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# INTERNATIONAL EDUCATION FOR MEDICAL STUDENTS: AN INTERNATIONAL PROGRAM DESIGN IN PUBLIC HEALTH

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*SIT Graduate Institute*

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INTERNATIONAL EDUCATION FOR MEDICAL STUDENTS: AN  
INTERNATIONAL PROGRAM DESIGN IN PUBLIC HEALTH

Program Design Course-Linked Capstone

Elizabeth Tyrie  
PIM 75

A Capstone paper submitted in partial fulfillment of the requirements for a Master of  
International Education at SIT Graduate Institute-  
Brattleboro, Vermont, USA

Capstone Seminar Start Date August 2017  
Advisor: Raymond Young, Ed.D

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Student name: Elizabeth Tyrie      Date: August 12, 2017

### **Abstract**

*Cultural Perspectives in Public Health: An International Education Program for Medical Students* proposes a six-week international mobility course for medical students at Università Cattolica del Sacro Cuore. The course design responds to a request from the UCSC medical student cohort to expand credit bearing international program opportunities. The program will introduce participants to Kolb's (1984) experiential learning cycle in an effort to provide students with a framework to use when evaluating common practices in the medical field. The course aims to increase academic collaboration between Università Cattolica del Sacro Cuore, an Italian based Higher Education Institution, and the Higher Education are in the United States. The program proposes a design that unites Università Cattolica with a U.S. Higher Educaiton Institution (HE) through a program that will be co-hosted by two institutions and team-taught.

The research performed for this program design included a literature review of global trends in international programming for medical students and a needs assessment designed to assess gaps in programs at Unviersità Cattolica del Sacro Cuore. The findings shed light on two reoccurring themes that prevent medical students from participating in international education program which, when combined could be summarized as a lack of short-term credit bearing opportunities in an international context. These themes, along with other needs identified during the research, have established the foundations for *Cultural Perspectives in Public Health* program design.

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### **Introduction**

As higher education institutions worldwide feel pressured to introduce global competencies to the curriculum in all areas of study, Università Cattolica del Sacro Cuore (UCSC) has worked hard to be strategic in its approach towards international program design. UCSC understands the importance of teaching students how to interact in an interconnected society and has successfully innovated the University's international educational offerings by implementing a comprehensive internationalization strategy aimed in part at increasing participation rates in international mobility (IE) programs (Mazzoleni, 2013).

A diversification of program models has successfully paved the way for UCSC to promote new destinations that offer opportunities to work, study, or volunteer abroad for almost all areas of study. As access to IE programs has increased for the majority of the UCSC student population, the decision makers in the Office of Global Engagement and International Education have noted that IE opportunities for medical students have remained static.

As the demand for educational opportunities abroad continues to rise, program models, teaching methods and areas of study included in international education program designs continue to evolve and expand. Competition among medical students to participate in the IE programs available is fierce even though students have expressed discontent with the programs currently available to them. As globalization elevates the need for global citizens in the professional arena, the University's administration is interested in responding to the students' request for new programs that will appeal to the medical student population.

The program design to follow provides an overview of a potential solution to close the gap in UCSC's IE offers by promoting a new program designed specifically for medical students. The proposed course will allow UCSC's medical students to apply for an IE experience through a short-term summer course that will permit them to receive academic credit applicable to their major while exploring the field of healthcare in a global context.

### **Institutional Background**

Università Cattolica del Sacro Cuore was established in 1921 with 68 students enrolled under two academic departments: Philosophy and Social Sciences. Since its founding, the Institution has grown to host over 40,000 students studying 12 academic disciplines across five campuses<sup>1</sup>. One of its most noteworthy achievements was opening the Faculty of Medicine in Rome, along with the construction of UCSC's teaching hospital *Ospedale Agostino Gemelli* in 1961.

The inauguration of the Faculty of Medicine marked a significant achievement for the private Institution. UCSC became one of the first private universities granted the privilege to administer a wide array of public services, including the ability to teach medicine and provide healthcare services as an entity recognized by and partially funded by the Italian government (History, n.d.). The merger between private and public practices entrusted to the UCSC Faculty of Medicine established a unique framework that can be difficult to navigate when establishing comprehensive institutional policies to fairly govern all five campuses (Mazzoleni, 2013).

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<sup>1</sup> The campuses are based in Milan, Rome, Brescia, Piacenza, Cremona and Rome



For years, the regulations governing institutional practices created a divide between the Rome and Milan campuses. The two campuses often worked in a parallel fashion as opposed to being comprehensively united. As such, strategies or policies that touched both institutions equally were often difficult to establish. This unyielding terrain became evident when the Rome branch of UCSC's Office of Global Programs and International Education was instructed to implement the internationalization plans for its campus. Establishing a universal approach to international education (IE) that effectively meets the needs of the students studying under the Faculty of Medicine has proven challenging to the UCSC administration because IE practices on the Rome campus have evolved from different motives and strategic purposes than the rest of the UCSC faculties.

As noted by de Wit et al. (2013) the internationalization of higher education in Europe tends to lead institutions to focus on two dimensions for program development: cooperation and competition. The European Union (EU) promotes collaboration between and among HEIs for the advancement of knowledge and research within the geographical region. The UCSC Rome campus, being a medical school, has followed this direction and frequently based most IE initiatives on inter-institutional collaboration. Rome IE program models are often grounded in collaborative research or the mobility of students, faculty or staff between two institutions. The Milan campus administration and the decision makers in the Office of Global Engagement and International Education have chosen to interpret the push to collaborate more effectively as a consequence of the EU's need and desire to remain competitive in a globalized marketplace (de Wit et al, 2013). Consequently, the internationalization strategies have introduced many new program

designs that are often more commercial in nature (Mazzoleni, 2013). Goals to increase institutional revenue or brand awareness through IE programming have been integrated into many of the institutional initiatives. A divide in practices with the Rome campus remaining inclined to avoid commercial or economic practices in education has enhanced the schism between the campuses when discussing the development of IE programs at UCSC (Tyrie & Wolf, "Interview with Professor Federica Wolf", 2017).

### **Student Mobility at UCSC**

To remain competitive as a private university in a publicly oriented terrain, UCSC chooses to view IE programming as an outlet towards increasing the commercial reach and as a means for establishing international recognition of the UCSC name. Consequently, the Office of Global Engagement and International Education has worked hard to increase student mobility opportunities that extend beyond the E.U. context (Mazzoleni, 2013). UCSC's Milan campus has found great success in increasing IE participation by introducing the commercial approach towards program design that strays away from inter-institutional cooperation models that require bi-lateral agreements or equal exchange of students for success. Program offers include language-learning courses abroad, summer semester opportunities in the United States at HEIs and work experience or internship programs managed by third party providers. These programs, in addition to the traditional semester or year abroad program models that are promoted within the EU, have helped the majority of UCSC students, faculty and staff to understand the importance of international study programs and have increased participation rates in IE for students who are not able or not interested in staying away from campus for long periods of time (Mazzoleni, 2013).

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The Rome campus has traditionally followed the EU's inclination to stimulate collaboration between and among EU Higher Education Institutions (HEIs). Joint research programs and IE course designs that are accompanied by funding or publications for the advancement of knowledge tend to win favor with the Faculty in Rome; therefore, the student population at the Rome campus has not been directly impacted by the expanded program offers and improved global reach of the institution.

### Problem of Practice

While focusing on bilateral exchange agreements and inter-institutional cooperation has improved institutional reputation and is appropriate for many UCSC initiatives, the international programs office on UCSC's Rome campus has noted increasing requests from the student body to improve IE offerings in Rome (de Wit, 2013). Students in Rome are affected by the growing trend to participate in an international experience during the course of their degree program. In particular, the medical students have noted the difference between the programs offered to their cohort versus the IE program models available to students following other academic disciplines. They have also voiced a specific interest in studying in an English-speaking environment.

The IE program design and research to follow were inspired by a request to diversify IE program models for the UCSC Rome campus and the institutional instruction to better align the internationalization strategies on the Rome campus with the comprehensive institutional practices. More specifically, the program design has been created to increase IE access for medical students, extending beyond the borders of the EU, while continuing to promote and encourage the value of inter-institutional collaboration in the higher education arena.

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## Needs Assessment

### Literature Review

Literature reviewed for this program includes both quantitative and qualitative research on the current state of tertiary level student mobility programs and the internationalization of higher education institutions in Italy. More specifically, scholarly articles, institutional websites, census studies on mobility patterns and the European standards for international education were reviewed to understand best practices, program models and student participation rates for IE programs designed for students studying medicine or healthcare.

There is a lack of scholarly information on effective international study programs for medical students. Although many articles are available which argue that global competencies should be introduced to future healthcare professionals at an early stage in their medical training, the literature reviewed did not reveal an abundance of information about access to mobility programs for this population of students. Additionally, the literature failed to shed light on a comprehensive understanding of how many IE opportunities intentionally focus on healthcare or medical studies in a global context.

### The State of IE and Healthcare Disciplines.

Educators and healthcare professionals are seeking creative ways to include a focus on global concerns and cultural factors in the curriculum for students studying medicine and healthcare. Armstrong and Fischer (2001) shed light on this topic over 15 years ago when they proposed student exchange programs as an outlet for evaluating healthcare delivery systems. The authors highlight the contradiction between increasing concerns about healthcare reform in the political arena and a lack of attention to

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evaluating healthcare processes through comparative education in the academic curricula (Armstrong & Fischer, 2001). While Armstrong and Fischer's (2001) statement that "cross-cultural contact can provide a framework for identifying the strengths and weaknesses of one's own healthcare system" may seem like common sense to many faculty members today, it does not appear that increased awareness about how IE programs can enhance the educational experience for future medical professionals, has effectively increased participation rates in mobility programs for this category of students (p. 695).

