

***Enhancing the postgraduate experience by engaging students in online learning and embedding employability through curriculum design, authentic assessment, and networking***

**OVERVIEW: SUMMARY OF CONTRIBUTION AND CONTEXT**

Health is increasingly being recognised as crucial to growth, development, equity, and stability throughout the world, while globalisation has seen increased interconnectedness and interdependence of peoples and countries. Many of our 700+ strong cohort of Master of Public Health (MPH) and Master of Public Health and Tropical Medicine (MPH&TM) students at James Cook University (JCU) are currently working in, or aspiring to work in, an international setting. This, coupled with JCU's strategic intent "*to create a brighter future for life in the tropics worldwide through graduates and discoveries that make a difference*" make it essential that our public health graduates have skills, attributes, and attitudes that are transportable around the globe and that will make a difference to the populations they serve.

We are now witnessing the highest levels of population displacement on record. An unprecedented 65.3 million people around the world have been forced from home — that's greater than the population of Australia, New Zealand, and Canada combined.<sup>1</sup> Every day, approximately 830 women die from preventable causes related to pregnancy and childbirth; 99% of these deaths occur in developing countries.<sup>2</sup> My public health career as a nurse, midwife, and epidemiologist has covered development work in Papua New Guinea, the Philippines, and Timor Leste, and humanitarian emergencies in Ethiopia, Sri Lanka, Bangladesh, and South Sudan. These experiences have shaped who I am today and continue to be my passion. I am now fortunate to be able to share my insights, experiences, and networks with the next generation of public health professionals.

My academic journey began in late 2012 at JCU where I began coordinating ***Reproductive Health in Developing Countries*** and ***Refugee Health***, two elective subjects in the MPH and MPH&TM programs. As an Early Career Academic (ECA) I was encouraged to enrol in a Graduate Certificate of Education in Academic Practice (GCEAP). Combining the theories that underpin effective teaching and learning provided by the GCEAP with the JCU curriculum framework<sup>3</sup> has enabled me to develop these subjects in ways that stimulate student curiosity and encourage independent learning. ***Reproductive Health in Developing Countries*** is now more accessible to non-clinical students as I have refocused it away from clinical skills to a broader public health framework incorporating a human rights based approach to health. My intention is to develop students who are 'reproductive health champions' so that regardless of where their career path takes them they will always advocate for reproductive health. I use vivid case studies to demonstrate public health responses in emergency settings that inspire and motivate students to learn. Graduates from ***Refugee Health*** who go on to work with displaced populations are well equipped for the challenges they will inevitably face.

Post-graduate students are less satisfied with the student experience than under-graduates, which highlights gaps in the context of employability and support for learning, socialisation, and networking.<sup>4</sup> They are often busy balancing family/work/study commitments and are diverse; our current cohort sees 20% of students older than 40 years and 35% aged under 30 years.<sup>5</sup> The integration of national and JCU curriculum enhancement priorities<sup>6</sup> of authentic assessment, blended learning, and career development and employability into my subjects encourages student engagement and learning, and enhances the postgraduate experience. I provide empathetic advice and guidance with the focus on individual student learning needs rather than a one-size-fits all approach. My effective communication, presentation, and interpersonal skills enthuse and influence students, while my approach to teaching, and intentionality of curriculum design stimulates, motivates, and inspires students to learn.

**CRITERION 1: APPROACHES TO TEACHING AND THE SUPPORT OF LEARNING THAT INFLUENCE, MOTIVATE, AND INSPIRE STUDENTS TO LEARN.**

**ENGAGING STUDENTS IN ONLINE LEARNING**

*'This has easily been the most interesting and engaging subject I have ever taken. I loved it!!!'* (JCU Subject Survey 2016).

***Reproductive Health in Developing Countries*** is an external, fully online subject offered annually with an average of 81 students per year over the past four years. Online learning provides students with great flexibility and convenience. However, this learning environment poses challenges in creating a sense of

belonging and providing a positive learning experience while working within the confines of a Learning Management System (LMS). I have utilised Salmon's model<sup>7</sup> to inform my approach to online learning and teaching. I set up an expectation of engagement through a recorded message welcoming students. Students are invited to introduce themselves via an online discussion board (ODF) and while acknowledging the challenges of external study, I emphasise the benefits of participating in online activities and discussions. Understanding that not all students are familiar with ODFs, I developed a short video demonstrating how to access and use the system. To create a sense of connectedness, I respond to all student introductions with a short individualised message: *'...made more personal by a response to each person's introduction. This also enabled an insight into lecturer's experience'* (JCU Teaching Survey, 2016).

I also make a point of responding rapidly whenever possible to student queries: *'Sandra is so quick to respond to email. As a distance ed. student, this had a huge (positive) impact on my ability to complete studies at home'* (JCU Teaching Survey, 2016). To maintain an online presence, apart from responding to discussion posts, I post regular announcements varying from reminders of assessment, interesting events/webinars coming up and links to online study skills packages: *'Like the regular check-ins by Sandra through announcements – made me feel included and like she really cared about how we were progressing with the unit. It's hard to feel connected as an external student'* (JCU Subject Survey, 2015).

