

B230 Developmental Issues in Health
Assessment of Breadth of Learning- General Education Principle 4- Diversity

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Introduction

B230-Developmental Issues in Health is an introductory nursing course designed to educate first year nursing students on the theoretical perspectives of growth and developmental issues across the lifespan. Additionally, this course evaluates the influence of culture and diversity on health care decision-making, family patterns, and the aging process. Traditional nursing students are required to take the course in the second semester of their sophomore year.

In the spring of 2013, I conducted a study on the knowledge, perception, awareness, and comfort level of students on issues related to diversity awareness. Students were evaluated using a variety of assessment methods (test questions, short answer discussion questions, and service learning activity).

Purpose

A moderate portion of the course is related to the concepts of culture and diversity and was chosen as the nursing course for evaluation of general education principle 4 on diversity awareness. This report will outline the strategies, methods, and evaluation criteria for assessment of learning about concepts related to diversity and cultural awareness.

The definition of diversity identified by IU Northwest is:

- Valuing the diversity of human experience, as exemplified in race, ethnicity, social class, language, religion, gender, sexual orientation, age, or disabilities; understanding how these categories are often used to create injustice; recognizing our common human heritage and the interconnectedness of communities in the region, the nation, and the world.

Students completing a degree at IU Northwest are expected to:

- Demonstrate understanding of cultural diversity in a variety of contexts.
- Demonstrate understanding of the relationships between social structures, social justice, and human rights.
- Demonstrate understanding of racial minority experiences and diverse worldviews and the manner in which they shape U.S. culture and the world.

Methods

First year baccalaureate nursing students (n=64) were assessed on their knowledge, awareness, and perception of cultural diversity using the following methods:

- Pre/Post course survey
- Formative/ Summative test questions and assignments
- Community Based Service Learning Activity
- Short answer discussion questions

A variety of methods were chosen due to the varied experiences of the class, learning methods reported by students, and course content. The assessment methods were embedded into course material for ease of student use and comprehension. Quantitative data were analyzed using descriptive statistics and qualitative data analyzed using content analysis.

Pre/Post Course Survey

The pre/post course survey (See Appendix A) was delivered to the students prior to the start of classes. The survey was created and delivered via Oncourse Tests and Surveys and was a seven question, 5-point Likert scale (SA, A, U, D, SD) that asked about:

- Confidence in knowledge of culture in diverse settings
- Comfort level getting to know other races

- Impact of culture on delivery of nursing care

Student submissions were anonymous and data were collected from December 15th 2012 to January 17th 2013. All data were exported to excel and evaluated using descriptive statistics.

Formative/ Summative Test Questions and Assignments

Students received course content related to the influence and delivery of culturally sensitive and aware nursing care. This included completion of a required Culturally Competent Nursing Care online course (See Appendix B) that was offered by the U.S. Department of Health and Human Services- Office of Minority Health. The online course included 6 modules in which participants gain cultural insight and use case studies to practice the delivery of nursing care with culturally diverse people in a variety of settings. Students were able to complete this required assignment over the duration of the entire spring semester. Each module included pre/post test material and students received a total of 30 points (out of 1000) for completion of all 6 modules.

Enrolled students also received diversity specific test (See Appendix C) questions via quizzes (10) and exams (5). The test questions evaluated concepts related to:

- Stereotyping
- Cultural Competence
- Ethnicity
- Ageism
- Racism
- Diversity
- Homosexuality

- Sexism

Additionally, students worked together in learning teams of 6-7 complete a series of discussion questions (See Appendix D) related to course content. They were able to choose one of 2-3 discussion questions (DQ's) for completion using a rubric (See Appendix D) to craft their response and reflections on principles of social justice and culturally competent nursing care.

Community-Based Service Learning Activity

While working within their small learning teams, all students were expected to collaborate with a local community (or campus) based agency over the entire spring semester to create and deliver a health promotion activity. The activities and agencies varied in terms of client culture, settings, and diversity of participants. At the end of the semester each team was required to present (See Appendix E) their project and address:

- Their improved understanding of cultural diversity in a variety of contexts.
- Their improved understanding of the relationships between social structures, social justice, and human rights.

