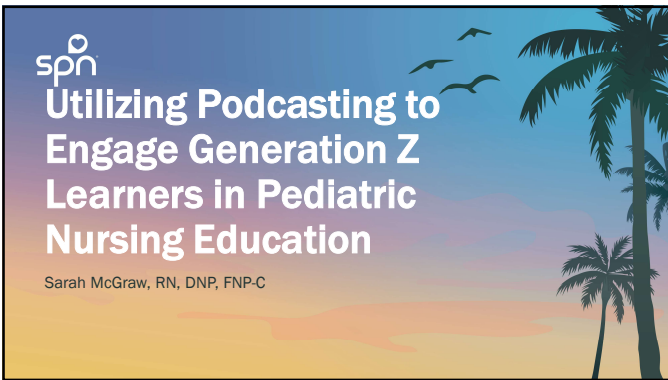
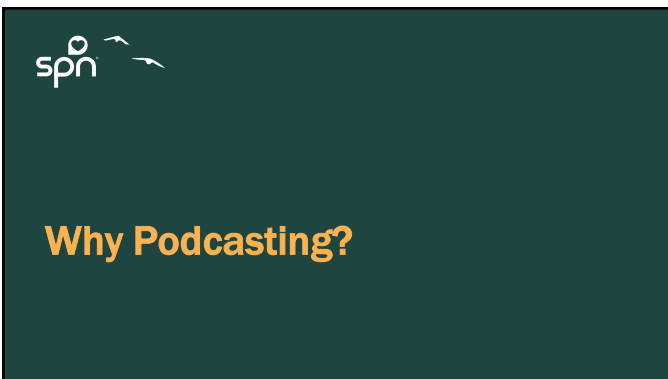




1





2



3

“Gen Z” Learner Characteristics

Digital Immigrants	Digital Natives
 <ul style="list-style-type: none"> • Adopters of the web technologies • Prefer to talk in person • Logical learners • Focusing on one task at a time • Prefer to have interaction with one or few people rather than many • Get info from traditional news sites 	 <ul style="list-style-type: none"> • Born during or after the digital age • Always on, attached to a phone or other device • Intuitive learners • Multitask and rapidly task-switch • Extremely social • Multimedia oriented

4

“Gen Z” Learner Characteristics

- Most pre-licensure nursing students are Gen Z learners
 - “Digital natives”
- Students prefer independent, self-paced learning
- Faculty strive to meet the diverse needs, bringing innovation & creative strategies
- Podcasts allow flexibility & agency of learning with improved retention of information

5

Theory Behind Podcasting

Constructivist Learning Theory <ul style="list-style-type: none"> • Actively construct knowledge through experience and reflection <ul style="list-style-type: none"> • Learners engage with content in a self-directed, contextualized way (e.g., while commuting, exercising) • Narrative-style or case-based podcasts • Integrate new information with prior knowledge 	Cognitive Load Theory (Sweller) <ul style="list-style-type: none"> • Optimize cognitive processing and learning <ul style="list-style-type: none"> • Audio delivery reduces visual overload compared to text-heavy materials <ul style="list-style-type: none"> • Concise podcast design • Learners control content delivery
---	---

6

Theory Behind Podcasting 


Adult Learning Theory (Knowles)

- Adult learners: self-directed, goal-oriented, value relevance and flexibility
 - Podcasts are on-demand and flexible
 - Deliver highly relevant, practice-based, and immediately applicable content

Social Learning Theory (Bandura)

- Learning occurs through observation, modeling, and social interaction
 - Exposure to professional dialogue

7

Theory Behind Podcasting 


Self-Determination Theory (Deci & Ryan)

- Motivation is driven by autonomy, competence, and relatedness
 - **Autonomy:** learners choose when and how to engage
 - **Competence:** Repetition and replay support mastery
 - **Relatedness:** Conversational tone fosters connection with instructors or experts

Multimodal Learning Theory

- Learning is enhanced when multiple modes of content delivery are used
 - Compliments readings, lectures, simulations
 - Not a standalone tool
 - Fosters blended learning environment

