

## **FINAL REPORT: 2021-2022 CATL DIG supporting SHS Interprofessional DEI Initiatives**

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### **Purpose of the Grant**

The purpose of this project was to explore the literature guiding best practices for co-curricular interprofessional learning related to the concepts of diversity, equity, and inclusion within healthcare provider academic programs. The hope of the team was to incorporate lessons learned into an engaged learning activity for students in the School of Health Sciences, focusing on improving health equity through collaboration and cultural humility.

### **Background/Pedagogical Issue**

Across the United States, health professions cohorts are white and gender conforming, while the general population is much more diverse and health equity amongst underrepresented minorities is not improving. To address these issues, many universities are adding diversity, equity, and inclusion (DEI) staff into their institutions to encourage the integration of DEI into classrooms and learning for all students. However, creating inclusive classrooms and collaborative learning environments is challenging without marginalizing or alienating those intended to be served.

The Health Professions Accreditors Collaborative (HPAC) encompasses the accrediting bodies of all programs in the School of Health Sciences. In 2019, the HPAC provided a shared framework regarding the need for interprofessional collaboration amongst our learners, and guidance on how to generate these initiatives in a way that makes meaningful connections between collaborative practice and the interprofessional education collaborative (IPEC) competencies that include the following: values/ethics, roles/responsibilities, teams/teamwork, and communication. This work at Elon SHS is just beginning, making this the perfect time to establish an evidence-based activity that initiates a school-wide curricular commitment to infusing diversity, equity, and inclusion in each program with a goal of graduating healthcare professionals who have the skills to bridge health and healthcare disparities.

A review of best practices of DEI in an interprofessional context supports both the interprofessional collaboration needs of the program, as well as the development of skills (understanding of perspective/values/ethics of others, respectful communication, interpersonal skills, etc.) needed to provide patient-centered healthcare.

## **Project Overview**

The literature review revealed the importance of students having an opportunity to explore their personal and professional identities. To facilitate this opportunity, the team held a 2-hour interprofessional seminar with 99 health professional learners called “Professional Identity and Me” (see also photos in Appendix A). During the seminar, the students were encouraged to participate in open dialogue around identities both personal and professional. The team then encouraged the students to create a “mask” to reveal any part of their identities they wanted to share with others. Dan Reis from the Elon Maker Hub was invited to share all the creative opportunities waiting for our students in his facility. After the seminar, the students were provided four (4) weeks to complete their masks and submit them, along with a brief descriptive card for a Mask Reveal Gallery Walk.

## **Methods**

After a scoping literature review (above), a Logic Model was utilized for the design of this project (see Appendix B). The assumptions were evidence-based, resources were explored in advance, and objectives (outcomes) were written to accompany expected products (outputs). These expected outputs drove the measurement tools utilized to ensure the impact was attainable.

### *Part 1-Professional Identity Mask-Making*

Based on the intended project outcomes, a mixed methods approach was utilized. Quantitative and qualitative data was gathered for the Professional Identity and Me activity utilizing a Qualtrics pre- and post-surveys that included reflective open-ended questions. The pre-surveys were reviewed prior to the event to help direct conversation. The post-surveys were analyzed by two participating faculty after the event for themes.

### *Part 2: Mask Reveal Gallery Walk*

The IPE activity concluded with a Mask Reveal Gallery Walk event (Part 2). Masks were displayed throughout the School of Health Sciences building. Participants reviewed descriptions of each mask and engaged in conversation regarding the impact of viewing others' revealed identities for additional qualitative feedback. To provide additional incentive for participation, participants were also asked to identify three masks that resonated with them, and then turn their responses in to the facilitation group. (See Appendix C). From the 50+ responses, we randomly drew two names and awarded them a \$50 gift card to the campus bookstore.

## **Outcomes**

### *Part 1-Professional Identity Mask Making Activity*

The pre-event reflective exercise revealed common concerns of sharing one's authentic self with colleagues. The post-event reflective exercise revealed various positive takeaways including finding unexpected commonality/similarity, a new appreciation for humble inquiry, a value of the diversity of backgrounds, identification of shared goals, taking time for introspection, and validation. Students also noted the early introduction to IPE and collaborative care as positive and desired. Quantitative results identified most students would promote this event to others and the objectives of the event were met.

### *Part 2: Mask Reveal Gallery Walk*

Fifty-seven students presented completed masks with accompanying cards for the art installation. When the display is removed, the reflective descriptions that accompany the cards will be further reviewed by this research team.

