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The Use of Creative Podcasting in Combating Ethno-Racial Health Disparities in Primary Care Education: A Brief Report

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Abstract

Racially and ethnically diverse populations are more likely than non-Hispanic Whites to report experiencing poorer quality patient-provider interactions as well as perceived discrimination from the primary care team. An approach to address discrimination in primary care is through alterations in primary care workforce development. This paper will focus on how the use of trainee-generated content (TGC) through *creative podcasting* can be used as a teaching aid to help trainees address implicit bias and discrimination in clinical practice. Doctoral-level health service psychology trainees in an integrated primary care course engaged in creative podcasting to promote deep learning related to racial and ethnic health disparities during the spring 2021 semester. Overall, trainees reported a positive experience with creative podcasting, reporting a strong connection with the material discussed in the podcast and improved self-reflection on biases related to racial/ethnic health disparities. TGC through creative podcasting appears to be an appropriate teaching approach to improve trainee engagement related to topics of implicit bias and discrimination as well as allowing trainees, especially trainees from racially/ethnically marginalized groups, a more equitable learning experience between the trainee and educator.

Many racially and ethnically diverse communities have higher mortality rates from chronic diseases such as cancer, diabetes, and cardiovascular disease than non-Hispanic Whites (Edgoose et al., 2018). According to the Kaiser Family Foundation, 32% of Hispanic/Latinos, 22% of African Americans, 19% of Asian Americans and 30% of American Indians are uninsured compared to 14% of non-Hispanic Whites (Edgoose et al., 2018). The impact of these statistics has been documented in the primary care setting, with African Americans, Asian Americans, and Hispanic/Latinos less likely than non-Hispanic Whites to have a personal primary care provider (Edgoose et al., 2018). Racial and ethnically diverse populations are also more likely than non-Hispanic Whites to report experiencing poorer quality patientprovider interactions as well as perceived discrimination from the health care team (Edgoose et al., 2018). More than one approach will be needed to address health

disparities and systemic racism in health care in order to achieve health equity

An approach to achieving health equity is through alterations in primary care workforce and curriculum development more specifically, the use of technology in clinical training (Davidson et al., 2019; Evans, 2008; Ho, Girgis, Rustad, Noordsy, & Stern, 2019; Pegrum, Bartle, & Longnecker, 2015; Hurst, 2016; Riddell, Robins, Sherbino, Brown, & Ilgen, 2021). When focusing on the development of the primary care adult learner, going beyond a pedagogical approach is needed (Mezirow, 2009; Snowball & McKenna, 2017). Typically, a pedagogical approach is educator centric. When infusing technology into a curriculum in which the adult learner can infuse their experiences into the content of the course and directly apply to their professional life, this becomes andragogy, and is superior to pedagogy for the adult learner (McNamara & Drew, 2019;

Mezirom, 2009). The increased use and popularity of web-based learning platforms and e-learning have provided educators (and learners) additional opportunities to present and comprehend information. The COVID-19 pandemic also facilitated the rise of virtual learning, pushing educators to use, possibly for the first time, online learning platforms and approaches that are not solely lecture-based. Examples of web-based educational tools include blogs, vlogs, wikis, e-portfolios, digital stories, and podcasts (Kim, Long, Zhao, Zhou, & Alexander, 2021; Snowball & McKenna, 2017). Websites like YouTube and Wikipedia allow users to generate their own content. Translating this approach into education allows for "trainee generated content" (TGC) in which trainees are the producers and consumers (i.e., "prosumers") of knowledge and content (Snowball & McKenna, 2017).

Past studies have found that TGC is associated with greater trainee engagement in the course, improved retention, deep learning, reflective learning, and creating "high quality work" that is enjoyable (Pegrum, Bartle, & Longnecker, 2015; Miesner, Lyons, & McLoughlin, 2017; Snowball & McKenna, 2017, p. 607; Yilmaz & Keser, 2016). TGC is also consistent with other pedagogical approaches that are trainee centered and encourage partnership between the learner and educator, in which shared learning can take place (Snowball & McKenna, 2017). Learners are able to combine their pre-existing knowledge and life experiences with new knowledge to engage in the critical analysis that is called for in deep learning (Pegrum, Bartle, & Longnecker, 2015). Rather than relying heavily on the educator-to-learner transmission of knowledge, learners are empowered to have a more active role in their learning. Learners can develop their

own insights based not only on the knowledge they consume, but also on their life context, challenging the assumption that the learner is passive in the process and the educator is the 'giver of knowledge' (Kim et al., 2021; Snowball & McKenna, 2017).

