

¹Why service-learning? A discussion on employing service-learning in enriching clinical education for health-care professions.

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ABSTRACT

Service-Learning or service-based learning is being recognized effective pedagogical tool. The integration of community service into the academic curriculum in higher education is embraced whole-heartedly in many countries, and is gathering momentum in many other places all over the world.

The differentiation and distinction of “Service” provision and “Learning” are debatable. The provision of service and enhancement of students’ learning are becoming more complex and dynamic in the real world. Nursing, as one of the health care professions, has been serving clients with changing health status in a diverse environment. Currently, clinical education is also known as internship, work-integrated education, or clinical practicum in different context. Whichever term is used, this article discusses the different rationales of integrating service-learning into clinical education of nursing profession. The integrating of service-learning can be highlighted and applied not just to the nursing profession: it can be generalized and promoted to other helping professions.

Key Words: service-learning, nursing profession, clinical education, practicum, work-integrated education, internship.

1. INTRODUCTION

The Motto of The Hong Kong Polytechnic University (PolyU) for both staff and students is “*to learn and to apply, for the benefit of mankind*”. On the other hand, as a result of changes in the structure of education in Hong Kong with the “Diploma of Secondary Education” (DSE) in 2012, the PolyU has expanded the Bachelor Degree curriculum from 3 years into a 4 year programme. To better equip the graduates, The PolyU is the first university in Hong Kong initiating “Service-learning” subjects as mandatory. This aligns with the calling that tertiary education should integrate social responsibility and community engagement, with academic and research outputs. Ngai et al (2013) have reported that through participation in service-learning subjects in overseas under-developed regions, PolyU students showed positive growth and improvement in aspects of interpersonal skill, teamwork, problem solving and social responsibility. Indeed, some PolyU students and graduates reflected they have gained and learnt to be more committed with greater civic responsibility and global outlook. Besides, the importance of professional ethics has been highlighted as well as development of generic competencies through the participation of service-learning. Given these benefits, the question is how to integrate or integrate service-learning into the Nursing profession.

Nursing as one of the health care professions

As one of the health care professions, the Hong Kong Nursing Council (HKNC) denotes “*Nursing is a caring, enabling, knowledge-based and competence-assessed profession which is dynamic in meeting the changing health needs of the society*” (HKNC, 2014). Nurses are dedicated to promoting and maintaining health, care for the sick and the disabled, no matter the individuals, or families, groups, institutions,

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in home settings and the community.

The practice of nursing is client-focused and evidence-based in carrying out primary, secondary and tertiary levels of health care. Primary health care emphasizes on health promotion and disease prevention, secondary level refers to disease management, while tertiary level means research and development of health care. Thus, the provision of care is best achieved through the person under care (the client) integrating different two elements (the environment and the client) together with health as the outcome. In this framework, “the client” is seen as a unique, holistic being with the potential to learn and develop through interaction with others and the environment. “The environment” refers to both external and internal components with ever changing nature, which generates both positive and negative stressors. The internal environment includes biological, psychological, spiritual and intellectual components of the person. Meanwhile, the external environment encompasses social, cultural and situational influences. Both the internal and external environments interact and affect the person’s function as an individual, as well as one of the family members, social groups and the community (HKNC, 2014). “Health” is defined as “*a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity* (WHO, 1948)”. The core value of endorsing service-learning into nursing is for all-round development and applying of professional theories in the real world. Appropriate learning objectives as health promotion or disease prevention in helping can better fit the needs of individual and community.

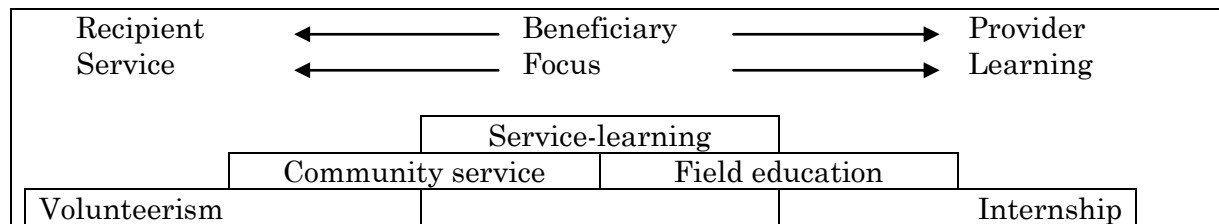
Effective nursing works through problems solving and collaboration with clients and other health care professionals in achieving mutually agreed goals and objectives on health aspects. Ultimately, the provision of holistic, client-centred care requires professional knowledge and skills through adoption of caring and responsible attitudes; effective communication and interpersonal skills, grounded on ethical thinking and behaviour (HKNC, 2014). These attributes can be better enhanced through service-learning to nursing students.

The concept of service-learning and the differentiation

Service-learning, can be defined and seen in difference contexts and content. However, the distinction of how to achieve a balance between “service” and “learning” does matter. Furco (1996) recognized the importance of this issue, and in considering the appropriate balance, he derived the following typology:

| Emphasis | Primary | Secondary |
|------------------|---|---------------------------------|
| Service-LEARNING | Learning goals primary | Service outcomes secondary |
| SERVICE-learning | Service outcomes primary | Learning goals is the secondary |
| Service-learning | Service and learning goals are completely separated | |
| SERVICE-LEARNING | Service and learning goals are of equal weight and both enhances the other for all participants | |

A further distinction among service-learning programmes is another point to discuss. When deciding on the nature of any given programme, a question arises of which participant need (recipient or provider) is more important. The balance rests on careful consideration, since a **service** focus on recipients’ (meaning patients) benefits lies at one end, while **learning** stresses on the learning needs of students, and lies at the other. Thus, Furco (1996) has given the following classification on volunteerism, community service, field education, internship and service-learning when choosing between service programmes:



Distinction among service programmes (Furco, 1996)

The definitions of these types of programme is given as follows. At one extreme, “Volunteerism” is the engagement of students in voluntary service to the end users primarily intended beneficiary as the service recipient. “Community Service” is the engagement of students in activities focusing on service provision for the benefits of service activities are devoted to the recipients. At the other end of the scale, “Internships program” means engaging students in service activities purposefully for students to have more hand-on experiences in their learning. “Field education” refers to the provision of students with co-curricular service opportunities which are related but not fully integrated to formal academic education. Moreover, experiential education moves and changes to a certain degree along a continuum with the above mentioned concepts (Furco, 1996).

2. DISCUSSION

If nursing functions as problem-solving and collaboration, targeting at mutually agreed goals and objectives on health aspects, nursing education needs to refine and develop the curriculum accordingly. The integration of knowledge and skills through adoption of caring and responsible attitudes, plus using effective communication and interpersonal skills helps to accomplish the learning outcomes of nursing education. Therefore, training and education of the nursing profession has integrated both theoretical learning with clinical practicum. The term “practicum” denotes clinical practice with the application and integration of theories into clinical settings for the development and education of the future nurses. Moreover, clinical education is also known as internship, clinical practicum or “work integrated education” (WIE). These clinical educational activities enable nursing students to achieve their learning objectives in a real work-oriented scenario. Meanwhile, they can learn to contribute to the health care industry and community tangibly. Undergraduates are not only integrated their professional competence, but also enhanced their ability of independent thinking, good communication skills and global outlook. Clinical education helps to develop students towards being *students with professional competence* and *preferred graduates* of as stated in the mission of the School of Nursing, PolyU (HKPU, 2014). However, the differentiation between service-learning from clinical education are the former one addresses the needs of all participants and tailored the service with service recipients, instead of focusing on the learning need of students.

Clinical education is supposed to be done under the supervision of guide (qualified) nurses with the co-operation and assistance of other nurses in the frontline. Students are expected to be able to perform as if playing the roles and functions of safe, competent and caring nurse when they are qualified as nurses. Most of the clinical practicum takes place in hospitals, while only a minor percentage of clinical practicum takes place in the community. Facilitation of learning of generic skills other than clinical skills and caring attitudes in both clinical and non-clinical settings would enable growth and development to advance (SN, 2014). Service-learning benefits nursing students in which they can