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Title: “Virtual” socialisation and case-discussion between linked medical student groups in Nepal-NZ and Samoa-NZ during collaborative global health learning – Why and How?

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Introduction:

In recent years, global health has emerged as a key topic that needs more emphasis in undergraduate medical curricula. In 2016 a pilot initiative of collaborative small-group, case-based learning via video-conferencing between medical students in University of Otago, Christchurch and Patan Academy of Health Sciences (PAHS) in Nepal, and between Dunedin School of Medicine and National University of Samoa, sparked an interest among participating students to have opportunities to socialise and learn more collaboratively.

The aim of this initiative, titled “Global Health Classroom” (GHCR), was to explore how better to promote collaborative global health learning and enable students to gain perspectives of different healthcare systems and cultures.

Aim:

To explore how use of social media, such as Facebook, among medical students could be used to enhance collaborative learning and socialisation in the GHCR.

Impact:

Global health needs more emphasis in undergraduate medical curricula to address the wide range of cultural, ethical and environmental issues that increasingly impinge on healthcare practice. Creating opportunities for medical students in different countries for collaborative learning and socialisation via social media in the GHCR will enhance global health learning in the GHCR program. The power of social media to connect medical students holds great potential for them to learn from each other about their cultures, contexts and healthcare challenges.

Methods:

The Global Health Classroom Summer (GHCR-S) case study was run from 8th of December to 14th of December, 2016. Medical students undertaking summer studentship projects at the Otago Medical School (OMS) campuses in Dunedin and Christchurch were recruited to represent OMS. Medical students at the National University of Samoa (NUS) were recruited by Dr Malama Tafuna’i. Pre- and post-questionnaires were prepared on Qualtrics software.

The theme for the case study was paediatric infectious diseases and a participant from each country was selected to prepare a local case study. Each case (NUS and OMS) was posted on the OMS MedMoodle GHCR website on 8th December where the participants could read the case details after using their medical student log-ins. MedMoodle was used as a repository to protect the confidential nature of the case studies. Participants were also emailed a “Student Guide to Global Health Classroom” which included guiding questions relating to the cases. Participants were invited to a closed Facebook group “Global Health Classroom Summer”,

restricted to the invited members all of whom, in this case, were medical students at OMS and NUS.

A concluding plenary video-conferencing session was conducted on the 14th December between Dunedin, Christchurch and Apia. Each case was presented using Power-point™.

Results:

A total of 23 volunteer medical student participants were recruited, 11 in Apia, Samoa and 12 in New Zealand (8 in Christchurch and 4 in Dunedin). All participants signed a consent form and agreed to a written code of conduct, entitled “Social media and Informal Learning Guideline” to guide their use of the closed Facebook group. The closed Facebook group had activity from 11th December to 15th of December.

When asked the strength of agreement with the statement “Collaboration via the closed GHCR Facebook, prior to the plenary video-conferencing enhanced my learning.”:

Strongly agreed	5/21	24%
Somewhat agreed	9/21	42%
Neither agreed nor disagreed	6/21	29%
Somewhat disagreed	1/21	5%
Strongly disagreed	0/21	0%

Overall, two-thirds of participants strongly or somewhat agreed that the Facebook collaboration enhanced their learning. Participants particularly found it useful to share resources such as the antibiotic guidelines and vaccination schedules. Lack of time was considered to be the limiting factor for more Facebook use.

When asked the strength of agreement with the statement “I used the closed Facebook GHCR-S for getting to know (socialisation) medical students from the other medical school.”:

Strongly agreed	6/21	29%
Somewhat agreed	11/21	52%
Neither agreed nor disagreed	2/21	9%
Somewhat disagreed	1/21	5%
Strongly disagreed	1/21	5%

Almost all participants used Facebook to socialise with students from the other medical students with participants commenting that they enjoyed seeing each other’s introductions and photos of their libraries, surroundings and hospitals. Participants commented that “getting over shyness” was a limiting factor.

In regards to future use of Facebook in the GHCR program, participant’s response was overwhelmingly positive due to the ability to collaborate, share resources and socialise.

Conclusion:

Our data overall shows that students enjoyed interacting on Facebook and found it a valuable tool for informal collaborative learning and for socialisation. Given the positive outcomes from the use of Facebook in the GHCR Summer project, the use of social media will be incorporated into some of the 2017 GHCR sessions, which will allow us to investigate further

the use of this potentially powerful tool in the context of global health learning and socialisation between students in different countries.