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Recent information about student mobility trends shows that, while study abroad programming and participations rates have improved over the past 10 years, the number of students studying Health Professions in the United States continues to represent a very small portion of that population (Open Doors, n.d.). While the National Center for Education Statistics reports that approximately 11 percent of all undergraduate degrees conferred in the 2014/15 academic year were presented to students studying healthcare professions, the Institute for International Education (IIE) indicates only 6.3 percent of all study abroad participants reported were health profession majors (Open Doors, n.d.). Considering that the IIE statistics include both graduate and undergraduate degree programs while the National Center for Education Statistics reports that, in addition to the bachelors degrees mentioned above, health professions represent 13 percent and 39 percent of all graduate and doctoral degrees conferred, respectively, the researcher has concluded that a need for more international mobility programs for this area of study is needed.

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There is a lack of reliable information about the movement of students across national borders in the European context. The decentralized processes used to create mobility program and the diverse manner in which institutions and regions choose to report their data make it difficult to discern which figures are most accurate. For this reason, similar statistics to those discussed above were more difficult to analyze for the Italian population that the program design to follow is attempting to serve. To avoid confusion, the literature reviewed was limited to EU figures and reports as well as statistics reported by the Italian national government.

Moving within these parameters, research shows that in academic year 2013/14, ERSAMUS+, the most commonly used mobility program promoted within the EU, reported that Health and Welfare students make up for 6 percent of all student mobility participants for academic programs (Erasmus - Facts, figures and trends - European Commission, n.d.). This figure suggests that the state of mobility programs for EU students studying medicine is similar to that of the US as reported by the IIE. When examining Italy specifically, the trend continues. Additionally, the figures reported indicated that the notion that medical students are underrepresented in international exchange populations based on the number of degrees conferred annually persists (Annuario statistico italiano 2016, 2016).

### Healthcare in a Global Context

Figures aside, there are several themes that emerge when evaluating student mobility trends for healthcare disciplines. First, the notion that healthcare practices, policies and services should be evaluated in a global context cannot be ignored (Yarbrough, 2014). Todd and Prasad (2015) argue that globalization and competition in

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the healthcare field are affecting students' interest in international education. Globalization and the commercialization of higher education programs have pushed the world round to acknowledge the importance of international education (Mazzoleni, 2013). Albeit slowly, this trend has begun to spill over into the healthcare professions and the academic disciplines that surround them. In 2014, NAFSA's Office of Academic Programs launched the colloquium on Internationalizing Education for Health Professions (Yarbrough, 2014). This initiative brought together professionals, academics and administrators from health-related programs and organizations to discuss the impact of cross cultural and international trends on healthcare practices. Participants discussed the impact of globalization on public healthcare trends, the evident necessity for healthcare professionals to gain inter-cultural competencies and the value of international learning experiences for future healthcare professionals. The various task forces noted that "economies, cultures, and social factors cross national boundaries with increasing frequency, regularly impacting the health of individuals and communities in profound ways. Those training healthcare professionals recognize that the populations their students will serve may encompass a wide array of cultures and nationalities, even if the student remains in a single location" (Yarbrough, 2014, p. #).

#### **The Need for Credit Bearing Programs.**

As increased literature on the positive effects of international study has peaked students' interest to add such an experience to their resume, the demand for international opportunities has increased (Todd and Prasad, 2015). Similarly, as this demand rises, higher education institutions (HEIs) are forced to evaluate the effects of the commercialization of such programs if academic institutions are not offering adequate

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access. As noted by Yarbrough (2014), practical internship opportunities create many legal and ethical challenges if they are not monitored very closely. The trend to allow students to provide health services to patients in other countries presents dangers for students and host communities (Yarbrough, 2014). For this reason, Todd and Parsad (2015) along with Balandin et. al (2007) urge HEIs to find ways to address cross-cultural medical practices through curriculum development and academic programming. Their researcher suggests that universities should promote more academic programs which encourage students to focus on increasing self-awareness and improving intercultural competency thus laying the foundation for global health competencies to return to in their professional career (Todd & Parsad, 2015). These notions establish grounds for a program design that that focuses on comparing healthcare systems as opposed to encouraging clinical training. It also suggests that ethical standards should be closely monitored and student activity should be clearly dictated by professional educators.

#### **Obstacles to Mobility for Healthcare Students.**

The final theme explored in the literature highlights obstacles medical students face when considering studying away from home. Both the independent research performed for this study and the literature reviewed about current trends in study abroad for medical students suggest that medical students face two distinct hurdles that are often more easily surpassed for other academic disciplines: (1) curricular compatibility issues (Abramovitch, Schreier, & Koren, 2000) (Schreir & Abramovitch, 1997); and (2) hesitation to pursue their studies in a foreign context (Abramovitch, Schreier, & Koren, 2000) (Schreir & Abramovitch, 1997).

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Medical students face several challenges that, although familiar to IE professionals the world round, take a particular shape when discussing them in regards to medicine. The first concern about compatibility of courses is somewhat straightforward; however, the topic is fairly sensitive when discussing a medical curriculum. As noted by Abramovitch, Schreier, & Koren (2000), students who are on track to be professional doctors always feel that they are racing the clock. Graduating on time is a priority for medical students. Shreier and Abomovitch (1997) point out that graduation from medical school is only the first step in a long journey of continuing education. Choosing a residency program or specialty training after completing medical school is a pivotal moment in the medical students' process towards becoming an established professional. For this reason, it is extremely important to the students that they receive full credit for any courses they take away from their home campus (Shreier & Abomovitch, 1997).

Receiving credit for these courses is not always as easy as it seems. The students are not the only ones to feel a bit uneasy about studying away. On campus faculty are often indirectly encourage students to be wary of participating in IE experiences. Even professors who promote the idea that healthcare professionals must be ready to discuss healthcare practices in a global and multi-cultural context, the teaching practices for medical schools are preventing students and institutions from crossing this bridge (Green & Whitstead, 2015). Many faculty members are hesitant to accept that a school in another country or region can adequately prepare a student for what to expect when they return home and the literature leaves room to believe that an exploration of how to create global standards for a medical curriculum is a topic that may warrant future exploration.

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Faculty's hesitation to approve credit earned at foreign institutions also impacts the students' fear of being overwhelmed by their course-load. As may be expected, medical school in any context forges a highly competitive environment. Students spend most their time studying and working to receive the best grades they can possibly achieve, even on their home campus. The idea of facing such academic challenges in a foreign environment is deterring medical students from IE participation (Abramovitch, Schreier, & Koren, 2000). Medical students are notably more concerned that studying in a foreign context will affect their ability to thrive academically than other student populations (Abramovitch, Schreier, & Koren, 2000; Yarbrough, 2014).

### Summary.

In conclusion, the literature reviewed highlights multiple concerns which must be addressed when designing IE program models for students studying medicine. Yet, there is a need to increase participation in IE opportunities for this population of students. Both the academic and professional communities for this academic discipline have documented the importance of intercultural experience for medical students. Unfortunately, it is also clear that the current academic program offers available are not necessarily attractive to most students in this category. The literature indicates that the current trend in IE programs for medical or health related disciplines is participation in a short term practical experience either in the form of an internship or a volunteer program. Such programs can arouse concern for student and patient safety; therefore, university-regulated programs for academic credit are needed. Finally, medical students are preoccupied about leaving their home campus for extended periods. For these reasons, an innovative program design will have a higher rate of success if it is a short-term

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program that allows participants to fulfill a portion of their academic curriculum in a foreign context without prolonging their formal degree requirements.

### Institutional Needs Assessment

After reviewing the current state of IE programming for medical students on a macro scale, a needs assessment was conducted on the institutional level considering three major stakeholders at UCSC: (1) UCSC students currently enrolled in academic programs on the Rome campus; (2) UCSC Faculty of Medicine; and (3) UCSC Global Engagement and International Education Office. A survey was sent to all students enrolled in programs taught by the Faculty of Medicine and interviews were conducted with members of the faculty, staff and administration who hold a direct interest in or power over IE program initiatives.

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### Institutional Context.

To begin, two strategic interviews were conducted on the UCSC Rome campus for the purpose of understanding if the overarching themes identified during the literature review were also valid in the UCSC context. Professor Federica Wolf and International Program Coordinator Aldo Balzarotti have been working as a team to manage all IE initiatives on UCSC's Rome campus for the past 20 years. Their experience makes them not only the institutional experts on when it comes to discussing IE programming for medical students, it also solidifies their personal and professional interest in responding to the student requests for new program designs the Rome campus. Both Wolf and Balzarotti explained that the student population on the Rome campus is currently dissatisfied with the state of IE programming at UCSC Rome. Wolf and Balzarotti also agree that medical students would benefit from a short-term program design (Tyrie &

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Wolf, "Interview with Professor Federica Wolf", 2017). "It's hard to stay away from home for a full academic year and medical students often have trouble finding a semester opportunity that can provide them with enough credits to justify going away for less than a year" explains Professor Wolf. Wolf further specifies that this difficulty stems from a problem rooted in academic compatibility. With the different approaches to teaching medicine around the world, it is hard to find an academic curriculum that offers UCSC medical students opportunities to study at a foreign institution. It is especially difficult to satisfy the academic requirements for the UCSC MD program in English-speaking countries like the United States, Australia or the United Kingdom because the structure of the higher education system in those locations is completely different. UCSC follows a single-cycle structure conferring a medical doctorate and bachelor's degree at the same time upon completion of a six-year curriculum. In United States and Australia, degree programs are split into the graduate and undergraduate levels thus complicating the possibility for students to find a match for their academic requirements from one context to the other.