Results

Pre/Post Course Survey

Upon course delivery 91% of enrolled students either agreed or strongly agreed that they felt confident in their knowledge on the delivery of culturally sensitive care in diverse settings. After completing the course, 82% either agreed or strongly agreed about their confidence level. This suggests that the course materials and activities challenged initial perceptions of awareness and abilities related to diversity. Students possibly developed a renewed “reality” or “awareness” of limitations and biases.

Ninety six percent of students reported lack of discomfort when getting to know someone of another race (vs. 91% at course onset). A small percentage of students (7%) reported feelings of discomfort when getting to know someone from a race other than their own. After completion of the course, this number decreased to 2%.

When asked about feelings of discomfort while working with patients of other racial groups, 18% of students either agreed or strongly agreed they felt uncomfortable prior to course delivery. After course completion, only 3% of students reported these feelings of discomfort.

At the onset of the course 86% of students reported they either agreed or strongly agreed they currently (prior to course delivery) possessed enough knowledge about other cultures to provide adequate care. After completing the course readings, activities, tests and projects, only 32% of students reported they had enough knowledge. This suggests increased awareness of their own limitations and knowledge and a need for continued education related to culture and diversity.

Formative/ Summative Test Questions and Assignments

Quiz and test questions related to diversity were delivered over the entire semester. Due to attrition and one student not completing the Culturally Competent Nursing Care modules, 62/ 64 (97%) students completed all exams, quizzes, and course materials. Grade distributions were as follows:

A+: 0	A: 0	A-: 0	W: 1
B+: 1	B: 3	B-: 20	I: 0

C+: 24	C: 10	C-: 0	S: 0
D+: 0	D: 0	D-: 0	F: 4

Two DQs questioned students about their perceptions of social justice and cultural competence. Although they had a choice of three DQ's, 50% (5 out of 10) of the Learning Teams chose to respond to a DQ about the importance of culture in nursing. The major themes from the students' postings include:

- Role and responsibility of the nurse
- Using culture to understand and affect health
- Recognize his/her own biases

One team of students wrote:

“Nurses are in a unique position to not only help their patients experience physical relief due to illnesses, but also connect on a level that reaches into the core of the person. This encompasses being sensitive to cultural differences and taking care of each patient effectively without any bias to different ethnic, cultural, or heritage backgrounds. We believe the overall understanding of this concept will develop with experience” (unidentified nursing student, Spring 2013)

When answering the DQ about the influence of social justice the top common themes/phrases that emerged from the initial postings were:

- Equality
- Justice and human rights
- Chronic disease and illness

- Reduction of health disparities

Students shared personal reflections of injustice and beliefs in the responsibility of the health care system for improved awareness and increased action.

Community Based Service Learning Activity

Student presentations occurred at the end of the spring semester and each presenting team (100%) was able to address and give a specific example of improved understanding of cultural diversity and the relationships between social structures, social justice, and human rights. One student dropped the course due to a failing status at midterm but 98% of enrolled students completed the activity with an average score of 49/50 possible points.

Discussion

If students are more personally aware of their own limitations, perceptions, and abilities they might be more inclined to have increased exposure to other cultures and diverse settings. Coming into the course many students verbalized their concerns about needing to learn “more culture” and why is there such a big focus on the subject. However, these results show that students (as well as others) may have preconceived ideas, biases and other issues related to diversity awareness that might go unnoticed if not given the opportunity to become enlightened.

Limitations

This course is traditionally a difficult and transition course for new nursing students. For spring 2013, the course was redesigned from a fully face-to-face option into a hybrid model where all course content was delivered online (recorded lectures, videos,

etc.) and class time was devoted to active learning processes. As this was the first offering of the redesigned course, it may have had some negative influence on student results.

Plans for Future Delivery

Student feedback was encouraging and classroom discussions were very active. Although I intend to maintain the variety of assessment measures, I plan to change some of the pre/post questions for improved specificity. I also plan to include more specific summative questions related to culture and diversity.

