

Influence of Performance Appraisal and Training on Employee Motivation in Public Hospitals: Evidence from Mbeya Region, Tanzania

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ABSTRACT

Effective employee motivation brings a successful organisation, whereas ineffective employee motivation may bring an unsuccessful one. This study explores the impact of the performance appraisal process and performance appraisers' training on employee motivation in public hospitals in the Mbeya region of Tanzania. A sample of 338 employees was selected using simple random and proportionate sampling. Structured questionnaires and interview checklists were used along with the data, and covariance-based structural equation modelling (CB-SEM) was used for the analysis. The study revealed that performance appraisal (performance appraisal process, performance appraisers) and training have a significant impact on employee motivation ($p < 0.001$). Furthermore, the study concluded that performance appraisals, training, and the appraisal process have improved employee motivation in public hospitals. Therefore, to maintain the improvement of employee motivation in public hospitals, the study recommended the Ministry of Health keep enhancing the abilities of performance appraisers and the performance appraisal process and increase funding for health sector training. Theoretically, fair appraisal and training improve motivation. Practically, motivated workers advance healthcare quality, supporting Sustainable Development Goal 3 and aligning with the Human Resource for Health Strategic Plan 2021-2026.

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1.0 Introduction

Employee motivation is essential to a hospital's success; it influences employees to commit, be inspired, and perform to their best ability. Moreover, employee motivation impacts patient care and health outcomes. Motivated health workers demonstrate sensitive care and adhere to a plan of care. The lack of motivation produces low morale, a loss of productivity, and decreased performance, which ultimately threatens the quality of care and impacts organisational objectives. Understanding the factors that motivate employees is critical to building strategies with a focus specifically on human research that improves health outcomes (Adetola *et al.*, 2022; Pahnwaret *et al.*, 2020).

Motivation levels among healthcare workers vary widely across different regions and sectors. This variation is influenced by a mix of systemic, economic, and organisational factors. In wealthier areas, like North America and Europe, better resource distribution, attractive incentives, and well-structured training programs usually lead to higher motivation. However, challenges such as burnout, heavy workloads, and administrative hurdles still exist, showing that even in well-funded systems, there are significant motivational obstacles (Kitsios and Kamariotou, 2021; Chmielewska *et al.*, 2020).

On the other hand, public hospitals in Africa face even tougher challenges, including low pay, insufficient supplies, overwhelming patient loads, and limited chances for professional growth. These systemic issues result in low job satisfaction, high turnover rates, and less-than-ideal patient care. While various initiatives—like training programmes, community support, and international assistance—have been put in place to tackle these problems, fundamental issues such as underfunding and poor infrastructure continue to hinder efforts to motivate staff and improve performance (Muthuri *et al.*, 2020; Manyisa and van Aswegen, 2017).

In Tanzania, the challenges in the healthcare sector are particularly intense, leading to ongoing reforms aimed at enhancing pay, working conditions, and opportunities for career growth. The government and its development partners understand that making lasting improvements in healthcare relies heavily on having a motivated and well-supported workforce. That is why they

have made it a priority to implement policy reforms that focus on retaining health workers, building their capacity, and ensuring resources are distributed fairly; that is the Human Resources for Health (HRH) Strategic Plan 2021-2026 (URT, 2023). These efforts are crucial to the country's overall health strategies, which align with national development goals. To succeed in this environment, it is essential to not only invest in the system but also to adopt targeted human resource management practices that genuinely motivate healthcare workers, fostering their dedication even when resources are tight (Msebeni, 2023).

In this context, performance appraisals and training operate parallel to each other in a public hospital, supporting the continued development and recognition of staff motivation. If a nurse's appraisal highlights a lack of technical skills, the organisation can provide supportive training to help the nurse develop those skills, demonstrating that it values the nurse as an individual. As the nurse improves performance through training, the outcome is a positive appraisal, which would continue the cycle of professional growth, empowerment, and motivation, resulting in a valued workforce (Jeffrey & Prasetya, 2019; Rodrigues & Waltres, 2017).