Also, although there are several EU HEIs that have compatible curriculums for UCSC medical students, the timing of the courses varies greatly. Therefore, if student chooses to go away during the fall and wants to come home for the spring, chances that the same courses offered at UCSC during the fall academic term can be found at a foreign institution in the right order are low. Students who opt for the semester abroad option often find themselves in a difficult position to stay on track with their academic progress. Professor Wolf explains that students have to find a creative way to anticipate one or two

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courses prior to departure or, must be prepared to make up for lost time upon their return to campus (Tyrie & Wolf, "Interview with Professor Federica Wolf", 2017).

Wolf has noted that these obstacles are deterring medical students from participating in IE programs. In her experience, students are increasingly attracted to short-term practical or clinical experiences in lieu of credit bearing mobility programs. Wolf says this trend leads her to believe that credit bearing short-term opportunities during the summer would be popular because medical students appear eager to go abroad in the summer even when the academic return is minimal (Tyrie & Wolf, "Interview with Professor Federica Wolf", 2017).

Balzarotti offers a similar opinion from an administrative perspective. The International Mobility Coordinator explained the difficulties his office faces when promoting international mobility to medical students (Tyrie & Balzarotti, "Interview with Aldo Balzarotti", 2017).

Balzarotti says that medical students seem to be a lot more anxious than other student populations and their concerns about fulfilling all of their academic requirements on time overshadow every conversation about studying abroad. He also explains that the creative initiatives made by the UCSC Office of Global Engagement and International Education discussed in the introduction to this capstone has created some tension between his office in Rome and his supervising team in Milan. The tension arises from a lack of continuity on an institutional level when evaluating IE mobility offers for the various student populations (Tyrie & Balzarotti, "Interview with Aldo Balzarotti", 2017).

As mentioned during the introduction, UCSC's decision to enter into a more commercialized approach towards IE has been successful with the majority of UCSC

students, however, medical students continue to remain at a disadvantage. The Rome campus continues to face a number of obstacles that the internationalization strategies implemented have not been able to hurdle.

In conclusion, the first two interviews confirmed that any new IE programs designed for UCSC medical students should meet two criteria:

- The length of the program should be less than a full academic term (short-term)
- The program should offer students an opportunity to earn academic credit

#### **Evaluating the Curriculum.**

Considering that the request to receive academic credit for participation in an IE program was a theme that emerged in the literature and during the first phase of the needs assessment, the second phase of the needs assessment addressed the possible academic content to propose that would assist UCSC to offer a program that could effectively substitute at least one core requirement from the Faculty of Medicine's course plan.

A thorough review of the academic curriculum for students studying medicine at UCSC was combined with a scan of other E.U. and U.S. based HEIs that offer degrees in medicine or pre-medical programs medical schools and pre-med programs. The environmental scan identified the topic of Public Health as the most appropriate academic focus for several reasons:

1. A course in public health is listed as a requirement for every academic discipline offered on the UCSC's Rome campus
2. The course content for all of UCSC's courses on Public Health can easily be manipulated to include a global or international focus.

3. The course content for UCSC's Public Health courses is similar to content offered in courses at other universities in either Public Health, Healthcare Policy or Healthcare Administration and therefore, the course content could be marketed to other international student populations

#### **Surveying Student Interest.**

After determining the need for a short-term program and choosing Public Health as the academic focus for the program design, the third phase of the needs assessment focused on evaluating whether a program designed with these presumptions would be appealing to the student body.

A survey was sent out to students enrolled in programs related to the student of medicine and healthcare administration and interviews were conducted with faculty members and administrators who have a direct influence over either IE programming, recognition of credits earned at a foreign institution or Public Healthcare courses.

The student survey content addressed the following topics Appendix A:

- Duration of the IE program
- Location and context of the IE program
- Tuition fees
- Composition of the student body
- Public Health as the academic focus for the IE program

The proposal for a six-week course to take place in both Italy and the United States received an overwhelmingly positive response with 88% of the 237 respondents stating that they would be interested in enrolling in a program of this nature.

Additionally, 91% of those students agreed that they would find the course more appealing if the participant population included both Italian and US students.

The suggestion of Public Health was also won the favor of the majority of the survey respondents. Out of the 235 students who answered the questions regarding whether they would be interested in taking a course that compares Public Health practices in the United States to the practice norms for the same sector in Italy, 67.7% of the students said yes. Additionally, 68.5% of the respondents said a course exploring Public Health in a global context would be useful to their future career.

#### **Assessing the interests of the Faculty and IE Offices.**

After the survey results were received, several faculty members from the Rome campus were interviewed along with some of the administrative decision makers from the Office of Global Engagement and International Education. All interviewees answered yes when asked if they would support the initiative to open a course in Public Health which compares the US and Italian healthcare systems. The faculty and staff interviewed were also in unanimous agreement that all UCSC students should be globally aware and have that UCSC should teach students about intercultural competencies.

#### **Summary.**

Overall the needs assessment informed the design for a short-term course covering the topic of Public Health. Also, an analysis of the results confirmed that both students and faculty would be interested in a summer program that explores healthcare in the U.S. context.



### **Cultural Perspectives in Public Health: International Program for Medical Students**

In light of the literature reviewed and the institutional needs assessment performed, the following program was designed specifically for UCSC medical students. *Cultural Perspectives in Public Health; An International Program for Medical Students* is a pilot project that will be offered to students on UCSC's Rome campus in an attempt to increase IE participation rates for students studying under the Faculty of Medicine. The course will be evaluated to assess the potential for future IE programming focused on the importance of discussing global perspectives in healthcare practices.

#### **Program Goals and Objectives**

##### **Institutional Goals and Objectives**

*Cultural Perspective in Public Health* offers UCSC medical students the opportunity to review healthcare practices in an international context. The course will guide students through comparative discussions on healthcare practices in the United States and Italy. The academic coursework will address how culture affects healthcare policies and practices through practical site visits to view the professional environment in two different contexts.

The overarching goal and inspiration for this course aims to close the gap in program offers on the UCSC Rome campus. Current literature on program models for medical students demonstrate that the same gap in program offers extends beyond the parameters of the UCSC student body affecting medical students across the globe. For this reason, the *Cultural Perspectives in Public Health* course intends to increase IE participation rates for UCSC medical students to meet an institutional goal while

simultaneously looking at a larger objective to pave a path for increasing IE programming for healthcare students worldwide. The course program will achieve these goals by offering a short-term program design responding to UCSC students' request for a short-term mobility course. The curriculum will explore the topic of Public Health within a cultural framework that offers an academic focus and program timeline versatile enough to be replicated at, by or in collaboration with other institutions.

The *Cultural Perspectives in Public Health* program also intends to achieve an institutional goal to strike a balance between the differing motives that inspire IE strategies on the Rome campus. The program design seeks to align the Faculty of Medicine with the comprehensive internationalization strategies of the Office of Global Engagement and International Education. The program will achieve this goal by ensuring that the new program focuses on innovating the IE curriculum by offering students an experience outside of the European Union while working to create and improve inter-institutional relationships. The program design includes a model of inter-institutional collaboration that proposed to any U.S. Higher Education Institution in an effort to bring UCSC students an English-speaking destination that has otherwise been difficult to reach for the study of medicine. For the purposes of this paper, the proposal to follow suggests Northwestern University located in Chicago, Illinois, as the partner institution. UCSC and Northwestern University have recently signed a Memorandum of Understand expressing an intent to collaborate on the exchange of students, staff, faculty and academic materials. The UCSC Faculty of Medicine is interested in strengthening this relationship and UCSC does not currently collaborate with Northwestern University for any other IE program opportunities. Consequently, the *Cultural Perspectives in*

*Public Health* could provide the perfect opportunity for UCSC and Northwestern University to begin strengthening their relationship.

### **Program Description**

#### **Program Scope**

*Cultural Perspectives in Public Health* is a six-week summer course, which will evaluate and compare healthcare practices in the United States and Italy. Using Kolb's (1984) Experiential Learning Cycle as a foundation for the academic curriculum, the course will take students through two academic sequences focused on connecting the topic of Public Health to a direct experience in an international context.

UCSC will partner with Northwestern University in an effort to create a unique and intercultural learning environment. The program will take place in two locations in order to allow students to observe cultural implications in healthcare practices in two distinct environments: Rome, Italy and Chicago, Illinois USA. Equal numbers of students will be recruited from both institutions in an effort to ensure that the entire program maintains a inter-cultural focus and promotes deeper reflections and dialogue. By choosing a collaborative design, UCSC hopes this program will strengthen the partnership between UCSC and Northwestern University, improve UCSC's international reputation and increase possibilities for promoting future international mobility programs rooted in inter-institutional collaboration. UCSC and Northwestern University will work together to manage the administrative, instructional and logistical aspects of the program. They will also share academic materials and co-design the curriculum.

The course will guide students through a set of experiences and classroom discussions that focus on analyzing and comparing healthcare practices in the United States and Italy. More specifically, the program will encourage students to reflect on how culture affects aspects of their future professional environment. Introducing students to Milton Bennett's (2004) theories on Intercultural Competence and Geert Hofstede's (1984) cultural dimensions as guiding principles for evaluating their experiences, *Cultural Perspectives in Public Health* will explore topics such as healthcare policy, managerial practices, patient care and the use of technology in healthcare. The students will compare their experiences in the U.S. and Italy through a combination of academic discussions in the classroom and practical sites visits in the field in both countries.

The entire program will last just over six weeks that will be split evenly between Chicago and Rome. The first three weeks will be held in Chicago on Northwestern University's campus and collaborating medical facilities. The second three weeks will take place on UCSC's campus and collaborating university hospital.

