

Stronger When Combined: Lessons from an Interprofessional, Jail-Based Service-Learning Project

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Abstract

Long recognized as a means for enhancing students' awareness of social justice and social responsibility, service-learning is now also being employed to help health profession students develop interprofessional teamwork skills. This paper describes preliminary evaluation results of one such pilot program: an interprofessional service-learning project at a county jail. In the program, college students from a range of health professions worked collaboratively with inmates and jail staff to design service projects that promote health in the facility. Qualitative analysis of open-ended questionnaires completed by student participants identified key learning outcomes, including increased awareness of the health and social disparities faced by people incarcerated at the jail; confidence in the ability to address these disparities and to engage in culturally sensitive practice; and appreciation for the value of interprofessional teamwork. This preliminary evaluation is part of a larger effort to develop tools to assess student and community outcomes that result from interprofessional serving learning initiatives.

The concept of interprofessional education (IPE) has gained tremendous momentum in health profession education in recent decades. Interprofessional education is defined as "When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes" (WHO 2010, p. 13). The U.S. Interprofessional Education Collaborative (IPEC) Panel (2011) further explains that IPE: enable[s] opportunities for health professions students to engage in interactive learning with those outside their profession as a routine part of their education. The goal of ...interprofessional learning is to prepare all health profession students for deliberately working together with the common goal of building a safer and better patient-centered and community/population-oriented U.S. health care system (p. 3).

The purpose of IPE is to intentionally prepare health profession students with attitudes and skills for effective collaborative and team-based practice. Specific competencies espoused by IPEC include capacity to work respectfully with workers and colleagues from other professions; appreciate roles and responsibilities of others needed to address the health and social care of clients and patients; communicate effectively with clients, communities, and cross-professional workers; advance population health; and perform as a member of a team when providing safe, equitable, and effective person-centered care (IPEC, 2016).

IPE is a method of learning that takes varied forms (Congdon, 2016). It can be delivered through curricular, extracurricular, co-curricular, pre-clinical, and clinical domains. Common examples of IPE include interprofessional courses and modules (Ekpe,

Moore, McCarthy, & DiGiovanni, 2017; Lane, Keefe, Rubinstein, Hall, Kelly et al., 2018); team immersion experiences and simulation (Cohen Konrad, Cavanaugh, Hall, Rodriguez, & Pardue, 2017); symposia (Isibela, Bennington, Boshier, Stull, Blando, & Claiborne, 2018); collaborative pre-clinical experiences and conferences; team competitions; community activities (Craig, Phillips, & Hall, 2016); and clinical rotations (also called field placements or internships) (Nagelkerk, Thompson, Bouthillier, Tompkins, Baere et al., 2018).

This paper describes an IPE service-learning project created through a partnership between a university and a county jail. The model brings together teams of students of different health professions with people who are incarcerated to identify and address unmet needs at the jail. Beginning in Fall 2012, inmates, jail staff, and social work, nursing, physician assistant, and physical and occupational therapy students have collaboratively designed and implemented a series of health and wellness workshops that incorporate exercise, health education and stress management skills. The authors of this article were at the time the director of University of New England's Interprofessional Education Collaborative (UNE-IPEC) and the lead faculty member on the jail project. Along with other faculty involved with the project, we have conducted a preliminary evaluation of participating students' learning outcomes focusing on the following question: What do students learn from working on interprofessional teams to provide health promotion workshops in a low-resourced jail setting? In addition to educational outcomes, we also broadly explore aspects of the learning environment including particular faculty skills and the level of institutional collaboration necessary to promote a transformational service-learning experience. This essay describes this service-learning project, the design of and results from the

preliminary evaluation, and our plans for further model development and evaluation.

Interprofessional Education Service-Learning

Historically, IPE has focused on campus-based learning and clinical site models. Increasingly, however, educators have explored outcomes of interprofessional service-learning for students working with underserved and marginalized populations (e.g., Bowland, Hines-Martin, Edward, & Haleem, 2015; Kolomer, Quinn, & Steele, 2010; Lee, Hayes, McConnell, & Henry, 2013). *Interprofessional service-learning* is a pedagogical practice utilizing outside-of-the-classroom experiences for health profession students designed to enhance their critical and reflective learning through hands-on, community-based activities. Learning takes place as students apply their developing professional skills to real-life situations in interprofessional teams, thus bridging the gap between what is learned in the classroom and what is practiced in the community on care provision and teamwork. Service-learning has mutual and interacting benefits for all stakeholders. For students it provides applied scholarship while for communities it offers a way to fill local needs and gaps in services (Craig, Phillips, & Hall, 2016).

