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**Enriching the First-year Curriculum of Students
 in Health Sciences at Stellenbosch University
 with a module on personal and professional
 development**


Prof Charl Cilliers, Ms Carey Bremridge and
 Dr Hannie Menkveld
 Centre for Student Counselling and Development,
 Stellenbosch University


**Introduction: contextualisation
 and actualisation**

The need for ...

- Demand to deliver optimally prepared graduates
- Demand to address high drop-out rates
- The above sounds logical, yet in general ...”the academic community does not share a common understanding of graduate attributes as the core outcomes of university education” [Barrie, SC, 2006. Higher Education 51:238]
- Shortage of focused research in this area [Gilbert, R et al, 2004. Higher Education Research and Development 23(3):386]
- ∴ literacy > numeracy > operacy


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The present reality

- Traditional narrow “academic focus”
- Neglecting the “whole student”
- Neglecting “what makes a good student and employee”
- Often second rate attempts towards....


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**The subsequent two phased
 response of one faculty** (funded by FIRLT)

- Integrated approach
- Pilot study in 2007 in the Extended Degree Programme
- Formal study in 2008 to equip all first year students with selected personal and professional development skills

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**OBJECTIVE,
 CONTENT,
 CONSTRAINTS AND
 LESSONS LEARNED**

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OBJECTIVE: SOFT SKILLS-

PUTTING FLESH ON THE
 SKELETON

OR

CEMENT BETWEEN THE BRICKS



CONTENT

Objective

After this module you will be equipped with the knowledge, skills and attitude to be a successful health science practitioner.

Session Date	Topic	Assessment
1. 26.02.2008	The demands of University study	
2. 04.03.2008	Class attendance and motivation	
3. 11.03.2008	Stress management	class test
4. 18.03.2008	Study skills	
5. 01.04.2008	Preparing for tests and exams	
6. 08.04.2008	Time management	assignment
7. 15.04.2008	Learning styles	assignment
8. 22.04.2008	Substance abuse and HIV/AIDS	
9. 29.04.2008	Interpersonal relations	assignment
10. 06.05.2008	Leadership and diversity	assignment
		EXAM

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REALITY CONSTRAINTS

- Size of class (± 360)
- Medium of instruction
- Lack of student-student and student-lecturer interaction
- Result: lack of optimal teaching for transfer [Billing, D, 2007. Higher Education 53:483]

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LESSONS LEARNED

LARGE CLASS FORMAT OF 360 students DOES NOT OFFER SATISFACTORY OPPORTUNITY FOR ACTIVE LEARNING AND PARTICIPATION

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CONE OF LEARNING

WE TEND TO REMEMBER OUR LEVEL OF INVOLVEMENT
(developed and revised by Bruce Hyland from material by Edgar Dale)

10% of what we read	READING	Verbal Receiving	P A S S I V E
20% of what we hear	HEARING WORDS		
30% of what we see	LOOKING AT PICTURES	Visual Receiving	A C T I V E
	WATCHING A MOVIE		
50% of what we hear and see	LOOKING AT AN EXHIBIT		
	WATCHING A DEMONSTRATION	Receiving and Participating	
70% of what we say	SEEING IT DONE ON LOCATION		
	PARTICIPATING IN A DISCUSSION	Doing	
	GIVING A TALK		
90% of what we both say and do	DOING A DRAMATIC PRESENTATION		
	SIMULATING THE REAL EXPERIENCE		
	DOING THE REAL THING		

Edgar Dale, Audio-Visual Methods in Teaching (3rd Edition). Holt, Rinehart, and Winston (1969).

This could, therefore, not happen:

School: Teacher gives, drives performance
University: YOU have to get, take from lectures

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“(We) learn best by getting engaged with the new information, by talking about it, using it, making sense of it, and filing it in handy places for future use.”

[Norris, Joye A. 2003. From Telling to Teaching: A dialogue Approach to Adult Learning, North Myrtle Beach: Learning by Dialogue.]



