Sharing a Successful Practice: A Life-Enhancing and Life-Saving Approach to Health Education

Joanne M. Crossman
Saint Leo University, joanne.crossman@saintleo.edu

Follow this and additional works at: https://opencommons.uconn.edu/nera-2016
Part of the Health and Physical Education Commons

Recommended Citation
https://opencommons.uconn.edu/nera-2016/3
Sharing a Successful Practice:  
A Life-Enhancing and Life-Saving Approach to Health Education

Joanne M. Crossman, Ed.D. Professor of Education Saint Leo University, FL

Study Purpose: This study sought to advance health education pedagogy by describing the framework, student learning outcomes, learning activities, and end of course evaluations from a newly designed course that approaches health from both life-enhancing and life-saving perspectives.

Theoretical Framework: Health-minded university communities have the potential to influence and motivate students to avoid perilous behaviors and embrace a wellness approach to learning and living, by taking responsibility for their optimal health and vitality. Our challenge however, is to adopt pedagogies that optimize student learning, neither by teaching everything we want learned or “covering” increasingly more health material, nor by teaching intellectually defensible key facts, but by grounding learning in student research, discussion, and performance (Wiggins & McTighe, 2006). Beginning with the end in mind, we design courses by determining the desired understandings, acceptable assessment evidence, and what is in our students’ best interest (Wiggins & McTighe, 2006). We guide students’ attainment of essential skills that build personal competence, social competence, and self-efficacy by (a) discussing each skill’s importance, relevance, and relationship to other learned skills; (b) presenting steps for skill development; (c) modeling the skill; (d) practicing and rehearsing it using real–life scenarios; and (e) providing feedback and reinforcement (CDC, 2015).

Therefore, the three stages of Wiggins and McTighe’s “backward design” guided the course’s design: “Stage 1: Identify Desired Results. Stage 2: Determine Acceptable Evidence. Stage 3: Plan Learning Experiences and Instruction” (2006, p. 17).

The course is titled: Community Health Education First Aid/CPR/AED. Course learning activities utilize health education as a strategy in health promotion and disease/injury prevention, and CPR/AED and first aid skills to potentially sustain life, reduce pain, and minimize consequences of injury or sudden illness.

Throughout the course, students review and interpret emerging research and services relevant to contemporary health issues and concerns. Subsequently using this knowledge in ways to educate and encourage healthy practices, students design and convey health-promoting messages enhanced by technology tools. Additionally, American Red Cross First Aid/CPR/AED certification may be earned through this course, further developing capacities and skills needed to build a healthier campus community. Given that cardiovascular disease remains the number one cause of death in the United States, is a major cause of disability, and is the leading cause of cardiac emergencies (American Red Cross, 2016), learning to respond to these and other emergencies is prudent.
**Methodology:** Course design: Following Wiggins and McTighe’s (2006) Stage 1 (Identify Desired Results), three national health education standards and American Red Cross certification standards clarified priorities, and guided development of the student learning outcomes:

1. Explore multiple types of health resources, research, and strategies.
2. Interpret evidence-based health research and services, using them in ways to both educate and encourage healthy practices.
3. Design relevant, targeted, health-promoting messages.
4. Use varied strategies and appropriate technology tools to convey health-promoting messages.
5. Develop skills to recognize and respond appropriately to cardiac, breathing, and first aid emergencies until advanced medical personnel arrive and take over.
6. Earn American Red Cross First Aid/CPR/AED certification.*
7. Demonstrate the Saint Leo University Core Values of “Community” and “Personal Development.”

*It is possible to pass the course without earning American Red Cross certification. Conversely, it is possible to earn certification and not pass the course.

In keeping with Wiggins and McTighe’s (2006) Stage 2 (Determine Acceptable Evidence), substantive evidence includes “performance tasks through which students apply their learning to new and authentic situations” along with quizzes, demonstrations, etc. Assessment therefore centers on appraising students’ “understanding and ability to transfer their learning” (ASCD, 2012, p. 5).