The benefits of engaging students from various health professions in community-based service-learning projects include gaining knowledge of others' professional roles and scopes of practice and at the same time, achieving a sense of civic and social responsibility (Craig, Phillips, & Hall, 2016; Kolomer et al., 2010; Lee et al., 2013). Kolomer and colleagues (2010) suggest that, like other service-learning projects, IPE community service opportunities increase students' appreciation for the lived needs of underserved populations. Similarly, in a community-based project where students partnered with older adults, Lee et al. (2013) observed that engagement with an underserved community contributed to meaningful learning as well as a sense of "making a difference" (p. 57). Along with supporting community needs, IPE service-learning can result in community change that endures beyond the educational intent of the project. Craig, Phillips, & Hall (2016), reporting on a two-year IPE clinical service-learning project in rural New South Wales Australia, noted its multi-level benefits in providing much needed team-based care including less supervisory time and provision of sustainable local service development. The authors, however, comment that because service-learning prioritizes the needs of the community over student learning outcomes, attainment of measurable IPE competencies may not be as robust as in structured campus-based or clinical site settings.

Service-Learning in Correctional Settings

Service-learning in correctional settings shares similarities with other service-learning and experiential education models, including its theoretical foundations, interactive teaching methodologies, increased social and civic engagement, and enhanced investment in raising students' awareness of social inequities (Pompa, 2005). The jail context, however, adds distinctive elements; most notably, the absence of personal freedom experienced by inmates; the stereotypes and stigma associated with incarceration; the political nature of crime policy; and the complicated and often controversial role of prisons in U.S. society. Learning is augmented in that context because it takes place *within* the jail culture, with students experiencing the restrictions of the jail setting firsthand, which leads to greater affective understanding of the experiences, challenges, and needs of people who are incarcerated (Pompa, 2005).

A similar model to UNE's project at the jail is the Montana State Prison Wellness Program (Amtmann, et al., 2002; Amtmann, 2004). The program included a Continuing Health Education program, in which health profession students led workshops with inmates on a variety of health topics, including smoking cessation, stress management, yoga, nutrition, cardiovascular disease and health, strength training, sexually transmitted diseases, anger management, meditation, and hepatitis (Amtmann, 2004). The goals of the service-learning project were threefold: to increase opportunities for those incarcerated to improve their overall health, to educate them about health, and provide challenging and practical educational opportunities for students (Amtmann, et al., 2002). The project has been evaluated through interviews with students and inmate participants, though the primary focus was on student learning (Amtmann et al., 2002; Amtmann, 2004). Evaluations document benefits for both students and inmate participants.

In an analysis of one set of Amtmann and colleague's (2002) student interviews, three themes were identified: (a) communication—students had opportunities to expand critical communication skills (for example, patience, tact and diplomacy and being less judgmental); (b) need—students identified needs for wellness programs in general and especially inside the facility; and (c) application of academic knowledge—student participants had opportunities to apply theory to real life (Amtmann et al., 2002). In an analysis of another set of interviews with students, emerging themes included fear, gratitude, and surprise. Participating students felt various levels of fear, nervousness, apprehension and

anxiety, which were quickly allayed after meeting the inmates; students were moved by the appreciation and gratitude from the incarcerated attendees as well as by the benefits of the experience; and students found that the experience benefitted their public speaking and academic growth; exposure to different types of people; communication and presentation skills; and knowledge of health topics (Amtmann, 2004).

Interviews with inmate participants also documented positive outcomes. Themes emerging from these interviews found that the inmate participants care about their health; are interested in health topics; enjoyed interacting with non-correctional students; were positively impacted by people actually taking time out for them, which showed them that people care; and found the students to be inspirational (Amtmann, 2004).

Service-learning projects in correctional settings focused outside the health field are also instructive. Models include college students teaching courses, mentoring, tutoring, engaging in art and writing projects, and being in reading groups (Meyer et al., 2016; Wetzel, 2013). Most of these reports note that participants start with fear and apprehension about meeting the other, but those fears dissipate through interaction, building connections, recognizing similarities, and learning that stereotypes are not true. Describing a facilitated reading group, Wiltse (2011) explains that students quickly learn the prisoners are not as bad as they feared, and conversely the prisoners learn that the college students are not there to study them. Participants learn that “some prisoners have been to college, some college students have done time, and both groups are more diverse in background and ability than they ...expected” (p. 9). The result is humanization, the realization that people who are incarcerated are complex human beings (Deal & Fox, 2006; Krain & Nurse, 2004; Swanson, King, & Wobert, 1997). Further, students gain recognition of the social forces causing crime and the limitations of our criminal justice system to address human need (Hischinger-Blankland & Markowitz, 2006; Meyer et al., 2006; Wetzel, 2013).

