

Commentary

Early exposure to community service learning in the medical curriculum: A model for orientation week

Kaitlin Endres

University of Ottawa, Ottawa, Canada

Abstract

Community service learning programs in pre-clerkship medical education are increasingly recognized as important in creating physicians who recognize the effects of one's environment on their health and further strive to advocate for these patients to receive access to social programs that can improve their outcomes. The University of Ottawa Aesculapian Society recognized that an excellent method for providing early exposure to service opportunities in one's new community is through Orientation Weeks. Prior to this year, no Orientation Week across Ontario had a philanthropy focus. Philanthropy in most students' eyes refers to monetary donation. Understandably, Orientation Week directors continuously make the decision that asking medical students to donate money during the first week of one of many financially demanding years is unrealistic. Ottawa decided to incorporate philanthropy into our Orientation Week in the more inclusive form of community service, allowing students to donate their time, rather than donating their money. In addition to ensuring that philanthropy still has the opportunity to be a fundamental component of bonding during Medical School Orientation Weeks, as it does at the Undergraduate degree level, our initiative also served to facilitate early exposure to the various organizations students could complete their community service learning placements with later in their first year. Here we present our model, uO-Serves ("uOttawa-Serves") of an Orientation Week philanthropy initiative of time-based community service in hopes that other Medical Schools will consider implementing a similar initiative within their Orientation Weeks

Keywords: community service learning, orientation week, philanthropy, volunteerism

Corresponding author: kendr071@uottawa.ca

Introduction

As medical students transition into medical practitioners, they will encounter a growing number of patients whose health problems are related to their surroundings. Consequently, medical students must be prepared to mitigate the effects of a multitude of environmental factors on the health of their patients, and therefore medical school curricula must integrate pedagogical strategies to help future physicians understand and address these modifiable social determinants encountered by community members¹⁻³. In response, Canadian medical schools are increasingly incorporating Community Service Learning (CSL) programs into their curricula. CSL aims to educate medical students through active involvement in their community, rather than through conventional lecture-based learning⁴⁻⁶. These programs help students broaden their knowledge about the impact of the social determinants of health on their future patients, while providing aid to community members in need. CSL programs further develop participants' critical thinking, problem-solving and communication skills^{1,7}. Additionally, CSL increases students' understanding of social concepts learned in class, allowing students to apply theory to real-life situations, and further enhances one's social awareness and responsibility⁸.

Unfortunately, increasing numbers of medical students view these CSL programs primarily as a mandatory requirement for earning a medical degree, rather than an opportunity to learn skills necessary for their future career as physicians^{9,10}. As the Vice-President (VP) Philanthropy of the Aesculapian Society (ASOC) at the University of Ottawa (uOttawa), I posited that the absence of *early exposure* to community service opportunities throughout the medical curriculum contributed to uOttawa students' decreased enthusiasm for CSL programs. I felt that an early positive volunteering experience would not only promote bonding with their new peers while giving back to their community, but would also be beneficial for students by helping build excitement about the CSL placement they would be required to complete throughout first-year. Further, I believed this experience would allow students to discover what they enjoyed and what they disliked, about their volunteer opportunity. Currently, at most medical schools, students rank their placements using an online system using a brief description of the organization for their decision making⁴⁻⁶. For medical students who have moved to a new community to complete their medical education, it is difficult to know which placement/organization best aligns with their interests. By integrating participation in community activities into O-week, students were provided with early exposure that would allow them to get a better idea of where they would like to volunteer later in the year. While many Ontario medical schools do not include philanthropic programming in their O-Week, I proposed that rather than focusing on monetary donation, students could be asked to donate their time. I believed that this would not only allow philanthropy to have a presence during O-Week, but also facilitate early exposure to CSL placements.

For the first time ever, our ASOC VP Philanthropy portfolio implemented an event called "uO-Serves" ("uOttawa-Serves") for uOttawa O-Week 2018. This involved first- and second-year medical students aiding various organizations in Ottawa by volunteering their time. uO-Serves appears to have had a positive impact on how students view CSL within the medical education curriculum and proves support for approaches that place an emphasis on community service and volunteerism from the start of students' medical education. This is evidenced below through unsolicited participant testimonials as

well as student interest in creating more long-term opportunities through further expansion of uO-Serves.

Community service learning programs in medical curricula

By facilitating students' understanding of the social roles that come along with their future profession, Eckenfels argues that community service experiences that allow medical students to aid those in need broaden students' education and offer a perspective of health and illness that the classroom cannot, fostering relationships with the community they will be helping serve¹¹. Students gain insight into how health promotion interventions and community partnerships can improve health disparities⁸. CSL programs exist at the majority of Canadian medical schools and allow students to contribute to their communities and then produce a corresponding reflective assignment on the topic⁷. A student's CSL experience allows them to explore connections between classroom learning and the experiential learning they are doing in the community, providing the opportunity to contextualize their roles as citizens and professionals through real-life experiences. CSL programs not only benefit the medical students who participate in them, but also provide community organizations with additional human resources, allowing tasks to be accomplished that may otherwise not have been possible, such as large-scale environmental clean up or donation sorting¹².

