
Implementing a Successful Student-Led International Service-Learning Experience

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The literature indicates a growth in students' desire to participate in service engagement during their higher education experience. Baccalaureate nursing students at a regional university developed and implemented a student-led service learning experience. Eight students and three faculty participated in an 8-day experience in Costa Rica. The group actively engaged in experiences in long-term care, acute care, and community health settings. By immersing themselves in the Costa Rican culture, students gained appreciation for cultural differences; developed an increased awareness of global health issues and differences in healthcare delivery models; and acquired enhanced altruism. The experience had an impact on the participants' professional practice as registered nurses. Having the experience be student-led allowed students to develop leadership, team-building, and organizational skills. Based on the positive outcomes of this student-led service learning experience, opportunities for service learning outside of the classroom should be considered.

Increasing numbers of students entering higher education seek opportunities to participate in community engagement. In 2009, a record number (30.8%) of incoming freshman indicated they expected to participate in volunteer or community service work (Pryor, Hurtado, DeAngelo, Blake, & Tran 2009). The percentage continues to rise with 37.1% reporting they intend to participate in volunteer or community service work

in the 2015 survey (Eagan, Stolzenberg, Bates, Aragon, Suchard, & Rios-Aguilar, 2015). This rise is not surprising as students reported that they participated in volunteer work or community service during their high school experience. In the 2015 survey, 87.9% of students reported frequently or occasionally performing volunteer work and 56.1% reported performing community service as part of a class (Eagan et al., 2015).

Faculty in higher education also value the importance of engaging the students in the community. In the 2013-2014 Higher Education Research Institute (HERI) Faculty Survey, 48% of faculty identified instilling a commitment to community service in students as “essential” or “very important.” Facilitating student involvement in community service was identified as a high priority at 47.2% of baccalaureate institutions. Over the previous two years, 16.9% of faculty reported that they taught a service-learning course (Eagan, Stolzenberg, Berdan Lozano, Aragon, Suchard, & Hurtado, 2014).

The literature encompasses many different definitions of service-learning. The main themes of the definitions involve learning opportunities for students and benefits for the community. The National Service-Learning Clearinghouse (n.d.) defines service-learning as a method of teaching and learning that connects classroom lessons with meaningful service to the community. Campus Compact (2016) defines service-learning as incorporating community work into curriculum, giving students real-world learning experiences that enhance their academic learning while providing a tangible benefit for the community. These organizations are on the forefront of promoting service-learning.

In higher education, service-learning may be domestic or international. Research suggests international service-learning opportunities contribute to students' cultural encounters, knowledge, skills, sensitivity, self-awareness, self-confidence, self-efficacy, and understanding of cultural barriers (Carpenter & Garcia, 2012; Kohlbry, 2016; Long, 2016). In a systematic review of global health experiences, the most frequently cited goals for the international exchanges were to expand students' appreciation and knowledge about differing cultures (Kulbok, Mitchell, Glick, & Greiner, 2012).

International experiences for nursing students can be complex to arrange and implement (Kulbok et al., 2012). Additionally, students often face barriers that affect participation in international experiences. Studies have identified lack of funds as a main barrier. Other barriers include life obligations, language, application process, safety concerns, and political instability (Kulbok et al., 2012; Kent-Wilkinson, Leurer, Luimes, Ferguson, & Murray, 2015).

These barriers can be even more complex and difficult to arrange for students who attend small regional universities or community colleges. However, a group of nursing students at a small regional university was able to overcome these barriers and participate in an international service-learning experience. This paper will discuss how the students successfully planned and implemented a service-learning trip to Costa Rica, the experiences offered to students, and student outcomes from participation.

Development of a Service-learning Experience

Baccalaureate nursing students from a regional university identified interest in participating in an international service-learning experience during the fall semester of their sophomore year. They wanted the experience to take place during their senior year, so they would be able to apply the knowledge and skills they had gained throughout the program. Because the students wanted to have a major role in the planning and implementation of the experience, it became a student-led process.

A service-learning experience had never taken place on the campus. Consequently, there was a large learning curve for both students and faculty. Three faculty agreed to serve as advisors to the students during their planning process and be the liaison with the university. The first hurdle was working with the office of global opportunities on the main campus to determine the best manner to implement the experience with the least amount of financial burden on the student. Specifically, it was necessary to establish if the students would earn course-credit for the learning opportunity. This would change the experience from student-led to faculty-led, as well as increase the cost. To allow the students to retain control in the planning process and to make the experience more affordable, it was decided that this educational opportunity would not be designed as an independent course for credit.

The students formed a committee of those who wanted to plan and organize the service-learning experience. This committee had four members. The committee researched multiple agencies that offered international healthcare related experiences. After choosing an agency, the students researched the location options for the experience. Members of

the committee created slide presentations with safety concerns, experiences available, and cost to the student for the multiple location options. Any students interested in participating stayed after class for the presentations then voted for the location and time of the experience. The students selected Costa Rica and decided to take the trip between the fall and spring semester of their senior year. At that time, approximately 20 students expressed a strong desire to participate.

The students planned and organized fundraisers to assist in defraying the cost of the trip. Students began fundraising activities toward the end of their sophomore year and continued those activities throughout their senior year. These included group and individual fundraisers, which a member of the committee tracked for disbursement to students when payments for the international experience were due.

As part of the Costa Rica experience, the students were informed that they would be working with pediatric and elderly populations. Additionally, they would be participating in oral health and stroke prevention campaigns. The students began to collect monetary and healthcare item donations from the local community to contribute to the populations they would be serving.

As stated previously, this was an entirely student-led service-learning experience and faculty took on an advisory role. Faculty continued to work with the office of global opportunities on the main campus to assure there was no conflict with university policies. This was a gray area for the university since the students were working with an outside agency, but faculty were also going to participate.

The number one priority for the university and faculty was the safety of the students during the experience. The university did offer students and faculty resources to increase their knowledge regarding international travel and to assist with their safety during the experience. The agency assisting with implementation of the experience also provided resources to educate students and faculty regarding policies, and procedures for participating in the international service-learning experience.

To enrich the learning opportunity while in Costa Rica, faculty collaborated with the university's Spanish department to arrange for a *Spanish for Healthcare Workers* course to be offered on the campus in the fall before the experience. The course was offered to all students on campus as well as healthcare workers in the community. Some of the students who were planning on going to Costa Rica were able to enroll in the course. As part of the course, the students and Spanish professor created posters in the Spanish language related to the oral health and stroke prevention campaigns.

Service-Learning Experience

A successful 8-day experience to Costa Rica occurred between the fall and spring semesters of the students' senior year. A total of eight students and three faculty participated. The students worked with a travel agency that specifically organizes volunteer trips. This agency coordinated with the organizations in Costa Rica to plan the itinerary for the experience. Additionally, the agency coordinated all in country travel as well as accommodations.

The group stayed together in Costa Rica with a host family screened by the agency. Students and faculty participated in a variety of healthcare and cultural experiences while in Costa Rica. The agency arranged for healthcare experiences in long-term care, acute care, and community health settings.

At the Catholic managed long-term care facility in Costa Rica, students were able to compare and contrast nursing care occurring there to what they had experienced in clinical rotations during their sophomore year. At the facility, students assisted residents to the on-site church for daily mass, assessed vital signs, and organized donated medications in the storage area. Students also provided the agency with healthcare item donations they had collected and a stroke prevention poster created in the Spanish course.

The experience at the private hospital was mainly educational. A physician provided a detailed explanation to the group regarding the model of healthcare in Costa Rica. A nurse from the hospital provided a tour of the facility and adjoining physician offices and further explained the delivery of healthcare and role of nurses in this private hospital setting.

The community center was located just outside of one of the most desolate communities in Costa Rica. Services provided at the center are free and include meals for children, childcare, and educational programs for women. Students and faculty were able to interact with the children who came to the center for a free meal. Education was the focus of the experience. Students and faculty educated children on basic hygiene and oral health. Donated oral health and hygiene supplies, as well as coloring books and crayons, were distributed to the children at the center. Health

posters created by the students were used to facilitate the education provided to the children and were donated to the center for future use.

Student Outcomes

Both formal and informal methods of data collection allowed faculty to evaluate the effectiveness and outcomes of this student-led service-learning experience. Daily debriefings allowed for informal evaluation and sharing of what the group felt went well and possible improvements for the next day. On the last day, discussion of the overall experience took place with both the group and the organizing agency.

To collect formal evaluation data related to the experience, an IRB application was submitted to the university and approved at the exempt level. An anonymous 10-item open ended, post reflective survey was completed by seven of the eight student participants after graduation and entry into nursing practice. Overall, students perceived the experience to be positive. Students were able to gain knowledge and personal insight that could not be taught in the classroom.

Students gained an appreciation of cultural differences. One student reported, "You can learn about cultures in a classroom setting, but until you are able to physically experience another culture in their environment, you can't appreciate or completely understand the differences...I am able to appreciate that their motives and ways of living life are rooted in their environments and traditions that can be very different from mine, but are no less important." Another student shared that the experience "... allows me to provide care without judging their methods. I feel I am a better nurse,

as I am able to incorporate their cultural values into the care they need instead of trying to block or ignore what is important to them.”

The service-learning experience also increased the students’ awareness of global health issues and differences in healthcare delivery models. When reflecting on the healthcare system in Costa Rica, one student shared, “I really enjoyed learning about the rules within their universal healthcare coverage, how it is funded, how the country is broken up into sections in order to “assign” doctors to that area, and learning about their tier system for access... I continue to think about it when the topic of universal coverage comes up for the citizens of the US...it was an extremely insightful experience!” Another student added, “The access to even basic health care is not a guarantee under all health care delivery models.”

Participants acquired an enhancement of altruism. The service-learning trip ignited a desire for future volunteerism and mission work within the students. This collective view might be best represented by one student’s statement, “The need is obvious and the joy and humility of serving individuals who are in need in that capacity is beyond rewarding and ultimately the right thing to do.”

During the stay with the host family, the group witnessed their family dynamics, role structure, values, and nutritional practices. Information regarding the country’s educational system was also acquired. One student shared, “Staying with the host family was one of the best experiences. Partly because the family provided us with traditional Costa Rican cuisine, but also because we were able to live within the Costa Rican culture. Additionally, we were able to come back after our service work and

openly ask questions or clarify what we didn't understand from our experiences with our host family. Those open dialogs were invaluable.”

Traveling with a native Cosa Rican guide proved to be equally beneficial. This afforded the opportunity to conduct an informal windshield survey of the community. Students observed some of the most affluent, as well as economically deprived, areas of the country. A student wrote, “Driving around and visualizing the various living situations and communities were invaluable.” Discussions about social issues and community needs emerged through these observations. Another student reported, “It was an eye-opening experience. It was amazing to see their architecture, how their homes were designed with open/outdoor spaces and seeing the bars on a majority of the homes/businesses.”

The experience had an impact on the students as they transitioned into their roles as registered nurses. A student stated, “I try to take time with each individual patient as they did in the Catholic nursing home.” The survey also revealed that the experience gave insight to the cost and availability of healthcare supplies and it must be considered and not taken for granted. One response noted, “In the environment I work in as a RN, I have access to all the supplies I need to provide my patients with quality healthcare but I still want to be mindful of what I use and try to do dressings, IV’s, and provide medications in a manner that is not wasteful.”

Perhaps one of the most innovative educational benefits of this experience was the fact that it was student-led. As a result, numerous leadership, team-building, and organizational skills were developed. One student wrote, “...it helped me to further develop my prioritization and delegation skills.” In relation to teamwork, a student stated, “Teamwork

was important to the service-learning experience and I feel I gained a better appreciation for my team members and how to effectively work as a team.” Such skills are often taught, but difficult to completely capture, in the traditional nursing classroom.

Conclusions

There has been an increase in interest by both students and faculty in higher education for hands-on, service-learning opportunities that contribute to the community. Students at a regional campus were able to overcome barriers to successfully develop and implement a student-led international service-learning experience. This provided learning and personal growth opportunities that can only be gained through experiential learning. The students were able to apply these experiences to their professional roles as registered nurses. Based on the positive outcomes of this student-led service-learning experience, opportunities for domestic or international service-learning outside of the classroom should be considered in multiple disciplines across a variety of educational settings, regardless of the barriers that may be encountered.

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