Podcasting has been used in higher education in a variety of ways: 1) Substitutional podcasting: audio recordings of class lectures; 2) Supplementary podcasting: audio recordings to supplement the material discussed in class; and 3) Creative podcasting: students creating their own podcasts to develop an understanding of a certain topic (Luna & Cullen, 2011; Pegrum, Bartle, & Longnecker, 2015). In order to address health equity downstream, the goal of this project was to examine trainee experiences with TGC through creative podcasting in the context of understanding racial/ethnic health disparities as well as facilitate the trainee's understanding of the connection between implicit bias and discrimination.

Methods

Our Lady of the Lake University is a small, Catholic, private university. The university houses an APA-accredited Health Service Psychology/Counseling Psychology, Doctor of Psychology (PsyD) program. Each cohort in this program has 6 - 8 PsyD students. Six doctoral-level health service psychology trainees were enrolled in a 16-week. integrated primary care course. The course covered topics such as the context of primary care, common concerns that patients present with in primary care, and the role of psychology in primary care. Students were given an overview of the different models of integrating behavioral health into primary care, with a specific focus on the Primary Care Behavioral Health (PCBH) model. Due to the COVID-19 pandemic, the course was

completely virtual. The course consisted of live lectures by the instructor and/or guest speakers weekly, weekly readings from the course texts, and online resources (e.g., journal articles, websites, webinars) to augment the weekly lectures. Formative assessment included weekly in-class discussions and course guizzes throughout the semester. Summative assessment included an end of the semester final paper focused on a fictional, primary care patient and applying the 5As model of care as if the student was a Behavioral Health Consultant treating the patient in primary care alongside the primary care team. Students also provided a presentation of their fictional patient care at the end of the semester.

Students completed a book reflection project in which they were presented with three texts that focused specifically on racial/ethnic health disparities in medical settings and engaged in a creative podcasting assignment to promote deep learning related to racial and ethnic health disparities. Students were given specific directions on how to complete the 10-15minute podcast (e.g., web platforms to use to complete the podcast), what to include (e.g., the book review itself, a discussion of implicit biases, and their opinions of the book content), and the rubric for the assignment at the beginning of the semester (Appendix A). Students were encouraged to ask questions and discuss ideas with the course instructor to help manage initial anxiety with using a new platform. Students were also encouraged to listen to different podcasts prior to starting the assignment if they were not familiar with podcasts. At the end of the semester, trainees were given the option of completing an online survey to provide feedback (i.e., qualitative and quantitative) regarding their experiences completing the assignment. Of the six trainees enrolled, five completed the online

survey. This project had IRB approval and students were granted extra credit for voluntarily completing the survey.

Results

Demographic information of the 5 trainees are listed in Table 1. Data on student perceptions of the value of TGC through creative podcasting were collected as part of the course evaluation administered near the end of the semester. Quantitative and qualitative feedback was collected. The purpose of the qualitative feedback was to give the trainee an opportunity to expand on their experiences with podcast creation. Trainees positively rated creative podcasting as enhancing their learning in racial/ethnic health disparities (40% (n=2) "agree" and 60% (n=3) "strongly agree). Additionally, 80% (n=4) of trainees selected either "agree" or "strongly agree" regarding creative podcasting enhancing their selfawareness of racial/ethnic biases.

Responses to the open-ended questions were sorted into positive and negative experiences. When asked if this assignment changed their view of podcasts, one trainee answered,

> I never listened to podcasts relating to psychology because I thought they would be gimmicky. But after completing this assignment and realizing the rigor it takes to accurately and honestly report information, I decided to give podcasts on psychology a chance. Since then I've really enjoyed listening to APA's podcast Speaking of Psychology and AAMFT's podcast.