While most reports on corrections-based service-learning focus on student learning outcomes such as reduced stereotypical thinking, increased interpersonal skills, integration of academic knowledge to real-life contexts, career exploration and increased interest in working or volunteering in corrections (e.g., Hischinger-Blankland & Markowitz, 2006), a few also include assessment of benefits for community partners (i.e., inmates). Meyer et al. (2016) describe the impact of a service-learning project in which education students taught a life span development class to women serving long-term sentences. Using pre- and post-test surveys, researchers found both groups were

impacted positively by the experience. Students increased their interest in both teaching in general and teaching in forensic settings. They also became more aware of their stereotypes, power, and privilege. Women inmates showed an increased knowledge of life span development and said that the course improved their ability to communicate with others and express themselves in writing.

Wetzel (2013) documented a model which used student-inmate peer reviews. Students in a first-year English course titled “Containment and Liberation,” and incarcerated students working on their associate’s degree at the prison through another university, wrote responses to a common reading, then engaged in peer review of their essays. Participants met in pairs for one hour to read and discuss their papers before convening for a group debrief. Peer review was chosen as a means to initiate mutual dialogue, divide tasks equally, and allow participants to confront and assess bias.

Qualitative analysis of student papers and prisoner oral reflections was conducted. One noteworthy comment by an incarcerated participant highlighted the humanizing benefit of being treated as a peer by both students in the process of peer-review, and the instructor when she solicited their feedback on the project. Service-learning projects of various models have potential advantages not only for students but also for people who are incarcerated, and such benefits are increased when incarcerated participants are fully included in project design and redesign.

Emphasis on Teamwork in IPE

From the beginning, the project at the county jail aimed to bring students together in interprofessional teams to apply IPE competencies within a jail setting. For more than two decades, the National Academy of Science, Engineering and Medicine (formerly known as the Institute of Medicine) (IOM, 2000, 2001, 2003, 2010) has urged academic institutions to develop and implement interdisciplinary/interprofessional, integrated curriculum that prepares health profession students for working in collaborative team-based clinical and community practices. The urgency was prompted by the alarming increase in medical missteps causing death and personal suffering to individuals and families as a result of poor communication, collaboration, and coordination between clinical health professionals and health care systems (IOM, 2000, 2001, 2003, 2010, World Health Organization, 2010). The Institute on Health Care Improvement (IHI) also supports concepts inherent in the Quadruple Aim: improving the health of populations, enhancing the patient experience of care, reducing the per capita cost of health care, and improving provider

satisfaction, all of which are known to be enhanced by collaborative, team-based health care cultures (Bodenheimer & Sinsky, 2014). A further tenet for improving outcomes not exclusive to health care professionals is inclusion of patients and families as active members of the team and informants to care.

Environments that allow for meaningful student interaction are optimal for building teamwork skills, and students want to learn teamwork through “hands-on” experiences such as those provided in service-learning, community-based activities, and preclinical and clinical education opportunities (Cohen Konrad et al., 2017; Lee et al., 2013). Behaviors fostered through interactive team learning build relationships and increase effective communication, and these behaviors generalize across team roles and client populations (Adams, Orchard, Houghton, & Ogrin, 2014). When students are intentionally taught team principles and skills-applied experiential learning, they are more likely to seamlessly transition from the world of interprofessional education to the realm of the collaborative team-based workplace. Participatory team-based learning has been found to increase students’ knowledge of other professions, improve their uniprofessional identity, enhance confidence in team skills and practice, and provide a basis for working collaboratively in their future workplace settings (Cohen Konrad et al., 2017; Cox, Brandt, Cuff, Reeves, & Zierler, 2016; Hrynchak & Batty, 2012).

Culture of IPE at UNE

Common barriers that derail interprofessional learning initiatives are well described in the literature and include differing faculty pedagogical styles, scheduling nightmares, accreditation requirements, space needs, packed curricular content, and deeply entrenched departmental traditions and philosophies (e.g., Barr, 2005; De Los Santos, McFarlin & Martin, 2014). Although these challenges still exist to some extent at UNE, there is cultural momentum to address these barriers and create multifaceted, shared academic, clinical, and community-based learning opportunities.

UNE supports IPE through wide-ranging learning opportunities that are integrated into undergraduate and graduate curricula, research, and service-learning. The design of UNE’s IPE learning opportunities is guided by the collaborative behaviors, such as active listening and shared problem solving, that were outlined by the Interprofessional Education Collaborative Expert Panel (2016) as well as the values embraced by UNE’s Interprofessional Collaborative that promote safe and quality healthcare, social justice, patient/person

centeredness, collaborative leadership, and student empowerment as agents of change.

