2-1-2019

Enhancing Services for Homeless Populations: Impact of a virtual-reality training tool on health professional students’ self-efficacy in working with homeless populations

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Enhancing Services for Homeless Populations: Impact of a virtual-reality training program on health professional students’ self-efficacy in interacting with homeless populations

INTRODUCTION
Despite the rising prevalence and unmet healthcare needs of homeless populations, most healthcare providers do not receive specific training on working with this population. The growth of simulation-based technology in the medical classroom offers new opportunities for such training. Virtual-reality tools have been shown to facilitate learning and minimize restraints such as time and travel. The Enhancing Service to Homeless Populations (ESHP) program was designed to provide health professions students at Thomas Jefferson University with training on how to interact with homeless populations using an interprofessional virtual-reality setting, with the ultimate goal of improving students’ self-efficacy.

METHODS
Participants (n=15) were students recruited from Thomas Jefferson University from the nursing, medicine, occupational therapy and public health schools. Participants were placed into groups in which they simulated visits with homeless clients on the virtual world platform Second Life. Confidence levels and knowledge of the participants were elicited in surveys and structured interviews before and after participation in the simulations. Survey results were analyzed with descriptive statistics. Interviews were transcribed and qualitative analysis was done using NVivo software.

RESULTS
Preliminary analysis of survey data demonstrates an increase in self-efficacy after participation. Codebook development for the qualitative analysis is underway but results remain incomplete.

CONCLUSION
The ESHP program was found to increase students’ self-efficacy in interacting with homeless populations but more data must be analyzed before we can elaborate upon these findings.
REFERENCES


