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Validation Through Expert Judgement of an Internationalisation Strategy in Health Sciences

Zulema Ávila González
Universidad San Gregorio de Portoviejo, Health Sciences Area, Portoviejo, Ecuador
Corresponding Author: Zulema Ávila González zavila@sangregorio.edu.ec

A R T I C L E I N F O

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A B S T R A C T

This study aimed to validate a strategy for managing internationalisation in university Health Sciences degree programmes. A sequential mixed-methods content validation study was conducted with eight experts. Panel selection combined the Expert Competence Coefficient (K) with the thematic relevance of academic and professional backgrounds. The proposal was assessed using a five-category ordinal scale, Aiken's V, and qualitative analysis of expert observations. Overall, Aiken's V was 0.930, with dimension coefficients ranging from 0.896 to 0.969. Of 24 criteria, 21 achieved values ≥ 0.90; none scored below 0.80. The results provided favourable evidence of content validity and identified operational aspects requiring refinement. Effectiveness requires subsequent implementation and evaluation in institutional contexts.

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INTRODUCTION

To obtain evidence of content validity and contextual feasibility for a strategic proposal entitled "Innovative strategy for managing the internationalisation process in university Health Sciences degree programmes", validation through expert judgement was conducted. This procedure enabled the relevance of the components of the Strategy to be assessed through the academic and professional experience of specialists involved in Higher Education, university internationalisation, Health Sciences teaching, strategic planning and quality.

In this setting, expert validation requires moving beyond the simple expression of individual assessments towards procedures that justify both the suitability of the participants and the soundness of the decisions derived from their judgements. The reasoned selection of the panel, the quantification of content validity and the systematic incorporation of qualitative observations are complementary components of the same methodological process. Aiken's V provides a useful measure for summarising assessments made on ordinal scales and identifying components with different levels of acceptance (Aiken, 1985), while qualitative analysis captures arguments, recommendations and contextual aspects that are not fully represented by a numerical coefficient (Maldonado-Suárez & Santoyo-Telles, 2024).

Combining these two sources of evidence supports a more transparent validation process aimed at refining complex proposals, particularly when they incorporate academic, organisational and management dimensions, as occurs in the internationalisation processes of university Health Sciences degree programmes.

This study aims to validate a strategy for managing the internationalization process in university Health Sciences degrees through expert judgment.

LITERATURE REVIEW

Ávila González (2023) validated an internationalisation strategy for university Health Sciences programmes using expert judgement and a mixed-methods approach involving eight experts. The findings demonstrated strong evidence of content validity, with an overall Aiken's V coefficient of 0.930. The study highlights the importance of combining expert competence assessment, quantitative validation, and qualitative feedback to evaluate the relevance and coherence of a proposed strategy. However, the author emphasized that further implementation and evaluation are necessary to determine its effectiveness in institutional contexts.

METHODOLOGY

A mixed-methods, sequential design for content validation through expert judgement was used. A methodological study of content validation through expert judgement was conducted, integrating quantitative and qualitative data in a sequential, two-phase design. The first phase focused on selecting and characterising the panel using the Expert Competence Coefficient (K), complemented by an analysis of the thematic relevance of the candidates'

academic and professional backgrounds. The second phase comprised the assessment of the proposal using an ordinal scale with five categories, the calculation of Aiken's V to estimate evidence of content validity, the thematic analysis of qualitative observations and the integration of both sets of results into a traceability matrix to guide decisions on retaining, adjusting or reformulating the components assessed.

Table 1. Methodological sequence of validation through expert judgement

1 Preselection of experts	2 Calculation of K	3 Informed consent	4 Dispatch of documents	5 Quantitative and qualitative assessment	6 Processing and integration	7 Adjustments and final version

Note. The sequence was carried out confidentially, with documentary records of each stage.

RESULTS AND DISCUSSION

The panel was formed through purposive sampling. Professionals with demonstrable experience in fields directly related to the subject of the study were invited, with the aim of achieving institutional diversity and involving national and international experts. Selection will be based, in addition to academic qualifications, on the correspondence between the professional profile, the declared experience and the specific competence to provide an informed judgement on the management of internationalisation in university health sciences degree programmes.