To ensure that educators have the skill sets that they want students to learn, faculty members are exposed early and often to team-based, interprofessional competencies through targeted professional development. Moreover, UNE educators work within an institutional culture that explicitly supports cross-professional collaboration, laying the groundwork for IPE service-learning at the jail.

Specific challenges are associated with developing educational programming in community jail settings. Faculty must take great care not only to meet the curricular needs of the various programs but to do so in a way that does not exploit those incarcerated for the benefit of student learning. This goal is done thoughtfully by first recognizing that students are engaged in an interactive cultural immersion experience that involves learning with and about individuals whose life circumstances may be markedly different from theirs.

Educators must model skillfully respectful communication and cultural sensitivity that facilitate openness to learning from community members about their lived experiences (Campinha-Bacote, 2003). To accomplish this end, educators are fully oriented to the jail culture, including a visit to the facility, before they are accepted to facilitate the project. Orientation sessions include discussions of implicit and explicit bias and introduction to IPEC competencies and skills.

The student learning process is reflective and reflexive. Thus, educators must be comfortable with prompting critical thinking and affective learning as well as being prepared for difficult conversations involving inequity, racism, difference and social exclusion. Such conversations might take place during active debriefing sessions when students examine their responses, biases and assumptions (Allred, 2009; Bowland et al., 2015). At debriefs, teachers refrain from judgment, doing their best to encourage students to struggle with the barrage of philosophical, political and affective dilemmas that surface when working alongside marginalized populations. Faculty members wrangle with similar dilemmas and, thus, debriefing with other faculty and self-reflection are essential practices for them as well. The existing culture of IPE at UNE allowed for faculty involved in the project to model interprofessional communication and teamwork, vulnerability, and reflection with project participants.

University-Jail Partnership

The service-learning project grew out of a partnership developed between the university and the jail that grew out of an Inside-Out course, first taught at the jail in Summer 2012. In the Inside-Out model, college and

incarcerated students study issues of crime and justice together in a semester-long course that meets weekly inside a correctional facility. Elements of the model such as sitting in a circle, icebreaker games, and small and large group discussions are designed to create a “safe enough” environment for the expression of multiple perspectives, experiences, and agendas (Pompa, 2005).

After the first course at the jail ended, participants decided to keep meeting in order to discuss other ways that university resources could be harnessed to benefit the jail and the people incarcerated within. The Collaboration Planning Group (CPG) was born and continues to steer all student activities at the jail. All ideas for new projects start in the CPG, and all students participating in service-learning at the jail meet with the CPG for orientation and feedback. Like the Inside-Out course, the CPG is guided by a spirit of mutual benefit and inclusivity: men and women incarcerated at the jail, jail staff, UNE faculty and students work together, defining interprofessional teamwork to include both professionals and non-professionals. The collaborative nature of project design helps students experience working with, rather than for, people in need.

Our partner institution in this project is a county jail built to hold 570 people and usually housing around 450. Most of these are men, with five housing units for men, including a protective custody unit, and one housing unit for women. Most people brought to the jail are released fairly quickly; the average length of stay is about seven days. About half of those incarcerated at the jail are not sentenced, meaning they have not yet gone to trial and they do not know for how long they will be incarcerated.

The jail is a challenging setting for education, collaboration and service provision because of the mix of inmates, with some coming in and out in a day, some serving short sentences, and some awaiting trial, sentencing, or U. S. Immigration and Customs Enforcement (ICE) processing for long periods. The jail can house people accused of a variety of crimes, from petty theft or public nuisance to child sexual abuse and murder. Although anyone sentenced to more than a year is sent to one of the state prisons, some presentenced inmates stay at the jail longer, awaiting trial. The jail also contracts with the federal government to provide detention services for federal defendants and ICE detainees, with federal inmates being at the jail anywhere from a few weeks to a few years.

Programs for those incarcerated at the jail are limited due to the short average length of stay and limited public resources dedicated to social services including rehabilitation. Educational opportunities include high school equivalency test (HiSET) courses, culinary arts training, a garden program, and special topic

classes such as parenting, financial literacy, and cognitive skills.

Health services are provided by a private contractor that supplies nurses and physician assistants. Dental care is available only two days per month, and a psychiatrist is available one day a week. An outside agency provides a weekly domestic violence prevention program, and Alcoholics Anonymous and Narcotics Anonymous groups meet twice a week. Bible study is offered weekly, and chaplain services are provided by a reverend and an assistant reverend. “Rec time,” or access to the gymnasium with a basketball court, is offered twice a day. There are no weights or exercise equipment other than basketballs and medicine balls.

All incarcerated men and women have access to a library and a law library. A limited number of minimum-security inmates work as trustees to perform janitorial and housekeeping services at the jail, earning a small amount of money or time off their sentence. For those who are not trustees or taking courses, there are limited opportunities for self-improvement, social support, physical exercise, and mental stimulation. As a result, program staff at the jail welcomed the partnership with UNE, which they saw as a way to increase opportunities for education and recreation at the jail.

