

# Qualitatively Assessing Undergraduate Dietetic Students' Abilities to Counsel in a Nutrition Therapy Class

Katie Horrell, B.S, MSND Student; \***Jeanette Andrade, PhD, RDN/LDN**  
School of Family and Consumer Sciences, Eastern Illinois University, Charleston, IL



## ABSTRACT #P104

**Objective:** To qualitatively assess undergraduate dietetic students' counseling abilities in a nutrition therapy class.

**Study Design, Setting, Participants, and Intervention:** A qualitative study was conducted at a Mid-Western University in Fall 2016 in a nutrition therapy class. 8 senior-level undergraduate dietetic students; 2 males and 6 females, were enrolled in the class. Students met with a graduate student, who acted as the patient, for five case studies throughout the course. These case studies were based on a chronic condition. Students were informed how to counsel at the beginning of the course, but not guided throughout the course on how to fine-tune their counseling abilities. Students were provided with a medical chart 24 hours prior to the counseling session. The graduate student sat outside in a semi-private hallway and was counseled by each student for 20 minutes.

**Outcome, Measures, Analysis:** After each counseling session, the graduate student assessed each student based on a ten-point counseling criteria that she created. Transcript analysis of responses from the ten criterion followed content analysis methodology.

**Results:** Over the course of 16 weeks, students overall improved their counseling abilities. Particularly, in the criterion: building rapport, compassion/empathy, prioritizing important information, respect of personal/religious preferences and scope of questions. However, students did not appear to improve in the criterion: eye contact, body language and preparation. Nutrition jargon remained at a consistent low throughout the five sessions.

**Conclusions and Implications:** The evidence supports that students who are exposed to live, interactive counseling sessions will improve their counseling abilities. Effectively, providing students with this opportunity to counsel in the classroom will help them as future RDNs.

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## INTRODUCTION

To counsel effectively, dietetic students need the ability to properly use both verbal and non-verbal communication skills. An absence of using these skills can impact nutrition undergraduate students' attitudes and beliefs on communicating with future patients.<sup>1</sup> Educators can help students improve their counseling skills within the classroom by incorporating an active learning approach. Active learning engages a student in the learning process and improves their cognitive abilities, creativity, and critical thinking skills.<sup>2</sup> One approach within active learning is role-playing. Role-playing involves a person acting out or performing based on expectations towards a character.<sup>3</sup> This approach may help students learn how to effectively counsel a patient as indicated by Dale Cone in which 90% of retention occurs through practice.<sup>4</sup>

## METHODS

- Eight senior-level undergraduate dietetic students; 2 males and 6 females, were enrolled in the Nutrition Therapy undergraduate class and took part in the study. Initially, the faculty member discussed techniques to use when counseling a patient and provided materials.
- Students role-played 5 case studies with a graduate student throughout the semester. Students acted as the RDN and the graduate student acted as the various patients. Each

## RESULTS

Table 1. Best Practices of Counseling - Quality Counseling Characteristics and Descriptors

Quality Counseling Indicators	Descriptors
Building rapport	Introduce self and role; Explain purpose of counseling objectives
Eye-contact	Maintained eye contact throughout the session
Body Language	Gestures- Shakes hand; talks with hands; Facial expressions- Maintains neutral facial expressions; smiles when appropriate; does not have a condescending look; Posture- Sits up straight, but relaxed; leans in slightly; non-crossed arms; faces the client
Expression of empathy and compassion for patient	Listens to the patient and reads cues from the patient concerning emotions connected to the disease, environment, or social issues; responds appropriately
Listening Skills/Scope of Questions asked	Asks open-ended questions; provided full/undivided attention when client was speaking; Repeats or summarizes information provided from client to ensure the student was listening; Took notes, but did not spend the entire session typing/writing
Nutrition "jargon" and use of consumer-friendly language	Explains complicated nutrition information in lay-person's term; Chunks and checks the information provided, stops and asks the patient for clarification to ensure the client understood the information; Provides examples and explains information by using analogies
Cultural Competency, Personal and Religious-based Preferences	Asks client about preferences based on religion and culture; Asks clarification questions to ensure the student understood about the client's religious/cultural preferences; Provided information adhering to these preferences
Prioritizing important information	Provided information based on client's readiness or agreeableness to make certain changes; Did not overwhelm the client with information; Included a minimum of 1 goal with the client and focused on that particular goal when explaining information
Preparation	Student was organized; prepared questions prior to the session; spoke confidently; understood about disease state and the type of information to provide client; provided additional educational materials