CSL provides a tangible experience to students allowing them to integrate traditional academic learning with immediate, hands-on practical experience⁴. There is much diversity in accepted CSL projects, but they often involve teaching, healthcare, community development, environmental projects or another avenue that contributes to the well-being of individuals or local communities. Due to the longitudinal nature of CSL projects, they challenge medical students to understand the community organization's philosophy, values, mission and the living conditions of the organization's clients⁹. The key aspect of service learning is its mutual reciprocity; the student learns from the service agency and the agency learns from the student through the unique perspective they bring from their classroom learning³. While many medical students come into medicine with altruistic motives; few carry this altruism into their practice¹³. Teaching social accountability is expected to help students remain altruistic and stay engaged in community work, in addition to further encouraging work in underserved areas, such as rural communities^{13, 14}.

uO-Serves Model

At the non-medical undergraduate education level, O-Week primarily focuses on philanthropy through monetary donation to an organization in need, such as "Shinerama", which supports cystic fibrosis research¹⁵⁻¹⁸. Uniquely, uOttawa is the only Ontario medical school with a strong philanthropy presence during O-Week. Many previous and prospective O-Week Directors at other medical schools attribute the lack of philanthropy programming to increasing costs of medical school tuition combined with already expensive O-week fees, making fundraising during O-Week an understandably tough ask of first-year medical students¹⁹⁻²².

Previously, uOttawa focused their philanthropy efforts *strictly* on monetary fundraising for Shinerama. As students, we are not always in a position to be able to donate our money to philanthropic efforts; however, most students are able to donate time. Therefore, I felt student engagement would increase if we expanded our O-Week philanthropy focus from fundraising alone, to the inclusion of volunteerism activities that provided an opportunity for students to give back. With this goal in mind, as well as the hope of inspiring other medical schools to incorporate philanthropy into their O-Weeks, uO-Serves was created.



Figure 1. O-week students at the Ottawa Food Bank Community Harvest Program.

All 12 O-week teams of students were assigned to 12 different organizations across Ottawa including The Ottawa Mission, Ottawa Food Bank Community Harvest Program, Habitat for Humanity, Ottawa Salvation Army Booth Centre, StopGap, Canadian Blood Services, Ronald McDonald House, Shepherds of Good Hope Shelter, Boys and Girls Club of Ottawa and the AIDS Committee of Ottawa. The ASOC worked with various organizations to ensure that the task was low-risk enough that it still allowed students to bond with their peers on the first day of O-Week and yet significant enough that it

helped the organization and their clients. From serving a meal at Shepherds of Good Hope, to helping make Ottawa more accessible by building ramps with StopGap, to harvesting crops at the Ottawa Food Bank's Community Harvest Program shown here in Figure 1, for the first time at uOttawa Medicine students were not only able to contribute to O-Week philanthropy efforts by donating their money to our Shinerama campaign, but were provided with the alternative option of donating their time⁶. uO-Serves has now been unanimously voted into our constitution by all elected ASOC members as a yearly philanthropic initiative during each future O-Week. Further, first-years were inspired to transform uO-Serves into a long-term commitment through a proposal to establish a new Community Service Interest Group for Fall 2019. One first-year student believes that "through uO-Serves and the friendships it helped foster, I believe our VP Philanthropy changed many students from viewing CSL volunteerism as a mandatory part of their first-year experience, to instead viewing the curriculum as a unique and exciting opportunity that they were excited to participate in." A second-year student was able to "witness first-hand how this initiative allowed first-year students to sample local programs and consider which aspects they might be passionate about, undoubtedly helping them in selecting their future CSL placements." Future directions for uO-Serves include completing a more objective study to measure the impact of the initiative on students' perceptions of volunteerism in medical school. Through a quality improvement project for the VP Philanthropy portfolio, ASOC members plan to further validate these claims and identify areas for advancement through use of a formal feedback survey following uO-Serves 2019.

Conclusion

Incorporating community service into O-Week facilitates early positive exposure to community service organizations in the medical school curricula and allows for students to bond with their peers over the rewarding sense of giving back to their new shared community. Further, an initiative like uO-Serves, which focuses on students giving back their time as opposed to money, supports a more inclusive way for students to give back, regardless of financial background. By integrating CSL placements early on in a non-threatening environment it provides students with the chance to explore volunteer options to better prepare them for when they have to make placement decisions later in their first year at a time when they are under increased stress. It has been well established that CSL placements are a vital educational tool that have been incorporated into medical curricula across many Canadian medical schools⁴⁻⁶; however, it is likely that without early, first-hand exposure to community service opportunities available in students' new communities, we are failing to set up medical students to find these programs as valuable as they could be.