Program staff worked on scheduling and logistical issues with security staff, who were mostly skeptical at first but became somewhat more supportive over time as they saw students and faculty coming in week after week without incident. Students and faculty showed respect for the facility’s rules by being on time, wearing appropriate clothing, and following staff directives. Whenever this was not the case, for example if a UNE student forgot to bring their driver’s license and then asked to be permitted to enter the jail without it, program staff informed the lead faculty member, who reminded participants of the importance of following the rules. UNE’s ability to build a positive reputation among jail security staff was based on open and consistent communication and vigilant attention to emerging concerns. Program staff and the lead faculty often had to serve as cultural brokers, teaching and learning about institutional norms and the professional roles, responsibilities, and values of various stakeholders.

Identifying Health Needs at the Jail

The services provided at the jail for those incarcerated are minimal, while the needs are overwhelming. Nationally, people who are incarcerated are more likely to suffer from chronic diseases including diabetes, hypertension, and asthma; infectious disease, in particular, MRSA (a type of staph infection), HIV, tuberculosis, and Hepatitis B and C; mental

health disorders, substance abuse disorders, and risk of suicide (Davis & Pacchiana, 2004; James & Glaze, 2006). As part of their orientation to the jail setting, students participate in a discussion session with the CPG to learn about challenges to being healthy at the jail. At the session, students and CPG members brainstorm a list of what it means to be healthy and the challenges of being and staying healthy in jail. The list cited many other challenges than those identified in the research, including limited access to health providers, medication and information; lack of fresh air, personal space, privacy, sun, physical activity and mental stimulation; monotonous food; sleep disruptions; barriers to building trusting and supportive social relationships; and limited opportunities for personal expression and autonomy. This exercise not only helps students to identify how their skills can be useful for improving the lives of people incarcerated at the jail, but also encourages them to develop a broad definition of health that goes beyond the absence of disease (WHO, 1946).

After assessing health challenges, students and CPG members brainstorm how various health professions could be brought together to provide opportunities for healthy living at the jail. Improved nutrition, infectious disease prevention, stress management skills, increased physical activity, and opportunities to vent are often identified as areas of need aligned with student skill sets. The students then work in teams to develop curriculum for the 6-week workshops they will provide at the jail, with each team assigned to a different housing unit. While some curriculum is now available for students to draw from, each team is given the opportunity to rework or design curriculum to meet their skill sets and insights gained during their meeting with the CPG.

Methods

Evaluation and constant refinement of this service-learning program was based on participatory action research principles, engaging in a look-think-act loop (Stringer, 1999). Students and CPG members “look” at the issues together, they “think” about solutions, “act” to implement their solution, then “look” at the results. During the academic years 2013 through 2015, students took part in the final “look” portion of the “look-think-act loop” process (Stringer, 1999) by way of end-of-year debriefs that consisted of a whole-group debriefing session and completion of open-ended questionnaires. Information from the debriefing and questionnaires was then used to improve the structure of the projects in future semesters.

Data collected were also used for program evaluation to document student learning outcomes and lessons learned to ensure that they were used to advance institutional knowledge of IPE service-learning. Approval from

the UNE’s Institutional Review Board for the Protection of Human Subjects (IRB) was sought and an exemption status was received. Given the participatory nature of the project, the evaluation used interactive qualitative methods rather than traditional pre- and post-test surveys. Likewise, because UNE’s relationship with the jail was new at the time of this early project assessment, we wanted to avoid having the inmates feel like “guinea pigs” and decided not to evaluate inmate outcomes in this initial phase. As a safeguard to make sure the incarcerated workshop participants felt the workshops were helpful and not harmful, the students distributed satisfaction questionnaires that both they and jail program staff reviewed.

Participants

Questionnaires and debrief notes were gathered from students participating in interprofessional projects at the jail over five semesters including Spring 2013, Fall 2013, Spring 2014, Fall 2014, and Spring 2015. Student participants totaled 76, including 30 occupational therapy, 21 physical therapy, 12 nursing, five physician assistant, four social work, and four dental hygiene students. All but 16 of the students were women. Data on race and age of service-learning participants was not collected.

Data Collection

To investigate program impacts, we used qualitative methods to uncover learning outcomes and elements of the program that facilitate those outcomes. Given time constraints on students’ and faculty members’ schedules, we focused on readily collectible data gathered during project participation. Data were collected from weekly and final debrief notes as well as from the final debrief questionnaire. Weekly debriefs took place with faculty mentors in the jail at the end of each student-led workshop, and one student from each team was designated responsible for posting debrief notes on the team’s Google folder. At the end of the semester, all students and faculty from all participating teams gathered to complete the debrief questionnaire and discuss key lessons learned and ideas for changes. The final debrief session took place in a two-hour evening meeting on campus, and meeting notes were recorded by hand.

