

Service Learning:

the World as the Classroom

Interest in service learning programs is surging. How are educators balancing the needs and expectations of students, patients, educational institutions, communities, and the profession?

photograph by Barry Myers



When Kelly Braden, PT, DPT, then a student at Virginia Commonwealth University (VCU) in Richmond, participated in a service learning project last year, neither she nor Dianne Jewell, PT, PhD, CCS, FAACVPR, an assistant professor in VCU's Department of Physical Therapy, realized just how far—both figuratively and literally—the project would take her.

VCU offers its DPT students a variety of service learning (SL) opportunities. One—an annual prosthetic limb and brace drive—last year collected more than \$80,000 of in-kind donations that were distributed internationally for use by individuals who were injured by land mines or have experienced traumatic amputations. The VCU role was to collect the limbs and turn them over to the not-for-profit Physicians for Peace and its “Walking Free” program.

But, Jewell explains, “Kelly took that experience and extended it by traveling with Physicians for Peace to the Dominican Republic this past summer. She raised the funds to go there and got in touch with people there for a place to stay. She ended up staying for an entire month, working with physical therapists (PTs) and prosthetists.

[Top] VCU students participate in an annual prosthetic limb and brace drive. [Left] Sheryl Finucane, PT, PhD, a member of the VCU faculty, (center) observes as Julie Peacock, SPT, (left) works with patient Julieta Brain.

She even participated in physical therapy classes at La Universidad Catolica. That was under her own initiative. What that says to us is that she got the message about service, saw the opportunity to give of herself, and acted on it." Braden confirms that conclusion, stating, "While I hope that I was able to leave the people I met with new ideas and techniques, I am sure that I gained far more than I was able to give."

Why Service Learning?

According to Johnette L Meadows, PT, MS, director of APTA's Department of Minority/International Affairs, the growth in the number of service learning programs has been spurred by many universities recognizing specific needs of the patient/client population surrounding them. These needs often are based on linguistic and cultural differences, but, as Jewell notes, they also may reflect differences in age; socioeconomic status; lifestyle, such as drug addiction; or life circumstances, such as homelessness.

Other factors have been offered as further justification for service learning programs. First is the increasingly common view that SL can provide a better learning experience than does the traditional classroom. In "Service Learning: Designing and Implementing a Successful Program," a paper summarizing their service learning experiences, a group of Northeastern University students suggest that universities are tapping into the student population as a resource to help provide community education and thus address a goal of Healthy People 2010.¹

Jewell agrees but also sees student motivation as a key factor in the increasing popularity of SL programs. "The students really *want* to do this," she says. The current generation of PT students, she says, is enthusiastic about community service and not only willingly participates in a class with a service learning component, but

even comes to her with new, self-initiated projects.

Ann Naumann, PT, MS, OCS, clinical assistant professor in the Department of Physical Therapy at the University of Vermont, says that PTs also "have an obligation to the community." This element seems to have long-lasting effects. Sandra Levi, PT, PhD, formerly on the faculty at the University of Illinois at Chicago Physical Therapy Program, says a significant number of her graduates remain actively involved in volunteer or pro bono work in their respective communities.

Jewell agrees, describing a recent DPT graduate who participated in service learning as a student. After graduation, she became employed as a physical therapist in Richmond. Jewell picks up the story: "On her own, she talked to her employer and said she'd like to volunteer at one of our service learning sites, the Cross Over Health Center, a free health clinic for the uninsured working poor, the working homeless, and the unemployed homeless. Her employer said yes. So now she's part of our volunteer staff and comes over every Friday afternoon."

Meeting Students and Community Needs

Service learning programs vary widely in regard to community needs, curricular structure, setting, patient population, and stated educational objectives. But the most important element, according to those interviewed for

