

Original Paper

Exploration of Ideological and Political Construction in the Course "Musculoskeletal Disease Rehabilitation" for Vocational Rehabilitation Therapy Technology Majors Under the "New Double High-Level" Background

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Abstract

Ideological and political education within the curriculum (Curriculum Ideology and Politics) is a vital approach to fulfilling the fundamental task of "fostering virtue through education" and remains a focal point in current vocational education reforms. Under the background of the "New Double High-Level Plan" construction, there is an urgent need to promote the deep integration of professional courses with ideological and political education for Rehabilitation Therapy Technology majors. As a core course in this major, Musculoskeletal Disease Rehabilitation possesses strong professional and humanistic characteristics, making it an effective carrier for such integration. Based on this course, this paper aims to shape students' "medical benevolence," temper their "craftsmanship spirit," and enhance their comprehensive literacy. It explores a teaching path that unifies professional instruction with value guidance, aiming to cultivate high-quality rehabilitation therapy professionals who possess both moral integrity and technical skills.

Keywords

New Double High-Level, Musculoskeletal Rehabilitation, Curriculum Ideology and Politics, Rehabilitation Therapy Technology

1. Introduction

As the "Double High Plan" (a plan aimed at developing high-level higher vocational schools and high-quality professional programs) continues to deepen, higher vocational education has entered a

crucial stage of quality improvement and talent cultivation. Rehabilitation of Musculoskeletal Disorders is a core course in the Rehabilitation Therapy Technology major, covering the rehabilitation assessment and treatment of common musculoskeletal disorders. It is highly practical and knowledge-intensive. This course not only undertakes the task of imparting professional knowledge and skills but also shoulders the responsibility of cultivating students' professional qualities and humanistic spirit. In classroom teaching, it is essential to enable students to master solid foundational and clinical skills in musculoskeletal rehabilitation while subtly guiding them to develop a rigorous and pragmatic learning attitude, collaborative communication habits, and a people-centered service consciousness. Against the backdrop of the "New Double High Plan," how to organically integrate ideological and political elements into the teaching of Rehabilitation of Musculoskeletal Disorders, align with industry development trends, and achieve the coordinated education of knowledge transmission, ability cultivation, and value shaping has become an urgent issue to explore in current curriculum reform (Yu & Zhai, 2025).

2. Current Status and Challenges of Ideological and Political Construction in the Course "Rehabilitation of Musculoskeletal Disorders"

The course "Rehabilitation of Musculoskeletal Disorders" holds a pivotal position in the talent cultivation program for rehabilitation therapy technology majors. It serves as a crucial link for students to construct clinical rehabilitation thinking, master core rehabilitation skills, and form an initial sense of professional identity. Currently, higher vocational colleges have made certain progress in promoting teaching reforms of this course. However, there are still numerous practical challenges and room for improvement in systematically and deeply integrating ideological and political education into the course.

Firstly, from the perspective of teaching philosophy, some teachers have not yet fully broken away from the traditional teaching concepts of "knowledge-orientation" and "skill-priority." During the teaching process, they tend to emphasize the explanation of disease knowledge points, demonstration of assessment techniques, and imparting of treatment methods, while lacking systematic design and in-depth thinking on how to consciously and systematically conduct ideological guidance, value shaping, and professional quality cultivation in combination with professional knowledge. This results in students having obvious shortcomings in terms of autonomous learning ability, critical thinking, teamwork awareness, doctor-patient communication skills, and practice of humanistic care, making it difficult to meet the comprehensive requirements for compound talents in future positions (Qiao, Chen, Niu et al., 2025).

Secondly, in terms of teaching content and methods, there is a phenomenon of "forced grafting" or "superficial integration" when it comes to the excavation and incorporation of ideological and political elements. Although some teachers are aware of the importance of ideological and political education, in practical operations, they often simply deliver moral lectures at the beginning or end of the class or

forcibly insert some ideological and political cases. They fail to naturally integrate ideological and political elements into various teaching links such as disease mechanism analysis, assessment decision-making processes, treatment technique operations, and patient management, as seamlessly as salt dissolving in water. This type of integration lacks appeal and persuasiveness, making it difficult to evoke emotional resonance and recognition among students.

Thirdly, regarding the teaching evaluation system, the existing assessment methods mainly focus on final theoretical exams and skill operation assessments, emphasizing quantitative evaluation of students' mastery of knowledge and skills. However, the evaluation of students' professional attitudes, communication abilities, teamwork spirits, humanistic care, and social responsibilities manifested during the learning process is relatively lacking or merely a formality. The deviation in evaluation orientation inadvertently reinforces students' tendency to "prioritize scores over morality," which is not conducive to their all-round development of comprehensive qualities.