Data Analysis

Thematic coding of the debrief data content was conducted by two coders: one actively participated in the service-learning project, created the questionnaire, and led the final debrief meetings; the other was a faculty member familiar with IPE activities at UNE but who was not involved in the project directly. Use of coders from these different vantage points ensured some measure of trustworthiness in the

thematic findings (Tutty, Rothery, & Grinnell, 1996).

Each coder individually read all surveys and created an initial code list. The coders reconciled their two lists and then reread and recoded the data using the revised code list. Through the coding process, categories of data were identified and then major themes were delineated through iterative dialog between data and the coders. In the next section, we describe these key learning outcomes and processes identified by the 76 students participating in the project over the first three years.

Findings

The people in the group had a feeling they were giving us as much as we were giving them. That's a piece of meaning for them. Every single week there was a lesson to walk out of there with. (Health profession student)

The clearest takeaway from the students' comments was the value they placed on hands-on learning through engagement with other students, jail staff, CPG members, and workshop participants. They enjoyed having the opportunity to implement IPE principles and other knowledge gained from coursework in a real-life setting. This echoes prior studies which similarly found students benefitting from the opportunity to learn in real-life contexts (e.g., Cohen Konrad et al., 2017; Hirschinger-Blankard & Markowitz, 2006). Some elements of the experience they identified as key to students' learning experience included (a) working with students and faculty from other professions, (b) interacting with workshop participants and hearing their stories, (c) working with an especially stigmatized population, and (d) being exposed to the lack of resources in the jail.

Being inside the jail and working directly with workshop participants and students from other professions laid the groundwork for transformative learning. Analysis of student debrief sessions and surveys uncovered evidence of transformative learning outcomes spanning multiple domains, including (a) an understanding of inequity and the health and social disparities faced by people incarcerated at the jail, (b) increased cultural sensitivity working in under-resourced settings, (c) increased confidence in the ability to work in under-resourced settings to address disparities, and (d) the value of learning and working in interprofessional teams. We address each of these themes in turn, describing both outcomes and the elements of the experience that made each outcome possible.

Inequity

Whereas *inequality* represents an uneven distribution of resources or outcomes, *inequity* ties inequality to the social structure (Graham, 2007). We titled this theme "inequity" because students witnessed the lack of resources at the jail and in inmates' lives, and they began to question the fairness of these disparities. When asked about the most important lesson that they learned at the jail, several students mentioned the overwhelming need for, and glaring lack of, health and social services at the jail. Basic health and education services are available, but specialized care, social services, reentry planning, dental care, mental health, and addiction services are absent or sparse. As one of the participating students wrote:

I think that's one of the biggest things I took from this all that they are there for a reason but they don't have to be living in conditions that are deplorable in my opinion. There are not a lot of windows or communication with the outside world for various reasons. There was a point where someone said they liked being treated like a human...

Students identified key health challenges that they witnessed at the jail, including limited access to healthy activities such as work and recreation, nutritious food, exercise, information about infectious and chronic disease prevention, and social support. For students who were fresh from learning in their courses about health and disease, seeing the amount of need at the jail was equally jarring and humbling. Each of the professions represented brought its particular phenomenological lens to problems and causes highlighting different needs, giving students a full picture of all the kinds of services that could benefit those incarcerated. These findings echo those of Swanson, King, & Wolbert (1997), who documented students' recognition of the limitations of the juvenile detention system to address the needs of the youth they mentored inside.

Cultural Sensitivity

Cultural sensitivity involves being aware of how cultural beliefs and practices can affect relationships between healthcare providers and their patients (Campinha-Bacote, 2003). The origins of cultural sensitivity were found in student comments indicating a shift in their previous assumptions about people who are incarcerated to a fuller understanding of their humanness, and that they are, as one student said, "just people," not monsters. Many of their stereotypes were challenged as they met workshop participants who "were not all deadbeats" and who "are willing to help

themselves if you provide the opportunity.” Students appreciated the chance to meet with incarcerated CPG members in the orientation session and “talk with them as equals.” Mirroring themes in the literature on service-learning in corrections, such interaction allowed the students to get a better sense of who is incarcerated and the trajectories, strengths, and vulnerabilities of people inside the jail (Deal & Fox, 2006; Krain & Nurse, 2004; Pompa, 2006; Swanson, King, & Wolbert, 1997; Wetzels, 2013; Wiltse, 2011). As one student commented: “I think I realized the diversity that exists among inmates in their backgrounds, social status, education, family lives.”

