

Investigating on Humanistic Quality Education in Medical Schools in Shandong Province as Basis for Proposed Management Intervention Program

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Abstract:

This study aims to understand the content, methods and effective implementation strategies of humanistic education in medical colleges in Shandong Province, to construct a process model of humanistic education in medical colleges in Shandong Province, and finally to propose a management intervention plan. This study adopted a multiple case study method, and semi-structured interviews were conducted with 4 humanistic education teachers, 3 medical students and 3 managers from three medical colleges in Shandong Province through purposive sampling and snowballing methods. This study used the basic ideas of grounded theory to conduct thematic analysis of the interview data. This study conducted open coding, screened typical sentences from the interviewees' answers, extracted keywords from the typical sentences; then the keywords were classified and sorted to further extract relevant information such as the content, methods, and implementation strategies of humanistic education in higher medical colleges. The research results show that the humanities education in medical schools in Shandong Province has a certain foundation, but there are still some shortcomings. In addition, the study proposed four (4) concepts, namely: humanistic leadership in medical schools, strengthening humanistic guidance, strengthening the humanistic development of medical students, and cultivating and nurturing students' humanistic qualities. Furthermore, the findings also indicated the positive impact of empathy, communication skills, and cultural awareness, which highlights the importance of integrating humanities into medical education to develop well-rounded, compassionate healthcare professionals of the future. Based on the findings, a management intervention plan is hereby proposed.

Keywords: Humanities Education, Medical Schools, Management Philosophy, Humanistic Qualities, Medical Students

1. Introduction

Medical staff's adherence to professional ethics is the basis for providing high-quality medical services. Therefore, medical workers must not only have professional medical knowledge and skills, but also have good humanistic qualities^[1] (Zhang & Su, 2021). As a training institution for future medical talents, medical schools need to place humanistic education in an important position^[2] (Mo, 2019). Medical humanities is an interdisciplinary field that covers philosophy, law, history, culture, anthropology and art.

Medical humanities education is based on these disciplines and aims to cultivate medical students' professional values, moral standards and the ability to effectively handle doctor-patient relationships^[3](Tang and Wang, 2021). Humanistic qualities are the inherent attributes of individuals formed by internalizing humanistic knowledge through environment, education and practice, which are manifested in ambition, moral sentiment and way of thinking^[4] (Sun Li, 2021). Humanistic education is crucial in medical education^[5](Mo Bizhen, 2019), and its achievements promote the development of medical technology and make medical-related disciplines gradually independent^[6] (Bao and Yang, 2020). Medical humanities education not only cultivates a solid knowledge base and noble moral character, but also enables medical students to actively respond to social problems brought about by the intersection of science and humanities, especially medical ethics issues^[7](Shi, 2021). Offering humanities courses helps to improve the cultural accomplishment and medical professional ethics of medical students and cultivate their ability to care for the humanities^[8] (Huang & Zhang, 2020). The World Federation of Medical Education (WFME) clearly stipulates the teaching standards of humanities and knowledge in its Global Standards for Undergraduate Medical Education, emphasizing its importance in medical education.

However, existing studies have shown that Chinese medical schools still have deficiencies in humanities quality education, such as curriculum deviation and lack of humanities courses^[9] (Yang, 2022). Therefore, it is crucial to evaluate the current status of humanities education for Chinese medical students to ensure that it meets social needs^[10] (Li & Zhang, 2021). Given the lack of relevant research in Shandong Province, it is particularly necessary to conduct this study.

This study uses a multiple case study method to analyze the current status of humanistic quality education for medical students in Shandong Province, propose countermeasures, and construct a theoretical framework and practical methods.

