**Competency:** To acquire knowledge and skills needed for healthy behaviors and improving the quality of life.

**Description:** Northwestern has a broadly based core curriculum that is central to the University’s mission and consistent with the Louisiana Board of Regents requirements for general education. The competency “knowledge and skills needed for healthy behaviors and improving the quality of life.” requires undergraduate students seeking a bachelor’s degree to take PSYC 1010 (3 credit hours) and/or PSYC 2050 (3 credit hours).

**Student Learning Outcome:** Students completing PSYC 1010 and/or PSYC 2050 will have an increased level of knowledge about three factors: 1. Level of knowledge about healthy life-style choices such as exercise, eating behaviors, sleep, drug use, etc. 2. Level of knowledge about the effects of stress on the body, such as lowered immune system functioning, etc., and 3. Level of knowledge about how emotions (ex: depression/anxiety/anger) effect our lifestyle choices (such as eating/sleeping/drug use, etc.).

**Measure (including methodology and target).**

This competency is measured using a ‘Student Survey of Knowledge and Skills Needed for Healthy Behaviors & Improving Quality of Life Skills’. (See Analysis below for development history.) The anonymous measure is given in the spring semester to a random sample of students in face-to-face PSYC 1010 and PSYC 2050 courses. It is unfortunate that the Moodle online delivery platform does not allow us to assess students anonymously, so online students are not represented in our sample.

The measurement is in two parts-- From this, a survey was developed and students were asked to report their level of knowledge about the three contributing factors before they took PSYC 1010/2050. They were then instructed to turn the page, where they were asked to rate their knowledge of these contributing factors since taking PSYC 1010/2050. Pre-course and post-course averages were computed and compared.

**Acceptable target:** there are two acceptable targets. The first is that the sample will show a minimum post-course mean score of 7.00 out of a possible score of 10.00 on each of the three (3) questions about healthy behaviors/quality of life on the assessment. The second acceptable target was a 25% increase in the level of knowledge on each of three questions from pre to post course.

**Ideal target** is a 40% increase from the pre to post course average on the three (3) factors.
Findings:

Data derived from these assessments was decidedly mixed. For Academic Year 2015-2016, our sample of students showed significant increases from pre-course to post-course, met the goal of scoring at least 7.00 out of 10.00 post-course, and met the acceptable target goal of 25% for two of the three factors. However, for the Academic Year 2016-2017, their level of knowledge and skills needed for healthy behaviors and improving the quality of life exceeded all goals, including the ideal goal of a 40% increase.
Analysis:

**Academic Year 2014-2015:** What happened – why did it happen – what are we did we do about it.

We were unable to reach consensus on how to measure the acquisition of knowledge/skills needed to develop a personal value system, therefore data was not collected.

**Academic Year 2015-2016:** What happened – why did it happen – what are we did we do about it.

- A committee consisting of the Course Stewards for PSYC 1010 and PSYC 2050, the Undergraduate Coordinator, and the Department Chair met to develop a survey that was designed to measure the student’s knowledge and skills needed for healthy behaviors and improving the quality of life. In order to measure this, the committee agreed on three factors that contributed to the development of a personal value system: 1. **Level of knowledge about healthy life-style choices such as exercise, eating behaviors, sleep, drug use, etc.** 2. Level of knowledge about the effects of stress on the body, such as lowered immune system functioning, etc. 3. **Level of knowledge about how emotions (ex: depression/anxiety/anger) effect our lifestyle choices (such as eating/sleeping/drug use, etc.).**
- From this, a survey was developed and students were asked to report their level of knowledge about these three contributing factors before they took PSYC 1010/2050. They were then instructed to turn the page, where they were asked to rate their knowledge of these contributing factors since taking PSYC 1010/2050. Pre-course and post-course averages were computed and compared.
- Data was collected the last week of classes during the spring 2016 semester.

**Findings:** Forty-three (43) face-to-face students were sampled and the results were:

Factor 1: Level of knowledge about healthy life-style choices such as exercise, eating behaviors, sleep, drug use, etc.:

pre-course mean=7.60, post-course mean=8.83

For Factor 1, the 16.18% difference between pre-course and post-course level of knowledge was a statistically significant (p < .05) increase, but it did not meet the acceptable goal.

Factor 2: Level of knowledge about healthy life-style choices such as exercise, eating behaviors, sleep, drug use etc.

pre-course mean=6.70, post-course mean = 8.50
For Factor 2: the 26.86% difference between pre-course and post-course level of knowledge was a statistically significant \((p < .05)\) increase, which exceeded the acceptable goal.

Factor 3: Level of knowledge about how emotions (ex: depression/anxiety/anger) effect our lifestyle choices (such as eating/sleeping/drug use, etc.):

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\text{pre-course mean} = 6.80, \quad \text{post-course mean} = 8.80
\]

For Factor 3: the 29.41% difference between pre-course and post-course level of knowledge was a statistically significant \((p < .05)\) increase, which exceeded the acceptable goal.