Students not only saw inmates as human but also saw the complexity of their humanness. Linking inequity and cultural sensitivity, students experienced a two-fold punch of awareness: people who are incarcerated have a lot of unmet needs and they deserve to have their needs met because they are human beings. By working inside the jail and engaging directly with jail staff, CPG members and workshop participants, students learned about cultural norms common to U.S. correctional institutions and the context-specific nature of care provision in such settings.

Confidence

The data revealed a specific form of self-efficacy, the belief among students that they had the power to make a real and positive impact at the jail and in other under-resourced communities. Students responded to the needs at the jail by recognizing and sharing the impact their profession could have. Instead of feeling overwhelmed, many saw it as an opportunity, even a responsibility, to employ creative ways to bring UNE resources to the jail. Perhaps most important, they saw themselves playing a role in a change process, as evidenced by student comments such as: “We can provide much needed, effective tools to help inmates in their journey to ‘break the cycle.’” While we did not assess the workshops’ direct impact on positive change within the jail, it is significant that students developed a confidence in their ability to make a difference.

Students also gained confidence in their ability to generalize what they learned about culturally responsive services to other practice settings. As a student explained,

I learned how to provide help to people who need it in an environment that is not consistently supportive. It opened my eyes to working with vulnerable populations who have limited access to healthcare.

Significantly in an age of growing economic, access, and health disparities, students recognized firsthand that it is possible to build relationships across social divides. As one of the

student participants said, “That you can build relationships and common ground with the most unlikely, unexpected people—but it takes time, a commitment and a certain amount of initial willingness to make it happen.” Such statements connect to prior research on service-learning documenting increased interpersonal skills for students, and provided evidence that students emerged from the jail service-learning experience with unforeseen capacities to form meaningful and beneficial relationships with underserved populations (Hirschinger-Blankard & Markowitz, 2006).

Teamwork

The theme of “teamwork” came up in students’ comments in a variety of ways, including questions they asked about who was on the team, what students learned from their team members, and how they weighted the challenges and benefits of being on a team. Students developed an expanded understanding of their ability to make a difference within a collective framework; that is, they realized that they do not have to address inequity and its effects on their own but can partner with patients, workers and other professionals to make a difference. Some talked about the value of working with CPG members to develop curriculum for their own learning, with one saying, “The importance of collaboration between the inmates and the student volunteers—really enriched the experience for all!” Working at the jail helped students broaden their definition of teamwork to include nonprofessionals, workers, and members of the target population.

Almost all of the students mentioned the value of working on interprofessional teams. Many cited the interprofessional nature of the program as its greatest source of strength, with one saying:

The interprofessional nature of the project was what made it so successful.

It allowed us as future professionals to work together, to design a program for individuals in need. It was not just one program going to work with the individuals but allowed each profession to play a crucial role and provide important information. Students saw in real time the contributions of other professions to real-life problems affecting real people they had met. For some, it was the first applied interprofessional experience they had as a student. As one student explained,

This is the one chance I’ve had to really apply what I’ve learned and use it alongside other professions. It was also the only time I was able to witness other professionals actually applying what they have learned in a clinical location, not just in class.

Given the interprofessional nature and challenges of bringing two very different institutions together, positive and effective communication was noted by the students as being extremely important. As one student wrote, "Interprofessional communication was crucial to this program. It was mostly student-run and interacting with other professions' views and schedules were essential." Listening, sharing, openness and respect were identified as essential skills for optimal communication between professions working on teams.

Teamwork was often reported synonymously with collaboration; working together was viewed as critical to all iterations of building partnerships. Students gained appreciation for the value of interprofessional and interagency collaboration, and they understood that they are improved and strengthened through good communication and teamwork. These insights coupled with new understanding of the power of patients, clients and nonprofessional workers on health care teams, are perspectival shifts that improve healthcare in the U.S., making it both responsive to and informed by patient and community needs.

Discussion

The findings from UNE's interprofessional service-learning project at the jail suggest that the project has met the goals of engaged community-based learning as described in the literature (Allred, 2009; Kolomer et al., 2010; Lee et al., 2013). The jail provides a nontraditional, interactive, hands-on learning venue that fosters teamwork skills and reinforces collaborative principles (Lee et al., 2013). Students and faculty from a range of health professions report deepened knowledge of the roles and expertise of other professions that was achieved through real-life encounters, and the opportunity to apply what they had learned on campus *about* interprofessional teams to meaningful practice in the community.