## **Reflections and Conclusion**

The mask making proved to be a positive first step towards a scaffolded curriculum dedicated to DEI. The follow up "reveal" allowed students, faculty, and staff to find connectedness within our learning space. The timing of the event (early) and intentional

interprofessional teams were crucial. Lessons learned include a plan for additional buy in from all disciplines, class requirement for mask completion, and better timing of the post-survey.

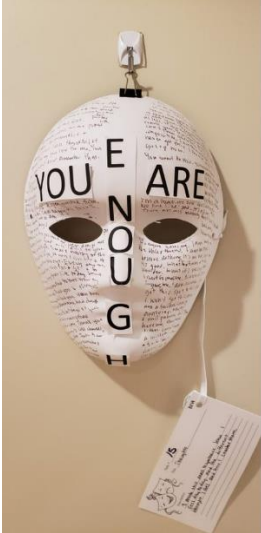
Appendix C offers insight into the feedback collected from the students after the seminar. Results show that students were satisfied with the presentation and activity. The open-ended comments reveal their appreciation for the opportunity to explore their identities and how that impacts them as future healthcare providers.

Moving forward, the team plans to integrate this event into the annual curriculum each January. During that time, we have decided to increase the length of the seminar to three hours based on the feedback from the students. We also plan to pre-schedule several dates with the Maker Hub so that our students can sign up in advance to attend them. The team even has plans to host a follow-up activity that would allow the students the opportunity to reflect on how their identities may have changed or evolved since the beginning of the year. This interprofessional activity would also encourage conversation around what identities not previously revealed and why.

## Key Citations

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**Appendix A: Photo documentation of the Professional Identify Seminar (1/7/2022) and Mask Reveal Gallery Walk (2/14/2022)**



**Appendix B: LOGIC MODEL FOR SHS CATL DIVERSITY AND INCLUSION GRANT 2021-2022**

**Planned Work**

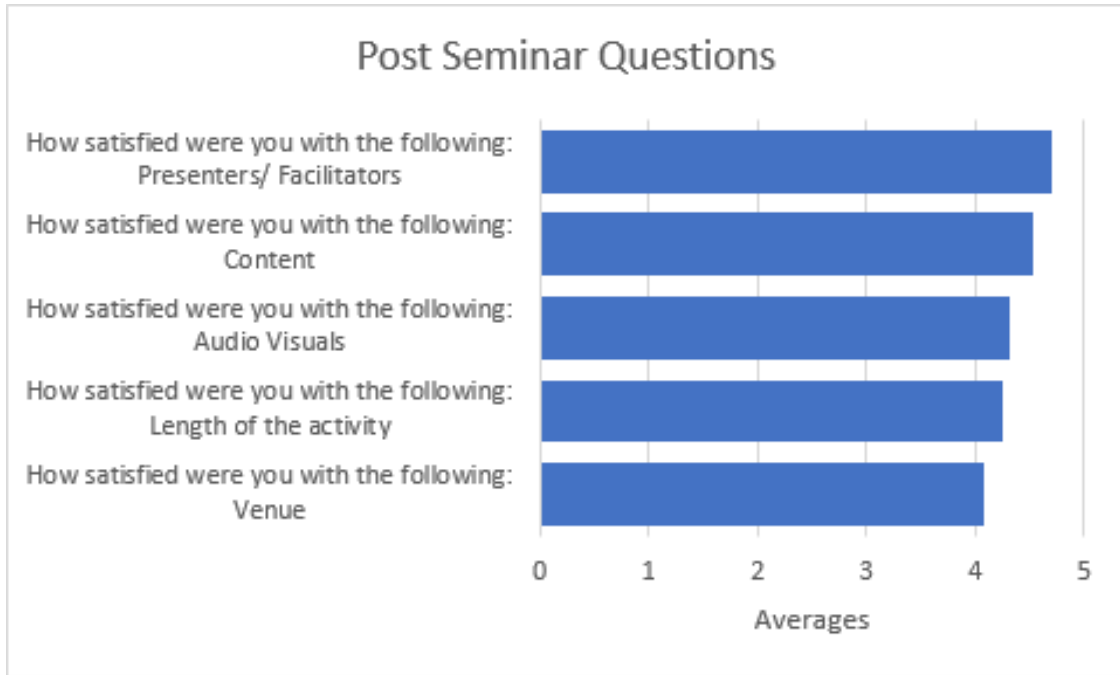
Assumptions (from lit) re: cultural humility, inclusivity, IPE	Resources/Inputs	Activities
reflection is key scaffolding is key	Stokes Morris	1) Pre-event reflection (survey) followed by 2) a 2 hour interprofessional event in the Moseley Center (99 students). Goals for the day: General overview of "identities" in the room, quick IPE (values/ethics) connector, 30 min "level-setting" activity; mask making activity, wrap up with one question reflection (e.g. minute paper)
mask-making is effective re: identity	Buggs Skillmann DiBiasio	
schedules will coordinate	DPT1 students	
we will have buy-in from SHS	ABSN students	
students have time (we have time)	PA1 students	
orientation is the right timing	Space for 99	
central campus connection valued	Supplies  Maker hub  Time	2) A "reveal" event. Who is behind the mask.

