

Report 2: International Semester

Evaluation of project aims, teaching quality and student satisfaction



Evaluation report, version 1, 23 February 2018

By Louise Binow Kjær, Ulla Breth Knudsen, Rikke Korgaard Præstegaard and Rasmus Thøger Christensen

Contents

1. Introduction.....	3
2. Teaching quality and language at the International Semester	4
Lectures	4
The clinic.....	4
Students.....	4
Patients.....	5
The professional track	5
Communication skills training	5
Seminars and lectures	5
Examination on the International Semester	5
3. Student welfare at the International Semester.....	6
International students.....	6
Danish students.....	6
4. Internationalisation at home.....	7
5. Danish students going abroad.....	8
6. Conclusion	8
7. Concluding remarks.....	9
Appendix 1: Evaluations of the International Semester.....	11
Appendix 2: Evaluation of lectures.....	12
2.1 Evaluation of lectures – Autumn 2017	12
2.2 Evaluation of lectures: Compared results from Autumn 2016, Spring 2017 and Autumn 2017.....	12
Appendix 3: Results concerning dyads – autumn 2016.....	13
Appendix 4: Communication skills course (Communication 5).....	14
4.1 Evaluation of communication 5 – Autumn 2016.....	14
4.2 Evaluation of communication 5 – Spring 2017.....	14
Appendix 5: Incoming and outgoing students.....	15
5.1 Incoming students from autumn 2016 to spring 2018.....	15
5.2 Outgoing students from autumn 2016 to spring 2018.....	15
Appendix 6: Partnership agreements with high-standard universities.....	16

1. Introduction

The strategy of Faculty of HEALTH at Aarhus University (AU) is to internationalise the faculty's education programmes. At the Medical Master's Programme at AU, the best way to internationalise is to choose a semester where all courses are taught in English. This allows AU to make formal exchange agreements with attractive international universities, which makes AU attractive to international students.

The aims of the International Semester:

- 1) Make the faculty more attractive for students and lecturers outside the Nordic countries
- 2) Increase the number of exchange agreements / partnerships with high-standard universities
- 3) Increase the language competencies in English among students and lecturers
- 4) "Internationalisation at home" in the sense that Danish students increase their global perspective and English language skills by interacting with international students.

The 5th semester was a natural choice for the new International Semester, as it contains courses and clinical placement in gynaecology, obstetrics and paediatrics. These specialities correspond to the content of semesters at many other universities. By choosing this particular semester, AU aimed at making agreements with partner universities and exchange students within an approved "package of courses" corresponding to the main courses taught at the 5th semester of the Medical Master's Programme at AU.

The International Semester project was divided into two phases:

- 1) Planning: August 2014 - August 2016
- 2) Implementation: August 2016 - August 2017

We now have experiences from three full semesters of the International Semester. During these semesters, we have conducted several student evaluations regarding teaching quality, self-reported language competencies in English and student satisfaction (see appendix 1). This report is an evaluation of the aims of the project, teaching quality and student satisfaction.

2. Teaching quality and language at the International Semester

Lectures, teaching in small groups and clinical teaching were evaluated during the first two International Semesters using the following evaluation procedures:

- A standard Mentimeter evaluation was conducted in all Friday lectures and seminars. In team sessions at the professional track, sessions were evaluated against the learning objectives presented in the introductory lectures. The students were given time in the last part of teaching sessions to fill in the evaluation form online. Questions were answered on a 5-point *Likert* scale (ranging from *highly disagree* to *highly agree*). The higher values indicate a more positive evaluation. Some questions had the possibility of an open answer format. In general, response rates were high.
- At the International Semester, one Danish student representative and one international student representative were appointed in the beginning of the semester. The representatives were responsible for bringing feedback (e.g. questions, opinions and challenges) from fellow students to the semester management. Two times during the semester, course managers met with the student representatives to evaluate and discuss potential fields for improvement. The international coordinator also participated in these meetings.
- An evaluation session was held with the Head of Department of Clinical Medicine at the end of the semester.
- HEALTH end-of-semester evaluation: All students receive an email with a link to an online evaluation of the semester. Response rates are low (average = 25%).

Below, a summary of the results is presented.