8



Methods

9

- AI-assisted draft script
- Created mini podcast series
 - Recorded in-person in the SON
- Recruited content specialists for each episode
- 30-60 minute episodes posted to LMS
- Discussion boards & in-person discussion
 - Clinical groups
- REDCap Survey



10

Draft Script

Host Introduction
Hi, and welcome to the first of three podcast episodes in 3427 this semester! I'm your host, Dr. McGinnis, and with me I have two of your other faculty- Ms. McBrine and Mrs. Riddick. Today we're diving into a topic that's as crucial as it is complex—vaccine hesitancy and the spread of misinformation. Vaccines have been one of the greatest public health achievements in history, yet misinformation has led to growing skepticism and fear in certain communities. Today, we'll explore what's driving vaccine hesitancy, its consequences, and what we can do to build trust in vaccines.

Joining me is Spencer Brooks, Nurse Practitioner in the division of Pediatric Infectious Diseases here at Children's of Mississippi. Concerns around vaccines are something that her department faces often, and a big part of her role is caring for children who do get various illnesses vaccines help prevent. So, without further a due, Welcome Spencer!

Guest Introduction
Thank you for having me. It's a privilege to discuss this critical topic.

Segment 1: Understanding Vaccine Hesitancy

Host:
Let's start with the basics. What exactly is vaccine hesitancy, and how does it differ from outright refusal to vaccinate?

Possible Follow-Up Questions:

1. What are some of the main reasons people feel hesitant about vaccines?
2. Is vaccine hesitancy more prevalent in certain populations or regions? If so, why?
3. How has vaccine hesitancy changed over time, particularly with the introduction of COVID-19 vaccines?

Host:
Misinformation is often cited as a key driver of vaccine hesitancy. Can you explain how misinformation spreads and why it's so effective in shaping public opinion?

Possible Follow-Up Questions:

1. What are some common myths or misconceptions about vaccines that you encounter?
2. How has social media amplified the spread of vaccine misinformation?
3. Are there specific psychological factors that make people more likely to believe and share misinformation?

Guest:
(Discuss the role of social media algorithms, confirmation bias, and emotional appeal in spreading misinformation. Highlight examples of common myths and how they've been debunked.)

Segment 3: Consequences of Vaccine Hesitancy

Host:
What are the public health consequences of vaccine hesitancy?

Possible Follow-Up Questions:

1. Can vaccine hesitancy lead to the resurgence of diseases we thought were eradicated?
2. What impact does it have on vulnerable populations, such as children or the immunocompromised?
3. How did vaccine hesitancy affect efforts to control the COVID-19 pandemic?



11

Episodes

- 1) Vaccine Hesitancy & Misinformation
 - Pediatric Infectious Diseases PNP
- 2) Child Maltreatment
 - Forensic Clinical Nurse Specialist NP
 - "Show Notes"
- 3) Social Media and Mental Health
 - Local Pediatrician
 - >30 years of experience



Rode RODEcaster Pro Podcast Production Studio



12

“Show Notes”

TEN-4-FACESp
Brunting Clinical Decision Rule for Children < 4 Years of Age

TEN
Torticollis | Ears | Neck

FACESp
Fever | Anorexia | Fussiness | Rash | Swelling | Pain

4 months and younger

Patterned breathing

See the signs
Unexplained brunting in these areas most often result from physical causes. This checklist is not an attempt to replace clinical judgment or a comprehensive assessment. The recognition of potentially critical illness with brunting may require further evaluation.

See the signs
Unexplained brunting in these areas most often result from physical causes. This checklist is not an attempt to replace clinical judgment or a comprehensive assessment. The recognition of potentially critical illness with brunting may require further evaluation.

See the signs
Unexplained brunting in these areas most often result from physical causes. This checklist is not an attempt to replace clinical judgment or a comprehensive assessment. The recognition of potentially critical illness with brunting may require further evaluation.

13

Student Assignment

- Listen to each episode independently
- Answer 2 discussion questions with peer response as ticket to clinical
- In-person discussion facilitated in clinical post-conference

Podcast Discussion: Social Media and Mental Health

Please provide a thoughtful response to the following questions using complete sentences. You should also respond to 1 of your peers with original thoughts.