When asked about what was most enjoyed about completing the creative podcasting

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assignment, trainees reported enjoying the content (racial/ethnic health disparities), the ability to engage in self-reflection, and the challenge of using a technology medium not used previously. One trainee answered, "the relationship you develop with the material. I learned that I had to really know the material before I spoke about it and that created a richer learning experience." Another trainee answered, "I enjoyed learning how to use technology to create the podcast and the ability to reflect on my own biases." When asked about what improvement could be made to the creative podcasting assignment, trainees reported more training on editing podcasts as well as more flexibility with podcast content (e.g., interviewing a person and discussing the book versus the podcaster reviewing the book alone). One trainee answered,

> I think it's a great assignment to keep in the syllabus! I would really like to hear what others did but would be nervous for people to hear what I did. I think it would be cool to upload a link to hear people's podcast if they chose to share it.

Table 1

Trainee Demographics		
Characteristics (N=5)	Result n (%)	
Gender		
Female	5 (100.0)	
Age, mean (SD)	32.0 (5.9)	
Race/ethnicity		
Hispanic/Latinx	4 (80.0)	
Multiracial	1 (20.0)	
Years in the program		
1 st year doctoral student	1 (20.0)	
2 nd year doctoral student	3 (60.0)	
Other	1 (20.0)	
Technology for course		
Laptop computer	4 (80.0)	
Tablet	2 (40.0)	
Smartphone	3 (60.0)	
Podcast listening before course		
Personal enjoyment	5 (100.0)	
Professional development	2 (40.0)	
Created digital content in past course		
Yes, in psychology course	2 (40.0)	
No	3 (60.0)	
Technology to complete podcast		
Laptop computer	4 (80.0)	
Smartphone	1 (20.0)	
Audio voice recorder	2 (40.0)	
Microphone	2 (40.0)	
Time (hours) involved in, mean (SD)		
Create interview/podcast guide	7.5 (4.3)	
Record the podcast	5.0 (2.8)	

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Edit the podcast	1.3 (0.4)
Engagement in podcast after course	
Listen for personal enjoyment	4 (80.0)
Listen for professional development	3 (60.0)
Create for personal enjoyment	2 (40.0)
Create for professional development	3 (60.0)

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Given that primary care patients will continue to become more racially/ethnically diverse, it is important to address racial/ethnic health disparities in primary care education so trainees are aware of these health disparities and can take steps to address and close the disparity gaps and improve health equity as they begin clinical practice. Finding ways for trainees to be more engaged in the course content is imperative. Approaches like creative podcasting can also validate and acknowledge students from minoritized sociocultural backgrounds by giving them a voice within the course content, which in traditional learning settings, may be ignored or invalidated (Dames, 2019; Mason, McDougle, & Jones, 2019).

Data from the evaluations showed that many of the trainees felt that the process of creating a podcast was beneficial for their overall learning (Pegrum, Bartle, & Longnecker, 2015). As found by Benedict and Pence (2012), Pegrum, Bartle, and Longnecker (2015), and Snowball and McKenna (2017), trainees also enjoyed, and showed considerable proficiency in using new technologies as well as creativity to facilitate their learning. Although none of the trainees had prior experience with creating and editing podcasts prior to this course, 80% of the trainees indicated preexisting knowledge of how to find podcasts or listed to podcasts prior to completing this assignment. This may have also impacted the trainees having a positive experience with creating podcasts. This is consistent

with past research stating digital literacy facilitates the use of e-learning for learners (Mohammadyari & Singh, 2014). Given the size of this sample and the cross-sectional nature of this project, future studies should examine larger samples as well as other learner groups who are part of the primary care team such as medical students, nursing students, and family medicine/pediatric/internal medicine residents. Additionally, it would be important for future research to examine the longitudinal impact of projects like this in the trainee's clinical practice, specific to actively addressing racial/ethnic health disparities, implicit bias, and improving health equity in their patient populations and communities. Overall, these findings could suggest that a transformative learning approach for teaching and learning using online tools like TGC through creative podcasting could be necessary for trainees to not just consume content but also to produce it.

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