In 2044, the US will become a majority-minority nation—no one racial/ethnic group will be considered a majority.3

• The US also is recognizing diversity as broader than race/ethnicity.4

• Student pharmacists will need to be prepared to interact with patients who are diverse by becoming culturally competent, as outlined in the ACPE Standards2016 as well as the ACCP White Papers.4,6

• There are limited, large-scale educational interventions examining the impact of classroom activities on student cultural competency.

**BACKGROUND**

- In 2044, the US will become a majority-minority nation—no one racial/ethnic group will be considered a majority.
- The US also is recognizing diversity as broader than race/ethnicity.
- Student pharmacists will need to be prepared to interact with patients who are diverse by becoming culturally competent, as outlined in the ACPE Standards2016 as well as the ACCP White Papers.
- There are limited, large-scale educational interventions examining the impact of classroom activities on student cultural competency.

### METHODS

- 7 pharmacy schools with students in different years
- 5 out of the 7 universities utilized in required courses (N=669)
- 2 out of the 7 universities utilized in elective courses (N=44)

- Post-pre, observational design with a modified version of the Clinical Cultural Competency Questionnaire (CxCCQ) administered

- Two educational activities:
  - Global Beads Activity
  - Trading Places

  - Each student is given a clear plastic bag & colored beads (corresponding to race/ethnicity groups)
  - A series of questions are asked; students place the corresponding bead in their bag as a response
  - Shows diversity of people exposed to in the past & encourages them to explore future diverse relationships

### QUESTIONNAIRE DEVELOPMENT

- **CxCCQ** was developed to assess knowledge, skills, and attitudes (Likert-type scale) and is freely available for use
- A revised version (14 items) was previously used in a seminar series
- 3 items related to the two educational activities were developed and included (5-point, Likert-type)

### QUESTIONNAIRE ADMINISTRATION

- Pre-assessment was administered 2-3 days prior to activity and within 1 week post-activity via Qualtrics (anonymous link)
- A revised version (14 items) was previously used in a seminar series
- 3 items related to the two educational activities were developed and included (5-point, Likert-type)

### RESULTS

- **GLOBAL BEADS ACTIVITY**
  - Made me more aware of my own biases toward certain patient groups
  - Made me want to diversify my relationships
  - Made me more aware of my own stereotypes toward certain patient groups

- **TRADING SPACES ACTIVITY**
  - Made me more aware of my own stereotypes toward certain patient groups

### DISCUSSION AND CONCLUSIONS

- Incorporation of learning activities across institutions and at different stages of pharmacy education resulted in improved cultural competence.
- These activities did not change students’ perceptions of the importance of receiving training in cultural diversity.
- Most students had identified awareness of biases and stereotypes as well as interest in diversifying relationships post-activity.
- These activities require minimal time and resources to implement and could assist programs in addressing both ACPE standards related to cultural competency and preparing students for future practice.

### LIMITATIONS

- These activities were ungraded, which may have impacted student performance and engagement with the activity.
- A self-selection bias for interest in cultural competency training could have been present in elective courses which offered the activities.
- The University of Tennessee administered the Global Beads activity only to P1s and the Trading Spaces activity only to P2s, which may have impacted study results.

### REFERENCES