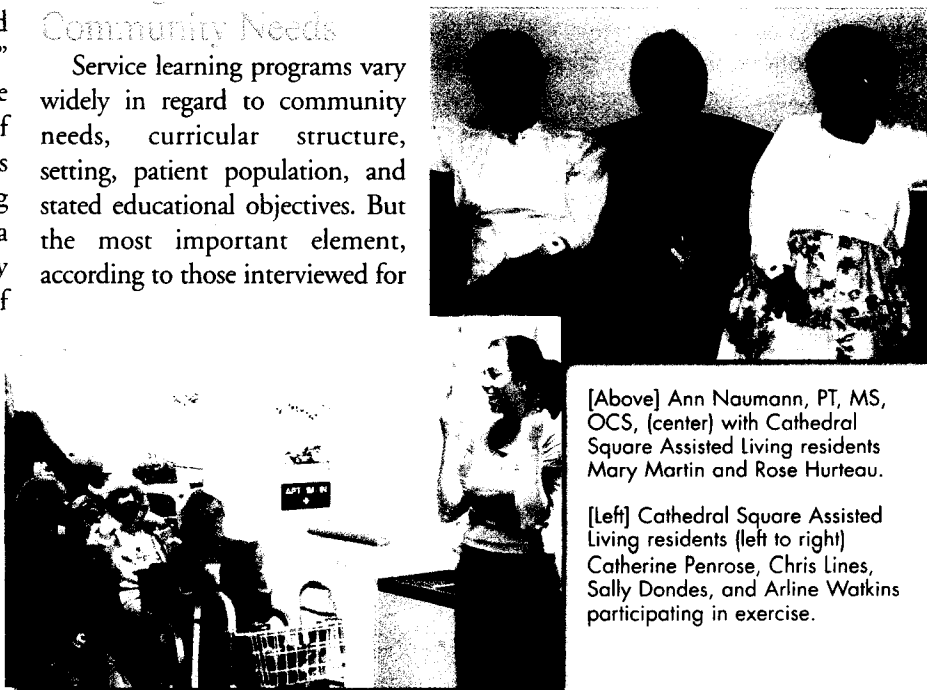
this article, is the answer to the question: "What do my students need?"

Naumann says that students learn things they can't get from a typical classroom experience. These include the functions of community agencies, exposure to new patient populations, and working with interdisciplinary staff. One advantage, Naumann's students tell her, is that a service learning environment offers a way to practice their skills without the pressure sometimes associated with a formal clinical experience. They get to "see dystonia, feel spasticity," she says, but they also learn that "elders are interesting people."

Jewell gives another example: "Students at our foot clinic, which specifically targets individuals who are homeless, see patients who they wouldn't see during their routine education. That's a great opportunity to learn additional compassion and openness."

Although benefits to students are great, *reciprocity* is a key element in service learning. Students must put in as much as they get out of the experience, and patients must benefit as much as students. After all, the goal is to provide high-quality patient care.

And there can be still other benefits. Jewell adds, "For students who do have a faith-based connection in their lives,



[Above] Ann Naumann, PT, MS, OCS, (center) with Cathedral Square Assisted Living residents Mary Martin and Rose Hurteau.

[Left] Cathedral Square Assisted Living residents (left to right) Catherine Penrose, Chris Lines, Sally Dondes, and Arline Watkins participating in exercise.

the foot clinic has enormous spiritual meaning. We don't talk about that, but we can't ignore the cultural impacts on the students any more than we can on the patients."

An Evolving Concept

Education programs for PT and physical therapist assistant (PTA) students are evolving to keep up with the profession's changing needs. In the past several years, there's been a "growth spurt" in the development of service learning programs. One recent survey of accredited PT and PTA programs found that half have incorporated some form of community-based learning within their curriculum. (See "Service Learning Gaining in Popularity.")

In broad terms, service learning programs combine community service and academic study for a richer learning experience. In general, there are four basic models for service learning programs. An SL program may:

- ❖ emphasize learning over service,
- ❖ emphasize service over learning,
- ❖ incorporate both service and learning but with no formal relationship between them, or
- ❖ balance both, with a community-educator partnership in the planning stage.²

There is some debate about which model is most appropriate and how to balance community service and education. For example, Jewell describes SL as "giving students the opportunity of providing service to others," while tying in learning objectives and a class project for professional development. Community-Campus Partnerships for Health,³ a nonprofit organization that promotes health through partnerships between communities and higher education institution, defines it as "a structured learning experience that combines community service with preparation and reflection" with a balance between service and learning, combining "community service" or "volunteerism" with either "field education" or a "practicum," such as an internship.

Despite the multiple definitions of what service learning is, those interviewed for this article clearly agreed on what service learning is *not*: It is not a volunteer program; it is not community service hours required for graduation; it is not a form of punishment; and it does not just benefit either the student or the community.

The process of developing a new program or modifying an existing one involves active dialogue to determine appropriate goals for both students and the community agency. Staff at the site may not be overly enthusiastic. Nurses, OTs, and other staff may be short on budget, manpower, time, or all three, and may worry that the students will take them away from their primary duties. The solution is for the advisor to take the time to talk with the staff, hear their concerns, and allay their fears.

Service Learning Gaining in Popularity

According to the National Service-Learning Clearinghouse:¹

- ❖ Almost 30% of the 6.7 million students in public and private 4 year institutions of higher education report participating in a course where service is part of the curriculum.
- ❖ Almost 2 million students participate in service learning at 4 year public and private institutions.
- ❖ Almost half of all community colleges in the United States offer service learning courses.