In addition to being a measure of training need, performance appraisal is an essential tool for feedback provision and job satisfaction that would lead to a higher level of motivation among employees. If well managed, open, and conducive to career progression, appraisals can become a time when staff feel acknowledged and supported. They tend to translate into direct benefits, such as promotions or bonuses, which provide additional incentives for staff. Furthermore, the effectiveness of the performance appraisal process is greatly affected by the competencies of the appraiser; a skilled and well-trained appraiser allows for valuable, actionable feedback which supports learning and goal setting (Homauni *et al.*, 2021).

Likewise, qualified appraisers are crucial in healthcare to provide valuable assessments to professionals to improve skills, set goals, and ultimately improve performance. Trained appraisers increase employee engagement and overall success for the organisation. In public hospitals, to provide patients with high-quality

care, accurate diagnoses, effective treatments, and compassionate service, motivated and skilled employees are required. Such employees are also furnished to engage in problem-solving, which is critical in busy and complex healthcare contexts. In addition, skilled and knowledgeable workers will assist with continuous improvements and innovation. When boosting the hospital forward, all of these things ultimately enhance hospital reputation, the patient experience, and efficiency in operations.

1.1 Theories Underpinning the Study

This investigation revolves around two main theories: Goal Setting Theory (GST) and Expectancy Theory (ET). GST, introduced by Edwin Locke, posits that when we set specific and challenging goals, it can really boost our performance by ramping up our effort and motivation, especially when we receive feedback along the way. In public hospitals, tying performance appraisals to clear objectives can significantly enhance employee motivation and productivity, while focused training goals help in developing skills and keeping staff engaged (Mesfin, 2020; Moraa and Datche, 2019). But GST doesn't consider individual motivation differences, which is where ET comes in. ET was developed by Victor Vroom and highlights that motivation hinges on how valuable the rewards are perceived to be, the belief that effort leads to performance (expectancy), and that performance will yield rewards (instrumentality). When these elements align, motivation reaches its peak. In hospital environments, staff tend to feel more motivated when they can see the connection between their work, performance evaluations, and the rewards they receive. They are also more likely to take part in training if they see clear benefits, such as professional growth or increased productivity, that are linked to their efforts and the rewards they get (Mesfin, 2020; Githui, 2018).

However, several earlier studies used theories such as Social Comparison Theory (SCT), Equity Theory (EQT), Feedback Intervention Theory (FIT), and Human Capital Theory (HCT); their weaknesses prevent an entirely rich understanding of employee motivation (Biswakarma and Kadayat, 2023; Danaa and Kim, 2021). SCT, while sustaining motivation, can diminish intrinsic motivation; EQT is very

subjective. The subjectivity of Equity Theory arises from individual perceptions of fairness, which are influenced by personal values, experiences, and social environments, ultimately affecting their motivation and feelings towards perceived unfairness. FIT fails to account for broader motivational issues, and HCT does not acknowledge the value of motivation in achieving success. These criticisms have been resolved by Goal Setting Theory (GST) and Expectancy Theory (ET), which emphasise clear, challenging goals and link effort to outcomes. Implementing GST and ET should allow for a more individualised, goal-based, and motivated employee work environment, thus addressing the deficiencies in the previous theories.

1.2 Relationship between Performance

Appraisals, Training, and Employee Motivation

Research into how performance appraisals and training affect motivation reveals a range of viewpoints. Some researchers believe that when employees feel appraisal processes are biased, unclear, or overly subjective, it can lead to dissatisfaction, which in turn demotivates them and hampers productivity. Likewise, if appraisers depend on personal opinions instead of objective standards, it can hurt morale and motivation (Opoku *et al.*, 2024; Faisal, 2021; Homauni *et al.*, 2021; Caesar, 2018). On the other side, a lack of proper training can leave employees feeling unprepared and lacking the skills they need, which further diminishes their motivation (Reñosa *et al.*, 2021; Zahoor *et al.*, 2019). However, when performance appraisals are fair, transparent, and provide constructive feedback—especially when combined with targeted training—they can boost morale and engagement. Still, the research findings are somewhat mixed: while some studies indicate that poorly executed performance appraisals can lower motivation, others indicate that well-structured appraisal systems and continuous training can enhance employee engagement (Ebrahim, 2023; Nigussie, 2022).