Lectures

The lectures every Friday have been evaluated online by Mentimeter.com using six questions (see appendix 2). Furthermore, the students were asked to give constructive feedback to the lecturer using the open answer formats. They often did this, and when the lecturer had more lectures during the semester, the evaluation showed increasingly positive results.

Overall, the rating of the lectures was very satisfying on a 5-point scale (see overall rating in appendix 2). Over the three semesters, the evaluations became increasingly positive?. Especially on question number 2 (involving the students during the lecture). This reflects the incorporation of new teaching methods, e.g. online tools to activate students in relation to a case, by answering online questions and then discussing the answers.

The clinic

Students

In the clinic, each department at the five university hospitals in Jutland had their own evaluation. This mostly consisted of an oral discussion about the quality of the clinical placement and possibilities for improvement. Overall, the evaluations show that the clinical placements are of high standard.

A survey was conducted in the middle of the first semester. Overall, both the Danish and the international students were pleased with their clinical placement, but they mentioned the need for more focus on

teaching in English. In the feedback to the departments, it has been stressed that all conferences in the clinic should be conducted in English.

The dyads of Danish and international students were evaluated during the first semester (see appendix 3). It seems that both Danish and international students give and receive more feedback when working in dyads, than they are used to. Also, the international students find the dyads helpful in relation to outcome of the clinical placement and belief in their own ability to complete given tasks. Some Danish students felt it was hard to have an international student along during their clinical placement, especially in relation to managing the practical aspects of a patient consultation. This might be explained by the fact that it is a new task for Danish students to help translate to other students. Moreover, the Danish students are not previously trained in how to work in dyads and in this way are facing two challenges at the same time. As a solution to this, more focus on how to work equally in a dyad has been stressed and instructive video material has been produced. Also, the faculty is planning to introduce dyads earlier in the Medical Master's Programme.

Patients

A small survey at Department of Pediatrics and Adolescent Medicine focused on the patients' acceptance of having a Danish and an international student along in a dyad. The responses were positive. Most of the patients replied that it had no influence on the clinical situation, and some even found it was positive that there were more students present "to help each other". The language did not seem to have a negative impact on the patients' impression of the consultation.

The professional track

Communication skills training

Peer supervision is trained in teams (15-20 students), using the students' own cases. The theme is "the challenging conversation". The students have a two-hour introductory lecture and four lessons of mandatory communication skills training. In four of the 12 teams, the teaching was in English and the evaluations of the teaching sessions in these four teams were not significantly different from the Danish teams regarding the overall impression of the session, the lecturer's ability to make students participate actively and the students' preparation (see appendix 4 for more results).

Seminars and lectures

There are three seminars in the professional course track 5: Law and ethics concerning death, coordinated work between authorities and cultural and ethical perspectives on medicine. Furthermore, there are five hours of lectures and clinical case discussions in pharmacology. These teaching sessions have not been evaluated using Mentimeter, but the oral evaluations and the HEALTH end-of-semester evaluation indicate that students find the sessions to be satisfactory overall. Some students mention language as a challenge to some lecturers.

Examination on the International Semester

All students have to pass an examination comprised of 70 MCQ items and an OSCE. The MCQ is the "Best single answer" and on average, the students have 90 seconds to answer each item. The OSCE consists of 11

stations where the students are examined on the different specialties. Each station has a specific focus - e.g. gynecological examination using a phantom, communication, drawing a family tree or – most often - a case where the student has to show his or her ability to take a medical history, analyze and comment on laboratory tests etc.

Both for the Danish and the international students, the MCQ items are written in English and the instructions for the OSCE stations are in English. However, the students can choose either Danish or English as the examination language at the OSCE stations.

All of the 45 international students who participated in the examination have passed (autumn semester 2016 = 23 and spring semester 2017 = 22). In the spring 2017, 4 international students chose not to take the examination. Because of this, the semester management now makes it even clearer to the international students that they have to take the examination in Denmark.

3. Student welfare at the International Semester

Student welfare is the social and personal experience of being a student at the International Semester. Both Danish and international students were asked to respond to surveys on this during the semester. Response rates were on average 50% for international students and 27% for Danish students. Furthermore, social events and meetings with student representatives have provided information about/insight into student welfare.