Assessment evidence was guided by these questions: Through what authentic performance tasks will students demonstrate the desired understandings? By what criteria will performances of understanding be judged? Though what other evidence will students demonstrate achievement of the desired results? How will students reflect upon and self-assess their learning? (p. 17).

In addition to American Red Cross certification demonstrations, quizzes, and skills tests, the course features two major health education projects. These are located in the Learning Management System for easy access and use. Analytic rubrics accompany the projects, and students are directed to use them to prepare each assignment, and as instructive feedback of assessed work. Among their advantages, analytic rubrics provide diagnostic data about students’ performance and learning, and useful information that may influence assignment, lesson, or assessment refinement (Popham, 2006).

Students also earn a CDC Concussion in Sports Certificate available through a free webinar. Extra credit assignments include taking self-photos aside campus AED units, attending health events on campus and writing reflections prompted by the What, So What, Now What model (Toole and Toole, 1995).
Per Stage 3 (*Plan Learning Experiences and Instruction*), learning activities and lessons were next designed.

The course was piloted and its learning materials, assignments and reflections continue to be refined to improve teaching and learning. End of course evaluation data were reviewed.

**Results:** Of 31 prompts posed on students’ end of course evaluation, seven are dedicated to students’ perception of learning. On a five point Likert scale, the average rating for these six, through spring 2016 was 4.88.

The prompts were: *I have become more confident in this area because of this course;* *I gained an excellent understanding of the concepts in this field;* *I gained significant knowledge about the course subject matter;* *I learned something valuable in this course;* *I learned to analyze and critically evaluate ideas, arguments, and points of view;* *I learned to apply course concepts to solve problems and make decisions.*

The seventh prompt, averaged 4.75. It stated *The course challenged me to perform to the best of my abilities.* Two prompts regarding learning activities garnered 4.88. They stated: *Instructional activities were relevant to the course content;* and *The instructor gave assignments that helped me learn the course content.*

During a two year period, all students (N=61) earned the American Red Cross Adult/Pediatric CRP/First Aid/AED, certification.

Students reported investigating health issues that were both important to them, and that they would likely not have otherwise researched. Those who interviewed athletic trainers, nurses, coaches, residential life staff, campus safety and security staff, etc. learned to ask probing questions, and discovered pragmatic information about their topics. Most students commented positively about collaborating and the variety of learning activities and resources; “hands-on” activities were best received. Students conveyed an increased confidence in consulting and interpreting evidence-based research and health services, and using them to educate and promote healthy practices. Students reported increased ability to recognize and give care in an emergency or sudden illness situation, and in providing essential information to emergency personnel.

**Conclusions:** Ultimately, health education influences and motivates students to learn and adopt behaviors that promote and maintain health. Through active learning, this course teaches students how to live healthy lives, utilize health resources, avoid costly diseases and medical procedures by taking responsibility for their optimal health and vitality, and become better health professionals by using health education strategies. The first aid, CPR/AED components advance knowledge and skills necessary in emergency situations to help sustain life, reduce pain, and minimize consequences of injury or sudden illness. Collectively, this course approaches community health
education from both life-enhancing and life-saving perspectives. The student learning outcomes are achieved, core values are practiced, and the university’s dedication to balanced growth in mind, body and spirit is realized.

**Educational Implications:** This elective course has been of particular interest to the university’s Pre-Med, Biology, Education, Health Care Management, and Criminal Justice majors. The course approaches health from both life-enhancing and life-saving perspectives, integrating active learning as its primary methodology. Featured course framework, student learning outcomes, assignments, and learning activities may be adopted or refined by faculty and curriculum designers who provide students with community health education experiences including health promotion, disease/injury prevention, and sudden illness response.

The course learning activities, rubrics, and resources will be continually reviewed and refined toward improved teaching and learning. Reflections and feedback will guide planning, implementation, and assessment strategies for future iterations of the course.

**References**


