

Teaching Reform in Health-law Course for Chinese Public Health Students: Video-Based Design for Improving Students Capability

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Abstract—To change the teacher speeches pattern to a student involvement pattern in health law and inspection teaching, for leading the medical students to a more humane way of thinking, I redesigned the health law course contents and methods, and evaluated the advantages of the proposed three-dimensional model of capability development. Video-based case study and simulation practice were brought into the classes, and the evaluation of the course effect was conducted in 2016, to see if the teaching method satisfied the target of the designed 3 dimensional targets for students' capability development, 82% of the total students responded to the survey and the mean score of satisfaction for each capability development was critical thinking (4.33), ethical concern (4.38) and legitimate action (4.29). Video-based tool was positive for development of teaching and enhancing the capacities of critical thinking and empathy in practice, which involved an innovative shift from knowledge acquiring to experience shaping.

Keywords—health-law course, practice-oriented, public health students, humane concern

I. INTRODUCTION

In the academic years of 2015-2016, I conducted reform on the course titled "Health Law and Supervision" at the Third Medical Military University. Medical students majored in public health are in their fourth year and will do internship in the following year, eventually the graduated will fill the position in the centers for Disease Control and Prevention (CDC), health supervision agencies, or health bureau. Given the fourth-year students have already grasped solid foundation of specific knowledge and technology with a comparatively bit of humanities, arts and social science enlightenment. The course was designed with two modules through video-based case study and simulation practice, the first module was about medical law especially related to clinical legal issues combined with medical rights, litigation and malpractice, and the second module was law and supervision in public health regulation field such as food, public health emergency, radiation, occupational diseases. In order not to indoctrinate students with the 'right answer', the evaluation of the course effect was emphasis on the process of knowledge construction (by group discussions, research essays, case report, and simulated performance) rather than the exam that depended on testing student's mechanical memories. In 2016, I invited students to rate on a 5-point Likert scale (1-strongly disagree, 5 – strongly agree) for the video-based

learning, to test whether the video-based activities satisfy their capability development.

II. THREE-DIMENSIONAL MODEL OF CAPABILITY DEVELOPMENT

When Dewey elaborated the relation of theory to practice in education [1], he highlighted the best that the school of law or medicine can do is to provide a somewhat remote and simulated copy of the real thing. Therefore, a practical-oriented experience learning and pre-clinical training is vital. However, in Chinese way of teaching health law, most activities were followed by one-way knowledge transmission from teacher to students pattern, students often trapped in the ivory tower without real-life experience, a common inadequate cultivation of practical skills partly resulted in the loss of humane and ethical sense towards patients and people. One common concern was that students' capacities will be inhibited in old pattern of teaching, since the actual behavior in practice was not merely implemented with obedience according to legal instructions.

Thus I designed the three-dimensional target of practical-oriented training to fulfill the social and professional requirements on public health major students, that was to enhance the students' 3 capacities including the ethical consideration, critical thinking and legal reasoning for legitimate action. Furthermore, if students develop an awareness of how they should act reasonably more than legitimately, they could take that awareness into practice and could enjoy a questioning and prudent way of thinking, which may benefit the future inspectors and public health administrators, properly use their policy power in the supervision system.

III. CRITICAL THINKING BY VIDEO STIMULUS

Video-based materials for case study were real stories in complicated Chinese context. Narrative video clips were collected from debated issues with legal and ethical dilemma, that could make students empathy on the vulnerable group, two examples were as follows.

A. Video Case One: "Refusing to Sign, Mother and Baby Die"

The signing of one's name may mean life or death for a patient in danger as doctors need the signature to rescue, it is actually not the inform consent but indeed for the purpose of defensive medicine to over-protect the doctors.

The work is supported by The reform on the 2018 collage education reform project of Chongqing municipality (grant number 183151), titled as "Research and Practice of Health Literacy Training Model for Liberal Arts College Students in Chongqing".