International students

The results of four surveys during autumn 2016 and spring 2017 show that the international students report a high sense of “feeling as an integrated part of the International Semester”, rating this question with an average of 4.2 (on a 5-point scale). Furthermore, the average rating to the question “I feel that my contact with Danish students is adequate” was 3.9. Overall, the international students rate their semester at AU as highly positive: 48% rate the semester as “excellent”, 48% as “good” and 5% as “satisfactory” (*End of semester survey – HEALTH, Autumn 2017. Response rate: 50%*).

When asked about positive aspects of being a student at the International Semester, students mention:

- Meeting Danish and other international students
- Clinical placements
- Getting to know another healthcare system

They also mention some negative aspects:

- Quality of lectures is lowered when conducted in English
- Danish language used in clinical practice makes it hard to follow and understand
- Worries about passing the examination (due to English language issues)

Danish students

The Danish students report a lower sense of “feeling as an integrated part of the International Semester” than the international students. Their average rating to this question is 3.1 (on a 5-point scale). It seems natural that the Danish students find it more challenging to be part of an international environment at their

5th semester, as all the previous semesters have been conducted in Danish and with Danish-speaking students. However, 3.1 is a positive result for the students responding to the surveys. As it was only 27% of the Danish students who participated in the survey, the results is not an expression of the general opinion. Regarding the question “I feel that my contact with international students is adequate”, the Danish students' average rating was 2.9 (on a 5-point scale). Again, this result is less positive than the response from the international students, but still quite positive. When asked about the positive aspects of being a student at the International Semester, the Danish students mention:

- Meeting people from other countries
- Social arrangements
- Better at English (orally and in writing)
- Implementation of new activating teaching methods because of International Semester

Negative aspects mentioned:

- Quality of lectures is lowered when conducted in English
- Dyads in the clinical practice results in lower learning outcome
- Worries about passing the examination (due to English language issues)

4. Internationalisation at home

To investigate the outcome of “Internationalisation at home”, we conducted four surveys on “global perspective” and language capabilities among the students before and after the International Semester. The results do not indicate that Danish students have increased their knowledge of international health care by having completed the International Semester. Incorporating more international aspects into the teaching at the International Semester is a point for further development.

We tried to measure the students' language capabilities before and after the International Semester asking the questions “rate your level of English when it comes to the use of medical terms in writing” and “rate your level of English when it comes to the oral use of medical terms”. The results showed a small increase in perceived English skills (writing skills develop from 3.3 in 2015 to 3.6 in 2017 and oral skills from 3.0 in 2015 to 3.4 in 2017 on a 5-point scale). This indicates that most Danish students were confident about speaking English before the International Semester was implemented and that they improve slightly during the course of the semester.

Furthermore, evaluations indicated that:

- a) The Danish students take great responsibility in helping and discussing with the international students (e.g. during the clinical placements).
- b) The Danish students participate in lectures and symposia in English – however, they seem to be a little more reluctant to have unstructured discussions in large groups due to the language. For this reason, lecturers now use more student-activating tools (e.g. mentimeter etc.) in their teaching.
- c) The Danish students interact with the international students, although this may be a challenge. Social events arranged by the university make it easier to get to know each other. Also, the dyads makes Danish students engage with international students.

5. Danish students going abroad

All Danish students going abroad through an Aarhus University exchange agreement are encouraged to evaluate their exchange stay when returning to Denmark. Generally, all Danish students are positive about their experiences abroad and strongly encourage other students to go on exchange stays.

The students mention academic benefits such as getting new perspectives on their education, experiencing a foreign health care system and networking internationally. And they generally rate the experience as positive in relation to their future employment. Furthermore, studying abroad supports students in practicing or learning another language.

Personally, the students benefit from the exchange by meeting new friends, experiencing another country and culture as well as combining traveling with education. All students who studied abroad have felt integrated both in the local community and with other international students. All students going abroad are more likely to consider working abroad.

6. Conclusion

Regarding the aims of the International Semester, we can conclude that:

1) Make the faculty more attractive for students and teachers outside the Nordic countries

As seen in report 1, the Medical Master at AU, HEALTH is increasingly attractive to students outside the Nordic countries. We experience a rising number of international students applying for exchange at the International Semester (see appendix 5). Our goal was to exchange 60 students each semester, and we have now reached approximately 30 international students at each semester. We are confident that it will be possible to recruit a higher number of international students.