Finally, in terms of teachers' own ability in ideological and political education, some professional teachers, especially young teachers, still have deficiencies in their in-depth understanding of course-based ideological and political education, their ability to excavate ideological and political elements, and their methods and skills for skillfully integrating ideological and political education into professional teaching. They may possess solid professional expertise, but when it comes to "guarding their own section of the canal and cultivating their own field of responsibility" to achieve the unity of explicit and implicit education, they still require systematic training, continuous discussions, and refinement (Jiang, Liu, Zhu et al., 2025).

Therefore, it is an inevitable choice to systematically review the current situation, break through existing bottlenecks, and explore the construction of an effective course-based ideological and political education system that aligns with the characteristics of the "Rehabilitation of Musculoskeletal Disorders" course, meets the talent cultivation requirements of the "new double-high" initiative, and enhances the teaching quality and educational effectiveness of this course. It is also the core essence of the professional connotation development.

3. Overall Design of the Ideological and Political Teaching System for the Course "Rehabilitation of Musculoskeletal Diseases"

To advance the construction of ideological and political education in courses, it is essential to first conduct top-level and systematic teaching design, ensuring that the objectives of ideological and political education align with professional teaching objectives and create a synergistic effect.

3.1 Three-dimensional Integrated Objectives for Ideological and Political Education

Based on the requirements for high-quality technical and skilled talents under the "New Double High" initiative and considering the professional characteristics of rehabilitation therapists, this course has established a three-dimensional ideological and political education objective system encompassing

knowledge, abilities, and qualities.

3.1.1 Value-shaping Objectives (Quality Dimension)

Guide students to deeply understand the core values of rehabilitation medicine, namely "people-orientation and function-first," and foster a professional spirit of "respecting life, saving the dying, being willing to sacrifice, and possessing boundless love." Cultivate a scientific attitude and work ethic characterized by rigor, pragmatism, meticulousness, and patience among students. Forge a "craftsmanship spirit" of striving for excellence and continuous improvement. Enhance teamwork awareness and communication and coordination skills. Inspire a sense of responsibility and patriotism to serve grassroots communities and contribute to society, laying a solid foundation for medical ethics and professional conduct.

3.1.2 Knowledge Construction Objectives (Knowledge Dimension)

Enable students to systematically master the etiology, pathology, clinical manifestations, principles, and methods of rehabilitation assessment for common musculoskeletal diseases. Facilitate an in-depth understanding of the mechanisms of action and applicable principles of various rehabilitation treatment techniques (such as joint range-of-motion training, muscle strength training, balance and coordination training, and the application of physical agents). Equip students with the ability to develop individualized, phased rehabilitation treatment plans for patients based on evidence-based medicine.

3.1.3 Ability Development Objectives (Ability Dimension)

Cultivate students' proficiency and standardization in conducting rehabilitation assessments and treatment techniques for the musculoskeletal system. Develop preliminary clinical reasoning skills to analyze and solve common musculoskeletal rehabilitation problems. Enhance health education and doctor-patient communication skills to effectively guide patients and their families in home-based rehabilitation. Foster the ability to collaborate in teams to complete rehabilitation plans for complex cases.

3.2 *Progressive and Integrated Content System for Course Ideological and Political Education*

Centered around the aforementioned objectives, the content of the "Rehabilitation of Musculoskeletal Diseases" course has been reorganized and integrated to establish a three-tier ideological and political mapping system consisting of "modules-units-knowledge points." Ideological and political elements embedded in each teaching unit have been thoroughly explored and transformed into specific teaching materials and integration points.

3.2.1 In the "Rehabilitation of Neck, Shoulder, Waist, and Leg Pain" Module

In light of the high prevalence of these conditions and their impact on patients' quality of life, the service concept of "patient-centeredness" is integrated. Through case discussions, students learn how to patiently listen to patient complaints and provide personalized health guidance, fostering a sense of care for patients and communication and collaboration skills.

3.2.2 In the "Rehabilitation of Osteoarthritis and Post-fracture" Module

The long-term and progressive nature of rehabilitation training is emphasized. Stories of patients who persevered in rehabilitation and eventually reintegrated into society, or cases of outstanding therapists providing long-term follow-up guidance to patients, are introduced to cultivate students' perseverance, patience, meticulousness, and a strong work ethic.

3.2.3 In the "Sports Injury Rehabilitation" Module

In the context of injuries in competitive sports and mass fitness, the public health concept of "prevention first" and the functional goal of "returning to sports" are incorporated. Students are guided to contemplate the social responsibility of rehabilitation therapists in safeguarding people's sports health and serving the national strategy of building a sports power. Additionally, by analyzing rehabilitation cases of high-level athletes, students are encouraged to develop a craftsmanship spirit of pursuing technical precision and innovation.