Acknowledgements

I would like to thank our ASOC VP Social Sam Wilson for all his support in allowing me to incorporate uO-Serves into his O-Week programming. I would additionally like to thank ASOC's VP Executive Jessica Tao for her encouragement to establishing uO-Serves here at uOttawa as well as Mehr Jain,

ASOC's VP External for her help in sharing this initiative with other medical schools across the province.

References

1. Stewart T, Wubbena Z. An overview of infusing service-learning in medical education. *Int J Med Educ* 2014; 5: 147-56.
2. Burrows MS, Chauvin S, Lazarus CJ, et al. Required service learning for medical students: Program description and student response. *Teach Learn Med* 1999; 11: 223-31.
3. Averill NJ, Sallee JM, Robinson JT, et al. A first-year community-based service learning elective: design, implementation, and reflection 2007; 19: 47-54.
4. Michaëlle Jean Centre for Global and Community Engagement, University of Ottawa. (no date). Community Service Learning. Retrieved Dec 18, 2018 from the World Wide Web: <https://servingothers.uottawa.ca/volunteering/community-service-learning>.
5. Dr. Teresa VanDeven, Schulich School of Medicine & Dentistry. (2016). Service Learning in Undergraduate Medical Education. Retrieved Dec 18, 2018 from the World Wide Web: https://www.schulich.uwo.ca/medicine/undergraduate/academic_resources/service_learning.html
6. Queen's UGME, Queen's University (2016). The Service Learning Program at Queen's School of Medicine. Retrieved Dec 18, 2018 from the World Wide Web: <http://www.intlmeds.queensu.ca/blogs/2016/11/19/service-learning-program>
7. Arora N, Ngo K, Weerakkody I, Doshi S and Khan R. Ontario Medical Student's Association. Improving Service Learning in Medical Education. (2017). Retrieved Dec 19, 2018 from the World Wide Web: https://omsa.ca/sites/default/files/position_paper/43/position_paper_improving_service_learning_curricula_in_medical_education_2017_mar.pdf.
8. Buckner AV, Ndjakani YD, Banks B et al. Using service-learning to teach community health: the Morehouse School of Medicine Community Health Course. *Acad Med* 2010; 85: 1645-51.
9. Adela Talbot, Western News. Bringing holistic health to the community (2018). Retrieved Dec 18, 2018 from the World Wide Web: <https://news.westernu.ca/2018/03/bringing-holistic-health-community/>.
10. Loh AZH, Tan JSY, Lee JJM and Koh GCH. Voluntary community service in medical school: a qualitative study on obstacles faced by student leaders and potential solutions. *Glob Health Action* 2015; 8: 10.3402/gha.v8.27562.
11. Eckenfels, EJ. Contemporary medical students' question for self-fulfillment through community service. *Acad Med* 1997; 72: 1043-1050.
12. McLaughlin JE, Roth MT, Glatt DM et al. The flipped classroom: a course redesign to foster learning and engagement in a health professions school. *Acad Med* 2014; 89: 236-243.
13. Salas AA, Anderson MB, LaCourse L et al. CurrMIT: a tool for managing medical school curricula. *Acad Med* 2003; 78: 275-9.

14. Meili R, Fuller D, Lydiate. Teaching social accountability by making the links: qualitative evaluation of student experiences in a service-learning project. *Med Teach* 2011; 33: 659-666.
15. No Author. Laurier University. Laurier welcomes first-year students to Brantford with a week of orientation events. (2017). Retrieved Mar 30, 2019 from the World Wide Web: <https://www.wlu.ca/news/news-releases/2017/sept/laurier-welcomes-first-year-students-to-brantford-with-a-week-of-orientation-events.html>.
16. No Author. Guelph Tribune. Shinerama back after 10 year absence. (2012). Retrieved Mar 30, 2019 from the World Wide Web: <https://www.guelphmercury.com/community-story/5864171-shinerama-back-after-10-year-absence/>.
17. No Author. University of Toronto. UTSC Shinerama. (2019). Retrieved Mar 30, 2019 from the World Wide Web: <https://www.ulife.utoronto.ca/organizations/view/id/126931>.
18. Shinerama. Cystic Fibrosis Canada. (2019). Find Your School. Retrieved Apr 01, 2019 from the World Wide Web: <http://shinerama.ca/#school>.
19. Orientation Planning Team Members. University of Toronto. (2018 and 2019). (December 30, 2018). Personal Interview. (December 30, 2018). Personal Interview.
20. Orientation Planning Team Member. Queens University. (2019). (December 31, 2018). Personal Interview.
21. Orientation Planning Team Members. Western University. (2018 and 2019). (December 30, 2018). Personal Interview.
22. Orientation Planning Team Members. University of Ottawa. (2017, 2018). (December 29, 2018). Personal Interview.