1. What did you learn from the Social Media and Mental Health episode?
2. What will you take with you from the episode into clinical practice (hospital, clinic, community event) as you interact with adolescents?

Reply

14

Results

15

16

17

18



Practical Implications for Nursing / Professional Education

- Supports **flexible, asynchronous learning** for busy students (especially RN-BSN, DNP).
- Enhances **clinical reasoning** through narrative and case-based discussions.
- Promotes **engagement among Gen Z learners**, who prefer mobile and on-demand content.
- Can be integrated into:
 - Pre-class preparation (flipped classroom)
 - Reinforcement of key concepts
 - Reflective assignments

19



Key Takeaways

- Non-traditional teaching modality
 - supplement classroom and clinical learning
- Ensures exposure to topics despite clinical variability
- Robust conversation about sensitive topics
 - passionate sharing of information in a friendly environment
- Modeled interdisciplinary, professional behavior/conversation
- Consider expanding to include more topics
- Consider biases

20



References

Chunta, K., Shellenbarger, T., & Chioqa, J. (2020). Generation Z students in the online environment. *Nurse Educator* 46(2): 87-91. <https://doi.org/10.1097/nne.0000000000000872>

Dimock, M. (2019, January 17). *Defining generations: Where millennials end and generation Z begins*. Pew Research Center. <https://www.pewresearch.org/short-reads/2019/01/17/where-millennials-end-and-generation-z-begins/>

Dodson, T.M., & Thompson-Hairston, K. (2025). A scoping review of gen z nursing students: Learning preferences and educator strategies. *Teaching and Learning in Nursing*, 20(1), 85-90. <https://doi.org/10.1016/j.teln.2024.11.007>

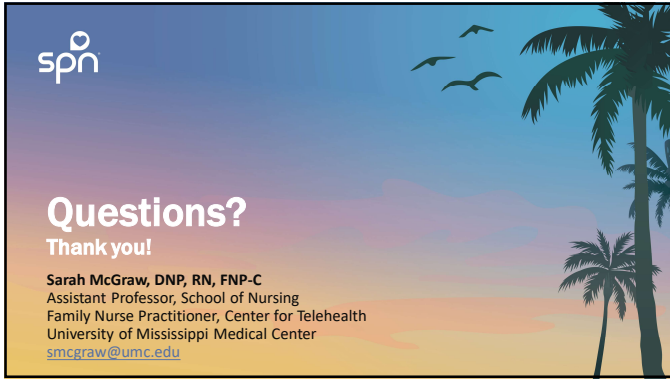
Firmino, C.F., Faria, M.N., Frade, F., Valentim, O., & Longo, J. (2025, June). Nursing in tune: Evaluation of the effectiveness of podcasts as an educational tool for undergraduate students: A cross-sectional study. *Nurse Education Today*, 149. <https://doi.org/10.1016/j.nedt.2025.106695>

Mertala, P., Lopez-Pernas, S., Vartiainen, H., Saqr, M., & Tedre, M. (2024). Digital natives in the scientific literature: A topic modeling approach. *Computers in Human Behavior*, 152, 1-12. <https://doi.org/10.1016/j.chb.2023.108076>

O'Connor, S., Daly, C. S., MacArthur, J., Borglin, G., & Booth, R. G. (2020). Podcasting in nursing and midwifery education: An integrative review. *Nurse Education in Practice*, 47, 1-14. <https://doi.org/10.1016/j.nepr.2020.102827>

Shorey, S., Chan, V., Rajendran, P., & Ang, E. (2021). Learning styles, preferences and needs of Generation Z healthcare students: Scoping review. *Nurse Education in Practice*, 57, 1-11. <https://doi.org/10.1016/j.nepr.2021.103247>

21



spn

Questions?
Thank you!

Sarah McGraw, DNP, RN, FNP-C
Assistant Professor, School of Nursing
Family Nurse Practitioner, Center for Telehealth
University of Mississippi Medical Center
smcgraw@umc.edu
