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Improving intercultural competence through a combined virtual exchange and simulated pandemic response exercise

1 | WHAT PROBLEMS WERE ADDRESSED?

'Intercultural competence' refers to the ability to communicate and cooperate with people from different backgrounds. As most healthcare workers frequently encounter colleagues and patients who have been shaped by diverse values, beliefs and experiences, intercultural competence can improve quality and outcomes in healthcare.¹

The dominant approach to developing intercultural competence in higher education is international exchange programmes. These opportunities are often inaccessible to medical students because of the intensity and inflexibility of their courses. More generally, they are unattainable to students who cannot afford the cost and those unable to live away from home.

2 | WHAT WAS TRIED?

We delivered a virtual exchange between medical students based in East London, UK, and undergraduate students on an interdisciplinary global and community health programme in northern California.

The students participated in a simulated pandemic response exercise. The classes were split into small, mixed groups, each playing the role of a World Health Organisation Strategic Advisory Group of Experts. Every week for 5 weeks, the students were sent updates on the evolving 'pandemic'. They responded to developments in a series of collaborative activities with associated deliverables. Tasks included: photo essays illustrating social inequalities in their respective locales that might impact the progress of the pandemic; filmed discussions on the pros and cons of lockdowns as a public health strategy; and posters to increase vaccine uptake in marginalised groups. The activities were designed to consolidate the students' learning in their respective programmes, facilitate the exchange of country-specific knowledge and experiences and provide opportunities to present ideas in unfamiliar formats. Above all, the activities created opportunities for students to work together and develop their intercultural competence.

3 | WHAT LESSONS WERE LEARNED?

The virtual exchange had a measurable impact on students' cultural competence. Students were given questionnaires at the start and end of the module. They were asked to what extent they agreed with 19 statements related to intercultural, analytical and scholarly skills (1 = not at all; 6 = very high degree). The mean scores improved in responses to all 19 statements. Despite a small n (16), t-tests demonstrate that improvements for two statements related to intercultural skills are statistically significant: for 'I understand the forms of verbal and non-verbal communication that exist within different cultures', the mean score increased from 4.57 to 5.44 (p = .0040); and for 'I am aware of how my own cultural rules and biases impact how I view the world and shape my experiences with and view of people from other cultures' from 4.83 to 5.38 (p = .038).

We plan to include students from one or more universities based in low- and middle-income countries in the next iteration of the virtual exchange. This will allow UK- and US-based students to collaborate with peers with very different backgrounds and experiences. The virtual exchange will also benefit students from the 'majority world' who have limited opportunities to improve their intercultural competence through in-person exchanges because of financial and visa-related barriers to travel.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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