On the other hand, some prior research has drawn on small samples (ranging from 48 to 280), as seen in Ebrahim (2023), Tuğçe (2022), and Aijaz (2019), which limits accuracy and generalisability. Similarly, studies by Shahraki *et al.* (2023), Danaa and Kim (2021), and Momanyi *et al.* (2016) also used small samples (ranging from 60 to 237). This study responds to the gap in

research using a larger sample (338). Larger samples deal with rest areas, including increasing generalisability, increasing statistical power, reducing variability and uncertainty, and performing subgroup analyses to provide more confidence and understanding than smaller sample sizes.

In addition, various earlier studies used descriptive statistics and multiple linear regression, which have limitations; they fail to capture complex relationships, must contend with measurement errors, cannot model latent variables, and assume all predictors are independent. Structural Equation Modelling (SEM) allows for taking these factors into consideration by permitting the researcher to analyse complicated pathways, incorporate measurement error corrections, model latent constructs, and relax independence assumptions. The outcome is a more accurate, flexible, and comprehensive understanding of the relationships among the data. (Dos Santos and Cirillo, 2023).

1.3 Why is the Study so Important?

First, it improves employee motivation: understanding the influence of performance appraisal and training on motivation will allow hospitals to enhance employee involvement to improve patient care and hospital performance. Secondly, the study provides a foundation for policy creation: the results will assist hospital administrators in developing meaningful and motivating appraisal and training programmes that engage the healthcare workforce. Thirdly, improvement of quality of service delivery: employees who are well-motivated are more dedicated; therefore, a motivated workforce will provide better quality of care in hospital settings and improve patient satisfaction in public hospitals. Fourth, Retention of the Healthcare Workforce: Well-developed appraisal and training programs will increase job satisfaction; consequently, hospitals will reduce turnover and retain a dedicated workforce with experience and stability in public hospitals. Lastly, this study supports Sustainable Development Goal 3 through an improved quality of health care provided by energised healthcare professionals, reductions in mortality, and enhanced health outcomes. Additionally, this study supports the Human Resources for Health Strategy 2021–

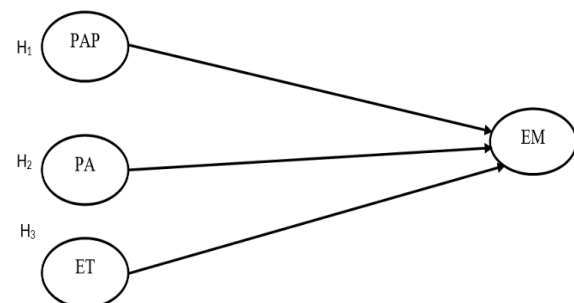
2026 in that it should inform policies to promote effective training and appraisal systems that enhance staff motivation, retention, and sustainability of the health system's workforce.

1.4 The Hypothetical Model and Objectives of the Study

The proposed model shows the influence of the performance appraisal process (PAP), performance appraisers (PA) and employee training (EP) on employee motivation (EM). PAP, PA and ET are independent variables, and EM is the dependent variable.

Figure 1

The Hypothetical Model on the Effect of Independent Variables on Dependent Variable



Source: Authors (2025)

A line with an arrow shows the influence of the independent variable on the dependent variable H1: Propheisies the influence of PAP on EM. H2: Forecasts the influence of PA on EM. H3: predicts the impact of ET on EM. The aims of the research are as follows, based on the hypothetical model:

- i. To investigate how PAP affects EM in public hospitals.
- ii. To explore how PA affects EM in public hospitals.
- iii. To determine how ET affects EM in public hospitals.