**Intended results**

Outputs (tangible, immediate)	Learning objectives	Outcomes (measurable)	Impact
Personal pre-reflection Personal mask Personal post-reflection	<i>Students who complete this interprofessional activity should be able to:</i> 1) <i>self-reflect on their personal identity as new health professionals</i> 2) <i>Identify connections between personal identity and the values/ethics of others</i>	Reflections (qualitative) data pre-/post-	Students with an understanding of self- are primed to understand others, thus on the road to providing patient-centered care
Masks on wall Completed index cards	<i>Students who complete this interprofessional activity should be able to:</i> 1) <i>Recognize the complexity of personal values and ethics</i> 2) <i>Potentially identify a colleague with whom they can relate/connect</i>	Reflections (qualitative) re: meaning as turn masks in  Card with "similarities"	Students who feel seen/find those with shared values are more confident, less likely to feel isolated, more likely to succeed. This could assist with "connection" to Elon and the student community here.

**Appendix C: POST-activity Quantitative and Qualitative Feedback Samples**

**Post Survey Response Sample (Quantitative)**



**Post Seminar Qualitative Response Samples**

What was the most impactful learning experience or personal "take away" from your participation in this activity?
I think across the board this event only confirmed what I had already began to notice which is <i>the ability of the students in the health science building to relate and speak to others despite social, cultural, and other differences. I was explaining to my mother after the event that my undergraduate experience was very much not that way; there were many people I knew I had to filter conversations with because they were unable to adapt or participate.</i>
We are not in a competition. We all have <i>one goal in mind</i> which is to provide compassionate care to our patients.
I got a lot out of finding similarities with those around me. <i>I had so many different types of people at my table (ethnicity, age, background, etc.) and it was so cool to find something I had in common with everyone!</i>
<i>That all of us bring different ideas and experiences to the healthcare field and that we must use "humble inquiry" with our patients.</i>
Seeing how <i>IPE initiatives are being implemented in medical education to be the change in the healthcare system.</i>
I was surprised by the number of students who identified as religious but were afraid to disclose that to others. I think that speaks on the need for <i>further inclusivity</i> among our own class.



I really enjoyed the main topics we addressed and discussed during the presentation. I think *it made me dissect inner stigmas and preconceived notions I wasn't fully aware about.*

Learning *more about myself and what is most important to me* to present

The feeling of *validation* after what others had to share in response the survey questions about what we would like others to know about us. *I found commonalities in ways I never thought I would.*

That although we all have different backgrounds and experiences, *there are a lot more things I have in common with everyone in that room than I would have ever realized*

### Is there anything else you would like to share with us?

Thank you for taking the time to speak with us openly today. I personally have been through many medical appointments where I was not believed and it could have easily lead to my death. I had cancer when I was 16 and the first couple doctors that I saw didn't believe the level of pain I was in and shrugged off the symptoms I was experiencing. It took finding a doctor that believed me that called for an MRI to actually discover the cancer. *Not believing patients seems to be rampant in our medical system and I am glad we touched on that today.*

The comment about being an introvert that desired relationships was mine- *I appreciate the validation and the spark it seemed to ignite among others.* It's something I've struggled with for a while amongst other things, including an anxiety disorder which I've been professionally treated for (Zoloft, hydroxyzine, etc), although it may be surprising if you've interacted with me before. As I'm starting my graduate school experience (with medical advice of course) I'm trying to come off of the medication route due to side effects and trying to be more "me" during this time. *During this journey, validation like today is really encouraging, so thank you! Talking about things like this in an anonymous space where no one looks at you differently is very liberating, so thanks for that, too. :)*

*In addition to the word map of what we would like to be called, I think you should include a word map from what we have noticed of our fellow students in the first week* (given that this event continues to happen at the end of the first week). I think this would be pleasantly surprising, because I know that personally I have already been able to identify some very admirable actions/characteristics of my fellow PT students.

*This mask project has really challenged me to be creative, which is something that I've deprioritized in favor of academic achievement.* I'm enjoying the opportunity to create art, and to reflect on my current and future professional identity.

I think this was a *really important starting place for these conversations, and I am thankful that I was able to be apart of it.*