And I think that as well, a lot of women are in this profession and that also makes it a little bit difficult sometimes.

A – Yea, so if you had to remove the focus from feet, what would you describe podiatry as?

(Pause)

B – A specialist. Like every other. You know when you think of dermatologists, you think they’re a dermatologist, they’re a specialist in dermatology, you know. I think that sort of same association should be made the same. It seems to be that for some reason we’re not within the group of medical people, we’re not cool enough to be in there. But that’s just how I personally feel.

A – Ok, anyone else?

E – I can only say like how any disease to do with the body is related to the feet. Or how we analyse how someone walks and how improving how someone walks can improve other things as well. It’s not just cutting toenails and it’s not just removing dead skin, there’s a reason why there’s dead skin and by improving something else, will improve the pain elsewhere.

A – Ok, so it has a far bigger impact on the body.

E – Yea it’s not just one thing, you have to look at it holistically, the whole body, not just…

(Agreeing)

A – Ok, so we’ve already touched a little on where you first saw or heard about podiatry, did anyone see any campaigns, anything on social media, did anyone come across it in a social/digital world?

B – Never

E – No

A – Nothing

D – No

A – No, ok, I guess it may be the sort of thing that unless you’re in this field or need treatment you may not hear about it.

(Agreeing)

A - Ok. That’s interesting. And what would you see as the most attractive part of podiatry as a career?

D – A 9-5,

A – Ok, so flexible hours?

D- Yea and also when I was like researching it on results day the fact that there’s a need for podiatrists and you are quite likely to get a job once you graduate. It’s not as competitive as other professions.

A – Ok so there’s some job security in there, and flexible hours. Was there anything else in there for anyone in particular?

B – Like what D was saying, and there’s a lot of women in the profession and I think that the freedom to be able to you know think right, I’m a woman who is eventually going to want kids, I want a job that will, you know, earn me enough money but will also you know give me enough time to enjoy my family, enjoy my personal life and not just be so career orientated. With this you don’t take a lot home as with being a GP or a cardiovascular specialist or something you might take more home. But that’s just again my thoughts.

A – So you mentioned money briefly, and the idea of financial security, is that something that’s echoed around? That you think it’s a quite well-paid career? Or that there’s the possibility for it to be a very well paid career?

(Agreeing)

B – The possibility that it can develop further, like it’s how far YOU want to take it, you know. You’re very much in control of it. You’re in control of you patients you’re in control of your work hours, you’re in control of you know, how far you want to go with it and I think that’s the good part about it, there’s so much control in so many different aspects.

A – Ok, and what about responsibility as an aspect? You mentioned just then about being in control, so having responsibility for a patient, is that from a medicine point of view and with surgery I can understand that having that responsibility is something you may have wanted form a career, is that what anyone else feels? That you wanted a career with an impact.

D – Yea

B – Definitely

A – Ok and if we flip that is there anything you 100% didn’t want from a job?

E – Just to be working in an office, I wanted to be helping people.

B – To have a boss, I didn’t want to have a boss telling me what to do all the time. I want to make the right decisions for my patients without you know having someone else butting in and saying no actually what you are doing is wrong.

A – Ok, so if they were to put something out there for young people to try and bring people into podiatry and what point would it have most influenced your career choices. So, for some of you this wasn’t your first choice, would you have been more influenced by podiatry if you had seen it earlier, if you had known about it and maybe it was glamorised slightly and less about feet?

D – Possibly… erm I just feel like I wasn’t given enough information about it to even consider it. Like work experience to see what it’s like. Like in my school, in my school medicine was really… everyone was pushed to do medicine and law, like podiatry wasn’t something people would be encouraged to do. I don’t know why, like I feel like the teachers didn’t even have that much information or knowledge on podiatry.

A – Yea, I guess they can’t push something they don’t know about themselves. It’s the usual doctor, lawyer, vet, isn’t it, the three ones everyone wants to be, or a teacher.

(Agreeing)

A – So if you’d have known about it at say GCSE’s, A levels?

D – A Levels,

E – I’d say GCSE’s

B – GCSE’s, yeah, everyone nowadays young people are always worrying about what they are going to do.

E – Yea I feel like I didn’t know enough about university in general let alone that much about a course I wanted to do…

B – Yea, I think it’s quite tough to also expect you know these people who are going into university, you’re 18, a lot of them don’t really know what they want to do, I mean I certainly didn’t, I just went with the flow and was like… I got a job at a GP’s surgery, the next natural course was to be a healthcare assistant and then a nurse and wherever it took me. I think it was only through, you know, just going with the flow that I ended up here and I feel like a lot of other people feel the same. They don’t get into the course they want so they go with the flow and go onto the next course that’s available. Because there’s pressure to either get a job or go to university and so many young people nowadays are on Instagram and things like that, and there’s people with diamond necklaces, going abroad all the time and they’re getting paid to do it or whatever and everyone’s thriving for that lifestyle, but everyone wants to earn a lot of money but also not work very hard and travel far and I’m digressing a bit but yeah... everyone wants that and I think just podiatry you can get that and I think that by letting people know early on that there are so many options out there. And you know these kids are seeing all this travelling abroad and that from a young age, because they’ve got Instagram and social media from a young age so everyone is worried about what they’re doing now. There’s so much worry as to “Oh my god am I going to earn enough money” “am I going to be able to pay for a house”, like housing prices in the UK are crazy, everyone’s just worried about making money.