2. literature review

2.1 Current status of research on humanistic qualities of Chinese medical students

2.1.1 Research importance

The importance of humanistic quality education for medical students cannot be underestimated, as it includes not only medical skills but also moral values for all-round development. As emphasized by Zhang and Lin (2020)^[11], this education aims to instill in students the values of "people-oriented" and the commitment to "serving humanity". Effective communication with patients, cultivating harmonious doctor-patient relationships, and adhering to professional ethics are essential. In the contemporary context, strengthening the cultivation of medical students' humanistic spirit is crucial to shaping exemplary talents in this field. Liu and Wang (2019)^[12] also expressed similar views, emphasizing the importance of cultivating humanistic qualities in the context of medical and health system reform, believing that this is the basis for establishing a harmonious doctor-patient relationship. Wu, Sun, et al. (2020)^[13] believe that cultivating the medical humanistic spirit is essential to showing the essence of medicine and promoting the development of medicine.

2.1.2 Analysis of the reasons for the lack of humanistic spirit among medical students

Although the importance of humanistic education for medical students is recognized, its implementation is insufficient, with problems such as large teaching staff, unbalanced knowledge structure, and lack of standardization in the curriculum system. Wu, et al. (2020)^[13] believe that Chinese medical education has traditionally attached importance to medical knowledge and neglected the cultivation of humanistic

spirit. The main reasons are insufficient allocation of class hours for humanistic courses, selective teaching content, and the capital-seeking nature of hospital operations, which has led to a shift in medical decision-making, emphasizing technological progress and cost-effectiveness, and ignoring humanistic values.

2.1.3 Specific measures and suggestions for cultivating the humanistic spirit of medical students

Tan and Xu (2018)^[14] advocated that higher medical schools should deepen teaching reforms and combine theoretical teaching with practical training. Liu, et al. (2020)^[15] emphasized the construction of a medical talent training system centered on professional practice ability, improving the knowledge, skills and literacy of clinical medical students, and focusing on the cultivation of humanistic qualities.

2.2 Research and current status of humanistic education in foreign medical schools

2.2.1 Research on medical students' responsibility

Many developed countries have a long tradition of medical education, forming a model suitable for their cultural and social background. Most medical schools give priority to cultivating students' humanistic spirit and medical ethics to adapt to the cultural background. These subjects are usually included in humanities and social science courses, focusing on cultivating medical students' sense of responsibility. Esther Helmich (2019)^[16] believes that cultivating medical students' sense of responsibility is a gradual process, emphasizing that students must learn to manage emotions in clinical experience, and educators need to provide support. McCall Daniel (2014)^[17] pointed out that the development of the service industry has increased society's attention to medical students' volunteer services, and the global health experience of medical staff has raised ethical issues. Sawdon Marina and Mclachlan JC (2020)^[18] studied the conscientiousness of 858 medical students from 2005 to 2018. The analysis showed that the conscientiousness index provides a unique forward-looking perspective on future knowledge, skills and clinical practice, which helps to avoid potential problems.

2.2.2 Research on the path of humanistic quality education for medical students

Sorrell and Sara (2020)^[19] emphasized the importance of medical students' professional identity, especially the role of white coats and surgical gowns in symbolizing status. These garments cover the emotions, logistics and interpersonal relationships of medical students, and professional dress training is seen as a means to strengthen responsibility and identity. Prasad and Dhikale (2020)^[20] believe that a comprehensive approach is needed to cultivate the humanistic spirit of medical students, covering values such as the pursuit of excellence, responsibility for patients, professionalism, selflessness, effective communication, morality, law-abidingness, integrity and social justice.

3. Research Design

3.1 Research Methods

This study adopts a multiple case study method (Yin, 2017)^[21] because Eisenhardt (1989)^[22] believes that theory can be established from case studies. Multiple case studies can identify consistent behavioral patterns (Zach, 2006)^[23]. Different case study designs contribute differently to the theoretical continuum, thereby enhancing the evaluation of understanding, theory construction, theory development, and theory testing (Ridder, 2017)^[24]. Multiple case studies are an effective strategy to support and extend previously developed theories and can explain the hypothesized causal relationships in real-life interventions that other research strategies cannot explain (Amerson, 2021)^[25]. Therefore, it is most appropriate to use a multiple case study method in this study. This study uses semi-structured interviews

to directly understand the content, methods, and implementation of medical students' humanistic education from the perspectives of teachers, administrators, and medical students.