### Participant Goals and Objectives

Participation in this course will encourage medical students to view healthcare practices through a cultural lens in an effort to prepare them to be better professionals in a globalized world. Northwestern University students will be united with UCSC students to explore the influence of culture in healthcare practices. Kolb's (1984) Experiential Learning Cycle and Milton Bennett's (2004) guidelines for gaining intercultural competence situated within a professional framework will help students to achieve four specific goals:

- Develop intercultural communication skills and become more cultural competent

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**Comment [33]:** You should have both program goals and objectives as well. Remember, the goals are broad and the objectives are specific. For example, a program goal may be to establish an institutional HEI partner within the US. A program objective might be to enroll a minimum of 15 students the first year.

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**Comment [34]:** Please check above to see if the institutional goals and objectives are acceptable

- Become reflective learners through reflective practice and analytical observations
- Improve their academic understanding of public health practices
- Gain practical skills to improve their professional development

### **Participant Objectives**

The *Cultural Perspectives in Public Health* curriculum addresses use the theories mentioned above to assist participants to achieve the aforementioned goals in the following manner:

- Participants will improve their Intercultural Communication and Competency skills through:
  - In class discussions between U.S. students and Italian students
  - On-site visits in both the U.S. and Italian contexts
  - Guided lectures on inter-cultural communication theories and working in multi-cultural teams
- Participants will participate in Reflective Practice and analytical observations through:
  - Small group discussions evaluating and reflecting on on-site visits and material reviewed in class regarding the healthcare practices in both cultural contexts
  - Reflective papers analyzing and discussing the participants' individual experiences and evaluations
  - Comparative analysis assignments asking students to make conclusions about the impact of culture on healthcare practices

- Students will improve their academic understanding of the healthcare profession and gain professional skills through:
  - Discussions and interactions with healthcare professionals in the field during on-site visits
  - Oral presentations of the experience and the conclusions made by participants' at the end of the course

By the end of the course, students will know how to explain their own experience, discuss how culture influences healthcare practices and policies and describe culture has influenced the manner in which they view the world and professional expectations. More specifically students will be able to:

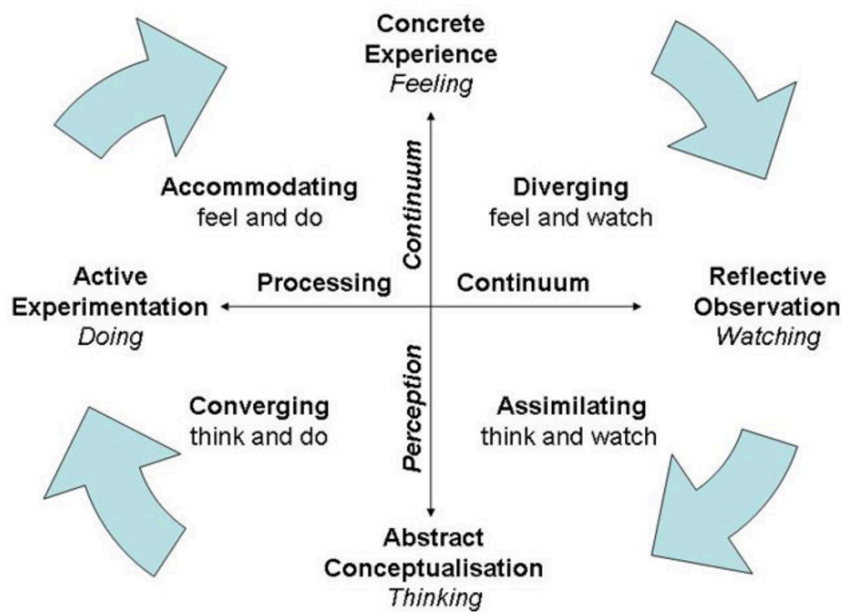
- Identify the stages of intercultural competence identified by Milton Bennett (2004) and describe a situation where the scale has or will be useful to them as a medical student or professional.
- Identify the cultural Geert Hofstede's (2004) cultural dimensions and use them effectively to analyze the differences between the Public Health policies and professional context in the United States and Italy
- Explain their own individual growth using active reflection on the experiences during the course and discuss how the course has affected their understanding of public health practices.

### **Theoretical Foundations**

Using Kolb's (1984) Experiential Learning Cycle as a foundation for the academic curriculum, *Cultural Perspectives in Public Health* will take students through

two academic sequences focused on connecting the professional practices in healthcare to a set of direct experiences in an international context.

According to Kolb (1984), the act of learning moves through a series of processes that can be broken down into a four-phase cycle, beginning with a concrete experience and ending with an active experimentation of that experience. As demonstrated in the figure below, Kolb's (1984) learning cycle passes from experience to experimentation through two intermediate steps identified as reflective observation and abstract conceptualization. (see figure 1).



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 Comment [35]: Add in your APA figure notation

The faculty members teaching *Cultural Perspectives in Public Health* will walk students through Kolb's four learning cycles by facilitating comparative analysis to evaluate the influence of culture in a specific professional arena.

Kolb (1984), who took inspiration from other experiential learning theorists such as Dewey, Lewin and Piaget (Kolb, 1984), purports that learning is a process of development requiring an interaction between the individual and the environment. According to Kolb (1984), this interaction takes place through four distinct actions: feeling, watching, thinking and doing.

More specifically, Kolb (1984) asserts that effective education should address the four phases by moving students through specific activities that transform feeling into concrete experience, watching into reflective observation, thinking into abstract conceptualization and doing into active experimentation.

### **Experiential Learning applied to the Academic Curriculum**

*Cultural Perspectives in Public Health* will guide students through the learning cycle identified by Kolb (1984) while introducing them to new cultural norms and professional expectations as they travel between Italy and the U.S.. Practical experiences in the field will establish the foundations for Kolb's (1984) learning process as students will have a concrete experience rooted in observing healthcare practices in a professional context.

The first stage of Kolb's (1984) learning cycle is defined as a concrete experience. For this reason, the course program will begin with a practical site visit. The site visit will serve as a foundation for beginning the second stage of Kolb's learning cycle and will affect the two student populations in different ways. As the first portion of the program will take place in the United States, the UCSC students will experience phase one Kolb's (1984) learning cycle in a direct manner by observing healthcare practices in a foreign context. At the same time, the Northwestern University students will experience the first stage of Kolb's (1984) learning cycle in two ways: 1) directly by entering into the field to



observe the concepts being evaluated in practice and 2) in an indirect fashion by observing and interacting with the UCSC students' observations of the healthcare practices from a foreign perspective. This approach will allow both groups of students to participate in reflective practice discussions together. The students will benefit from discussing their perspectives in a group setting intended to shed light on pre-conceived notions and expectations about what healthcare services and administrative protocols should look like based on different experiences, professional standards and cultural backgrounds.

The second stage of the learning cycle, reflective observation, will take place in a group setting through dialogue and facilitated discussions in the classroom, on an individual basis through written assignments and in an academic context through lectures aimed at addressing the cultural aspects of the healthcare systems being reviewed.

Kolb's (1984) third cycle, abstract conceptualization, and fourth cycle, active experimentation, will be incorporated into the program in the form of research. At the close of the Chicago based portion of the program, students will be asked to discuss and write a comparative analysis of the two healthcare systems based on the information they learned through either direct experience or indirect experiences.

The comparative analysis assignment will be the launching pad for the second half of the course in which Kolb's (1984) learning cycle will begin again in the Italian context. The four-phase cycle will repeat itself on UCSC's campus with the student populations switching roles.

At the end of the Rome based portion of the course, participants should be able to effectively converge the two experiences and work in groups to create a presentation

discussing the observations made in regards to the two healthcare systems. The students' observations and findings will be presented to other students, healthcare professionals and faculty members with suggestions for how the two systems could either learn from each other or find ways to lay the groundwork for better global health policies.

This activity will encourage students to use their observations in a manner that could stimulate positive change in both cultural contexts by integrating their experiences into an evaluation of the norms used in healthcare policy or administration efforts. The exercise will give students the opportunity to put theory into practice by using the cultural theories they learned about as a framework for discussing their experiences. By introducing Bennett's (2004) theories on intercultural competence and Hofstede's (2004) Cultural Dimensions theory to other members of their communities students will move from the role as learner to teacher. This exercise should reinforce the notion that looking at realities from a different perspective can help them establish more inclusive practices. It is also intended to stimulate and encourage the idea of cross cultural and international collaboration in the formulation of healthcare policy and practices as the reflective and academic portions of the course aim to encourage students to reason in a manner that takes into account the fact that sharing knowledge and information is more likely to lead to innovation for all parties involved.

By situating Bennett's (2004) Cultural Competency theories and Hofstede's (2004) Cultural Dimensions theory within Kolb's (1984) Experiential Learning Cycle, *Cultural Perspectives in Public Health* course will encourage students to use reflective practice as a launching pad for forming new perspectives, ideas, and creative ways to approaching

professional practice in the healthcare arena. By the end of the course, students should achieve the following learning objectives:

Kolb's (1984) Experiential Learning Cycle has been chosen as a tool to integrate the practical and academic experiences in a manner that, when coupled with the intercultural competency theories and reflective practice exercises, will assist the students to achieve the learning objectives outlined in the course syllabus:

1. How healthcare policy and practices are formed based on cultural and societal norms (Concrete Experience)
2. How the student's own individual experience prior to the course affects their expectations of how a healthcare provider should or should not behave (Reflective Observation)
3. How policy and practices differ from one location to another (abstract conceptualization)
4. How students can apply the experience gained during the Cultural Perspectives on Public Health to enhance their academic and professional competencies once they return to their home environment (active experimentation)

For more specific details about the academic components of the course see the syllabus in Appendix B.