1.4.1 Hypotheses

Testable hypotheses are as given below:

- H1: EM in public hospitals is not significantly impacted by PAP.
H2: EM in public hospitals is not significantly impacted by PA.
H3: EM in public hospitals is not significantly impacted by ET.

2.0 Materials and Method

2.1 Study Area

Six specifically selected public hospitals in the Mbeya region were the research's focus. The hospitals were: Mbeya Zonal Referral Hospital, Mbeya Regional Referral Hospital, Rungwe District Hospital, Kyela District Hospital, Mbalali District Hospital, and Chunya District Hospital. An essential component of the research was the adoption of a performance appraisal tool by all of these hospitals to evaluate staff performance. Their primary services and functions are also comparable. Additionally, the research area was chosen because it was more accessible and had more staff activities than dispensaries and health centres.

2.2 Research Design and Approach

This study adopted a cross-sectional mixed-methods design, integrating both quantitative and qualitative approaches to enable comprehensive data triangulation within a single time frame. This approach helps us gain a complete understanding of the research problem. By confirming results from different perspectives, the findings become more reliable and detailed. Likewise, researchers can cover a broad spectrum of data with quantitative methods and discuss specific details with qualitative methods. This combination leads to more meaningful and nuanced insights (Mulisa, 2022). Moreover, the study used a cross-section design, where data were collected within a sample at a single point, which, furthermore, is useful in identifying relationships between various factors (Spector, 2019).

2.3 Population and Sampling

To minimise favouritism and guarantee that the data truly reflects the population, a random sample technique was used to obtain the data. A comprehensive list of the target group, comprising 2160 people, was generated as a sampling frame as the initial stage of the data-gathering procedure. The target population included medical officers, nurses, pharmacists, pharmaceutical technicians, medical laboratory technicians, administrative staff, and support personnel who had been employed for at least one year and had undergone performance appraisal. Using computer-generated random numbers and the Yamane method, 338 participants were selected at random to guarantee that each had an equal chance of getting selected. The chosen individuals were then contacted to take part in interviews using standardised questionnaires.

2.3.1 Calculation of Sample Size

A sample size (n) of respondents (employees) was calculated by using the Yamane (1973) formula.

$$n = \frac{N}{1 + N(e^2)} \quad (1)$$

Where n = sample size, N = the population size (2160) and e = the level of precision desired at alpha (α) = 5%. Thus, the overall sample size (n) was:

$$n = \frac{2160}{1 + 2160(0.05^2)} = 338 \quad (2)$$

The calculation indicated that 338 employees needed to take part in the study. The number of employees to survey from each hospital was worked out by (n_i) by dividing its total staff count (P_1) by the total number of employees across all hospitals at (P_2). Then this was multiplied by the total number of people needed for the study (N). The breakdown is given in the table below:

Table1

Total Number of Employees in the Targeted Hospital and Number of Respondents Sampled

Variable	Name of hospital						Total
	Zonal	Mbalali	Mbeya regional	Kyela	Rungwe	Chunya	
Number of employees (P_1)	968	369	306	190	235	92	2160
Number of employees to be sampled (n_i)	151	58	48	30	37	14	338

Source: Public hospitals

2.4 Data Collection

Data was gathered using the questionnaire and interview checklist. The variables were measured using a five-point Likert scale. The codes 1, 2, 3, and 5 stood for strongly disagree, disagree, neutral, agree, and strongly agree, respectively, on a five-point Likert scale. The scale was

selected due to its ease of use and ability to fairly balance the number of responses. Its practical use demonstrates that it is more reliable than alternative scaling algorithms (De Winter and Dodou, 2010).