3.2 Interview subjects

Jones (2019)^[26] recommends a sample size of 15-30 for in-depth interviews. In some cases, at least 10 is sufficient. This study adopted a purposive sampling method and included 10 participants, namely: 4 teachers, 3 students, and 3 managers who are currently engaged in humanities education at Shandong Medical College. Among them, teachers who are engaged in medical education and have at least 3 years of teaching experience and are currently lecturers, associate professors, or professors; students who have received humanities education and are currently studying in five-year medical majors, medical majors, and are over 18 years old; managers who are engaged in medical humanities education management and have at least 3 years of management experience and are currently lecturers, associate professors, or professors are included in the study. At the same time, participants who refused to participate or did not complete the interview were excluded from the study. This study was reviewed and approved by the Angeles University Foundation Ethics Committee and exempted from review (ERC code: 2024-PHDEM-Student-142); all interviewees gave informed consent to this study and signed the informed consent form.

3.3 Research tools

First, the interview outline was drafted according to the research content and existing literature, and then three professors in related fields were invited to modify the first draft, add or delete some questions, and form the second version. Subsequently, a preliminary interview was conducted with an administrator, a teacher, and a student. The outline was then modified and improved based on the problems found and feedback to form the final version of the interview outline. "Interview outline for educational managers of Shandong Medical College", "Interview outline for humanities educators of Shandong Medical College", "Interview outline for medical undergraduates of Shandong Medical College".

4. Data Analysis and Results

This study collected data through semi-structured interviews (Adams, 2015)^[27]. The data were processed using thematic analysis because it is suitable for identifying and explaining patterns or themes in the data set. This method often produces new insights and understandings (Lochmiller, 2021^[28]; Thomas, 2008^[29]).

4.1 Thematic analysis of administrators and teachers

Table 1: Main themes raised by administrators and teachers

Themes
Establishing Management Philosophy
Humanities Education in Medicine Practice
Taking Humanities Course for Medical Students
Qualified Teaching Staff to Teach Humanities
How to Cultivate Humanistic Qualities among Students
Conducive Education in Cultivating Humanistic Qualities of Students
Developing Good Humanistic Qualities among Students
Improving the Shortcomings of Humanities Education in Medical Schools

4.2 Analysis of student topics

Table 2: Main topics raised by undergraduate students

Themes
Humanistic Qualities of Medical Students
Possessing Humanistic Qualities among Medical Students
Improving Humanistic Qualities
Teachers for Developing Humanistic Qualities
Appropriate Environment and Management System for Humanistic Qualities
Vital Courses, Activities, and Methods to Improve Humanistic Qualities
Shortcomings and Improvement of Humanistic Education in Medicine

4.3 Emerging Framework

After a thorough analysis of the findings from the informants of the study, Figure 1 below reveals the emerging framework of the study which encapsulates the different ideas and perspectives of the informants. The framework is composed of four major contexts namely: Humanistic Leadership in Medical Schools; Enhancing Humanities Education; Enhancing Medical Students’ Humanistic Development; and Fostering and Nurturing Humanistic Qualities among Students. The framework further illustrates a mechanism of how a medical school should consider fostering a humanistic quality education among their students. For the first box, it represents the medical schools from the province. Then the four major contexts of the framework connect the idea of how the medical schools can impose humanistic quality education. The next batch of boxes represents the different perspectives of undergraduate students in order for the medical schools to employ humanistic education to them, it includes the humanistic qualities of medical students, possession of humanistic qualities among medical students, improving humanistic qualities, teachers for developing humanistic qualities, appropriate environment, and management system for humanistic qualities, vital courses, activities, and methods to improve humanistic qualities, and shortcomings and improvement of humanistic education in medicine. And for the last sets of boxes came from the ideas and opinions of the medical school managers and teachers. They include the following concepts: establishing management philosophy, humanities education in medicine practice, taking humanities courses for medical students, how to cultivate humanistic qualities of students, developing good humanistic qualities among students, and improving the shortcomings of humanities education in medical schools. All of these identified constructs align with each other to form a strong argument and representation of how humanities quality education can become part of the medical curriculum. According to Ehliisa et al. (2024) ^[30], humanistic values underpin the ethos of youth red cross organization management, fostering an environment conducive to leadership cultivation, first aid proficiency, and altruism.