Table 2. Results from Observations – Examples of Positive, Negative, and Neutral Quality Counseling Characteristics

Quality Counseling Characteristics	Positive	Negative	Neutral
Building Rapport	Session 1, Subject G: Introduced self, smiled, locked eye contact, engaged about client	Session 2, Subject F: No introduction of self, started in on session without asking much about client	Session 5, Subject C: No introduction of self, engaged about client
Eye-Contact	Session 2, Subject A: eye contact 75-100% of time	Session 4, Subject D: eye contact <50% of time	Session 2, Subject F: Eye contact 50% of time
Body Language	Session 4, Subject E: Faced patient, Smiled often. Pointed body toward patient.	Session 4, Subject D: Body not directed at patient, focused on laptop majority of session (75%).	Session 1, Subject G: Relaxed, slouched back in seat
Empathy/Compassion	Session 1, Subject H: Empathized with patient, explained further about condition	Session 5, Subject G: [in response to pt smoking/not wanting to quit] "That's not going to help anything... Do you want to breathe?"	Session 5, Subject F: Did not "react" when patient admitted to smoking 1 pack per day, though did not offer any outward empathetic responses.
Listening Skills/Scope of Questions Asked	Session 5, Subject B: Heard the patient out; Focused on what patient likes and what they would eat.	Session 1, Subject B: Asked questions prepared, but did not deviate from questions	N/A
Nutrition Jargon	Session 1, Subject D: No jargon observed	Session 2, Subject G: Used jargon often without explanation	Session 3, Subject C: Use of <1 without explanation

## RESULTS & DISCUSSION

- The average case study time (in minutes) for sessions 1-5 were as follows: 17.6, 16.8, 16.8, 13.5, 15.1. Net average for all sessions was 15.9 minutes. 5 students spent an average of 17-18.6 minutes to counsel their patients. 3 students spent an average of 10.6-15 minutes to counsel their patients. Although time spent did not directly impact the students' counseling abilities, students who spent <16 minutes with the patient were more likely to receive more "neutral" or "negative" remarks.
- The overall Kappa scores from the pair KH-JA was 0.61, which demonstrates substantial agreement. Based on the descriptions of the counseling abilities, discrepancies existed among all counseling skills, in which one researcher rated an action as neutral, whereas the other rated it as positive or negative for that same description.
- Over the course of 16 weeks, students improved or stayed consistent in the following characteristics: **eye contact, body language, relevant scope of questions.**
  - Students overall performed (+) well in: **rapport building, prioritizing information, nutrition jargon, and preparedness**, however, students were rated lower (negative/neutral) in 4<sup>th</sup> and 5<sup>th</sup> sessions in comparison to 1<sup>st</sup>-3<sup>rd</sup> sessions.
  - Students overall performed poorly (-) in: **Cultural competency and empathy.** Patients who showed an addictive behavior towards alcohol consumption or smoking, students showed lack of empathy and compassion.
- Students who experienced reduced motivation near the end of the class may have put forth less energy into their counseling sessions, which may explain the drop in some counseling criterion during the 4<sup>th</sup> and 5<sup>th</sup> sessions. Students may have little pre-existing knowledge about counseling patients of other cultures, which may explain the lack of "positive" ratings in counseling scores. Students with little or no experience with addiction are less likely to know appropriate strategies to counseling an individual with an addiction.

## CONCLUSION & IMPLICATIONS

Many students improved or remained consistent in their counseling abilities through the 5 sessions. There appears to be a knowledge deficit in cultural competency of the study participants. Future research should further investigate cultural beliefs of university students and best practices for incorporating cultural competency in college students. The research supports that students who are exposed to live, interactive counseling sessions will improve their counseling abilities. Students whom remained strong in most counseling criterion throughout the study were able to benefit by practice of their counseling skills in a roleplaying setting. Roleplaying and counseling activities in an undergraduate classroom can improve communication skills in dietetics students which can help improve the effectiveness of nutrition counseling with future patients and clientele. Millennials are also more likely to retain information with active learning, which can benefit students as future health professionals. Effectively, this type of active student engagement activity will help students as future Registered Dietitian Nutritionists