3.3 *"Online-offline, in-class-out-of-class, on-campus-off-campus" Linked Teaching Model*

By breaking the boundaries of traditional classrooms, a diversified and three-dimensional teaching implementation path is constructed to promote the integration of knowledge and action.

3.3.1 Theoretical Teaching Sessions

Interactive teaching methods such as case introduction, problem exploration, scenario simulation, and group debates are adopted to integrate ideological and political discussions into professional knowledge learning.

3.3.2 Practical Teaching Sessions

A progressive practical chain of "simulated scenarios-skill training-clinical internships-community services" is designed. In the training room, role-playing is used to simulate doctor-patient communication; during hospital internships, clinical mentors explain medical ethics and professional conduct using real cases; in the community, health education and simple rehabilitation guidance services are organized to strengthen social responsibility.

3.3.3 Online Teaching Platform

A course ideological and political resource library is established, uploading relevant documentaries, reports on advanced deeds, and ethical case discussion questions as online extended learning materials to guide students in independent exploration and reflection.

4. In-depth Exploration and Practice of the Integration Pathways for Curriculum-based Ideological and Political Education

To ensure that ideological and political construction is effectively implemented and yields tangible results, it is necessary to start with key links and carry out refined design and implementation.

4.1 Core Driver: Enhancing the Ideological and Political Literacy and Competence of the Teaching Team

Teachers are the key force in promoting curriculum-based ideological and political education. Firstly, organize the teaching team to conduct thematic study sessions to deeply understand the fundamental task of "fostering virtue and cultivating talent" and the connotations of "curriculum-based ideological and political education," unifying their thinking and raising their awareness. Secondly, establish a regular mechanism for collective lesson preparation and teaching discussions on curriculum-based ideological and political education, where teachers jointly explore ideological and political elements, design integration plans, share successful cases, and address teaching challenges. For example, regularly hold "Curriculum-based Ideological and Political Education Workshops" and invite teachers from the Marxism College to provide guidance, facilitating collaboration between professional course teachers and ideological and political course teachers. Thirdly, encourage teachers to go deep into clinical practice to collect vivid ideological and political cases to enrich their teaching; support teachers in participating in specialized training on curriculum-based ideological and political education to enhance their pedagogical skills. The ultimate goal is to build a fusion-oriented teaching team with strong political qualities, excellent professional competence, and high-level educational capabilities, forming a synergistic educational force (Wei & Lu, 2025).

4.2 Carrier Innovation: Constructing a Multi-level, Three-dimensional Practical Teaching System

Practice is the best way to test and elevate ideological understanding. This course has designed a practical teaching system with a total of 54 class hours, which includes the following components:

4.2.1 Blended Online and Offline Teaching (22 theoretical hours + online extensions)

Utilize the Xuexi Tong platform to construct a digital course space featuring micro-lecture videos, animated demonstrations, online quizzes, and thematic discussion forums. Before class, assign preview tasks containing points for ideological and political reflection; during class, use the Xuexi Tong tools to facilitate interaction; after class, assign extended reading and reflective journals, such as writing about "My Understanding of the Professional Ethics of Rehabilitation Therapists," to achieve full-process infiltration of ideological and political education.

4.2.2 Staged Skill Training (12 class hours)

Adopt a closed-loop process of "teacher-standardized demonstration—student group practice—teacher patrol guidance and error correction—peer evaluation within groups—skill assessment and demonstration." In the "error correction" and "peer evaluation" stages, emphasize the humanization and safety of operations, concretizing the "craftsmanship spirit" into precise control of every action angle, force, and rhythm.

4.2.3 Dual-mentor System Clinical Internship (12 class hours)

Students intern in the rehabilitation departments of partner hospitals, receiving joint guidance from senior hospital therapists and university faculty. Around real cases, conduct bedside teaching, group case discussion sessions, and rehabilitation plan presentations. Clinical mentors vividly illustrate the

importance of professional ethics, communication skills, and teamwork based on their own experiences, making ideological and political education more vivid and impactful.

4.2.4 Community Rehabilitation Service Practice (8 class hours)

Organize students to conduct services in communities or elderly care institutions, including musculoskeletal health screenings, home rehabilitation environment assessments and guidance, and promotion of appropriate technologies. Through these activities, students deeply understand the grassroots rehabilitation needs, experience the sense of accomplishment in serving the public with their professional knowledge, firmly establish the professional belief of being "health gatekeepers," and enhance their sentiment of serving the people and contributing to society.