Humanistic Leadership in Medical Schools. Humanistic leadership in medical schools embodies a transformative approach that prioritizes the cultivation of compassionate, empathetic, and ethical healthcare professionals. This philosophy underscores the integration of humanistic values, including empathy, respect, integrity, and cultural sensitivity, into all facets of medical education and practice. Humanistic leaders in medical school’s advocate for patient-centered care, empathetic communication, ethical decision-making, diversity and inclusion, wellness initiatives, interprofessional collaboration, role modeling, mentorship, and a culture of continuous improvement. By fostering a nurturing environment that values humanity alongside medical expertise, humanistic leadership in medical schools

enriches the educational experience, enhances patient outcomes, and shapes a generation of healthcare professionals who embody not only clinical excellence but also profound compassion and ethical integrity in their interactions with patients, colleagues, and communities. abductive qualitative analysis for each aspiring principals' reflection using both deductive and inductive coding methods. The need for structure and organization, attending humanistic needs, struggling to respond to policy changes, and finding meaning and uplifting morale can used to help inform and guide educational leadership preparation and development programs (Gonzales et al., 2022) ^[31].

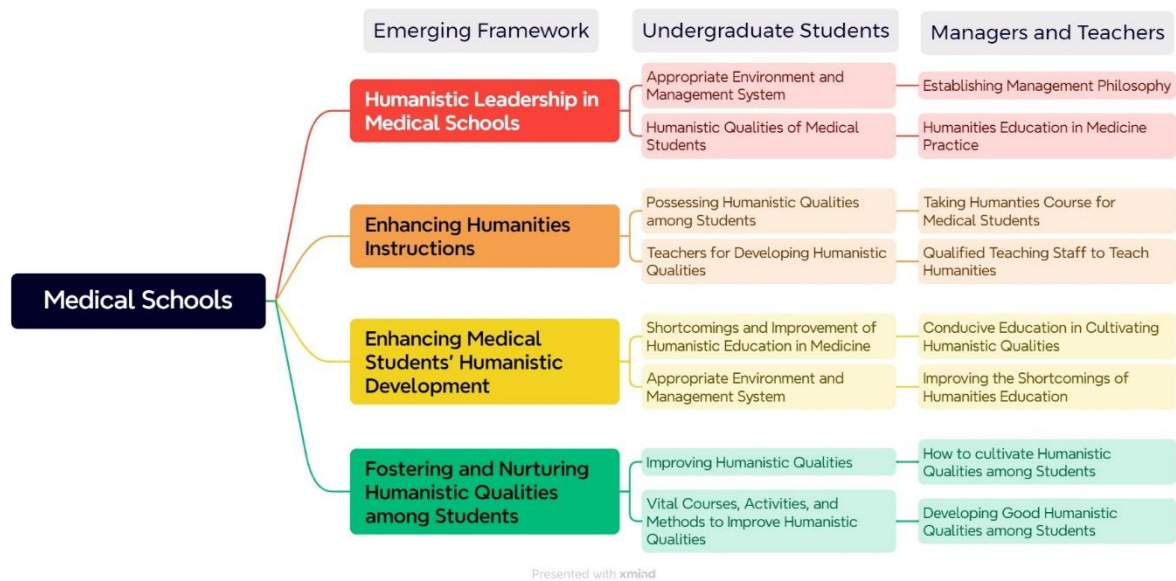
Enhancing Humanities Instructions. This context involves enriching educational experiences by integrating diverse disciplines such as literature, philosophy, history, and the arts into the curriculum to foster well-rounded and empathetic professionals. This approach aims to cultivate critical thinking, cultural awareness, communication skills, and ethical reasoning among students, providing them with a broader perspective that complements their technical knowledge. By incorporating humanities into education, students can develop a deeper understanding of human experiences, strengthen their capacity for empathetic patient care, and navigate complex ethical dilemmas with greater sensitivity and insight. Furthermore, enhancing humanities instruction can promote interdisciplinary collaboration, nurture creativity, and encourage lifelong learning, ultimately equipping individuals with the holistic skills needed to excel in their professional endeavors and contribute meaningfully to society. Phumsaidorn and Julsuwan (2024) ^[32] found out that developing the educational supervision model based on instructional coaching and mentoring principles to enhance active learning management competency, revealed that the supervision model is consisted by Planning, Observation, Reflection, and Evaluation.