Appendix A
Pre/ Post Course Survey Questions

1. Please rate your past experience in providing culturally sensitive care to diverse persons in diverse settings?
 - a. Strongly Disagree
 - b. Disagree
 - c. Undecided
 - d. Agree
 - e. Strongly Agree

2. Getting to know someone of another race is uncomfortable for me.
 - a. Strongly Disagree
 - b. Disagree
 - c. Undecided
 - d. Agree
 - e. Strongly Agree

3. My prior experiences have offered me a clear understanding of the impact of culture on healthcare decisions.
 - a. Strongly Disagree
 - b. Disagree
 - c. Undecided
 - d. Agree
 - e. Strongly Agree

4. I believe my cultural awareness will impact the nursing care I provide to others.
 - a. Strongly Disagree
 - b. Disagree
 - c. Undecided
 - d. Agree
 - e. Strongly Agree

5. I feel uncomfortable working with patients of racial groups different than my own.
 - a. Strongly Disagree
 - b. Disagree
 - c. Undecided
 - d. Agree
 - e. Strongly Agree

6. I believe I currently possess enough knowledge about other cultures to adequately provide nursing care.
- a. Strongly Disagree
 - b. Disagree
 - c. Undecided
 - d. Agree
 - e. Strongly Agree

Appendix B

Culturally Competent Nursing Care Online Course

U.S. Department of Health & Human Services
Office of Minority Health

www.hhs.gov
minorityhealth.hhs.gov

Culturally Competent Nursing Care: A Cornerstone of Caring

TCH Home Course Home Credit Info

Course Login

New Users
[Register Here](#)

Returning Users
Username:
Password:
[Forgot Password?](#) [Login](#)

Getting Started

- Technical Requirements
- Help / FAQs

"Providing effective and respectful nursing care to our country's increasingly diverse population is of paramount importance to the ANA. The OMH curriculum offers nurses the most comprehensive program regarding culturally competent nursing care."

Rebecca M. Patton, MSN, RN, CNOR
President, American Nurses Association

Why Culturally Competent Care?

Have you ever experienced a situation where you were unsure about the best way to approach a patient and family because of racial or ethnic concerns? Was there ever a time when language differences prevented you from effectively communicating with a patient?

You play a very important role in the health delivery system. Nurses spend more time in direct patient care than other groups of health professionals and are employed in a variety of settings. Increasingly diverse racial, ethnic, and sociocultural backgrounds of patients, colleagues, and staff may present challenges to you as you strive to provide care. Cultural and language differences may engender misunderstanding, a lack of compliance, or other factors that negatively influence clinical situations and impact patient health outcomes.

Cultural competence

is a set of behaviors, attitudes, and skills that enables nurses to work effectively in cross-cultural situations (OMH Web site).

Case Highlights


vu nguyen
A 17-YEAR OLD VIETNAMESE MALE WHO IS HIV POSITIVE AND HAS BEEN TAKING HERBAL REMEDIES.

Vu Nguyen is being treated for HIV. The patient and his family showed

Cultural Insight

Asian and Pacific Islander cultures, among others, use traditional therapies including acupuncture to treat illness (Kaiser Permanente, 2003).

Why Use this Web site?

The Culturally Competent Nursing Modules (CCNMs) were developed to effectively equip you with awareness, knowledge, and skills to better treat your increasingly diverse patient population.

The CCNMs include an Introduction

[email a colleague](#)

Appendix C

Culture and Diversity Test Questions

1. If a healthcare provider fails to order a test or screening because he assumes that a female patient must have already had one is engaging in:
 - f. Gender discrimination.
 - g. Cultural formulation.
 - h. Cultural pain.
 - i. Gender formulation.
 - j. None of the above. x
2. Homosexuality is:
 - k. A mental illness, according to the DSM-IV.
 - l. A treatable medical condition.
 - m. A type of sexual identity. x
 - n. An expression of cultural pain.
3. Members of the LGBT population sometimes avoid seeking medical care because:
 - o. They believe in and practice homeopathic healthcare.
 - p. Of insensitivity and discrimination among some healthcare workers.
 - q. They tend to be healthier than members of the general population.
 - r. They discriminate against non-LBGT healthcare workers.
 - s. None of the above. x
4. Social scientists believe that racial identity is socially constructed through
 - t. Political and legal institutions.
 - u. Economics.
 - v. Social organizations.
 - w. Scientific institutions.
 - x. All of the above. x
5. Immigration and birth rate statistics suggest that cross-cultural encounters between and among patients and healthcare workers are expected to:
 - y. Decrease.
 - z. Stay about the same.
 - aa. Increase slightly.
 - bb. Increase greatly. X
6. Cultural Matching Exercise

Stereotyping
Cultural Competence
Ethnicity
Race
Culture
Diversity
Homophobia
Sexism
Racism