This growth may be an extension of a boom in the growth of service learning at the high school level.

According to the Clearinghouse, from 1984 to 1997:¹

- ❖ The number of high school students involved in service related programs rose from 900,000 to 6,181,797, an increase of 686%.
- ❖ The number of high school students involved in service learning grew from 81,000 students to 2,967,262 students, a 3,663% increase.

A recent study examined the use of service learning, extracurricular volunteer activity, and pro bono services within physical therapist (PT) and physical therapist assistant (PTA) education.²

Surveys were sent to all accredited PT and PTA programs. The response rate was 48% and 47% for the PT and PTA programs, respectively.

Within the past 7 years, 77% of the PT and 61% of the PTA programs had at least one of the three types of service activities. Of the respondents, 50 PT programs and 38 PTA programs currently were using service learning in their curricula. The most common service activity being implemented by PT programs was service learning, while for PTA programs volunteer activity was more common.

The study found, "Half of those responding to this survey incorporate some form of community-based learning within their curriculum and many programs where it is not yet included are planning to add service learning. Service-learning and pro bono services are offered more frequently in PT than in PTA programs. This study suggests that physical therapy education is increasingly incorporating service opportunities."

1. Shumer R, Cook C. The status of service-learning in the United States: some facts and figures. National Service-Learning Clearinghouse; 1999. Available at www.servicelarning.org/resources/online_documents/research/the_status_of_service-learning_in_the_united_states_some_facts_and_figures/index.php. Accessed March 10, 2005.

2. Village D, Clouten N, Millar AL. Comparison of the use of service-learning, volunteerism, and pro bono activities in physical therapy curriculum. A paper presented at PT 2004, Chicago, IL, June 2004.

Other advice from those interviewed for this article:

- ❖ Plan upfront.
- ❖ Talk to people who already have been through the process. They can tell you how to avoid pitfalls.
- ❖ Partner at all levels, not just at the administrative level, but in the trenches.
- ❖ Determine clear learning and service objectives.
- ❖ Keep an open mind to experience and be flexible.



Dianne Jewell, PT, PhD, OCS, FAACVPR (right) talks with Shawnte' Branch, SPT (left) as Julie Peacock, SPT, working with patient Kenneth Taylor, listens.

Developing Criteria for Success

There is ongoing debate over the practical implementation of a program and how to maintain a balanced focus on both academic content and community service. According to Judith H Munter, PhD, in *Academic Exchange Quarterly*, "it is easy for programs to slip down one

slope or another from this pinnacle—either becoming strictly volunteer service endeavors...or becoming internship and laboratory opportunities for students"⁴ without integrating the two into one rich experience. This is why collaboration between community partner and university program is paramount to success.

The common elements of a service learning program include service objectives, learning objectives, learning strategies, assessment, and criteria for evaluation of outcomes. Some universities are developing concrete criteria for their own programs. The University of Vermont has an Office

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of Community-University Partnerships and Service-Learning (CUPS) that developed university-wide criteria for all of its SL programs. These criteria include: 1) a credit-bearing course; 2) integration of academic content and service in the course design; 3) planned reciprocity between community partner and students; 4) student assessment and credit based upon demonstration of learning, including critical reflection regarding integration of service and academic content; and 5) active guidance to the students in critical reflection.⁵

According to Pamela Reynolds, PT, EdD, GCS, of Gannon University (formerly of Chatham College), "intentional goals" and "reciprocity" are "two factors that distinguish service learning experiences from other types of community service programs."⁶

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Cultural Competence in Service Learning

While service learning is not a formal accreditation requirement, certain professional practice expectations—such as altruism and cultural competency—can be met by participating in a service learning program, according to Mary Jane Harris, PT, MS, director of APTA's Department of Accreditation. In Professional Practice Expectation 2.1 in *A Normative Model for Physical Therapist Practice: Version 2004*, one of the educational outcomes of altruism states that a graduate "recognizes the need for physical therapy services to underserved and underrepresented populations."¹ Section 2.2 covers pro bono services.

Professional Practice Expectation 7 addresses cultural competence. It states, in part, that a successful graduate "incorporates an understanding of the implications of individual and cultural differences in the management and delivery of physical therapy services" and also "is aware of and suspends [his or her] own social and cultural biases."¹ In addition, APTA's *Professionalism in Physical Therapy: Core Values* includes altruism, compassion/caring, and social responsibility as essential qualities of a PT.