#### **Timetable for Program Delivery**

The course will launch in the summer of 2018. The classes will begin on July 9<sup>th</sup> in the Chicago, Illinois, U.S. and the last class will be held in Rome, Italy on August 17<sup>th</sup>. The UCSC students will be expected to arrive in the U.S. two days before the beginning of class for an on-site orientation session and welcome dinner. Northwestern University

will host a welcome dinner and a brief orientation will be held on the first day after arrival.

Academic classes will be held from Wednesday to Thursday with a site visit scheduled for Monday and Friday of each week. On Friday July 27<sup>th</sup> no site visit will be held and students will be responsible for flying from the U.S. to Italy to begin the Rome based portion of the course. Students will be expected to arrive in Rome on Saturday July 28<sup>th</sup> or Sunday July 29<sup>th</sup> however they will be encouraged to arrive by Saturday in order to have Sunday as a day to rest and get adjusted to the new time zone. On Monday July 30<sup>th</sup> a second orientation session will be held for the Northwestern University students. A re-entry session will be offered contemporarily to the UCSC students to assist them in reflecting more deeply on their experiences in the U.S. and prepare them to view the Roman context from a new perspective.

Considering that Kolb's (1984) Experiential Learning Cycle has been chosen as the theoretical foundations for this course, it is important that each phase of the program begin with an on-site visit. The practical experience will be used to stimulate active reflection and classroom discussion activities. For this reason, during the week of July 30<sup>th</sup>, an on-site visit will take place on Tuesday and during the week of August 14<sup>th</sup> one final class will be held to wrap up the program on Friday the 17<sup>th</sup>.

Although a re-entry program for the Northwestern students will not be embedded into the curriculum, UCSC will host a closing dinner after the final class to mirror the welcome dinner held in the U.S. and a re-entry session will be recommended to the Northwestern Faculty and administration. Information regarding the re-entry session

held for the Italian students will be shared with Northwestern for this purpose. For a detailed outline of the program timetable see Appendix C.

### **Orientation**

As discussed above, the *Cultural Perspectives on Public Health* course will have two distinct orientation sessions. The two orientation sessions will be directed individually at the two separate student populations with the orientation for UCSC students being held on-site at the Northwestern University's campus and the orientation for the Northwestern University students being held at UCSC in Italy.

The goal of the orientation sessions will be the same for each student population. The content reviewed will assist the students to understand their cultural and physical surroundings, review the crisis management procedures and explain to the students the administrative support structures in place. The orientation will also discuss the academic standards and evaluation norms for the on-site visits and explain to the students any expected dress codes or behavioral standards for the designated locations.

Both orientation sessions will be prepared by and presented by the designated UCSC administrative staff member and will be reviewed and approved by the course faculty prior to the beginning of the course.

Because that cultural experiences and short-term courses may be intense and quick-paced experiences, the UCSC designated administrative staff who will be on-site in both the U.S. and Italian contexts will be assigned the task of offering continuing orientation support to the students throughout the program. These brief orientation sessions will provide the foundations for students to understand how to navigate in a new environment and what to expect from the site visits and additionally, the UCSC staff

member will explain that they may be contacted as a point of reference for any reason throughout the course of the program.

### **Staffing Plan**

Three professionals will divide the primary responsibilities required to launch *Cultural Perspectives in Public Health*. The academic responsibilities will be shared between two faculty members, one from UCSC and one from Northwestern University, who will co-teach the course. The two professors will be responsible for all aspects related to assigning and evaluating academic coursework. They will work together to establish the academic expectations and evaluation parameters and will communicate this information to the two students at the start of the program.

Additionally, one administrative staff member from UCSC's Rome Office of Global Engagement and International Education will be designated as the Program Coordinator to handle the logistics and on-site support to students and faculty in both cultural locations. The Program Coordinator will be responsible for determining and facilitating recruitment practices, admissions procedures and orientation content for the program. The Program Coordinator will also assist the professors to manage any student concerns while abroad (UCSC students in the U.S. and Northwestern University students in Italy) and will be responsible for all logistical concerns related to the on-site visits and program travel needs.

Marketing, recruitment, admissions processes and responsibilities related to managing the students' academic career will be divided by the two participating institutions. Each HEI will be responsible for their student contingent for the aforementioned categories. The division of responsibilities in this manner will allow

each institution to remain compliant with their individual institutional practices and be at liberty to determine their own interest in making investments in promotional activities. UCSC will make use of existing administrative channels for promoting the program, recruiting participants and determining the admissions criteria. This approach should minimize any additional costs to UCSC and will maintain continuity between the *Cultural Perspectives in Public Health* and other IE program models. Northwestern University will be able to manage the recruitment of their students in whatever manner they deem fit.

The UCSC Program Coordinator assigned to oversee logistical arrangements for site visits will be expected to collaborate with the Northwestern University to determine the appropriate lines of communication and ensure that the site visits chosen are in accordance with the expectations of the U.S. university partner. Similarly, the UCSC Office of Global Engagement and International Education will work closely with Northwestern University during the recruitment and admissions phases to share marketing materials ensuring consistency for all promotional activities and communication strategies.

The UCSC Program Coordinator will be expected to spend approximately 40% of their professional time working on this program prior to the six-weeks of the course in which 100% of the staff member's time will be dedicated to the *Cultural Perspectives in Public Health* travel and activities. For this reason, it is recommended that the UCSC Office of Global Engagement and International Education consider hiring a part-time staff member or student worker to assist the designated administrative staff member with his/her work as this program will result in a substantial increase in his/her workload. For

more information about the expectations for the UCSC Program Coordinator, see a full job description in Appendix D.

### **Marketing Plan (for UCSC students only)**

The primary target audience for this program will be medical students on UCSC's campus. Northwestern University will have liberty to determine the target audience for the U.S. participants, and therefore, the marketing plan outlined here pertains to the UCSC population and campus strategy only.

Utilizing existing administrative hierarchies and organizational norms at UCSC, the Office of Global Engagement and International Education will hold the sole responsibility for the creation of and execution of all marketing strategies. All printed collateral and web content will be determined by the International Marketing and Communications team and will be distributed and/or communicated to the Rome Office of Global Engagement and International Education for implementation.

Marketing for this program will take place through several channels and will utilize marketing strategies that have proven successful on UCSC campuses in the past:

**Direct Marketing:** Direct marketing strategies tend to have the highest return for UCSC populations, especially among medical students. The Office of Global Engagement and International Education will launch a direct marketing campaign utilizing the following tactics:

1. International Day Event – UCSC hosts an international day on campus twice annually to promote IE programs. UCSC will set up a table dedicated to Cultural Perspectives in Public Health and will present the



course during the dedicated presentation times for UCSC managed IE experiences.

2. In class promotion – The designated UCSC faculty member will discuss the details of this course and explain periodically to the students prior to beginning a lesson for a different subject. Also, UCSC administrators from the Office of Global Engagement and International Education will request permission to present the course to medical students at the beginning of different lectures in an effort to raise awareness of the opportunity.
3. Designated info sessions – the Office of Global Program and International Education will host four info sessions dedicated solely to presenting the Cultural Perspectives in Public Health course the UCSC student body. Additionally, the course plan and offer will be integrated into the general IE info sessions that are held three to four times annually.

**Internet Marketing:** Some of the most cost effective and dynamic marketing tools available to the UCSC team today can be found online. This IE opportunity will use internet channels to spark interest in the following ways:

- a. Email campaign – emails will be sent to all students enrolled in a medical or healthcare program on the UCSC Rome campus. Additionally, an informative email will be sent to all faculty members so they may also take an interest in promoting or supporting the program.

- b. UCSC Website - a dedicated landing page will be created to explain the details of the program and the Cultural Perspectives in Public Health course will be listed on all online resources that discuss IE opportunities or Public Health related academic courses.
- c. Social Media Platforms- considering that the average UCSC student is very active on social media and the medical students have a dedicated page for each cohort of students, UCSC's International Marketing team will run an add campaign through Facebook, Instagram, Twitter and YouTube by sharing content on the appropriate pages and using appropriate key words to pop up if a related topic is searched on Google or the UCSC website.

#### **Participant Recruitment and Admissions (UCSC contingent only)**

As with the marketing strategies, the recruitment and admissions procedures should be managed independently by the two partnering institutions. That said, the standards must be agreed upon and shared and therefore, the following outline which defines a procedure for UCSC will be used as a framework for the designated U.S. partner.

It is a goal to increase participation in IE programming for the UCSC medical student population. For this reason, the admissions requirements for this program may be modified if necessary to increase access to the program. At this time, the program will be open to a total of 15 students and priority will be given to applicants who meet the following criteria:

- Enrolled in a degree program under the Faculty of Medicine

- Able to demonstrate fluency in the English language at a C1 level as per the European Standards (should I put a footnote [here?](#))
- In good academic and disciplinary standing

Students will be asked to apply to the program through an online application process consisting of the following steps:

1. Application including all demographic information and personal contact information
2. Application Essay stating their motivations for participating in the program
3. Recommendation Letter
4. Transcript and Current Academic Standing
5. Application Fee (35 EUR)

The applications will be reviewed by the Office of Global Engagement and International Education organized in order to priority based on the above mentioned criteria and an initial review of the motivation letters, transcripts and recommendation letters. Afterwards, the final selections for participants will be determined by the UCSC designated faculty member who will be teaching the course along with the Academic Coordinator for International Mobility Program Professor Federica Wolf.

### **Logistics**

The short length of the course assists with logistics in regards to pre-departure preparations and entry into the foreign destinations for the two student populations because no entry visas will be required for any participants holding a valid U.S. or Italian passport. The UCSC staff member designated to manage the program will need to review

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**Comment [36]:** That probably makes sense, especially when read by those who don't understand the classification system.

the participant details carefully to ensure that any visa requirements are addressed if participants are not U.S. or Italian citizens.