Enhancing Medical Students' Humanistic Development. This construct comprises a multifaceted approach that goes beyond clinical skills to cultivate qualities such as empathy, compassion, cultural competence, ethical reasoning, and self-awareness. By integrating humanistic values into medical education, students are encouraged to understand the patient as a whole person, considering their beliefs, values, and social context. This process includes experiential learning opportunities, reflective practices, mentorship, and role modeling by faculty members who exemplify humanistic qualities. Emphasizing humanistic development not only enhances the quality of patient care but also promotes professional fulfillment, resilience, and well-being among future healthcare providers. By nurturing these qualities, medical students are better equipped to navigate the complexities of healthcare, communicate effectively with patients from diverse backgrounds, and make ethical decisions that prioritize the welfare of those under their care, ultimately contributing to a more compassionate and patient-centered healthcare system. There is a need for intervention that focuses on recognizing congruent leadership and considering a situation from multiple values.

Fostering and Nurturing Humanistic Qualities among Students. Fostering and nurturing humanistic qualities among students entails a deliberate and holistic approach to cultivating empathy, compassion, ethical awareness, cultural sensitivity, and interpersonal skills within the educational environment. This process involves creating a supportive and inclusive learning atmosphere where students feel encouraged to engage in self-reflection, appreciate diverse perspectives, and develop a deep understanding of the human experience. Educators play a pivotal role in modeling humanistic behaviors, providing mentorship, and offering opportunities for students to practice empathy and ethical decision-making. By fostering humanistic qualities, students not only enhance their capacity for patient-centered care but also strengthen their ability to collaborate effectively, communicate with empathy, and navigate complex ethical challenges in their future professional roles. Ultimately, by instilling these values early in their

education, students are better prepared to contribute meaningfully to healthcare, uphold ethical standards, and provide compassionate and culturally competent care to individuals and communities. Abdou et al. (2022)^[33] suggest that training programs must prioritize and embed the values of cultural humility and culturally responsive practice as foundational constructs for future educators.

Figure 1: Emerging Framework for Humanistic Quality Education for Medical Schools



4.4 Enhancing Humanistic Leadership in Medical Schools in Shandong Province

Objectives

To promote humanistic qualities in medical education particularly in Shandong Province.

To enhance humanities instruction used in medical schools in Shandong Province.

To foster a culture of empathy, ethics, and compassion among medical students in Shandong Province.

Table 3: Proposed Management Intervention Plan

Key Components of the Intervention Plan

Key Indicators	Program	Activity	Timeline	Expected Outcome
Curriculum Development	Integrate Humanities into Medical Curriculum	Develop courses in literature, ethics, anthropology, philosophy, and history of medicine to help students appreciate the human aspects of healthcare.	AY 2024-2025	80% of medical students improved their empathy and humanistic skills
	Interdisciplinary Approach	Collaborate with humanities departments in medical schools to design integrated modules that connect medical knowledge with humanistic insights among health care professionals and experts.		