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MUST CONTEXTUALISE THE INFORMATION FOR FUTURE USE IN THEIR OWN MEDICAL PRACTICE

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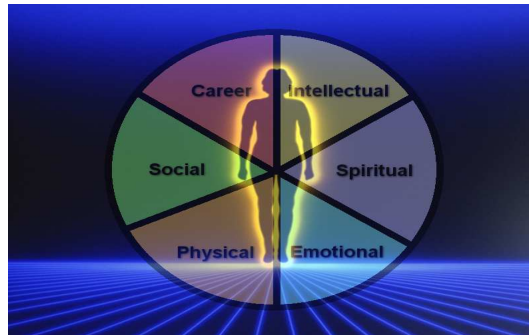
FEAR OF HIV / AIDS occupational exposure and interaction with patients IN PRACTICAL SETTING OF HOSPITAL = REALITY must contextualise and decrease fear & decrease discrimination and stigmatisation of HIV and AIDS patients

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A MODEL THAT CAN BE APPLIED TO THEIR OWN LIVES AND TO THAT OF FUTURE PATIENTS

WELLNESS MODEL AND SALUTOGENIC VS PATHOGENIC



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SOME TOPICS COVERED PREMATURE AND SOME ESSENTIAL FOR THE FIRST YEAR EXPERIENCE

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Topic of Leadership can be covered at a later stage of the curriculum but extra-mural societies, sports involvement should be encouraged

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ALCOHOL AND SUBSTANCE USE AND ABUSE

A reality that needs addressing on first year level ON ALL SOUTH AFRICAN CAMPUSES- "WINE-DRINKING IS A TRADITION IN THE BOLAND WINE REGION" is a socially sanctioned message that MOST MATIES are frequently exposed to.

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MUST KEEP IT FUN AND CREATE MOMENTS FOR LAUGHTER

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- When people laugh and have fun, they release chemicals in the brain that affect learning in a positive way. According to the research of McNamara and Skelton, there is a specific neurochemical basis for learning and memory. From: McNamara, R. K. and R. W. Skelton. "The Neuropharmacological and Neurochemical Basis of Place Learning in the Morris Water Maze." *Brain Research Reviews* 18.1 (1993): 33-49
- O'Keefe and Nadel were instrumental in establishing the role of the hippocampus in emotions and learning and suggested that positive emotions allow the brain to manufacture better cognitive maps. In other words, when we feel good we can learn better and enhance our memory. From: O'Keefe, J., and L. Nadel. *The Hippocampus as a Cognitive Map*. Oxford: Clarendon Press, 1978

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Learning or Teaching errors?

- Teacher: What is the chemical formula for water?
John: "HIJKLMNO"!!
Teacher: What are you talking about?
John: Yesterday you said it's H to O!
- Teacher: John, go to the map and find North America.
John: Here it is!
Teacher: Correct. Now, class, who discovered America?
Class: JOHN!
- Teacher: How can you prevent diseases caused by biting insects?
John: Don't bite any.
- Teacher: John, your composition on "My Dog" is exactly the same as your brother's. Did you copy his?
John: No, teacher, it's the same dog!
- Teacher: What do you call a person who keeps on talking when people are no longer interested?
John: A teacher

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Research Project

Phase One: Preparation

- Pre- and post-questionnaires
- 65 Multiple choice questions
- Content: attitude; behaviour and knowledge
- Completed electronically

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Phase Two: Presentation of theme 4 of the module

- Observation by investigator
- Tasks and exams: Read through a random sample of the work

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Phase Three: Focus group interviews

- Lecturers involved in other themes of the module (their perceptions)
- Senior students (the need for such a theme)
- Present students (the impact of the theme)

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Main generic findings

- **Classes too big**
More group work; interactive tutorial sessions where we can apply what we have learnt.
- **Methodology and content**
We need more time to learn and participate. I feel that this module should be taught at a later stage. Very interesting.
- **Present students do often not see the need for the module**
The module has too many assignments. The module to me seemed highly unnecessary.

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Results of questionnaires

Attitude changes: significant

- Students spend more time on studying and self study
- Students need more help with study skills, time management, stress management, interpersonal relationships and personal management

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- **More help needed with wellness issues**, i.e. deep learning, support of family and feeling over-whelmed
- **Lower perception** of academic abilities, emotional health, confidence in intellectual abilities, perseverance, self-knowledge, research, problem solving and critical judgement of information

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Behaviour changes: significant (Negative changes)

- Less reading through notes after classes
- Less sleep
- More socialising
- Less understanding of what success at the university means

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Knowledge changes: not significant

- Average pretest: 57.67% (n=170)
- Average posttest: 56.14% (n = 170)

Pilot Study (2007) with 24 EDP students:

- Average pretest: 56%
- Average posttest: 65%
- Significant difference
- Possible reasons: Organisational structure, content and methodology

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Main recommendations

- Adapt organisational structure and methods
- Reduction of content
- Attend to overlaps and deliberate linkage with other themes and modules
- Deliberate teaching for transfer
- Pay attention to the whole person (holistic teaching)

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Any questions?



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Thank you
Dankie
Enkosi



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