

# SYMPOSIUM: BEST PRACTICES IN TEACHING PSYCHOSOMATIC MEDICINE

VIKKI BURNS, PHD; CRISTA CRITTENDEN, MPH, PHD; DOUGLAS DROSSMAN, MD; NATARIA JOSEPH, PHD



### EVIDENCE-BASED TEACHING PRACTICES AND ASSESSMENTS FOR INCREASING EFFECTIVENESS & IMPACT

#### Guiding Conceptual Frameworks

- High Impact Practices (HIPs)
- Learning Types: Learner-Centered, Active, Self-Referential Learning, Deep
- Assessment and the Importance of Backwards Design

### MY PORTION OF THE SYMPOSIUM

### PEDAGOGY + ASSIGNMENT EXAMPLES: HIPS & DEEP, ACTIVE LEARNING

#### **High-Impact Practices (HIPs)**

- Associated with Deep Learning, Active Learning, and Personal / Professional Gains
- Service Learning, Community-Based Learning
   Example: Healthy Happy Hours; cultivate field-based experiential learning of course content in action by working with and serving the campus community by applying PM principles to analyze and solve a problem
- e
- Collaborative Assignments and Projects
   Example: American Health Association (AHA) collaboration; team-based assignment to consult with AHA to solve a problem, i.e., recommend approaches to health promotion informed by PM principles

## PEDAGOGY + ASSIGNMENT EXAMPLES: FLIPPING THE CLASSROOM

#### Flipped Classroom Example

- Individual Space Prior to Class Session
  - Video lecture (e.g., on health behavior models)
- Group Space During Class Session ["guide by the side"]
  - Active learning: analyze case examples (apply health behavior models to a case)
  - Cooperative learning / Jigsaw: come to class as an expert in something and use expertise to solve a problem (develop a new health behavior model in a group)
  - Gameful learning: escape room



Persky & McLaughlin, 2017 Tusa, Sointu, Kastarinen, Valtonen, Kaasinen, Hirsto, Saarelainen, Mäkitalo, & Mäntyselkä, 2018 Williams. 2016