Housing will be arranged on Northwestern University's campus for the three weeks in Chicago and on UCSC's campus for the three weeks in Rome. All participants will be asked to stay on campus for the duration of the course in order to enhance the intercultural experience between the two different cohorts. Students will be able to choose a roommate if they like, however, they will be encouraged to room with a student from the partner institution as opposed to rooming with someone from their homeschool. Single rooms will also be offered at an additional fee and students will be asked to specify if they have any concerns about living in on the same floor as individuals of a different gender identity. Considering that UCSC is a Catholic institution, male and female students will not be permitted to share a room in either cultural environment in an effort to maintain constancy with UCSC institutional policies. Obligatory participation in the religious activities organized by the UCSC housing offices will be waived for these program participants, however the U.S. participants should be warned and debriefed regarding the cultural context of the UCSC housing facilities and will be advised that all live-in staff are members of the clergy.

As mentioned above, the on-site visits to local healthcare offices and providers will be arranged and managed by the UCSC administrative staff member assigned to oversee this program, however, Northwestern University will be asked to identify a point of contact who will assist the UCSC staff member to arrange the Chicago based visits. All visits will be arranged in advance and confirmed prior to launching the course and the necessary security protocols and access requirements will be observed. Dress code

information will also be received and distributed prior to the start of the program and again during the orientation sessions.

The on-site orientation sessions will be arranged on each respective campus and the room reservations will be made by the UCSC administrative staff member with the necessary support and collaboration from the international office and/or designated faculty member from Northwestern University for the Chicago portion of the program.

The welcome and farewell dinners will be held at a local restaurant in the two different environments. The restaurants will be chosen by the two faculty members and the necessary logistical arrangements will be handled by the UCSC designated UCSC administrative staff. The cost of the two meals will be included in the program budget.

### **Health and Safety Plan**

Health and safety is a top priority when executing an IE program. Access to healthcare is essential and, considering that the academic content of this course focuses on public healthcare norms, students will be provided extensive information about how to navigate the local healthcare system prior to the first day of class. This information will be required reading material for students. Additionally, all students will be required to show proof of a valid travel insurance for medical care no later than two weeks before the start of the program.

Participants will also have access to both all on campus health services in both locations. In the event of a medical emergency, students are advised to seek immediate medical attention. Students will receive contact information about local hospitals and emergency protocols during their on-site orientation.

Because UCSC is connected to a hospital, standard procedures for accessing the campus include complying with the protocols outlined by the health surveillance office.

These protocols include:

- Submission of a valid vaccination record showing proof of a vaccination or measles, mumps, Hepatitis A, Hepatitis B and Tuberculosis.
- A physical and several blood analysis
- Proof of a valid health insurance including international coverage

Considering these procedures are necessary before participating in the on-site visits in Italy, all students will be required to comply with the procedures and show proof of their results prior to the start of the course. The UCSC students will most likely already have all of the required information and Northwestern University participants will be provided the list of requirements during the admissions procedures.

Before the start of the course students will be informed of how to contact and utilize the services of their respective local consulates in the foreign destination. The U.S. participants will also be informed of how to enroll in the Smart Traveler Enrollment Program (STEP) through the U.S. Department of State. This is a free service which notifies students and their families about important health and safety information in Italy (or the traveler's selected destination) and provides advice on how to make the smartest and most informed decision about travel plans. It also provides alerts for terror threats and informs U.S. citizens about ways to stay safe or seek help in the event that a terrorist attack or natural disaster occurs.

Health and safety risks are considered minimal in the U.S. and Italy at this time, however a full list of safety tips and best practices will be provided to the students and will be reviewed during orientation. See appendix E for the full details.

Finally, students will be required to read and agree to the rules and regulations for the housing facilities and the Code of Student Conduct for the program prior the course. Students violating regulations or policies of the program will be subject to reviews and possible sanctions. UCSC reserves the right to remove students from the program for failure to maintain appropriate academic or behavioral standards.

### **Crisis Management Plan**

Considering the present dangers and the increased risk of terrorism present in today's society UCSC will ensure that emergency support teams are ready to respond for any reason at any time during the course of the *Cultural Perspectives on Public Health* program. This is one of the primary reasons that the UCSC Program Coordinator will be accompanying the students and faculty members as an on-site coordinator throughout the entire program.

The designated UCSC staff member and two faculty instructors will be trained on emergency response protocols for all levels of emergency. Participants will be given a student card at the start of the program with a list of all emergency contact numbers for the U.S. context and a second card will be provided for the Italian context. Some useful phrases in the local language will be reviewed during orientation and printed on the card. Students will be instructed to carry the card on them at all times in order to minimize stress in the event that they require assistance during an emergency. UCSC is aware that,

even if students have an adequate level of fluency in the local language, it is helpful to have a point of reference or a handy reminder in a moment of crisis.

The UCSC on-site Program Coordinator will hold an emergency cell phone that will be available 24 hours a day. The phone will be managed by the Program Coordinator throughout the course of the six-week program with a one or two days a week designated to one of the faculty members based on a pre-determined rotational schedule. The emergency phone holder will respond or ensure that a trained professional responds to the phone in the event that an individual calls to report an emergency or request emergency assistance. All emergency responders including the UCSC staff member, both faculty members and any other on-site staff who are designated as points of reference for the program must be trained to work with the local medical professionals and law enforcement if necessary. They must also familiar with the protocols for when and how to notify a student's parents or emergency contact.

All participants will be required to complete an emergency contact form designating two emergency contacts with the appropriate phone numbers and email contact information. To ensure cohesion and cooperation from the student body in any emergency, Participants will also sign a Health Disclaimer which authorizes the program administrators with to contact the student's identified emergency contact person and their home university in the event that the student is:

1. Hospitalized
2. Unconscious
3. Arrested



4. Demonstrating signs of severe psychological distress (or suicidal tendencies)
5. Has threatened to harm another individual
6. Has broken the terms agreed to regarding student conduct and behavior

Students will be briefed on the crisis management plan during the two orientation sessions and the UCSC student participants will receive a brief run-down of the expectations for the Italian portion of the program during the re-entry session.

The on campus housing facilities will also be involved in any after-hours emergencies and students. Contact information for emergency protocols for all accommodation structures will be handed out during orientation. Students will be instructed that the live-in staff members should be contacted immediately if an emergency occurs while students are on the housing premises. If students are in another location, they should call the program emergency phone. In the event that a student has a complaint or a problem with the live-in staff or any of the first responders, they should notify a trusted staff or faculty member from their home school who will assist them in managing such a concern.

### **Budget**

*Cultural Perspectives in Public Health* was designed with an attention to avoid increasing the outgoing expenses for the UCSC international programs team. The majority of the costs for the program should be absorbed and accounted for within Global Engagement and International Education's annual budget for outgoing student mobility. Staff salaries and compensation for the faculty members will not be altered as the UCSC institutional employee contracts do not concede to the possibility of increasing an

employee's annual income based on participation in a project that falls under their pre-defined professional responsibilities. For this reason, the initial budget for the program provides an overview of the expenses that will be related to the program itself without including a section for staff compensation. The budget has been organized in the following manner:

**Pre-program expenses:**

Pre-program costs to consider include expenses for marketing materials such as posters and brochures to be used during the International Day event and to be passed out on campus during regular promotional activities hosted by the Office of Global Engagement and International Education.

**Housing:**

The housings costs presented include an estimate of a three week stay on UCSC's campus and an estimate of a three week stay on at a university in the United States. The costs for housing also includes a small meal plan which will be offered to the student participants. The meal plan will not be obligatory.

**Activity expenses:**

The program includes several activities that are broken down on the budget. The welcome and farewell dinners has been designated as a program expense. The other activities include an estimated cost to pay to the professional locations for access to the site visits, professional liability insurance for the students allowing them to enter the professional locations and the estimated cost of transportation for the on-site experiences.

**Program Fee:**

Considering the norms at UCSC, students do not need to pay an additional tuition fee to participate in the course. Students are locked into an annual tuition rate that is often determined based on the student's family income and therefore, the fees for the program will be designated as an extra-curricular activity fee in order to cover the cost of the program. It is important to note that this budget structure may not apply to the U.S. cohort of students recruited and the budget will need to be modified once the partner institution has been identified.

The program fee indicated is the minimal fee to be collected from the students in order to ensure that the host institutions do not absorb the costs of the program. For the first year, no profit has been indicated however, in the future, the budget should leave room for a possible financial return for the host institutions to redistribute in an effort to develop additional IE program offers.

**Additional Costs to students:**

This section of the budget is an informative area to demonstrate the extra costs that students may incur while studying away from home. It is not comprehensive and does not impact the managerial or fiscal aspects of the program on an institutional level but should be taken into consideration when promoting the program and preparing pre-departure and orientation materials.

**Evaluation Plan**

A summative and formative (Weiss, 1997) evaluation plan is necessary to ensure that UCSC maximizes the benefits of the *Cultural Perspectives in Public Health* course if

it is successful and learns from the process if the program is not successful. The program differs greatly from other international mobility modes that the university has promoted in the past and although the research reviewed above indicates that the program will appeal to students' needs, it is important to monitor the evolution of the program as it moves from the planning to execution phase to understand if the desired outcomes are achieved. It is also important to measure participant satisfaction and the effectiveness of the curriculum to measure the academic value of the course. Finally, because the course aims include a focus on gaining professional competencies, the evaluation plan for the pilot program should plant the seeds for future assessments to gauge the long-term effects of the experience on participants.

The primary stakeholders to consider for this evaluation process should be the same stakeholders noted in the needs assessment with a focus on the UCSC medical students as the primary stakeholders. It will be important to assess the satisfaction of the entire cohort of medical students and not just the participants because the program has been designed in an effort to increase participation rates and access to IE for the UCSC Rome campus. For this reason, a survey should be sent to students who did not participate to understand if the program was successful in removing the obstacles preventing students from studying abroad or, if the students' underlying complaints about IE programs on the UCSC Rome campus persist regardless of the new initiative.