Faculty Training and Development	Humanistic Leadership Workshops	Provide training for faculty on humanistic leadership principles and teaching methodologies that foster empathy and ethical practice.		80% of teachers trained and developed their school humanistic leadership and mentoring skills
	Mentorship Programs	Establish a mentorship mechanism where faculty mentor students on developing humanistic qualities through experiential learning.		
Student Engagement Initiatives	Service-Learning Opportunities	Create programs that involve students in community service, allowing them to interact with diverse populations and understand different life experiences.		80% of students are actively engaged in school learning activities.
	Reflective Practices	Encourage reflective writing and discussions on experiences with patient, challenges, and personal aspirations.		
Monitoring and Evaluation	Humanistic Competencies Assessment	Develop metrics to assess students' humanistic qualities, including empathy, communication skills, and ethical decision-making.	AY 2025-2026	
	Feedback Mechanisms	Implement 360-degree feedback involving peers, faculty, and patients where validation and field testing are embedded to provide a comprehensive evaluation of students' humanistic development.		
Fostering a Supportive Environment	Feedback Circles	Regular meetings for teachers to discuss challenges and successes in implementing feedback practices.		80% of medical school environments are more supportive and compassionate in giving feedback and reflections
	Surveys and Reflection	Gather feedback from both teachers and learners on the effectiveness of the intervention and areas for improvement.		100% of feedbacks and reflections were considered in the refinement of the program
Research and Continuous Improvement	Evaluate Effectiveness	Regularly assess the impact of humanistic education initiatives on student development and learning outcomes.	AY 2026-2027	
	Incorporate Feedback	Continuous assessment to use student and faculty feedbacks to refine and		

		enhance the intervention program.		
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By implementing this management intervention plan, medical schools can significantly enhance the humanistic development of their medical students particularly in Shandong Province, fostering a generation of empathetic environment, and ethical healthcare professionals in medical schools.

5. Conclusion and Recommendations

The main objective of this study is to describe the current situation of humanities education in medical colleges in Shandong Province focusing on the content, methods, and effective implementation strategies of education.

To answer the first specific objective of the study which delves into the current status of humanities education in medical schools, the study revealed some interesting revelations. In general, the informants gave positive viewpoints when it comes to the humanistic education implementation in the medical schools of Shandong Province. Based on the revelations of the managers and faculty, they have a uniform experience and share the same aspects of humanistic education in their respective institutions. For instance, they believe establishing a management philosophy is essential to strengthen the implementation of humanistic education. To achieve this, managers and teachers must align themselves in providing humanities education in medical practice by further enhancing their courses related to the humanities. Also, the institutions must strengthen the capacities and capabilities of their faculty teaching humanities education to achieve quality learning for medical students. Furthermore, a conducive environment for learning and cultivation of humanistic qualities was also highly emphasized by the informants for medical students to develop this unique humanistic trait for medical practitioners. Lastly, both the managers and teachers also shared some intuitive suggestions and recommendations to help improve and absolve the shortcomings of humanities education in medical schools. These areas of concern are important to give rise to a more dependent or reliable implementation of humanities education for medical institutions in the areas. In the case of the undergraduate students, they also shared the same sentiments with that of the managers and teachers. They have already experienced humanistic qualities and they considered it to be a premium for every medical student to integrate with their medical practice. If one has possessed humanistic qualities even during the time of their medical study, it is a great virtue and reflection of the academic institution for inculcating to its medical students the essence of being a human and such trait is worth emulating. They also shared some ideas to improve humanistic qualities through qualified and dignified teachers and a conducive environment and management system in medical schools. The informant also did not forget to share the most important courses, activities, and strategies to improve their humanistic qualities at their respective schools. In this way, the shortcomings, just like what the managers and teachers had shared, will greatly improve and help medical students walk into the path of humanistic education with strong virtues and morals that will help them in their practice of medicine in the future.

For the second and third objective of the study, after refining the collected data there were four constructs that the study generated. As seen from figure 1, humanistic leadership in medical schools; enhancing humanities instructions; enhancing medical students' humanistic development; and fostering and nurturing humanistic qualities among students emerged. Based on these constructs, it is evident that there is an association between the implementation of humanities education in medical schools and the development of humanistic qualities among medical students. The findings of the study also indicate the positive impact of empathy, communication skills, and cultural awareness which highlights the

importance of integrating humanities into the medical education to foster a well-rounded and compassionate healthcare professional in the future. The findings further support the continued emphasis on humanities education in medical schools as a means of cultivating the humanistic values essential for effective and compassionate healthcare practice. Therefore, from these findings, the study hereby proposes a management intervention plan for humanities education in medical schools in Shandong Province.

6. References

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