2.5 Data Analysis

To analyse the relationships among the variables, the Covariance-Based Structural Equations Modelling (CB-SEM) approach was used (Stein *et al.*, 2017). This approach was chosen rather than others because it deals with both latent relationships and variable relationships effectively. AMOS version 23 was used in SPSS to project the model. To meet the SEM assumptions, the procedure involved examining the levels of skewness and kurtosis to verify multivariate normality and utilising scatter plots to verify the dependent variables' linearity (Demir, 2022). However, the qualitative data were analysed thematically by pinpointing key patterns and themes across the interviews and focus group discussions. Investigators coded responses related to perceptions of fairness, feedback quality, trust, motivation, and training. Similar ideas were grouped to illustrate common views, such as the importance of transparent appraisal processes and the impact of timely, constructive feedback on motivation (Bennett *et al.*, 2019). This thematic analysis helped synthesise insights and complement the quantitative findings.

2.6 Ethical Consideration

Through this study, ethical guidelines of respect for the rights of the participants, privacy, and informed consent were adhered to throughout. The participants were informed of the research's purpose and volunteered their participation. Participants' privacy was ensured by anonymising their personal data, and research clearance was obtained from Moshi Cooperative University.

3.0 Results and Discussion

3.1 Analysis of Exploratory Factors

The Kaiser-Meyer-Olkin (KMO) test was used to evaluate the sampling adequacy. As anticipated, all constructs – EM, PA, PAP, and ET – had levels above 0.6 (Shrestha, 2021). Their chi-square test and the associated p-value < 0.001 demonstrated that the items used to measure each construct were sufficiently correlated to permit exploratory factor analysis, according to Bartlett's Test. When compared to other constructs, employee motivation items showed the highest chi-square values, indicating a higher correlation.

Table1

Items that are Suitable for EFA in Every Research Construct

Construct	Determinant	KMO	Chi-squared Bartlett's Test (p-value)
Employee motivation	0.053	0.887	1078.797 (<0.001)
PA	0.177	0.849	634.102(<0.001)
PAP	0.145	0.837	707.499 (<0.001)
ET	0.153	0.853	689.208 (<0.001)

Source: Authors (2021)

3.2 Analysis of Confirmatory Factors

Cronbach's alpha was used to evaluate how similar items measuring the same construct were to one another. All of the constructions met the acceptable values range of 0.8 to 0.9, as stated by Adeniran (2009). According to Comrey and Lee (2013), the factor loadings, which measure how closely each item relates to its underlying concept, were more than the recommended cutoff of 0.5.

Furthermore, the composite reliability (CR) values were higher than the recommended cutoff point of 0.7 (Gebremedhin *et al.*, 2022). The average variances extracted (AVE) were likewise greater than the required 0.5, indicating the proportion of an item's variation captured by its intended construct rather than error, per Gebremedhin *et al.* (2022). The AVE square roots, which quantify the differences between the constructs, were larger than all.

Table 2

Tests of the Study Construct's Validity and Reliability

Construct	Factor loading range	Cronbach's Alfa value	CR	AVE	SQRT of AVE
Employee's motivation	0.834-0.857	0.902	0.928	0.719	0.848
PA	0.774-0.782	0.835	0.883	0.603	0.777
PAP	0.757-0.820	0.846	0.891	0.619	0.787
ET	0.756-0.825	0.845	0.890	0.618	0.787

Source: Authors (2021)

3.3 The Structural Model's Results

The findings demonstrate that the model fit is appropriate for analysing the associations between PAL, ET, and EM using the maximum likelihood approach (Figure 2). This equals 216.969 (164), $p = 0.004$ for the chi-square. "Although the chi-square value is statistically significant ($p = 0.004$), this result is likely influenced by the sample size, as the chi-square test is known to be sensitive to large samples. Therefore, alternative fit indices were considered to provide a more reliable assessment of model fit. A successful model fit is confirmed by various metrics. These include the root mean square error of approximation (RMSEA = 0.030), the Tucker-Lewis index (TLI = 0.984), the comparative fit index (CFI = 0.986), the relative fit index (RFI = 0.938), the root mean square residual (RMR = 0.020), the parsimony comparative fit index (PCFI = 0.851), and the normed fit index (NFI = 0.947). As experts like Schumacher and Lomax (2016) and Hair *et al.* (2023) have indicated, these values, when

combined with the chi-square fit statistics, imply a strong fit.