Bagele Chilisa (2016) explains that evaluation processes are "greatly influenced by what is valued by whom under what circumstances (p.8). Chilisa (2016) further elaborates on this topic as it relates to developing an evaluation strategy implying that evaluation processes must take into consideration the cultural norms of the population

that evaluator intends to analyze. In the case of the *Cultural Perspectives in Public Health* program, several contexts will need to be considered when planning the evaluation criteria:

- The academic environment at UCSC
- The academic environment at Northwestern University
- The professional context as it pertains to medical practices in both Italy and the United States
- The cultural norms of Italy and the United States

Sub categories to consider include the cultural background and professional background of the individual students that make up the first cohort. The teaching methods used by the professors facilitating the course should also be evaluated along with both the students' and faculty's satisfaction with the professional environments chosen for the on-site visits.

### **Conclusions**

As globalization, tourism and current migration patterns are increasing the rate at which people are crossing national boundaries for work, pleasure or in seek of shelter, it is important that future medical professionals understand the multi-cultural nature of modern society. Students should be exposed to the effect that cultural norms have on professional practices and global competencies are ever becoming a requirement for success post-graduation. Although UCSC has worked hard to ensure that all students are offered an opportunity to study in an international context during the course of their undergraduate career, it is clear that the students studying under the Faculty of Medicine

will benefit from expanded program offers. In particular, it is important that the Office of Global Engagement and International Education take into consideration the specific needs of the medical student cohort which are currently deterring them from participating in existing program offers. *The Cultural Perspectives in Public Health* Course Proposal described above is a suggested program that may close the gap between the UCSC's current IE offers and the students' requests to participate in a program with a shorter timeline that offers a guaranteed academic return. If approved, the *Cultural Perspectives in Public Health* program will help UCSC to spread institutional internationalization trends on a macro level and could set the stage for global advancements in international education programming with a focus on the healthcare arena.

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### Appendix A Student Survey Questions

- 1) **What is your academic focus (i.e. Medicine and Surgery, Nursing, Healthcare Management etc.)?**

*Qual è il Suo ambito accademico di studi (es. Medicina e Chirurgia, Infermieristica, Gestione Sistema Sanitario, ecc.)?*

- 2) **What is your current level of study? (radial button choice: Graduate, undergraduate, single-cycle MD, Magistrale)**

*Qual è il Suo attuale ciclo di studi? (Laurea Triennale, Magistrale, Magistrale a ciclo unico)*

- 3) **Would you be interested in enrolling in a six-week international summer program starting in early July and ending in mid-August which takes place for 3 weeks in Rome and 3 weeks in New York, NY USA)? YES or NO**

*Sarebbe interessato/a ad immatricolarsi in un corso estivo internazionale di sei settimane, con inizio previsto nei primi giorni di Luglio e svolgimento fino alla metà di Agosto, suddiviso in tre settimane di permanenza a Roma e altre tre presso la città di New York?*

- a. **If you answered no please explain why**

*In caso di risposta negativa, quali sono le ragioni del Suo mancato interesse?*

- b. **If you answered yes above, would you find this offer more attractive if the course was composed of equal numbers of US students and Cattolica students (i.e. a class of 20 students would be composed of 10 UCSC students and 10 US students)?**

*In caso di risposta affermativa, troverebbe la proposta ancora più interessante se il corso fosse composto da studenti americani e studenti Cattolica in pari numero (ad esempio, una classe di 20 studenti ripartita equamente tra 10 studenti UCSC e 10 studenti americani)?*

- 4) **Would you be willing to pay for to participate in a course of this nature (3 weeks in Rome and 3 weeks in NY)? YES or NO**

*Sarebbe disposto a pagare una quota per partecipare ad un corso di questo tipo (3 settimane a Roma e 3 settimane a New York)?*

- a. If yes, what is the maximum fee you would be willing to pay? (open ended question)**

*In caso di risposta affermativa, qual è la quota massima che sarebbe disposto a pagare a tale scopo?*

- 5) Would a course that explores the topic of Public Healthcare systems in a global context be of interest to you? YES or NO**

*Potrebbe risultare interessante un corso che approfondisca l'argomento dei sistemi sanitari pubblici in un contesto globale? SI' o NO*

- a. Please explain briefly the reason for the answer you chose**

*Le chiediamo la cortesia di illustrare brevemente le ragioni della Sua risposta.*

- 6) Would a course that explores the topic of Public Healthcare systems in a global context be useful towards your major? YES or NO**

*La frequentazione di un corso che approfondisca l'argomento dei sistemi sanitari pubblici in un contesto globale potrebbe tornarle utile ai fini dei suoi attuali studi? SI' o NO*

- 7) If you answered yes to either question 5 or 6:**

- a. In which year of study would you suggest UCSC introduce this topic?**

- b. Do you think it would be interesting to compare the US healthcare system to the Italian Healthcare system?**

*Qualora abbia dato una risposta affermativa alla domanda n.5 o n.6:*

*a. Durante quale anno di studi troverebbe più opportuno un'introduzione dell'argomento da parte di UCSC?*

*b. Ritieni possa essere interessante articolare un confronto tra il sistema sanitario americano e quello italiano?*

- 8) How many academic credits would you expect to receive for a six-week course of this nature to make? 3 ECTS, 6 ECTS, 12 ECTS**

*Quanti crediti formativi universitari si aspetterebbe di acquisire per un simile corso di sei settimane? 3 ECTS, 6 ECTS, 12 ECTS*

- 9) In your opinion, what is the most important factor currently preventing large numbers of UCSC Rome students from participating in international mobility experiences?**

*A Suo avviso, qual è l'aspetto più determinante che dissuade gli studenti del Campus di Roma UCSC dal partecipare ad esperienze di mobilità internazionale?*

- 10) Would you be interested in taking an inter-disciplinary course that allows students studying for any healthcare profession to explore the professional context for their future career in the classroom? (in other words, having nursing students, physical therapy students, medical students, healthcare management students etc. exploring a topic of common interest in an academic context)**

- a. Please explain the reasons for your answer.**

*Sarebbe interessato a frequentare un corso interdisciplinare che consenta ad uno studente di una qualsiasi Professore Sanitaria di approfondire in classe il contesto professionale della propria carriera futura? (in altri termini, facendo sì che studenti di infermieristica, fisioterapia, medicina, economia e gestione del sistema sanitario esplorino un argomento di interesse comune in un contesto accademico)*

- a. Le chiediamo la cortesia di illustrare brevemente le ragioni della Sua risposta.*

Appendix B Syllabus

**Università Cattolica del sacro cuore**

**Cultural Perspectives in Public Health**

Summer/2018

Professor Stefania Boccia

Class held at Northwestern University, USA from July 7 – July 26, 2017

Class held at Università Cattolica del Sacro Cuore, Italy from July 30 – August 17, 2017

Instructor I: Stefania Boccia *e-mail: [stefania.boccia@unicatt.it](mailto:stefania.boccia@unicatt.it)*  
Instructor II: TBD  
Course Coordinator: Elizabeth Tyrie *e-mail: [elizabethanne.tyrie@unicatt.it](mailto:elizabethanne.tyrie@unicatt.it)*

Grading: 8 ECTS 30/30 or 4 U.S. Credits Letter Grade

**I. Rationale:**

*Cultural Perspectives in Public Health* is a six-week summer course, which will evaluate and compare healthcare practices in the United States and Italy. Using Kolb's (1984) Experiential Learning Cycle as a foundation for the academic curriculum, the course will take students through two academic sequences focused on connecting the topic of Public Health to a direct experience in an international context.

**II. Course Aims and Outcomes:**

***Aims***

This course will help students develop the knowledge and the ability to understand the Public Health field and in the essential aspects of Healthcare Management in an effort to better prepare students to enter into the workforce as a healthcare professional.

Using Kolb's (1984) experiential learning cycle, the course will explore both theory and practice of the Public Health sector. The course will introduce cultural theories to compliment the study of the Public Health sphere in order to give all students an understanding of how cultural frameworks affect the social vision of the Public Health Services including its economic and institutional goals along with the subsystems and social aspects related to healthcare policy, administration and management.

On site visits to the professional environment in both the United States and Italy are imbedded in the course along with discussions on the impact of culture in the professional environment. This unique opportunity to view professionals in the field in two distinctly different healthcare systems and two different societies aims to create the theoretical prerequisites to deepen the study of operational methods required to overcome the multi-cultural and social challenges that Healthcare Companies, providers, professionals and policy makers deal with on a daily basis.

***Learning Objectives:***

This course will help students to:

- Develop intercultural communication skills and become more cultural competent
- Become reflective learners through reflective practice and analytical observations
- Improve their academic understanding of public health practices
- Gain practical skills to improve their professional development

***Learning Outcomes:***

By the end of this course, students will:

- Identify the stages of intercultural competence identified by Milton Bennett (2004) and describe a situation where the scale has or will be useful to them as a medical student or professional.
- Identify the cultural Geert Hofstede's (2004) cultural dimensions and use them effectively to analyze the differences between the Public Health policies and professional context in the United States and Italy
- Explain their own individual growth using active reflection on the experiences during the course and discuss how the course has affected their understanding of public health practices.

***Topics to be covered in both cultural contexts:***

Funding, introduction and application of Public Health – 3 CFU MG5270

- The National Healthcare System (NHS): principles, evolution and main funding of the NHS, roles and responsibilities of State, Regions, Councils for the planning and organization of the healthcare following the applicable regulations
- The economic impact of healthcare service.

Healthcare planning (Public Health planning)

- Management of the Healthcare Services.

- Healthcare planning.