Preselection Procedure

1. An invitation was sent by email explaining the purpose of the research, the scope of participation and the voluntary nature of the collaboration.
2. Acceptance of participation was received, and the professional profile form was sent.
3. The declared information was reviewed, and the expert competence coefficient (K) was calculated.
4. Those who achieved a high or nearly high level of expert competence were selected definitively.
5. Informed consent was signed before the technical documentation for the proposal was sent.

After the preceding steps had been completed, with the invitation sent to 23 potential experts, responses were received from 15, of whom 8 met the criterion (K); these experts formed our panel.

Characteristics of the Selected Panel

The final panel comprised eight experts, selected using a methodological criterion that combined the Expert Competence Coefficient (K) with the thematic relevance of their academic and professional backgrounds. Regarding

their geographical backgrounds, five experts residing in Ecuador, two in Argentina, and one in the Netherlands participated, which brought an international perspective to the validation process. Institutional affiliations included Ecuadorian universities, Argentine institutions specialising in ES and internationalisation, and a US university, which supported the diversity of academic and management contexts considered in the assessment. The institutions represented included Universidad San Gregorio de Portoviejo, Universidad Estatal del Sur de Manabí, Universidad de Flores, FLACSO Argentina, and Boston College.

From an academic and professional standpoint, the panel was interdisciplinary and complementary, comprising profiles associated with the internationalisation of Higher Education, university management, strategic planning, quality assurance and accreditation, involvement in the Health Sciences, Public Health, university teaching, research and engagement with national and international academic networks. This diversity was particularly pertinent to the subject of the study, because the proposal brings together two substantive areas: the management of university internationalisation and education in Health Sciences degree programmes.

To preserve participant confidentiality, panel members were coded E1–E8. Personal identification data were kept separate from the analysis matrix and used solely to verify the declared academic and professional backgrounds.

Table 2. Characteristics of the Selected Panel

Code	Kc	Ka	K	Classification	Main dimension of contribution	Inclusion criterion
E1	0,70	0,85	**0,78**	Medium competence approaching high	University management, Health Sciences, quality, accreditation and strategic planning	Thematic relevance and institutional experience in university management and health
E2	0,80	0,75	**0,78**	Medium competence approaching high	Health Sciences, teaching, research, epidemiology, university management and quality	Disciplinary relevance in Health Sciences and research
E3	0,90	0,90	**0,90**	High competence	Internationalization of Higher Education, university management, postgraduate education, planning and academic networks	High competence and relevant international experience

Code	Kc	Ka	K	Classification	Main dimension of contribution	Inclusion criterion
E4	0,90	0,90	**0,90**	High competence	International relations, Health Sciences teaching, public policy, planning, quality and research	High competence and a relevant interdisciplinary profile
E5	0,70	0,85	**0,78**	Medium competence approaching high	Internationalization of Higher Education, university management, strategic planning, quality, scientific output and international networks	High thematic relevance in university internationalization
E6	1,00	0,90	**0,95**	High competence	International education, interculturality, university management, strategic planning and Health Sciences	High competence and direct specialization in international education
E7	0,80	0,95	**0,88**	High competence	Health Sciences, Higher Education, research, strategic planning and quality	High competence and a relevant disciplinary and academic background
E8	0,80	0,65	**0,73**	Medium competence	Health Sciences, Public Health, strategic planning, quality and research	Direct disciplinary relevance and complementarity within the panel

Source: prepared by the author from the documentation received.

Once the panel had been formed, each expert was sent a standardised set of documents that enabled them to understand the problem, the logic of the proposal and the elements assessed. The review was conducted individually, asynchronously and confidentially to preserve the independence of the judgements. When necessary, an opportunity for methodological clarification was provided, without directing responses or encouraging prior agreements among participants.

Table 3. Quantitative Validation Matrix by Criterion

No.	Criterion	V	Interpretation
1	Addresses a real need	**1,000**	Excellent
2	Correspondence with current challenges	**1,000**	Excellent
3	Relevance of the objectives	0,906	Excellent
4	Sufficient theoretical basis	0,906	Excellent
5	Regulatory, institutional and quality reference points	0,938	Excellent
6	Rationale for the need for internationalisation	0,969	Excellent
7	Correspondence between diagnosis–problem–objectives–axes–actions	0,906	Excellent
8	Logical organisation of the axes	0,938	Excellent
9	Indicators for the achievement of objectives	0,875	Very good
10	Feasibility of the actions	0,906	Excellent
11	Resources, responsible parties, timeframes and indicators	0,844	Very good
12	Progressive application	0,938	Excellent
13	Incorporación of innovative elements	0,844	Very good
14	Current forms of internationalisation	0,969	Excellent
15	An up-to-date and contextualized vision	0,938	Excellent
16	Applicability to the field of health	0,938	Excellent
17	Particular characteristics of health education	0,906	Excellent
18	Global and intercultural competencies	0,938	Excellent