A nine months pregnant woman Li Liyun were sent to hospital for emergency treatment. After her boyfriend Xiao Zhijun refused to sign a consent form on caesarean operation, hospital reported to Health Bureau for authorization, and the responses is “no signature, no operation”. Finally, Li died. (A brief introduction to the true story of no signature no medical aid case(2009), available at <http://www.china.org.cn/english/China/232962.htm>.access 10 June, 2016.)The event stirs a nation-wide debating on the over-protective medical behaviors, notably the legal argument was, “signature first” was required according to a Chinese law entitled "Regulations on Chinese Medical Institution", while contradictory articles could be found in a higher-level law entitled "Chinese medical staff law", which declared the doctor emergency rescue as a bounden duty.

three video clips of interviews were from the perspective from patients’ family, doctors and the district health bureau. Students were required to give a short presentation on any critical aspect of the following.

- "Love and Responsibility dilemma" –trade-off between medical ethics and legal responsibility
- Analyze asymmetry between doctors and patients, balancing the medical sovereignty and patient’s rights
- discuss the flexible use of informed consent with differentiated scale of law-abiding
- Do media and public pressure lead to the probable erosion of justice?
- Agent's capacity (mental state, literacy, economic status) and its influence
- Construction of legal and social support systems for medical emergency rescue

B. Video case two: 'Last Chance Clinic' Shut Down

The new media reported that ,10 patients from nationwide bought second-hand Kidney dialysis equipment and helped each other with dialysis treatment in a rented residential courtyard(functioned as “clinics”) because they could not afford the medical bill in licensed hospitals. Later as TV reported, the health officials closed the self-funded equipment and forbid their self-aid.

After viewing the video, the students discussed in group on the following probing questions:

- Did the self-funded clinic belongs to health industry governance?(considering the self-saving behavior by self-aid)
- Is it right for the administrative power to restrict the self-funded clinic? Why legal regulation and ethical judgments conflicts in this case? Did the administrative force cross the borderline?
- What result in the absolute governmentality on the supervision of health care delivery? Discuss the ban on the self-aid space as site of colonial governance (Find quotations around bio-politics classics such as "The Birth

of the Clinic: An Archaeology of Medical Perception" by French philosopher Michel Foucault.);

- What makes the unreasonable escalating burden of disease in licensed hospitals?(It cost 5 times more in licensed hospitals than the fees by self- dialysis.)

IV. LEGITIMATE ACTION TRAINING BY VIDEO SIMULATION

A useful and effective vehicle to fill the know-do gap was the simulated action training by video simulation, for the purpose of advocating a heuristic, problem-based and cooperative learning. Berk [2] mentioned various videos had been used in college classroom over the past forty years, a large amount of articles were summarized guidelines for video-teaching. Rare reported in health law teaching, however, appropriate video can offer students early contact with how to conduct a professional supervision.

To assure the quality of learning, I selected two sources of video materials for students’ simulated training, one is a collection of preventive and regular health inspection in real context edited from net and TV news report, the other is historical records as legal evidence borrowed from health bureau enforcement.

Student’s simulation was the most interactive part, each group competed a simulated performance with designated task, simulated role-play were informed in advance and fixed by the creation of a concrete and vivid situation such as a initiative of food hygiene inspection, as it was the most popular part that they highly interested and enjoyed, they spontaneously brought some costumes to match the vivid role play, and the performance demonstrated their grasp of the essence of law with sophisticated behavior were unexpected amazing.

After the simulation activities the 360-degree evaluation was employed, feedback were from the in-group partners and intra-group members by self-evaluation and teamwork evaluation, supplemented by teachers’ assessment and comments. The simulation extended the experience learning and facilitate students' frequent contact with realistic context, mimic behaviors of the legal profession would add value to capacity acquisition of legitimate action by consistent self-reflection. Furthermore, the professional literacy and skills were gradually learned from consistent simulated practices.