**Decision / Recommendation.** The data was shared with the faculty as part of our ongoing process of re-examining our learning outcomes and coursework. However, since the Undergraduate Coordinator and the course stewards responsible for both PSYC 1010 and PSYC 2050 were on the assessment committee, they were the main ‘stakeholders’ in examining this data. The committee reviewed the data, which showed that while all factors showed a statistically significant increase, only two of the three factors met the acceptable goal of a 25% increase and none met the ideal goal of 40%.

However, further analysis showed that post-course scores were all above the goal of 7.00. The reason for the relatively low percentage increase in all factors was that, contrary to expectations, students actually reported a fairly high level of all knowledge and skills needed for healthy behaviors and improving the quality of life, before their coursework. While there were significant increases, the ideal goal of 25% may be unrealistic given the student’s base level of knowledge on these topics.

Given these issues, it was decided that no course changes would be made at the current time. It was also decided that no changes would be made to the assessment for the AY 2016-2017. However, the committee did decide to explore methods for assessing online students and will consider changing goals if next year’s results show the same pattern.

**Academic Year 2016-2017:** What happened – why did it happen – what are we did we do about it.

- The same committee as for AY 2016-2017, consisting of the Course Stewards for Psyc 1010 and Psyc 2050, the Undergraduate Coordinator, and the Department Chair met and reviewed the survey used in AY 2014-2015 to measure the student’s knowledge and skills needed for healthy behaviors and improving the quality of life. The committee agreed to continue to re-use the 2014-2015 survey containing questions on: 1. Level of knowledge about healthy life-style choices such as exercise, eating behaviors, sleep, drug use, etc. 2. Level of knowledge about the effects of stress on the body, such as lowered immune system functioning, etc. 3. Level of knowledge about how emotions
(ex: depression/anxiety/anger) effect our lifestyle choices (such as eating/sleeping/drug use, etc.).

- As with AY 2014-2015, students were asked to report their level of knowledge about these three contributing factors before they took PSYC 1010/2050. They were then instructed to turn the page, where they were asked to rate their knowledge of these contributing factors since taking PSYC 1010/2050. Pre-course and post-course averages were computed and compared.
- Data was collected the last week of classes during the spring 2017 semester.

Findings: Seventy (70) students were sampled. Despite the fact that Moodle, our online course delivery platform, does not allow anonymous submissions, we did attempt to assess a sample of online students. Unfortunately, only four (4) students responded. While the means were in the expected direction, with this low a sample size, it was impossible to complete statistical analysis since any differences would likely be due to sampling error. Another concern was that this sample would show a strong self-selection sample bias. For these reasons, the online student’s data was not included.

Factor 1: Level of knowledge about healthy life-style choices such as exercise, eating behaviors, sleep, drug use, etc.:

pre-course mean=6.40, post-course mean=9.20

For Factor 1, the 43.75% difference between pre-course and post-course level of knowledge was a statistically significant ($p < .05$) increase, which exceeded both acceptable & ideal goals.

Factor 2: Level of knowledge about the effects of stress on the body, such as lowered immune system functioning, etc.

pre-course mean=5.70, post-course mean = 8.80

For Factor 2: the 54.38% difference between pre-course and post-course level of knowledge was a statistically significant ($p < .05$) increase, which exceeded both acceptable and ideal goals.

Factor 3: Level of knowledge about how emotions (ex: depression/anxiety/anger) effect our lifestyle choices (such as eating/sleeping/drug use, etc.):

pre-course mean=6.40, post-course mean = 9.20

For Factor 3: the 43.75% difference between pre-course and post-course level of knowledge was a statistically significant ($p < .05$) increase, which exceeded both acceptable and ideal goals.

Decision / Recommendation. The data was shared with the faculty as part of our ongoing process of re-examining our learning outcomes and coursework. As with last year, since the Undergraduate Coordinator and the course stewards responsible for both PSYC 1010 and PSYC 2050 were on the assessment committee, they were the main ‘stakeholders’ in examining this data. The committee reviewed the data, which showed that all factors had a statistically
significant increase, all factors met the acceptable and ideal goals and all factors showed well above the goal of scoring 7.00 out of the 10.00 possible points.

A comparison to last year’s data showed that on every item, this year’s students reported a lower level of pre-course knowledge than last year’s sample. Additionally, the sample reported a higher level of post-course knowledge on every item.

The Undergraduate Coordinator (chair of the committee) was exploring ways to measure the reliability of the assessment measure when the committee was informed that the particular competency of ‘acquire knowledge and skills needed for healthy behaviors and improving the quality of life’ has been eliminated by the Board of Regents. Therefore, data will no longer be collected.

*The above data is from Taskstream TK20, the University’s assessment management system.*