Gail Jensen, PT, PhD, is associate dean of faculty development and assessment at Creighton University, which partners with the Omaha and Winnebago Nations in a project called *Circles of Learning: Community and Clinic as Interdisciplinary Classroom*. PT students in the program work in a clinical hospital on a reservation for 4 weeks. This immersion program has shown her that there is "an awareness of self" when one is physically in another culture "that you can't get from didactic work."

While service learning is an important tool in enhancing students' cultural competency, it must be interwoven into instruction. As Johnette L Meadows, PT, MS, director of APTA's Department of Minority/International Affairs, puts it, "Health comes first—ethnicity is just another aspect to consider" when treating a patient. In other words, students shouldn't ignore a patient's ethnicity, language barrier, socioeconomic status, or any other personal circumstances. On the other hand, they should be taught not to make it their main focus of attention, either.

One goal of some service learning programs is to break down stereotypes. However, studies of physical therapy service learning programs have shown that, instead, stereotypes inadvertently actually can be reinforced. A recent study by Janna Beling, PT, PhD, found that PT students held more negative bias about aging after an SL program, and that an increase in knowledge does not always "lead to changes in attitudes and can have negative effects."² Meadows advises that this may be avoided by making sure students go through a "preorientation" period before beginning a service learning program. During a preorientation, students should learn such things as:

- ❖ What is cultural competency?
- ❖ Why do I need to understand it?
- ❖ Health comes first—cultural competency is just a part of what we do.
- ❖ Don't stereotype; treat people on an individual basis.
- ❖ How do people from different cultures or lifestyles view disease/impairment?
- ❖ How do they talk about it?
- ❖ How do they deal with it?

1. *A Normative Model of Physical Therapist Professional Education: Version 2004*. Alexandria, Va: American Physical Therapy Association; 2004.

2. Beling J. Impact of service learning on physical therapist knowledge of and attitudes toward older adults and on their critical thinking ability. *J Phys Ther Educ*. 2004;18(1):13-21.

The educational objectives she used for her program at Chatham College included developing social responsibility, citizenship, and advocacy; developing a perception and understanding of health and illness and the variety of meanings these terms carry for individuals and members of differing groups; demonstrating cultural competence when gathering data for the patient/client history examination related to cultural beliefs and behaviors; and understanding and considering individual and cultural difference in development of prognosis and interventions.⁷ Objectives from other programs include intellectual development and development of moral reasoning.⁸



Julie Peacock, SPT, (left) observes as Dianne Jewell, PT, PhD, CCS, FAACVPR, works with patient Kenneth Taylor.

Varying Beginnings and Approaches

Programs can vary in terms of their origins, types of collaborations, and evaluation, among other things.

Origins and funding. Creighton's Circles of Learning is funded by a grant from the US Department of Health and Human Services and is a cooperative effort between the University and the Omaha and

Winnebago Nations. Levi's course was developed using a grant from the US Department of Health and Human Services' Health Resources and Services Administration, with the actual program using a public



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Students at the University of Vermont work with residents at Cathedral Square Assisted Living. Ann Naumann, PT, MS, OCS, says the experience allows students not only to “see dystonia, feel spasticity,” but also to learn that “elders are interesting people.”

health model. VCU DPT students, in conjunction with Hanger Orthotics, sponsored the limb and brace drive, with the donated devices delivered to the not-for-profit Physicians for Peace. Some students at VCU have been involved in developing service learning programs.

Degree and type of collaboration.

In some instances, the school decides what kind of program or clinic it wants to have, and then it looks for an agency with whom to partner. Other times, existing agency programs may need help and search out a school willing to collaborate with them. Students sometimes are brought into the planning process after the initial meetings between the agency and school. Levi's program was limited to a small group of students who developed their own projects and went out in teams of physical therapy, occupational therapy, and nutrition science students, partnering with a clinic or assisted living facility, for example.

Grading and evaluation. The culmination of the student experience is assessment, evaluation, and grading. This is also an area of diverse opinions. Student assessment and evaluation can be accomplished through quizzes, surveys, oral reports, outcome data, written self-reflection, and/or site evaluation by the advisor, along with student evaluation of practicum. It also can be a group project in which students may carry out a program from design through evaluation. There are

many models, but the key is that the student demonstrate that he or she has learned and can apply that learning to a real work situation.

In VCU's DPT program, students are required to complete a portfolio

project and write their reflections on the nature of the activity, why they chose it, what they learned, and how it may affect them as a professional. Naumann says the University of Vermont students are graded on what they produce academically, not on the services they provide. This includes developing a plan of treatment for a resident of a senior citizen housing agency, identifying the patients' health concerns, and producing written reflection, which is “actively guided” by faculty.

