

Healthy Perspectives Fall 2013 Summary

Pre and Post-test Feedback

There were 784 health sciences students across five colleges (Allied Health Sciences, Dental Medicine, Graduate Studies, Medical College of Georgia and Nursing) enrolled in the 2013 full implementation of HP.

Students showed statistically significant gains in their knowledge, attitude, skills and self-awareness. Knowledge, attitudes and skills were measured using the valid and reliable Health Beliefs Attitude Survey (identified by QEP committee). Students showed significant improvements on their pre-test and post-test scores for the survey ($p < .0001$).

Student demonstration of verbal communication and ability to work with an interpreter was accessed via a virtual simulation (VINSIM). The average student performance on VINSIM was 93 out of 100.

Statistically significant gains ($p < .0001$) were achieved for each of the following indicators of self-awareness (adapted from the Clinical Cultural Competence Questionnaire):

- Health disparities
- Sociocultural issues
- Race, ethnicity, identity, stereotypes, biases and prejudices

Course Evaluation

There were 590 students, a response rate of 75.3%, who completed the course evaluation. The top 5 most positively rated aspects of the course were:

- Objectives were clear (92.8%, $n = 547$).
- Course stressed understanding (92.1%, $n = 543$).
- Material was worthwhile (91.2%, $n = 539$).
- Content was organized (87.5% $n = 516$).
- VINSIM was helpful (82.5%, 488).

Combining all eleven questions rated 82% Agree or Strongly Agree

Student comments: areas for improvement – based on 474 comments

Discussion boards (19%)

The main points were they lacked real engagement, needed more interprofessional interactions, and link more to content.

“Possibly stretch out the HP discussion posts every 2 weeks, to give students time to post responses.”

Course organization and structure (17%)

The primary comments focused on shifting the timing, for example to orientation or the summer; allow flexible completion of all modules (at one time), and; include some face-to-face interactions/discussion.

“This course should be implemented during the summer prior to enrollment. Students that have been accepted into the program should have the option of completing this course before school starts. Financial/Tuition should not be a factor when giving this option.”

“I would like it if we could have access to all of the modules at once. Some weeks I had more time to work on healthy perspectives than others, and I would have preferred to do more when I had more time versus trying to rush through it.”

Technology (13%)

Three most common points included too many glitches, some videos were slow loading, and some material did not work on all browsers.

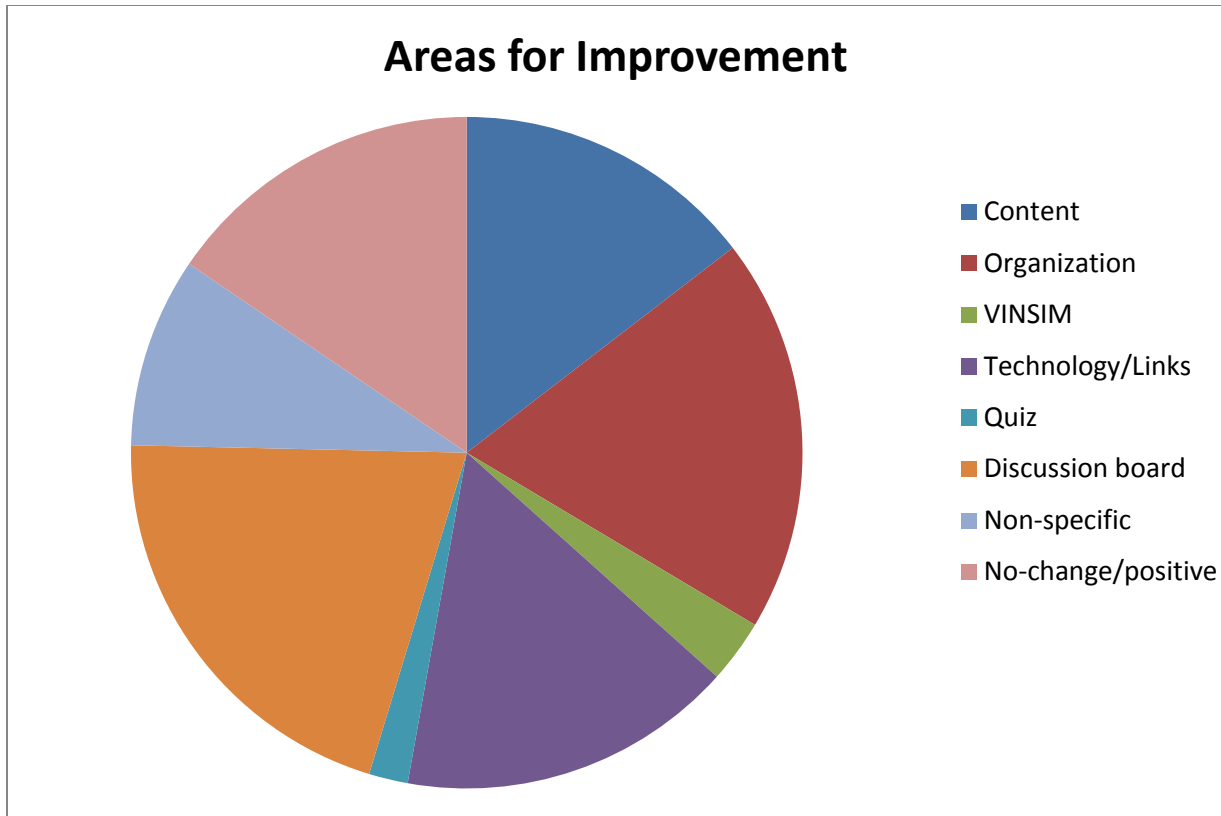
“The interactive portions and links could be easier to access.”