No.	Criterion	V	Interpretation
19	Mechanisms for continuity	0,906	Excellent
20	Integration into planning and quality	0,969	Excellent
21	Monitoring, evaluation and continuous improvement	0,938	Excellent
22	National and international positioning	0,938	Excellent
23	Cooperation, mobility, networks and visibility	0,969	Excellent
24	Impact on education, research and management	0,938	Excellent

Table 4. Final Quantitative Validation Matrix

Dimension	Final Aiken's V	Interpretation
Relevance of the proposal	**0,969**	Excellent content validity
Theoretical and regulatory foundations	**0,938**	Excellent content validity
Internal coherence	**0,906**	Excellent content validity
Implementation feasibility	**0,896**	Very good content validity
Innovation	**0,917**	Excellent content validity
Applicability to Health Sciences	**0,927**	Excellent content validity
Sustainability	**0,938**	Excellent content validity
Contribution to strengthening internationalisation	**0,948**	Excellent content validity
Overall Aiken's V	**0,930**	**Excellent content validity**

The quantitative assessment conducted by eight experts showed a high level of content validity for the proposed strategy. Overall, Aiken's V reached a value of 0,930, interpreted as excellent content validity. The result is very favourable: 21 of the 24 criteria achieve V ≥ 0,90, and the other 3 criteria remain above 0,80. Across dimensions, the coefficients ranged from 0,896 to 0,969, with the relevance of the proposal (V = 0,969), contribution to strengthening internationalisation (V = 0,948), theoretical and regulatory foundations (V = 0,938) and sustainability (V = 0,938) standing out.

Of the 24 criteria assessed, 21 achieved values equal to or greater than 0,90, and the remaining three ranged from 0,844 to 0,875. The lowest-scoring criteria were resources, responsible parties, timeframes, and indicators (V = 0,844) and the incorporation of innovative elements (V = 0,844), followed by

indicators for assessing the achievement of objectives (V = 0,875). No criterion had a value below 0,80, so there is no quantitative evidence requiring any component of the proposal to be substantially reformulated.

The validation was organised into two interconnected phases. The first focused on selecting and rating the expert panel using the expert competence coefficient (K). The second comprised the quantitative assessment of the proposal using Aiken's V, the qualitative analysis of the observations provided, and the integration of the relevant adjustments. The combination of these procedures sought to strengthen the methodological traceability of improvement decisions and ensure that the final version responds to the context of university Health Sciences degree programmes (Aiken, 1985; Cabero Almenara & Barroso Osuna, 2013a).

As an initial stage of expert judgement, the experts' profiles must be defined in advance, considering their subject-specific experience, research background and independence from the research team and the subject being assessed, to obtain pertinent judgements and reduce potential biases (Maldonado-Suárez & Santoyo-Telles, 2024). Expert judgement is an appropriate means of examining the relevance, representativeness and clarity of the elements of a proposal before its implementation; however, its results will be interpreted as content evidence rather than as an isolated demonstration of institutional effectiveness (Escobar-Pérez & Cuervo-Martínez, 2008).

The expert panel was selected with consideration of the Expert Competence Coefficient (K), calculated from the knowledge coefficient and the argumentation coefficient. This procedure has been widely used in educational and social science research to estimate participants' competence in validation processes through expert judgement (Cabero Almenara & Barroso Osuna, 2013) (Ramírez & Cepena, 2020).

This validation does not require a single, universal number of experts, because its purpose is not to represent a population statistically, but to obtain a specialist assessment of the content evaluated. In this respect, the quality of the panel depends primarily on the background, experience, and relevance of the experts' profiles to the subject of the study, rather than on the absolute number of participants (Escobar-Pérez & Cuervo-Martínez, 2008).