Creighton's *Circles* program relies on both quantitative and qualitative methods to measure student progress.

Additional Resources

Break Away

An organization whose mission is to train, assist, and connect campuses and communities in promoting quality alternative break programs that inspire lifelong active citizenship.

www.alternativebreaks.com

Community-Campus Partnerships for Health

A non-profit organization that fosters partnerships between communities and higher educational institutions.

<http://futurehealth.ucsf.edu/ccph.html>

Educators for Community Engagement

A national organization dedicated to democratizing classrooms and communities through learning circles, service learning, and critical dialogue.

www.e4ce.org

The Michigan Journal of Community Service Learning

A national, peer-reviewed journal consisting of articles written by faculty and service-learning educators on research, theory, pedagogy, and issues pertinent to the service-learning community.

www.umich.edu/~mjcsl/main.html

National Service Learning Clearinghouse

www.servicelearning.org

National Society for Experiential Education

A national resource center that promotes experience-based approaches to teaching and learning.

www.nsee.org

Professionalism in Physical Therapy: Core Values

www.apta.org/documents/public/education/professionalism.pdf

This includes adapted surveys, team-building scales, and reflective journals. Gail Jensen, PT, PhD, associate dean of faculty development and assessment at Creighton University, says that both types of assessments are important for evaluating the student and the program: Quantitative measures “make sure you know what students are and are not learning” and therefore can help adapt a program or teaching style to meet course objectives.

Not a Hard Sell

Some programs include service learning as an entire course; others have a service learning component to a course. Some are elective, and some are part of the required coursework to graduate.

In fact, a subject of continuing debate is whether to make service learning a compulsory element of all PT education programs. Proponents argue that it exposes all students to service learning experience and also meets criteria defined in the *Guide to Physical Therapist Practice*. Opponents assert that students who freely choose to participate bring a spirit of service that could be lost if “service” is made a requirement. If it is required, Naumann suggests, there should be room for student choice in the type of service learning program in which they can participate, because “when it is student-driven, there is a different feeling” than if it is required in order to graduate.

VCU doesn't require a minimum number of hours of service learning, although Jewell acknowledges that “As we're looking at how the DPT is working, service learning, including minimum thresholds, will continue to be evaluated.” However, she offers this encouragement for institutions considering service learning: “[It] would not be difficult for any program to include. Students are really jazzed

about it. The actual opportunity to serve is not a hard sell.”

There's another lesson that Jewell says both she and her students have learned. “When you're young,” she explains, “you have a desire to change the world. You worry about all the people not getting care. But because of our ongoing programs and the one-on-one contact with patients and clients, you learn you don't have to change the world to make a difference. You can make a difference with that one person sitting in front of you.” ■

Michelle Vanderhoff is editor and project manager in APTA's publications department.

References

1. DiNoble K, Dyka E, Moreau M, Wilson K. “Service Learning: A Guide to Designing and Implementing a Successful Program.” Boston, Mass: Northeastern University; 2004.
2. Sigmon RL. *Linking Service With Learning*. Washington, DC: Council of Independent Colleges; 1994.
3. Community-Campus Partnerships for Health Web site. Available at: <http://depts.washington.edu/ccph/service-learningres.html>. Accessed December 17, 2004.
4. Munter JH. We have been delighted [editorial]. *Academic Exchange Quarterly* [serial online]. 2000;4(4):2. Available at: www.rapidintellect.com/AEQweb/wi2000.htm. Accessed December 17, 2004.
5. Criteria for Designation of Service-Learning Courses at UVM. Community-University Partnerships and Service-Learning (CUPS) Web page. University of Vermont Web site. Available at: www.uvm.edu/~partners/?Page=SLForm.php. Accessed February 14, 2005.
6. Reynolds P. How service learning experiences benefit physical therapy students' professional development: A grounded theory study [dissertation]. Pittsburgh, Pa: Duquesne University; 2000. AAT 9993768. UMI ProQuest Digital Dissertations Web site. Available at: www.lib.umi.com/dissertations/preview/9993768. Accessed February 14, 2005.
7. Reynolds P. Syllabus for PTH 738: Service Experience Project [Community-Campus Partnerships for Health Web site]. Available at: http://depts.washington.edu/ccph/pdf_files/PTsyllabus.pdf. Accessed February 14, 2005.
8. Alt M, Medrich E. *Students' outcomes from participation in community service*. Paper presented at the meeting of the US Department of Education Office of Research. 1994.

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