However, the important question is if we will succeed in sending just as many Danish students to our partnership universities. This is a prerequisite for accepting more incoming international students as we are exchanging on a 1:1 basis. We have a challenge in motivating more Danish students at the 11th semester to apply for an exchange stay. It seems that many Danish students at this point of their studies have or are planning to have children, and this makes them less flexible. However, we will continue to advertise the possibility to go out on the International Semester and we hope to motivate even more Danish students. Regarding the aim for lecturers, we have not yet seen an increase in number of international lecturers at the Medical Master's Programme.

2) Increase the amount of exchange-agreements / partnerships with high-standard universities

As seen in report 1, there has been an increase in number of exchange agreements/partnerships with high-standard universities at the International Semester (see appendix 6) and our list of partnership universities include both European, Chinese and Australian Universities. The main part of availabilities are in Germany and Norway. Some of the European universities offer semesters taught in English. However, it has proven difficult to make partnerships with English and American universities, as they often wish to exchange students only for clinical placements. Our decision to exchange for a whole semester limits the number of potential partnership universities. We are currently searching for alternative models of exchange

agreements. One possibility is to offer summer school classes to other universities in exchange for a number of full semester availabilities.

3) Increase the language competencies in English among students and teachers

The language capabilities of lecturers were measured in student evaluations of teaching quality in teaching sessions at the International Semester. Overall, the rating of the lecturers was very satisfying and the teaching quality increased from the first to the third semester. The students' language capabilities were measured before and after the International Semester and the results showed a small increase in perceived English competencies.

4) “Internationalisation at home”

To investigate “Internationalisation at home”, we conducted four surveys on the “global perspective” among the students, before and after completing the International Semester. The results do not indicate that Danish students have increased their knowledge of international health care as result of completing the International Semester. This is a point for further development of the lectures to incorporate international themes and to activate the students’ discussions of these.

Also, the interaction with international students is expected to have some impact on the Danish students. However, this could be addressed more systematically in the teaching by spending more time on teamwork.

7. Concluding remarks

The process of planning and implementing the International Semester has been an exciting journey for the people involved at Aarhus University. We are confident that the International Semester will continue to develop in cooperation with lecturers, planners, leaders and students. Because of this ability to work together at all levels of the organisation, our project was implemented as planned in the autumn of 2016.

There have been challenges and one of the lessons we have learned is that it is good to be ambitious – and at the same time be able to listen to the critical and worried voices. There has been an ongoing dialogue about specialties and subjects at the International Semester. This has led to necessary adjustments, which made it difficult to make final agreements with partner universities at an early stage. We therefore recommend at least two years of preparation and planning before implementing an International Semester. The time spent on dialogue with stakeholders will pay off! Last, but not least, we would like to thank all the people involved in the International Semester for their time and valuable input.

Contact details:

Louise Binow Kjær

Department of Clinical Medicine / Centre for Health Sciences Education

E-mail: louise@cesu.au.dk

Ulla Breth Knudsen

Department of Clinical Medicine

E-mail: ubk@clin.au.dk and ullaknud@rm.dk

Rikke Korgaard Præstegaard

Office of International Relations

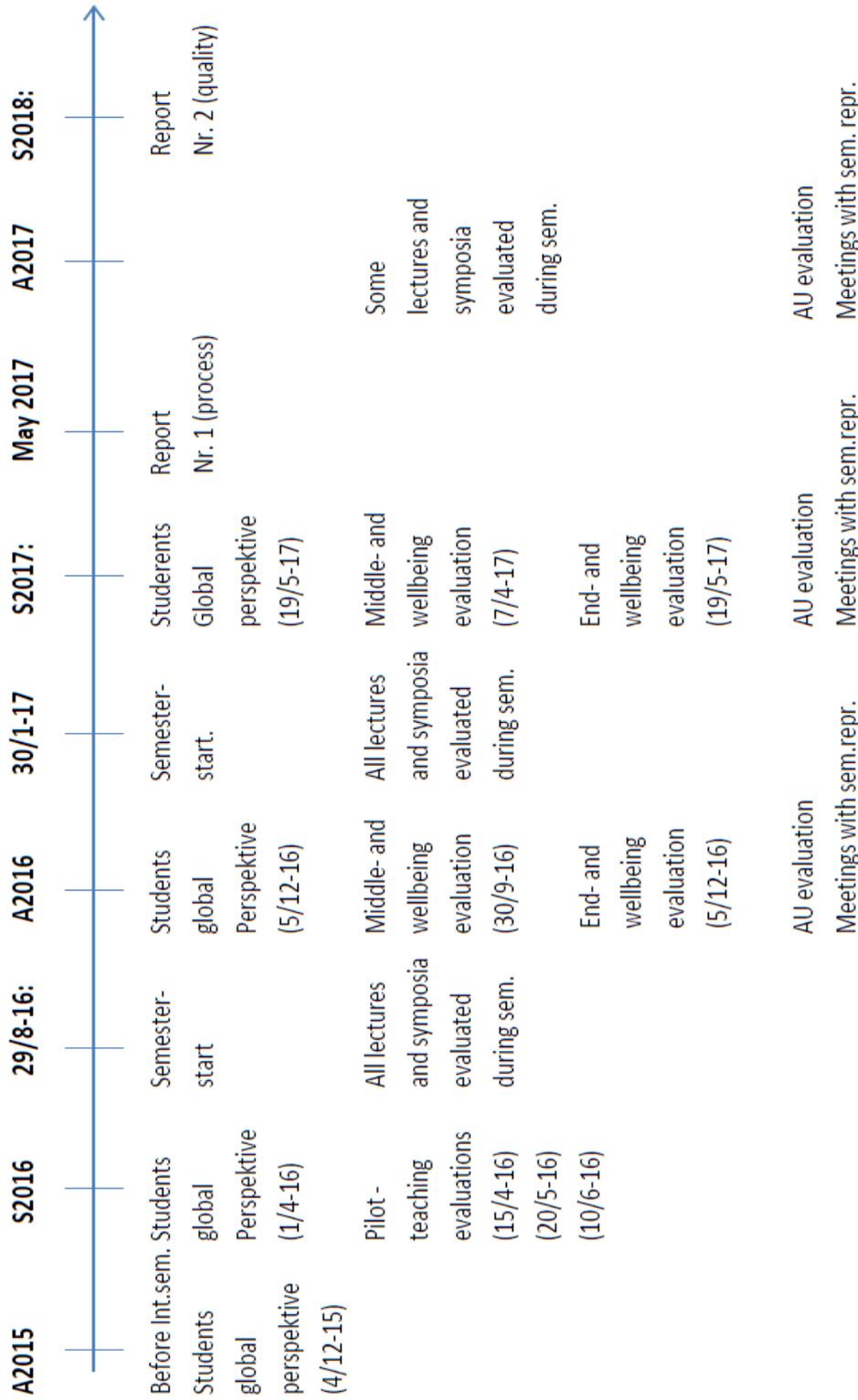
E-mail: rkp@au.dk

Rasmus Thøger Christensen

International student counsellor

E-mail: rtc@au.dk

Appendix 1: Evaluations of the International Semester



Appendix 2: Evaluation of lectures

2.1 Evaluation of lectures – Autumn 2017

Detailed evaluation results of lectures in each of the specialties of the International Semester.