Asynchronous ODFs enable students to read other perspectives and reflect before sharing their own thoughts<sup>8</sup>, and to review messages at a later date<sup>9</sup>; however, there is also the possibility of poor engagement. In 2015, I conducted a literature review to inform my design of, and interaction in, ODFs, then used a case study approach to assess what worked best to engage students in this subject. The findings resulted in a redesign of ODF questions to facilitate critical thinking about concepts, explicitly inviting students to share their experiences and maintaining non-mandatory participation: *'Liked the fact that there was no requirement to participate in discussions – feel this took the pressure off and actually made me want to contribute more than I did in other subjects where it is not marked but mandatory'* (JCU Subject Survey, 2015).

The JCU Standards for Blended and Online Subject Design<sup>10</sup> inform my practice and I have incorporated a variety of technologies to support a positive learning experience. This includes an anonymous online poll as an introduction to subject content in week one and invitation to online participation; links to non-JCU short courses on specific topics, which often have additional work-integrated certificates associated with them; quick quizzes requiring students to access databases to retrieve information; podcasts, vodcasts, TED talks, and recorded interviews: *'I found the delivery methods to be far more stimulating than any previous subjects. This was because rather than just readings, Sandra included videos, interviews, online courses. The subject was so well organised. Her passion for the topics taught is clear. I loved it. Would recommend TM5562 in a heartbeat to any friends studying MPH'* (JCU Subject Survey 2016).

#### **MOTIVATING AND INSPIRING STUDENTS BY EMBEDDING EMPLOYABILITY IN CURRICULUM DESIGN, AUTHENTIC ASSESSMENT AND NETWORKING**

Many students enrolling into **Reproductive Health in Developing Countries** and/or **Refugee Health** express a desire to work in developing countries or humanitarian emergencies, but have limited or no international experience. **Refugee Health** is a block mode subject with two weeks of face to face teaching, averaging 40 students per cohort. I motivate these students by facilitating networks with future employers and highlighting the applicability of curriculum and assessment tasks to real world situations. This embedding of employability is emphasised in the recently released Good Practice Guide to Support the Postgraduate Experience.<sup>11</sup> Student attention is drawn to documents and guides to add to their 'toolkit' of useful resources and I signpost pertinent websites and email subscription lists. Both subjects include non-JCU online short certified courses recognised within the aid sector and add value to student portfolios. *'Thought the subject was relevant....and exposed me to a wide variety of sources that I will now make part of my professional database'* (JCU Subject Survey 2015).

Students are inspired to learn through contact with current practitioners in the field. For **Reproductive Health in Developing Countries** I have recorded informal interviews with experts who are currently working, or have recently worked, in developing countries in a reproductive health capacity. I ask about their backgrounds, how they came to be working in the field, what their role entails, what challenges and rewards they have experienced, and any lessons learnt or advice for the students. Students are encouraged to post

questions/comments through an ODF: *'Thanks so much for sharing your experiences – it really is great hearing from people "on the ground" in developing countries'* (Student post, Putting it into Practice ODF, 2015).

ODF posts on family planning from students currently working in the field demonstrate the immediate impact of the subject: *'...it has also made me acknowledge the importance of provider attitudes and as a clinician it is still possible to have an influential voice in the workplace and in the wider community. It's also prompted me to have more in-depth discussions with my hospital colleagues about the issue whilst working here!'* (Student working in Tanzania, ODF post 2015); *'Exciting news, I have just been invited to attend the Marie Stopes Family Planning Meeting in Port Moresby this week to present on the Successes and Challenges of Family Planning in New Ireland Province. Supply is likely going to be my main focus of the 'Challenges' we experience'* (Student working in Papua New Guinea, ODF post, 2015).

For **Refugee Health**, apart from drawing on my own experiences, I invite a number of veteran aid workers with specific topic expertise as guest presenters. I encourage group work with case studies and scenarios to facilitate learning and have learnt to build time into each day to enable informal chats to occur so students take advantage of the networking opportunities: *'The case studies and practical exercises were the best - actually putting some of it into context and practice. The structure of the classroom work and interactive work was well coordinated and helped a large group of students get to know each other, work together as teams and created a safe and inclusive learning environment'* (JCU Subject survey, 2016).