4.3 Orientation Guidance: Implementing a Diversified Assessment and Evaluation System Based on Comprehensive Literacy

Reform the evaluation method of "one exam determining everything" and establish a diversified evaluation system that combines process-oriented evaluation with summative evaluation and emphasizes both knowledge assessment and literacy evaluation.

4.3.1 Process-oriented Evaluation (60%)

Includes: ① Online learning participation and quality of reflective assignments; ② Performance in practical training sessions (operational standardization, safety awareness, teamwork); ③ Internship reports (including observations and reflections on patient-centered care); ④ Group case analysis and presentations (focusing on the rationality of plan design, team division of labor and collaboration, and presentation skills); ⑤ Records and summaries of community service practices.

4.3.2 Summative Evaluation (40%)

Includes: ① Theoretical final exam, with increased comprehensive case analysis questions to assess students' ethical decision-making, communication strategies, and other competencies when applying knowledge to solve practical problems; ② Skill operation exam, using standardized patients (SPs) or simulated scenarios, which not only assesses operational techniques but also includes communication explanations, humanistic care, and encouragement and guidance to patients in the scoring criteria.

Through this comprehensive evaluation, students are guided to value the value experiences and behavioral cultivation during the learning process, realizing the educational orientation function of evaluation.

5. Preliminary Effects and Reflections on the Implementation of Curriculum Ideological and Political Education

The ideological and political teaching system constructed for this course has undergone a complete round of teaching practice among 155 students across four classes of the 2024 Rehabilitation Therapy Technology major at our university. After the course concluded, feedback was collected through various methods, including anonymous questionnaires, student symposiums, and individual interviews, and the relevant data was analyzed. The survey results revealed the following:

High recognition of teachers' educational effectiveness among students: The average comprehensive score given by students for the professional ethics, educational awareness, and integration capabilities demonstrated by instructors in teaching was 9.8 out of 10, indicating a high level of recognition for the ideological and political educational capabilities of the teaching team by the students.

High acceptance and satisfaction with curriculum reform among students: The average satisfaction score given by students for the integration of ideological and political elements into course content design, the diversity of teaching methods, the inspirational nature of practical sessions, the rationality of assessment methods, and the overall effect of the curriculum reform reached 9.9. Students generally reported that "the course not only taught us techniques but also made us understand why we learn," "community service allowed me to see the value of rehabilitation and my own responsibilities," and "case discussions taught me to think from the patient's perspective."

Positive changes in students' comprehensive qualities: Observations revealed that students demonstrated greater teamwork cohesion during practical training, showed more caring attitudes towards simulated patients or Standardized Patients (SPs), and considered more psychosocial factors during case discussions. Feedback from practice hospitals indicated that this cohort of students performed well in terms of communication willingness, service awareness, and discipline.

Of course, there are also areas requiring further improvement in our practical exploration. For instance, the design of some integration points for ideological and political education could be more refined; there are variations in implementation effects among different teachers; a long-term tracking and evaluation mechanism for students' ideological and political qualities is not yet well-established; and the collaborative development of ideological and political education resources at off-campus practice bases needs further enhancement.

6. Conclusion

In the new era where the construction of the "New High-Quality Vocational Education" leads the high-quality development of higher vocational education, cultivating talent with both exquisite rehabilitation skills and noble professional ethics, as well as profound humanistic sentiments—talent that combines moral and technical qualities—is an inevitable requirement for supporting the construction of a Healthy China and meeting the people's ever-growing health needs. It also represents the lifeline for the sustainable development of the Rehabilitation Therapy Technology major. As a crucial component of professional education, the ideological and political construction of the Musculoskeletal Disease Rehabilitation course directly influences the professional character of future rehabilitation therapists.

The exploration presented in this paper demonstrates that through systematic goal design, meticulous content exploration, three-dimensional pathway innovation, and scientific evaluation guidance, it is entirely possible to integrate ideological and political education into the entire process of professional course teaching in an organic, effective, and engaging manner. This not only serves as an effective

attempt to overcome the dilemma of the separation between ideological and political education and professional education but also represents the essential path to achieving the integration of value shaping, knowledge transmission, and ability cultivation, thereby promoting the comprehensive growth and development of students.

Looking ahead, it is necessary to continuously deepen the connotative construction of curriculum-based ideological and political education, optimize teaching modes, strengthen faculty development, and improve collaborative mechanisms. By doing so, we can deliver more high-quality rehabilitation therapy technical and skilled personnel to the industry and society—individuals who are politically steadfast, technically proficient, morally upright, and satisfying to the people—and contribute vocational education's strength to advancing the construction of a Healthy China (Zhang & Fan, 2025).

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