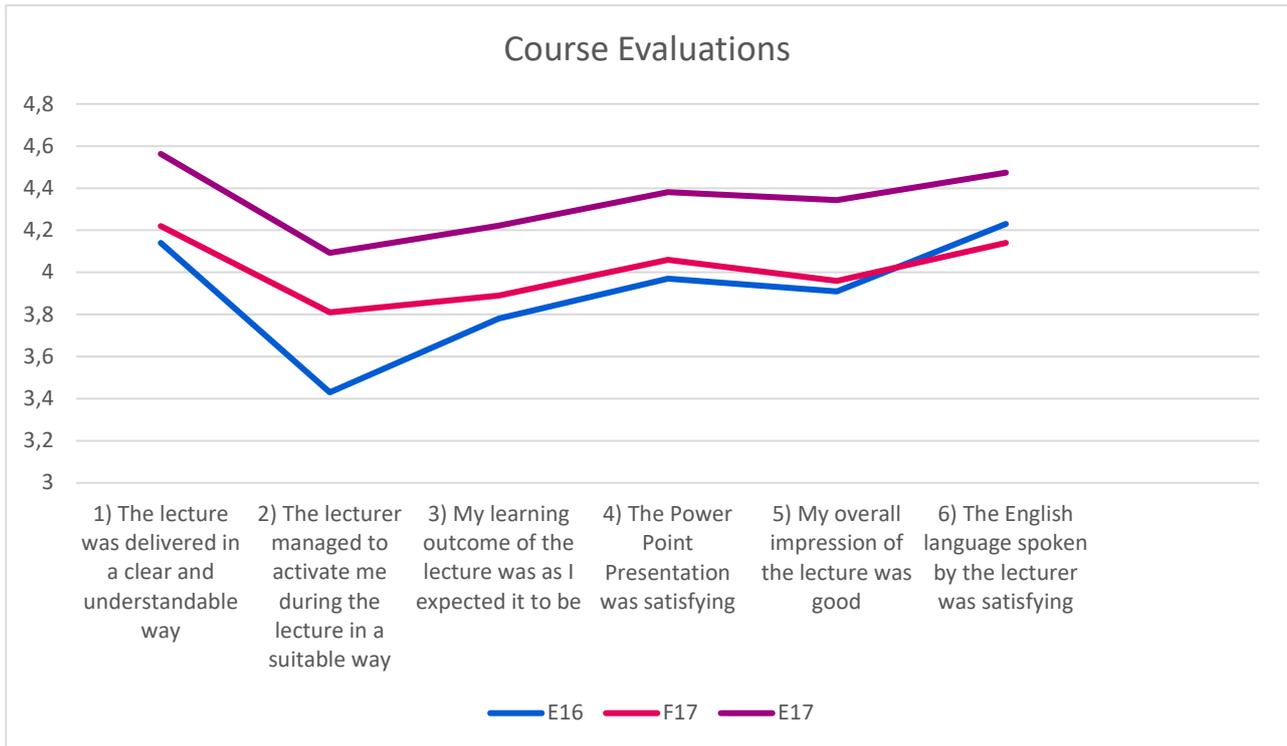
Question	Gyne- cology	Genetics	Paedia- trics	Forensic medicine	Average	Ranked (lower is better)
Question 1: The lecture was delivered in a clear and understandable way	4.49	4.67	4.24	4.85	4.56	2
Question 2: The lecturer managed to activate me during the lecture in a suitable way	3.84	4.34	3.67	4.53	4.09	7
Question 3: My learning outcome of the lecture was as I expected it to be	4.14	4.31	3.88	4.55	4.22	6
Question 4: The Power Point presentation was satisfying	4.22	4.53	4.04	4.73	4.38	4
Question 5: My overall impression of the lecture was good	4.20	4.57	3.93	4.67	4.34	5
Question 6: The English language spoken by the lecturer was satisfying	4.36	4.63	4.13	4.77	4.47	3
Question 7: Did the lecture respect the scheduled time?	4.59	4.95	4.59	4.59	4.68	1
Average score	4.26	4.57	4.07	4.67	4.39	
Ranked (lower is better)	3	2	4	1	Sum	
Total responses	412	147	614	291	1464	

2.2 Evaluation of lectures: Compared results from Autumn 2016, Spring 2017 and Autumn 2017

Compared evaluation results through the three semesters show a positive development in the student evaluation of lectures.

Questions	Autumn 2016	Spring 2017	Autumn 2017
1) The lecture was delivered in a clear and understandable way	4.14	4.22	4.56
2) The lecturer managed to activate me during the lecture in a suitable way	3.43	3.81	4.09
3) My learning outcome of the lecture was as I expected it to be	3.78	3.89	4.22
4) The Power Point Presentation was satisfying	3.97	4.06	4.38
5) My overall impression of the lecture was good	3.91	3.96	4.34
6) The English language spoken by the lecturer was satisfying	4.23	4.14	4.47

Below the results are illustrated in a figure.



Appendix 3: Results concerning dyads – autumn 2016

Range of answers on a 5-point scale (5 agree - 1 disagree). The first number is the average score of the Danish students and the latter the International students' score. The total number of students at the semester was 206. Of these, 23 were international students; 23 Danish and 23 international students were in dyads.