V. ETHICAL AND HUMANE CONCERN IN THE REAL-LIFE CONTEXT

The relationship between ethics and law was a long and tangled one, but most public health laws and regulations had behind them an explicitly moral purpose: that of promoting and protecting the lives of citizens[3]. Given the need to adjudicate interests with a concern for communities, individuals, and environments, it was no stretch to say that Public health practices fundamentally contained ethical considerations, and thus ethics was constitutive of the Public Health profession itself. [4] Gostin mentioned because the police power of the state was involved, a number of moral conflicts were generated, public health was one of the few professions that has legal power—in particular, the police power of the state—behind it [5] That was why in western way of teaching health law, ethics and human rights were indispensable part as I search the syllabus and found

out the similarities. However, Chinese health law textbooks and courses were solely on legal provisions which is far from enough to delineate the instinct of public health, a prism should be applied by interdisciplinary thinking besides law. Therefore, ethical and humane concern was the core and specialty parts that we attempted to bring in the health law course. Actually the reform on teaching contents was also a response to traditional Chinese bioethics that inherited Traditional Chinese Medicine training, as Cai, J. summarized that concerned most on the ethical requirements for traditional health-related profession [6].

Some topics were used as follows:

- Identify the tension between individual rights and official guarantee on population health, what makes enforcement measures appropriate in public health emergency like SARS
- observe National Mental Health Law legislative process analysis on the law draft and especially on the article of compulsory psychiatric admission and discharge
- discuss the ethical crisis behind doctor-patient relationship
- How to deal with the emergency such as the H1N1 flue spread

Prior arrangement of research topics were offered to study groups before class, for their benefit on self-study process, full of data collection, debate, discussion and followed by in class presentation, students constructed knowledge in a teamwork, with teachers' aid can they participated in critical thinking, negotiation and debating with various theories, opinions, beliefs and hypotheses, which enhanced their interaction skills and ability to solve practical problems.

VI. EVALUATION OF TEACHING PRACTICE BY STUDENTS

TABLE I. STUDENTS' EVALUATION OF THE COURSE EFFECT

capacity cultivation	min	max	mean	SD
critical thinking	3	5	4.33	.738
ethical consideration	3	5	4.38	.701
legal reasoning for legitimate action	1	5	4.29	.865

Students were asked to rate on a 5-point Likert scale (1-strongly disagree, 5 – strongly agree) for the video-based learning in 2015, to test whether the video-based activities satisfy the three capability development aim(see Table I), the question was “In order to test the effect of the three-dimensional target of practical-oriented training in health law and supervision course,Please rate on a 5-point Likert scale whether the video-based teaching can benefit your capability in three ways? (1- strongly disagree, 5 – strongly agree)”see Table I.

32 students (82% of the total) responded to the survey and the mean score for each capability development was critical thinking (4.33), ethical concern (4.38) and legitimate action (4.29).

The three capabilities were not separated but congregated. In general, the 3-dimension capacity training by video stimulation did benefit students in the sense of real experience. After interviewing several students for suggestion, the common issue related to the participation coverage and in depth, more detailed design needed to be adjusted to meet students' various needs.

VII. CONCLUSIONS

Video-based tool was an attempt to employ more creative and wide ranging teaching approaches, which involved an innovative shift from knowledge acquiring to experience shaping. Notably teachers should “aid” rather than “control” the process in the light of legal rules and moral principles.

The ideal of experience education brought in a chain of practical-oriented teaching innovation. Implications of teaching practice could be represented as follows. Firstly, the speeches only by teacher were transformed to interactive process with various video stimulus for the three dimension capacity development. Secondly, the contents were reshaped and extended more than law itself with ethics and human rights injected, it's noteworthy that the content expansion was not only adjustments approaching to the western style but also a response to traditional Chinese requirements for ancient Chinese medical students. Finally, Chinese students were not that depicted lack of creativity and their adaptability was also astonishing, which could be tested in the performance of video case study and simulated training, teachers need to nurture them carefully, not by rigid knowledge transfer but lend them full of opportunities and challenges, with an expecting gaze.

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