A – So having it introduced early and making it obvious that this is a really flexible job, there’s opportunity to make decent money you’re going to be your own boss and have that from a much earlier stage will help fulfil some of those worries and have people go “Ok, I don’t have to be a doctor or a lawyer or a teacher there are other careers.”

B – Definitely, the only reason why doctors and lawyers are glamorised is because of movies; Grey’s Anatomy, House, you know, oh err, Lier Lier, all of these professions were in movies, podiatry and that isn’t and I think that’s why it is not as popular.

A – Ok so we’ve already touched on the fact that it isn’t just feet but is there also an age side to it, people think it’s just old people. Or just cutting old people’s toenails or whatever. If there were a side that you think is most appealing, the glamorous side, what would that be?

B – The flexibility, like I said the opportunity to take it as far as you want.

D – I would say the surgery is what appealed to me most, because for me, I was considering optometry as well. But then with optometry it’s always going to be the same thing, it’s always going to be eyes, whereas with podiatry it’s like, you can get different like pathologies. With the eye, there is only so much you can see. But with podiatry I feel like there’s quite a lot you can see, not as much as medicine, like doctors would see, but it was like a good medium. It was a middle.

B – It’s a good way to be a doctor but not actually being a doctor and it’s a lot easier to get the qualifications for this than to be a normal doctor. So I can see your point.

A – Ok, so it would appeal to a wider group of people

(Agreeing)

A – And in terms of here as a location, was that a factor in you choosing podiatry as a course? Knowing that you can study here?

E – Yea, because of The Leaf Hospital.

B – Yeah, I’ve heard mixed things about this in general, from different people. A lot of people didn’t like it because they thought they were going to be in Brighton (D and E agreeing.)

D – I did as well

B – And everyone wants to go to Brighton, Brighton’s really famous for lots of different things, so even if you’re coming from abroad you’ve most likely heard of Brighton and not Eastbourne, but Meads area is beautiful, this is obviously the more better area of Eastbourne, it’s a lovely area, and like E said, Leaf hospital is a fantastic facility and it’s one of the reasons I chose Brighton, solely because of….

E – Yea that’s what sold the university to me, that’s what made it stand out compared to other universities.

A – As someone that doesn’t know much about it, is it just the hands-on part of having the Leaf hospital as part of it?

E – Yea and just the experience of it. One of my friends does physio and the fact that they don’t get the experience to treat actual patients and we already have. I’d say I have quite a lot of confidence now with basic care. Yea it really sold the course to me.

D – And also we got to do anatomy and we actually saw real life cadavers. Other universities didn’t offer that. So, that was quite intriguing because I was interested to see that. But also at the beginning of the year when I found out it was in Eastbourne and not in Brighton I was a bit disappointed, because I did initially think I would be in Brighton. But once you actually come here, it is nice.

A - Ok. So, it’s one of those things that you’re like, “aww”, but then when you get here’s you’re like “ahh it could be worse”. Do you think you will do better for being further out of the big city?

(Agreeing)

A – Probably study harder

(Laughing)

D – Yea.

A – Ok, so that was all the questions I had on the sheet but if anyone has anything else to add about how we could improve the uptake of podiatry or what you think could be limiting people from taking it then that would be really helpful.

B – I just think it’s a lack of education like a lot of things nowadays. But there’s so many professions it’s like, when you look through a university catalogue, it is… it is… there’s so many to choose from so it’s quiet difficult for us to say what exactly podiatry could do to stand out not just from other medical professions but from other professions in general is quite hard. So, can I ask you a question?

A - Yea

B – How much is it dropping by a lot? Is it a lot considerably?

A – I don’t know a whole lot about it. So I was brought in as a third party who doesn’t know too much about it, otherwise it could be a bit biased but I think fairly significantly to warrant this research. And I think, do you pay now? Has that changed anyone’s perspective?

D – I never realise it used to be free?

B – I think a lot of people are like I can get funding now and a lot of people do not realise what the commitment is to receiving funding until they’re in it. So a lot of people are like, meh, I’ll choose whatever course and then I’ll get funding for it.

D – I think that what scares people away from the course is that its feet. Like that it’s to do with feet. People have this phobia of feet and feet smelling, but they don’t actually smell that bad, because they don’t even smell, like old people still wash their feet.

B – I think because they’re all the way down there, you don’t look at feet, you walk all the time, you walk every single day no matter where you need to go.

E – That’s what’s interesting about the course, you’re always on your feet, you always have your feet.

B- But you wouldn’t think that until you’re on the course learning about it.

E – Exactly. I think it’s just getting the stigma away from it. I think if when you described it you say we can do surgery, we can prescribe certain things, we learn about the whole body it’s more appealing than we just do feet because its more than feet.

B – Yea there’s definitely a huge stigma around it. No one likes feet. Everyone that I’ve spoken to have all gone, “oh feet eurhg”. And I don’t mind feet that much, I don’t think they’re that bad, but everyone’s like “Eurgh you like feet!”.

A – Ok, well that’s all really helpful. Does anyone have anything else to add? Otherwise we’ll end it there. Perfect. Thank you.