Questions	Average score, Danish students in dyads (resp.rate = 70%)	Average score, int. students (resp.rate = 57%)
The dyad improves the outcome of my clinical rotation compared to previous semesters	2.62	3.75
By being part of a dyad, I have GIVEN more feedback to my dyad buddy than I usually give to my fellow students	3.75	2.92
By being part of a dyad, I have RECEIVED more feedback from my dyad buddy than I usually receive from my fellow students	2.25	3.23
By being part of a dyad, it was easier to manage the practical aspects of a consultation (e.g. preparing for the consultation, writing a medical record)	2.31	4.46
Being part of a dyad has improved my belief in my own ability to complete given tasks	2.86	3.5

Appendix 4: Communication skills course (Communication 5)

Evaluation results from Danish and English speaking teams on a 5- point scale (5 agree – 1 disagree). As only 4 out of 12 teams were English speaking, the number of respondents in this group was lower. This is due to the decision that international students should be placed in teams with a balance between Danish and international students - meaning that in teams with 18 students, there will be at least six international students (and 12 Danish).

4.1 Evaluation of communication 5 – Autumn 2016

Questions (respondents, n=186)	Average score, Danish teams (n=118)	Average score, English speaking teams (n=68)
My overall impression of the session was good.	3.84	3.72
The teacher managed to activate me during the session in a suitable way	4.28	4.21
I was prepared and participated actively in the session	4.31	4.50
The session was delivered in a clear and understandable way	4.21	3.91

4.2 Evaluation of communication 5 – Spring 2017

Questions (respondents, n=120)	Average score, Danish teams (n=93)	Average score, English speaking teams (n=27)
My overall impression of the session was good.	4.35	4.27
The teacher managed to activate me during the session in a suitable way	4.65	4.33
I was prepared and participated actively in the session	4.31	4.44
The session was delivered in a clear and understandable way	4.58	4.42

Appendix 5: Incoming and outgoing students

5.1 Incoming students from autumn 2016 to spring 2018

The difference in the number of ingoing students from one semester to another is determined by: 1) When the agreement was made and 2) When it is possible for the partner university to exchange students.

Country	Autumn 2016	Spring 2017	Autumn 2017	Spring 2018
Australia				6
Austria	2	5	3	2
Brazil		1	3	2
Czech Republic	2	4	3	4
Finland	1			
France				1
Germany	11	11	18	8
Hungary			1	
Italy	2	2	5	3
Norway	4		8	4
Slovenia		1		1
Spain	1	2	2	
Sweden				2
Tyrkey				1
Total	23	26	43	34

5.2 Outgoing students from autumn 2016 to spring 2018

The difference in the number of outgoing students from one semester to another is determined by which semesters it is possible to exchange students. In some agreements, it is only possible to exchange students during the autumn or spring semester.

Country	Autumn 2016	Spring 2017	Autumn 2017	Spring 2018
Australia	0	0	0	6
Austria	1	0	1	
Brazil	0	0	2	0
Czech Republic		2	6	4
France	0	0	2	0
Germany	4	6	2	9
Hungary			1	
Italy			3	3
Norway	8		9	2
Slovenia				2
Spain			2	
Sweden	6	1	3	2
Total	19	9	31	28

Appendix 6: Partnership agreements with high-standard universities

University	Country	Availabilites per year
University of Adelaide	Australia	4
Harbin Medical University	China	4
Medizinische Universität Graz	Austria	4
Medizinische Universität Innsbruck	Austria	2
Charles University Prague 1st Faculty	Czech Republic	2
Univerzita Palackeho v Olomouci	Czech Republic	2
Universite Claude Bernard(Lyon 1) Villeurbanne	France	2
Albert-Ludwigs-Universität Freiburg	Germany	4
Dresden University of Technology	Germany	2
Eberhard-Karls-Universität Tübingen	Germany	2
Freie Universität Berlin	Germany	3
Georg-August Universität Göttingen, Deutschland	Germany	2
Hannover Medical School (MHH)	Germany	2
Ludwig-Maximilians-Universität (LMU) München	Germany	4
Ruprecht Karls Universität, Heidelberg	Germany	2
Technische Universität München	Germany	2
Universita Cattolica del Sacro Cuore	Italy	4
University of Bologna	Italy	3
UiT The Arctic University of Norway	Norway	8
University of Ljubljana	Slovenia	2
University of Barcelona (UB)	Spain	2
Karolinska Instituttet	Sweden	1
Universitetet i Bergen	Norway	6
Universitetet i Oslo	Norway	6
Uppsala Universitet	Sweden	2
Total		77