#### Defining Culture and Cultural Frameworks

- Standards of patient care and communication practices.
- Review of cultural theories.

### III. Course Requirements:

#### 1. Class attendance and participation policy:

Class attendance is mandatory and participation in all on-site visits is required in order to pass the course. If a student is unwell or has an emergency during the six-week program, they must speak to the Course Coordinator to discuss any absences, however, withdrawal from the course may be suggested if a student is unable to attend all activities.

#### 2. Course readings (be advised that additional readings will be assigned throughout the course):

##### (a) Required text:

Zoller, H. M., & Dutta, M. J. (2008). *Emerging perspectives in health communication: meaning, culture, and power*. New York: Routledge/Taylor and Francis Group.

Kolb, D. A. (1984). *Experimental learning: experience as the source of learning and development*. Englewood Cliffs: Prentice-Hall.

##### (b) Other readings available on Blackboard:

Bennett, M. J. (2004). *Becoming interculturally competent*. In J. Wurzel (Ed.), *Toward multiculturalism: A reader in multicultural education* (2nd ed., pp. 62–77). Newton, MA: Intercultural Resource Corporation.

Hofstede, G. (1984). *Cultural dimensions in management and planning*. S.l.: S.n

#### 3. Assignments and Grading:

1. Reflection Journal – 20% of grade
2. Two individual reflection papers – 30% of grade
3. Two comparative analysis group assignments with accompanying oral presentation of findings – 30% of grade

4. In class participation – 20% of grade

### **VIII. Inclusivity Statement**

Università Cattolica del Sacro Cuore and Northwestern University are committed to providing an atmosphere for learning that respects diversity. As a participant in the *Cultural Perspectives in Public Health* program, we ask all students to:

- share their unique experiences, values and beliefs
- be open to the views of others
- honor the uniqueness of their colleagues
- appreciate the opportunity that we have to learn from each other in this community
- value each other's opinions and communicate in a respectful manner
- keep confidential discussions that the community has of a personal (or professional) nature
- use this opportunity together to discuss ways in which we can create an inclusive environment in this course and as future healthcare professionals



## Appendix C UCSC Program Timetable

Event	Date
Final Program Approval	September 8, 2017
Begin Program Marketing	October 1, 2017
Open Student Application Process	October 5, 2017
Student Applications Due	December 22, 2017
Application Review Process	January 3 – 12, 2018
Finalize Practical Site Visit Hosts	January 16, 2018
Student Acceptances	January 16, 2018
Student Confirmation Deposits Due	February 16, 2018
Housing Deposits Due	February 16, 2018
Housing Placement Process	February 20 – March 9, 2018
Housing Placements Announced	March 16, 2018
Final Program Payments Due including all Housing Fees and Program Fees	March 30, 2018
Launch Pre-Program Communication Plan	May 7, 2018
Students must present proof of international insurance and all travel documents required for international travel	June 7, 2018

Arrive in Chicago – Housing Check-in	July 7, 2018
Program Orientation	July 8, 2018
First on-site Class	July 9, 2018
Class on Campus Northwestern University	July 10-12, 2018
On-site Class	July 13, 2018
On-site Class	July 16, 2018
Class on Campus Northwestern University	July 17-19, 2018
On-site Class	July 20, 2018
On-site Class	July 23, 2018
Class on Campus Northwestern University	July 24-26, 2018
Travel from Chicago to Rome	July 27-29, 2018
Orientation and Re-entry Session	July 30, 2018
On-site Class	July 31, 2018
Class on Campus UCSC	August 1-2, 2018
On-site Class	August 6, 2018
Class on Campus UCSC	August 7-9, 2018
On-site Class	August 10, 2018

<b>On-site Class</b>	August 13, 2018
<b>Class on Campus UCSC</b>	August 14-17, 2018
<b>Program Evaluation</b>	August 17, 2018
<b>Action Planning for Next Year</b>	September 2018

### **Appendix D UCSC Program Coordinator Job Description**

The UCSC *Cultural Perspectives in Public Health* Program Coordinator is responsible for managing all administrative tasks associated with the execution of a six-week international mobility course. The Program Coordinator will work in conjunction Northwestern University's International Office to coordinate all logistics for participating students accepted into the program. Responsibilities also include, but are not limited to, coordination of marketing and recruitment initiatives in cooperation with the UCSC International Marketing and Communications team, creation of and execution of the on-site orientation programs. The Program Coordinator should also be prepared and willing to be the first line of support in case of an emergency and be willing to carry the UCSC emergency phone during the majority of the six-week course. This position should create and maintain a safe, healthy and supportive environment for living and learning, and should ensure the professional and efficient management of the Cultural Perspectives in Public Health Program. The staff member should be recruited from within the UCSC Office of Global Engagement and International Education and should have experience working with international programs in both Italy and the United States.

#### Qualifications:

- Minimum two years of experience working for UCSC.
- Bachelor's Degree in a related field. Masters Preferred.
- Fluency in English and Italian Languages – spoken and written.
- Emergency support services and Crisis Management training.
- Intercultural Training.
- Organized and able to meet deadlines under pressure.
- Exceptional customer service, interpersonal, and communication skills.

Responsibilities:

- Manage the application process using the online tool Radius.
- Coordinate all pre-trip logistics including housing arrangements and on-site practical visits.
- Facilitate student orientation and preparation for re-entry programming.
- Supervise students and support faculty during the on-site visits of the course.
- Travel with the student to both Italy and the US and serve as a point of contact for students in case of emergency or for any issues that arise in-country.

- Report directly to the Office of Global Engagement and International Education.
- Other duties as assigned.

Work Schedule: Full time, 40% of time dedicated to the Cultural Perspectives in Public Health Course.

Compensation:

- Strong benefit package.
- Travel bonus.
- All costs covered during time spent away from the staff member's home.

Additional Benefits:

The selected staff member will have the option to hire a student assistant or part-time employee to assist them with the course management or other administrative tasks as the selected staff member deems necessary. If the course is successful, the staff member will be on track to move into a supervisory role as the program grows in the future.

Room and board provided.

### Appendix E Safety Tips

1. Be aware of your surroundings at all times.
2. Keep the program's emergency contact card on you at all times and know who to call if you need help.
3. Travel in small groups and avoid unfamiliar areas, especially if you are alone.
4. Remain alert at all times. If you must go somewhere alone, tell someone where you are going.
5. Don't go out alone at night. Even when you're with friends, stick to well-lit streets.
6. Avoid carrying large amounts of cash on your person. Bring a credit card when possible.
7. Be careful of the traffic in Rome and in Chicago remember that you should look for a crosswalk and avoid crossing the street in undesignated areas.
8. When crossing streets, keep in mind that pedestrians may not be given the right of way or drivers may be distracted.
9. Be careful with alcohol. If you drink, make sure it is only with people you know and trust, and designate one person to remain sober.
10. Never drink and drive.

11. Try to blend in and respect unspoken dress codes. Observe local students' behavior, and try to mimic it. For example, avoid wearing flip flops in Rome and be aware that in most churches you will need to cover your shoulders and knees.
12. Use official taxis only. A good number to call in Rome is +39 063570. Uber is recommended in Chicago if you have the app. If not, ask Northwestern University's housing office for the local cab numbers.
13. Bring a copy of your address with you to be sure you remember how to get home.
14. Leave a copy of all important documents and credit cards in your dorm to make for easy reporting in the event of a theft.
15. Before you traveling, find out what methods of transportation are safest and whether any roads, neighborhoods or services should be avoided.
16. Stay away from demonstrations or any kind of civil disturbances. Even innocent bystanders can be hurt or arrested.
17. Keep your belongings close to you in crowded areas, on public transportation and in train stations.
18. For the latest safety alert information on a specific location, visit <http://travel.state.gov> and select the country of interest from the alphabetical listing. U.S Embassy information may be useful to Italian students as well. For similar alerts in Chicago check: <https://safearound.com/americas/united-states-of-america/chicago/>.







### Appendix G Staff and Faculty Interview Questions

1. Are you classified as a faculty member or an administrative professional at UCSC?
2. What subjects do you teach? OR What is your area of responsibility in the administration?
3. In a few short words, could you please describe your (primary) professional responsibilities at UCSC?
4. On a scale from 1 to 10, how would you rate the importance of learning about the organization of healthcare systems for the future professional responsibilities of your current students?
5. On a scale from 1 to 10, how would you rate the importance of learning about how a healthcare system works for all students who are preparing to become “global citizens”?
6. Would you personally or professionally support an initiative to open a course that analyzes and compares the healthcare systems in Italy and the United states?
7. Would you open this course to all students or just students studying for a particular career path?
  - a. If you answered a particular career path, please specify which:

8. Are you familiar with the faculty led study abroad model for international mobility programming?
9. What do you think is the most significant obstacle currently preventing students on the Rome campus from participating in international mobility opportunities for study?
10. On a scale of 1 to 10, please indicate the level of importance you think Cattolica should give to assisting students to gain the following competencies:
  - a. Global awareness
  - b. Intercultural competence
  - c. A capacity to make educated observations or decisions related to the public health sector
  - d. Awareness of the global impact of local public health trends
  - e. A thorough understanding of public health programming outside of one's home/professional environment
11. In your opinion, would students studying on the Rome campus be interested in attending a 6 week long summer course?
12. Do you think the faculty would support an experiential learning program led by a team of faculty members from UCSC and a US based institution?
13. Do you think that the UCSC students and faculty would support the idea of having a class composed of both UCSC students and US based students?

14. Does UCSC currently offering any inter-disciplinary courses which allow students studying Medicine and/or healthcare management to explore topics of mutual interest in the classroom/field together?
15. Do you think a program that offers such an opportunity would be valuable to students who intend to work as a healthcare professional?