Figure 2

Structural Model for the Constructs

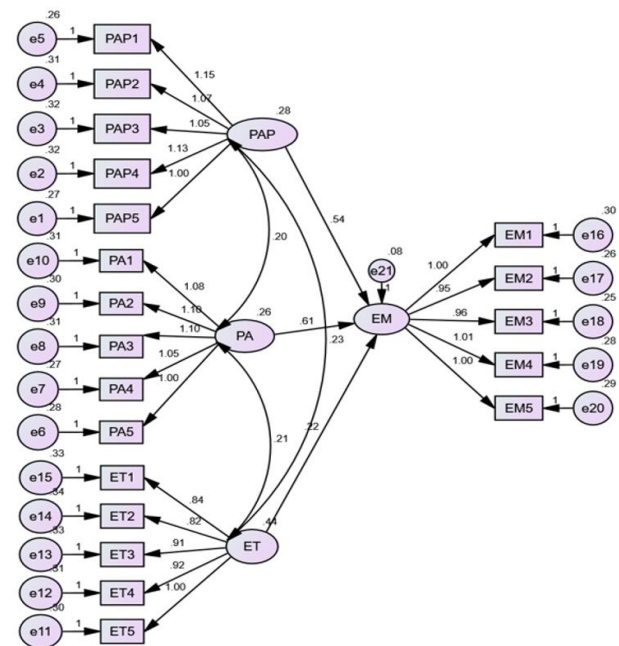


Table 3

Effect of Performance Appraisal and Training on Employees' Motivation

Variables	Estimates	SE	P	DECISION
EM<--- PAP	0.538	0.095	***	REJECT THE NULL
EM<--- ET	0.217	0.055	***	REJECT THE NULL
EM<--- PA	0.606	0.095	***	REJECT THE NULL

*** Means the variable was significant ($p < 0.001$)

4.0 Discussion of Findings

All three hypotheses were rejected because the performance appraisal process, performance appraisers, and training significantly affect employee motivation in public hospitals ($p < 0.001$) (Table 3). The following is a discussion of the effects of the performance appraisal process, performance appraisers, and training on employee motivation in public hospitals.

4.1 Effect of Performance Appraisal Process on Employee Motivation

The study indicated that the performance appraisal process significantly increases employee motivation in public hospitals ($p < 0.001$) (Table 3). Qualitative comments affirmed these findings, and a number of employees reported that appraisals made them feel recognised, valued, and treated fairly, boosting their morale and overall job satisfaction. In contrast to Chaponda (2014), where most employees were dissatisfied,

employees in this study reported increased motivation, which may be attributed to the participatory and unbiased nature of the process; moreover, this divergence could be attributed to reforms in performance management practices within Tanzania's public hospitals, which have increasingly emphasised participatory and developmental appraisal systems. Interpretations indicated that employees who feel recognised and appreciated are more likely to demonstrate stronger commitment and engagement. These findings coincide with Ndegwa (2018), who also found that fair and impartial appraisals motivated workers. The findings in this research submit that a functioning performance appraisal process allows for improvements in employee motivation, which will enhance patient care and efficiency within the hospital. Theories of goal-setting and expectancy help explain that the fairness of appraisals will improve overall goal alignment and positive expectations for outcomes, along with motivation. Overall, the qualitative and

quantitative data suggest the combined and sustained benefits associated with the fair, consistent, and participatory performance appraisal process for motivating healthcare workers.