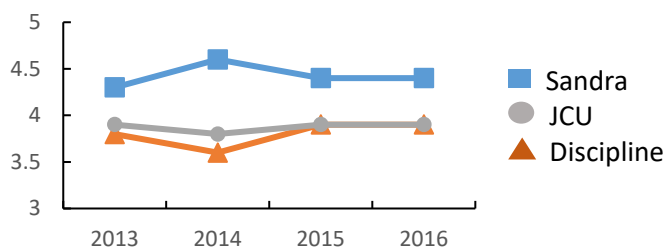
Authentic and work-integrated assessment focuses on students using and applying skills in real-life settings. By reviewing health grants and job descriptions and by engaging with an Australian non-government aid organisation, I have a sound understanding of what the sector requires. I took advantage of the support offered through the JCU Learning and Teaching Unit to craft meaningful assessment items with appropriate levels of instruction and marking rubrics. Appreciating that students may not have been asked to complete tasks like this previously, I provide real-world examples, exemplars and detailed feedback: *'Really enjoyed the assignments as they were in a format of what we might actually do in our working life'* (JCU Subject Survey, 2015); *'Very good feedback on assessments, it helped me improve further assessments and assessments in other subjects too'* (JCU Teaching Survey 2015).

#### **SUSTAINED RECOGNITION BY FELLOW STAFF, THE INSTITUTION AND/OR THE BROADER COMMUNITY**

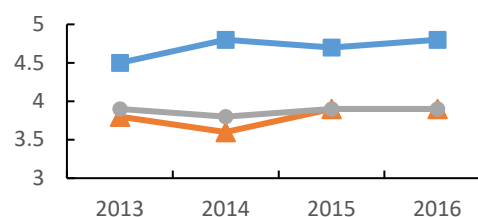
My subject strategies have influenced and inspired colleagues and are used as an example of best practice in JCU professional development sessions: *'I draw upon Sandra's redesigned assessment schedule, for Reproductive Health in Developing Countries, in JCU staff professional learning forums. It is one that inspires academics to consider transforming their own practices. The briefing paper and project proposal are relevant, engaging, sufficiently challenging, well framed and supported, and designed to provide students with consequential feedback. Student evaluation data attests to the quality of their design'* (Associate Professor Michelle Lasen, Head, Teaching Quality & Student Success, Learning, Teaching & Student Engagement, 2017). These subjects have been recommended to international organisations including Medecins sans Frontieres (MSF) and the Canadian Red Cross: *'...the course provided current and relevant topics which would benefit a MedCo whose responsibility is to not only lead the MSF medical programs within a country, but also to interact with other actors and agencies nationally and internationally'* (Wendy Rhymer, MSF MedCo training, Amsterdam 2013); *'During group discussions with new Red Cross Health delegates I recommended the Refugee Health course as giving a good basis for persons new to working in low resource countries and with emergency response'* (Wendy Rhymer, Canadian Red Cross, Emergency Response Unit training, British Columbia, 2014).

For **Refugee Health**, I received the **CPHMVS Dean's Commendation for Teaching Excellence** in 2015 and for **Subject Excellence** in 2016. Criteria for this award include subject student feedback survey scores in the JCU top 10% and with applying the Nulty liberal response rate criteria.<sup>12</sup> In addition, in 2017, I was awarded a JCU **Citation for Outstanding Contributions to Student Learning**.

JCU Subject Surveys for both subjects demonstrate a sustained level of student satisfaction greater than both the Discipline and JCU average for the corresponding year (Figures 1 & 2). A concentrated effort to engage students in providing feedback has resulted in increased response rates.



**Figure 1. Overall Subject Satisfaction**  
**Reproductive Health in Developing Countries**  
 Response rates (2013-16): 27%, 17%, 38%, 36%



**Figure 2. Overall Subject Satisfaction**  
**Refugee Health**  
 Response rates (2013-16): 33%, 30%, 65%, 61%

JCU Teaching Surveys conducted in 2015 and 2016 also indicate a high degree of satisfaction with teaching in both subjects, as outlined in Table 1.

**Table 1. JCU Subject Teaching Surveys**

Year	2015	2016	2016
<b>Subject</b>	Reproductive Health	Refugee Health	Refugee Health
<b>Response (% of cohort)</b>	38%	36%	61%
Staff member was approachable for support	4.7	4.6	5.0
Teaching style of this staff member inspired me to learn	4.3	4.3	4.9
Delivered subject material in ways that helped my learning	4.4	4.3	4.6
Provided useful feedback to improve my learning	4.4	4.4	4.6
Overall, I was satisfied with the teaching of this staff member	4.5	4.5	4.6

## CONCLUSION

My passion for the subjects I coordinate combined with enthusiasm for learning and teaching, influences, inspires, and motivates students to learn. My contribution to student learning has received praise from peers and students and is well demonstrated by sustained high levels of student satisfaction and strong teaching evaluations. Peers use my authentic assessments as examples of best practice and my subjects have been recommended as valuable within the humanitarian sector. I have engaged students in online learning and supported employability through curriculum design, authentic assessment, and networking, achieving the aim of enhancing the postgraduate experience. I also trust that along the way my students have become 'reproductive health champions' and well prepared public health professionals of the future.

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