This criterion is also supported by Lynn (1986), and the methodological literature that draws on her propositions indicates that, although the determination of the number of experts may involve a degree of arbitrariness, a minimum of five experts provides a sufficient level of control over agreement arising by chance, whereas three experts could be accepted only when the content area is very restricted.

However, given the multidimensional nature of the subject of the study, the formation of the panel was not based solely on a rigid interpretation of the numerical value of K. The doctoral proposal brings together two substantive dimensions: the management of university internationalisation and education in Health Sciences degree programmes. It was therefore considered necessary to form an interdisciplinary and complementary panel, in which some experts would contribute primarily through internationalisation, strategic planning,

university management, academic cooperation and international networks, while others would contribute through teaching, research, academic management, quality and the Health Sciences.

This decision is consistent with current methodological approaches to expert selection, which recognise that, for complex subjects of study, the suitability of the panel depends not exclusively on disciplinary homogeneity, but also on the diversity, specialisation and thematic relevance of its members. In this respect, Schifano & Niederberger 2025) indicate that the professional heterogeneity of the panel can strengthen study quality by enabling different analytical perspectives to be integrated. Similarly, (Hohmann et al., 2025) recommend that panel selection ensure diversity and specialisation, especially in studies addressing broad or multidimensional topics.

Likewise, (González Campos et al., 2026) caution that the traditional K coefficient may have limitations when applied as a simple, equally weighted average, and propose considering the expert's thematic proximity and differentiated weightings according to the dimensions of the subject assessed. This approach is pertinent to the present research, insofar as expert competence may be expressed differently depending on the component of the proposal being assessed.

Accordingly, in the present research, experts with medium competence were not reclassified as experts with high competence. The classification obtained using the K coefficient was retained; however, their inclusion in the panel was justified when their professional, academic or management backgrounds showed a direct relationship with one of the essential dimensions of the proposal. This decision preserved the methodological transparency of the process and, at the same time, ensured a comprehensive, interdisciplinary and contextualised assessment of the Strategy.

The assessment using Aiken's V showed a broadly favourable appraisal of the strategy's components, with an overall coefficient of V = 0,930 and values across dimensions ranging from 0,896 to 0,969. These results are relevant because Aiken's V enables the quantitative synthesis of the ordinal assessments provided by experts regarding the adequacy or relevance of the content, expressed as a coefficient between 0 and 1, where values close to unity represent a greater concentration of scores in the higher categories of the scale (Aiken, 1980; Aiken, 1985).

In this respect, the coefficients obtained provide favourable evidence of the correspondence between the strategy's components and the criteria established for its validation; however, they must be interpreted as evidence of content validity rather than as a demonstration of the proposal's effectiveness, which would require subsequent implementation and evaluation in specific institutional contexts.

The detailed analysis of the coefficients also identified areas for refinement, even though all criteria achieved favourable levels. The comparatively lower values corresponded to the definition of resources, responsible parties, timeframes and indicators (V = 0,844), the incorporation of innovative elements (V = 0,844) and the indicators for assessing the

achievement of objectives (V = 0,875), which directed the review towards primarily operational aspects of the proposal rather than towards a reformulation of its conceptual structure. This type of analysis demonstrates the usefulness of Aiken's V both for establishing an overall assessment and for locating components that require greater precision. However, the point estimate of the coefficient becomes more robust when interpreted together with qualitative observations and, where possible, with confidence intervals that allow the precision of the estimate to be assessed, especially in small panels (Penfield & Giacobbi, Jr., 2004) (Merino Soto & Livia Segovia, 2009). From this perspective, integrating the V values with the experts' recommendations strengthens the traceability of the process and prevents a high quantitative assessment from obscuring observations relevant to refining the proposal (Maldonado-Suárez & Santoyo-Telles, 2024)

CONCLUSIONS AND RECOMMENDATIONS

The application of the Expert Competence Coefficient provided an objective basis for selecting the panel by integrating the declared level of knowledge with each participant's sources of argumentation. Its use, complemented by the qualitative assessment of background and thematic relevance, supported the formation of an interdisciplinary panel suited to the multidimensional nature of the proposal.

Aiken's V provided favourable quantitative evidence of content validity, reflecting the experts' high assessment of the strategy's components. In addition to confirming the overall soundness of the proposal, it identified criteria with relatively lower scores and guided specific adjustments for its refinement.

Declarations

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