4.2 Effect of Performance Appraisers on Employee Motivation

The research indicated a significant effect of the performance appraiser on employee motivation in public hospitals ($p < 0.001$). (Table 3). Qualitative responses revealed that employees were more valued and engaged when the supervisor expressed recognition of their strength and continued to provide constructive suggestions. Employees felt that their gap in performance, constructive feedback, and the value of the appraisal made them feel involved and appreciated. Many employees even expressed gratitude that the feedback was fair and timely, which aligned with the quantitative results of increased motivation. Moreover, this result is in agreement with Chaponda (2014), where the majority (57%) of employees were satisfied with performance appraisers and motivated. On the other hand, findings are contrary to Jose (2011), where employees were dissatisfied with the appraiser for not giving them the appraisal feedback. Given the qualitative and quantitative perspectives, the findings highlight that performance appraisers who provide communication and constructive feedback improve job satisfaction, motivation, performance, and organisational commitment. These improvements ultimately contribute to better healthcare delivery and higher employee retention. The role of feedback and appraisal fairness in contributing to motivating employees is present in goal-setting and expectancy theories, both of which discuss how positive reinforcement and clear expectations motivate behaviour and performance outcomes. Overall, quantitative and qualitative data confirms that fair and constructive feedback from performance appraisers significantly enhances employee motivation, engagement, satisfaction, and organisational commitment in public hospitals.

4.3 Effect of Training on Employee Motivation

The research found that employee motivation was significantly enhanced by employee training in public hospitals ($p < 0.001$) (Table 3). Qualitative

feedback substantiated these findings, with numerous workers reporting that training enhanced their skills and overall confidence, and being better equipped made them feel more confident and motivated. Employees pointed out training would allow them to perform better in their roles, prompting an increase in job satisfaction, morale, and enthusiasm. Some employees indicated training altered their attitude toward coming to work, and they took pride in their improved skills. These responses were similar to those reported in studies by Hamidi (2019) and Ozkeser (2019), which found training to be positively correlated with employee motivation. The study suggests training advances not only technical skills but also increases self-esteem and job happiness, resulting in improved employee performance, improved patient care, and improved staff retention. Goal-setting theory and expectancy theory support this argument by demonstrating that training clarifies employee goals while strengthening their belief they can succeed. Overall, quantitative and qualitative data indicate that employee training increases motivation, confidence, job satisfaction, performance, and retention in public hospitals.

5.0 Conclusion and Recommendations

In conclusion, the study delivers convincing confirmation that employee motivation in public hospitals is significantly boosted through effective performance appraisal processes, employee training, and the role of appraisers, all of which contribute to enhanced morale. Moreover, this research confirms that well-structured appraisal and training mechanisms are essential drivers of employee motivation and organisational achievement in the healthcare sector.

Based on the findings, it is recommended that the Ministry of Health of the United Republic of Tanzania

- i. Arrange the development and implementation of a transparent, fair, and timely performance appraisal process.
- ii. Enable appraisers to be effectively trained to ensure objective and supportive evaluations, easing better employee engagement.
- iii. Invest in endless employee training programmes to develop skills, boost

confidence, and promote career growth, which in turn increases motivation and performance.

5.1 Theoretical and Practical Implication of Findings

The significant effects of performance appraisal and training on employee motivation highlight that unbiased appraisal systems and endless training improve workers' engagement. Theoretically, the evidence supports motivation models emphasising recognition and skill development. Practically, motivated employees advance healthcare quality, service delivery, and retention, contributing to SDG 3's goal of healthy lives and well-being. These findings align with the Human Resource for Health Strategic Plan 2021-2026 by fostering a competent, motivated workforce, ultimately strengthening health systems and ensuring sustainable, quality healthcare services.

6.0 Acknowledgements

Thanks to the hospitals in Mbeya and the surrounding areas (Zonal, Regional, and the district hospitals in Rungwe, Kyela, Mbalali, and Chunya) for all your help with getting the data. Your teamwork and quick responses made the project a success! We appreciate you all working to improve healthcare in your areas, and we hope to keep working with you.

7.0 Declaration of Conflict of Interest

There is no conflict of interest in this study. Everyone contributed and helped out without any personal or money stuff that could change the results. We want to be clear that our findings are unbiased and aimed at improving learning and healthcare.

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