Learning in the jail environment further enhanced student affective knowledge in ways that would not have occurred within the confines of the classroom. Their views of people who are incarcerated changed from thinking of them as "others" to appreciating that much like themselves, those incarcerated wanted to be listened to, respected and given opportunities to empower themselves. Similar to Kolomer et al. (2010), the benefits of community-based service-learning brought about more authentic understanding of injustice and social responsibility. In a context where schedules are inflexible, needs are overwhelming, and resources are scarce, participating students came to appreciate teamwork on new levels. Students emerged from the service-learning experience knowing that it is up to them to make a difference in the world and that they cannot do it alone. As one health profession

student put it, "We are stronger when combined than when individualized." This experience of the power of collective action is the foundation of social change and especially crucial in an era of heightened individuality and diminishing social care and health resources.

The service-learning project at the jail remains a sought-after IPE learning activity at UNE. Incoming students learn about the project at new student orientation from one of its earliest student participants who is now an alumna of the university. The following impassioned statement offered at the 2017-2018 orientation is evidence of the projects impact as a transformative learning experience:

IPE in the jail helped me figure out who I am and what I want to be. It's helped me form my passion for public health, it's helped me find my niche... Knowing what other professions do helps me serve my patients better ... I'm giving my patients the best care possible.

The IPE jail project remains responsive to input from its participants and has incorporated additional professions into student and faculty teams. Our relationship has deepened across, between, and within participating institutions. And we continue to learn from our mistakes.

Lessons learned from student and faculty feedback in the first two years of the project prompted positive improvements including action to (a) streamline scheduling, (b) increase required reflection activities into the service-learning structure, (c) increase orientation activities for student participants, (d) strengthen curricula to be consistent, yet responsive to accreditation standards, (e) identify student leaders responsible for facilitating communication amongst teams and agencies, and (f) ensure interprofessionality of all teams through strategic team assignment.

Limitations

Given that we did not utilize pre- and post-program data for this preliminary assessment, we can make only tentative claims about student learning outcomes, though we believe that what we learned is valuable to those conducting IPE service-learning, particularly in correctional settings. We are also aware that the convenience sample of students who completed the debriefs and questionnaires already had significant exposure to interprofessional learning in their courses and extracurricular programming at UNE. Hence it is likely that in some ways, they were primed to be successful in their collaborative jail experience because of prior knowledge and familiarity with interprofessional competencies and practices (Freeth & Reeves, 2004). Future evaluations should compare the learning outcomes of students with and without prior IPE exposure to see whether early exposure to IPE in coursework makes a difference in the

quality and depth of students' learning when engaged in IPE service-learning settings.

Together the UNE service-learning office and UNE IPEC evaluators are developing instruments that measure short- and long-term interprofessional service-learning outcomes. As noted in the interprofessional education literature, it is difficult yet necessary to determine the benefits of shared learning beyond individual student and faculty satisfaction (Thistlewaite & Moran, 2010). The questionnaires and group debrief sessions conducted for this project offer thematic directions that inform development of such instruments. Future evaluation also will include measures of both prior IPE experience and exposure to working with marginalized populations to capture any added educational value provided by interprofessional service-learning in the jail context.

On a broader scale, additional work is needed to assess whether the student-led workshops are increasing workshop participants' health knowledge, and whether the project overall is improving conditions at the jail and changing staff attitudes about the value of rehabilitation. While anecdotal evidence suggests all three goals were met, systematic analysis is needed to ensure the project is not causing harm to people incarcerated at the jail or the cause of social injustice.

Conclusion

The success of interprofessional education service-learning at the jail continues to be the result of many factors. One important influence is the Inside-Out Prison Exchange model, which emphasizes equality, reducing stereotypes and problematic assumptions, creating spaces where all voices are heard, and being flexible and people-centered. The orientation sessions in which students and CPG members meet for the first time and begin to learn about and with each other are based on the Inside-Out approach. The opportunity to learn about the needs of those incarcerated directly from them before working in teams to facilitate workshops was highly valued by college students. Another key force is the commitment of students who volunteer their time and talents, juggling hectic schedules, to address needs at the jail. Faculty have made great strides to support health profession students in their efforts to engage in interprofessional service-learning opportunities. Support from cross-professional faculty, chairs, directors, and deans model interprofessional collaboration with colleagues and provide quality mentorship to students. Recent additions of interprofessional competency outcomes to the accreditation standards of many health professions adds impetus to UNE's support of IPE service-learning opportunities (Rubin, Cohen Konrad, Nimmagadda, Scheyet, & Dunn, 2017).

Staff at the jail also went above and beyond to make this project possible and continue to do so. This service-learning opportunity was only possible because of a partnership that involved relationship and trust building over time and the willingness of people from both the jail and the university to bridge institutional cultural divides and engage in our own interprofessional learning. For IPE service-learning to be successful, and for it to have a real impact not only on students but on systems, it must be rooted in a committed relationship between the university and its community partner.

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