“The only improvements I can think of are centered around the technical issues with the course; however, technical difficulties are unavoidable with online courses.”

Content and information (13%)

The three main comments were somewhat contradictory in that some noted there were not enough specifics while others said there was too much detail. Others wanted more links to clinical applications.

“[Provide] More specific examples and information about culture instead of constantly repeating that understanding and respecting the patient's culture is important.”



Student comments: areas for strengths – based on 514 comments.

Content and information (47%)

- Important topic for career
- Bringing about self-awareness

Course organization and structure (16%)

- Assignments not too long
- Clear goals
- Weekly topics help with focus

VINSIM (14%)

- Need more
- Great practice
- Very practical

Technology/Links and Media (9%)

- On-line, go at your own pace
- Great to have video links

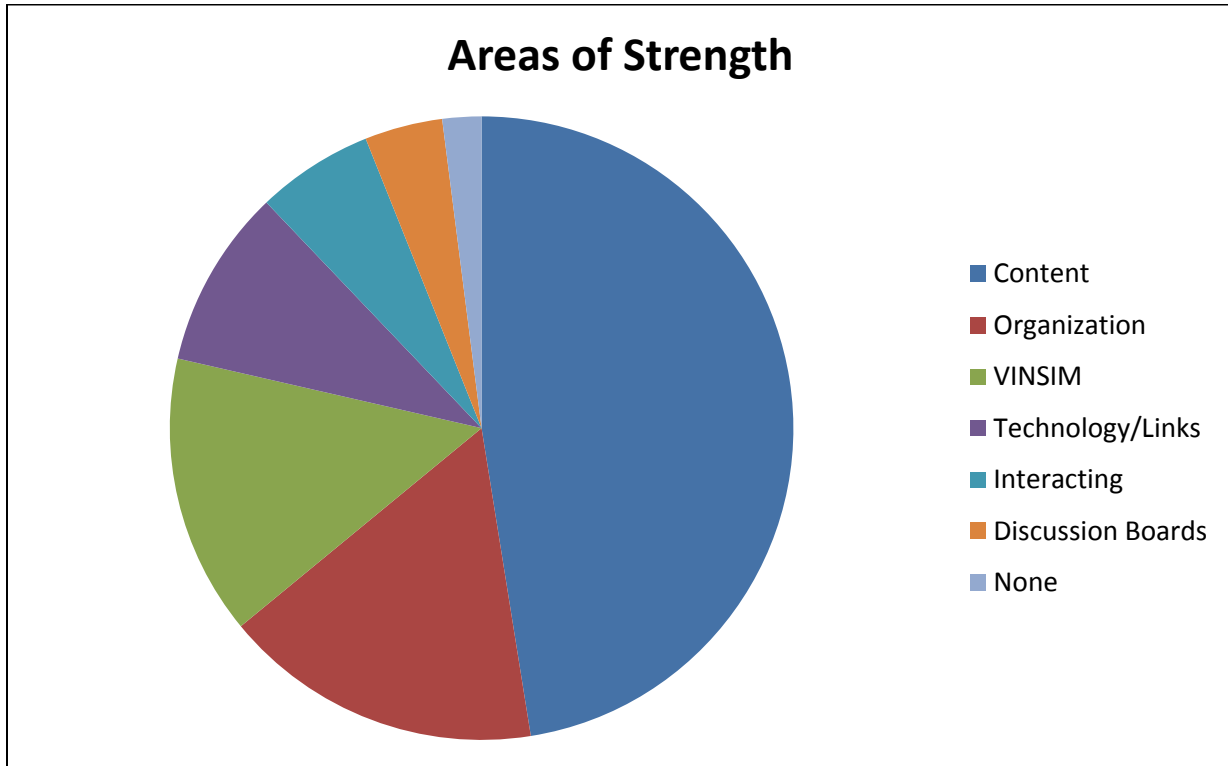
Interacting with other students (6%)

- Great to hear and learn different points of view of other professions

Discussion boards (4%)

- Provided opportunities to share and provide real world perspectives

No Strengths (2%)



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