- A. The ability to interact effectively with people of different cultures. Comprises an awareness of one's own cultural worldview, attitude towards cultural differences, knowledge of different cultural practices and cross-cultural skills. (Cultural Competence)
- B. A set of beliefs, behaviors, and interactional patterns that identify a person with a larger social or ethnic group. (Culture)
- C. The belief that race is the primary determinant of human traits and capacities and that racial differences produce an inherent superiority of a particular race. (Racism)
- D. Fear or hatred of, aversion to or prejudice and/or discrimination against people who are homosexual. (Homophobia)
- E. The belief in the inherent superiority of one sex (gender) over the other and thereby the right to dominance. (Sexism)
- F. One of four groups: White; Black; American Indian and Alaska Native; and Asian and Pacific Islander. (Race)
- G. Occurs when we use misinformation to judge everyone who belongs to a specific group. (Stereotyping)
- H. Selected cultural and sometimes physical characteristics used to classify people into ethnic groups or categories. American ethnic groups include Native Americans, Hispanics, Indians, Latinos, Chinese, African Americans, European Americans and so on. (Ethnicity)

Appendix D

Discussion Questions and Rubric

1. Explain how the principals of social justice and human rights protection reduce health disparities.
2. What is your definition and description of a culturally competent nurse and how do you believe that might impact the level of care provided to patients, families and communities?

Rubric

The forum is open Sunday 8a through Saturday 5pm. Comments posted outside of these parameters will not count toward DQ points.

Online Postings/ Discussion Boards

Substantive responses are required when responding to online postings. Substantive comments are those that aid in clarifying course concepts and their applications. In other words, you must send in messages demonstrating your regular analyzing, and reading of others' notes. Your messages must add value to the collective learning experience; this would consist of new ideas, your perspectives, pointed follow-up questions, etc. A message, which says simply, "I agree", for example would not constitute participation, since it does not add anything of substance to the discussion. Submissions of at least two (2) references are required to support your substantive post. APA format is expected and required. ***As a learning team answer 1 of 3 discussion questions (DQ). There should be only 1 answer per team! You are responsible for your own 2 follow up responses.***

CATEGORY	Well distributed (2 points)	Somewhat distributed (1 point)	Not distributed (1 or less points)
Replies to peers:	2 or more replies well distributed throughout the week. At least one reply per day for 2 or more days. Posts are substantive (100+ words), contribute to discussion, and are professionally presented.	1-2 replies, somewhat distributed throughout week (1-2 days). Posts are mostly substantive (<100 words), sometimes contribute to discussion, and are professionally presented.	1 or no replies not distributed throughout week (all posted on one day). Posts are not substantive, may not contribute to discussion, and are not always professionally presented
CATEGORY	Excellent contribution (6-8 points)	Good contribution (4-6 points)	Below standard contribution

			n (3 or less points)
Team DQ Answers:	<p>Clearly understands concepts and incorporates them in discussion.</p> <p>Advances discussion with questions, sharing of resources, and/or personal experiences/examples.</p> <p>Presentation of answer is professional looking with no grammatical or spelling errors. Text is divided into easy to read paragraphs and may have headings.</p> <p>Length: 100 words or more</p>	<p>Somewhat understands concepts and incorporates them in discussion</p> <p>Includes examples and real life examples; may not be completely related and question may not be completely answered.</p> <p>Presentation of answer is somewhat professional looking and has a few grammatical errors</p> <p>Length: 51-99 words</p>	<p>Not evident concepts are understood. Responses have little to do with concepts. Does not advance discussion. Presentation of answer is not professional looking and has quite a few grammatical errors.</p> <p>Length: 25-50 words</p>

Appendix E

Community Based Service Learning Activity Presentation Rubric

Title	Points	Total/ Comments
Learning Team Charter	1	
Project Planning Sheet	1	
Comprehensive Care Plan	10	
Class Presentation: Please include the following information in the presentation material: <ul style="list-style-type: none"> • Your improved understanding of cultural diversity in a variety of contexts. • Your improved understanding of the relationships between social structures, social justice, and human rights. 	10	
Learning Team Updates	3	
Project Summary	5	
Health Assessment/ Promotion Project Completion	50	
Learning Team Evaluation (minus 2 points for missing individual form)	20	
TOTAL	100	

Comments: