

Bridging the Gap: Effective Integration of Service and Theoretical Learning

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Background

The ongoing debate in education: lecture-based learning or experience-based learning?

- What approach is more impactful for student learning?
- Do students have a preference?
- Within medical education, which method best equips students to effectively serve diverse patient communities?
- **How can these approaches be integrated?**

Previous research has demonstrated:

- Students in service-learning courses reported **higher levels of engagement** than those in traditional lecture courses [1].
- Students who took a course after the integration of a service-learning requirement **performed better** than those who previously took the same course [2].

Project Aims

To create and assess a curricular model that:

- Integrates lecture content from the Health Systems Science (HSS) course with the practical applications of the Service Learning program.

1. Enhances student learning through hands-on experience.

2. Promotes camaraderie & collaboration among students.

3. Fosters productive & scholarly peer-to-peer conversations.

4. Encourages medical student commitment to service organizations in Rhode Island.

On a larger scale:

- Contributes to current literature as a **case study**.
- Offers valuable direction for other institutions seeking to integrate service learning into their curricula.

Methodology

COHORT 1: MD27 Class

 144 students

- **Control Group #1**
- Minor integration of the HSS-1 Course and Service Learning Program during the 2023-24 school year.
- A combined HSS-Service Learning writing assignment was required.

COHORT 2: MD28 Class

 130 students
(excludes PC-PM)

- **Control Group #2**
- Minor integration of the HSS-1 Course and Service Learning Program during the 2024-25 school year.
- Attendance at an HSS-specific Service Learning presentation was required.

COHORT 3: MD28 PC-PM Class

 16 students

(PC-PM stands for Primary Care-Population Medicine. Students earn a Master of Science in Population Medicine alongside their Doctor of Medicine)

- **Experimental Group – Integrated Model**
- Increased integration of the HSS-1 Course and Service Learning Program during the 2024-25 school year.
- Students were assigned to serve an HSS-related population and present their Service Learning experiences to their peers.

1. Rank Preferences

- Students rank the following population themes:
 1. Food and Housing Insecurity
 2. Education for Youth/Disadvantaged Communities
 3. Other Vulnerable Populations

2. Complete Service

- Students complete four hours of service within their assigned population.
- A list of approved electives, student groups, and community organizations per theme is provided.

3. Present to Peers

- Students present their Service Learning experience to their PC-PM peers.
- This presentation integrates HSS material, personal reflections, and discussion questions.

Data Collection

Surveys will be administered within each cohort to assess the integrated Service Learning model.

- These surveys will use a Likert scale to measure **personal impact, service continuity, professional growth, and peer collaboration**.

Example Statements:

- "I was prompted to reflect on my biases."
- "This experience enhanced my understanding of core health issues discussed in HSS."
- "My peers and I shared insights about our experiences with each other."

Expected Outcomes

The integrated Service Learning model is expected to:

FOR STUDENTS:

- Increase impact and personal/professional growth.
- Promote continuity of service beyond requirements.
- Boost bi-directional learning between peers.

FOR THE WARREN ALPERT MEDICAL SCHOOL:

- Establish Service Learning as a more centralized, integrated aspect of the curriculum.
- Strengthen community partnerships between the school and organizations in Rhode Island.

Discussion

Preliminary observations:

- The integrated model is **easily implementable** within the HSS and PC-PM curriculum.
- **Students are receptive** to the model's structure.
- Workload is not significantly increased for students or faculty (assignments, grading, etc.).

Limitations to monitor:

- Confounding variables from the ongoing curricular redesign may impact MD28 survey responses.
- Surveys may perpetuate bias, as students might respond desirably rather than honestly.
- If limitations appear to affect study results, **focus groups** will be utilized to clarify student insights.

Next Steps

Collect and Analyze Data

Administer surveys and focus groups.



Present Findings

Target audience: Office of Medical Education



Modify Curriculum Accordingly

Work with HSS, PC-PM, and Service Learning faculty.

- Future directions include **expanding the integrated Service Learning model** to test within an entire class.

References

- [1]: Rife, J. E. (2015). *The effects of service-learning courses and traditional lecture courses on students' academic achievement and level of course engagement*. Liberty University.
- [2]: Strage, A. (2000). *Service-learning as a tool for enhancing student outcomes in a college-level lecture course*. Michigan Journal of Community Service Learning, 5.