Institute for Christian Teaching
Education Department of Seventh-day Adventists

EDUCATING ALLIED HEALTH PROFESSIONALS

IN WORKING TOGETHER

'TO MAKE MAN WHOLE'

by

Ann Ratcliff

Department of Speech-Language
Pathology and Audiology
School of Allied Health Professions
Loma Linda University
Loma Linda, California

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12501 Old Columbia Pike
Silver Spring Md 20904, USA

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INTRODUCTION

Teachers in the allied health professions are preparing students for a wide variety of careers. Three of these disciplines, physical therapy (PT), occupational therapy (OT), and speech-language pathology (SLP) address the habilitation or rehabilitation of individuals with disease, trauma, and/or other handicapping conditions. These professionals are often hired by hospitals and clinics and make up a large part of the rehabilitation staff.

Teachers in the professional training of occupational and physical therapists, and speech pathologists aim to graduate competent practitioners who have demonstrated knowledge of curriculum content by applying it to clinical situations. Yet, teachers at a Christian University such as Loma Linda University find themselves challenged to be different from other institutions--to provide a teaching and learning environment that will set them apart and as Gaebelein (1968, p.13) said "....give learning a frame of reference spacious enough to comprehend all knowledge and dynamic enough to develop moral and spiritual maturity in the midst of a materialistic and violent age." In actuality, this challenge simply reminds those of us at Loma Linda University to live up to the mission statements already written in our college catalogues. The mission of Loma Linda University can be summed up in its motto "To Make Man Whole." Certainly these allied health disciplines, by their very nature serve to make man whole. Scores on national state board examinations reflect that our students are prepared clinically to enter their professions. On the other hand, the increasing number of constituents sending their children to public

schools serve as impetus for us to reevaluate how well we comply with our mission statements.

The word 'allied' means "...connected...joined in alliance..." (Webster's Third International Dictionary 1965, p. 56). This 'connectedness' suggests two ways we as Christian teachers should nourish students beyond just professional competency. First, we are quide charged to model and students to an individual 'connectedness' with Jesus Christ as personal savior. Second, we are charged to model and guide them to connect professionally with fellow medical/health workers in order to counteract professional isolationism which leads to fragmented and less effective service delivery. This paper will explore these two 'connection' issues for teachers in OT, PT, and speech pathology preprofessional training programs using a backdrop of a Christian world view.

A CHRISTIAN WORLD VIEW

All human beings search consciously or unconsciously for the threads that tie life together—the answers to the Who am I? and What am I doing here? questions. This seeking is the working out of a world view (Holmes, 1983; Sire, 1988; Walsh & Middleton, 1984). One answers (or is in the process of answering) these questions as one lives in a society with a specific cultural environment. One's world view is the filter through which one relates to the institutions of culture such as government, health care, education, church, marriage, and the arts. (Blamires, 1978; Holmes, 1983; Walsh & Middleton, 1984).

A Christian world view provides a unique response to the "Who am I?" question and the subsequent behavioral interfaces with societal institutions. Indeed, some have advocated that the Christian world view is the only answer to the decline in civilization (Blamires, 1978; Walsh & Middleton, 1984). Why? Christian orientation answers the "Who am I"? question by claiming we are created in God's image and God still takes an active interest and role in what He has created. When man contemplates "What am I doing here?" the Christian world view reminds him that he was given free choice, disobeyed and subsequently lives in a sin The Christian acknowledges the Fall of man and filled world. recognizes the ever present nature of sin. The remedy for living in this sin filled world is the person of Jesus Christ who reversed the Fall and has provided redemption for all creation. This is the unique "Good News" of a Christian world view.

There is a major problem, however, in today's world. is a gap between living out a Christian world view and living in today's society calling oneself a Christian (Blamires, 1978; Holmes, 1983; Walsh & Middleton, 1984). A Christian world view has potential to transform the world, but it has been short circuited such mindsets as economic greed, and technological by dehumanization (Walsh & Middleton, 1984). Walsh and Middleton (1984, p. 94) chide Christians by asking "Are we embarrassed about our faith because we suspect it is irrelevant to unbelievers? After all, our lives differ little from theirs." Behavioral results of this dualism are articulated by Blamires (1978, p.70)

[&]quot;....the modern Christian, a schizophrenic type who hops in and out of his Christian mentality as the topic of conversation changes from the Bible

to the day's newspaper, or the field of action changes from Christian stewardship to commercial advertising, or the environment changes from the vestry to the office."

The bulk of Christians today simply add faith to vocation instead of letting it transform vocation (Walsh & Middleton, 1984).

Christians who are intent on eschewing this dualism still face a pervasive conflict with the world view of western culture. Many of them end up with a performance-based Christianity. This performance-based motivation is touted in western culture as traits of self-reliance, individualism, and activism (Seamands, 1988). "Putting on" these aspects of western culture while at the same time espousing Christianity may tend to foster feelings of never being able to do enough for God, for ourselves, for others, and for So despite an active, alive Christian faith some society. individuals may have a sense of worthlessness, quilt, phoniness, and problems in intimacy with others (Seamands, 1988). feelings become a pattern of "being" and the most obvious behavioral manifestation of this pattern is low self-esteem (Seamands, 1988). Many Christians often cannot seem to find the proper self-respect in the continuum between "gods and garbage" (Farnsworth, 1985).

How did we come to this performance-based Christianity? In his book, <u>Healing Grace</u>, Seamands (1988) suggests that this predicament is related to the law and grace dichotomy. As Christians today we find that grace, the undeserved, unearnable, and unrepayable gift of God is difficult to accept. Western culture economic mentality tells us that we must work to earn what

we have. It is important for us to recognize this tendancy for performance-based Christianity in ourselves and our students.

As teachers in a Christian setting, our goal should not be limited to preparing professionals with outward manifestations of a Christian lifestyle (i.e., caring, kindness etc.). We need also to prepare clinicians who can actively engage in tasks of their disciplines with thoroughly grounded Christian perspectives enabling them to think and act "Christianly" (Walsh & Middleton, 1984).

So how do we actualize operating with Christian world view perspectives? What real difference does a Christian world view perspective make in training for and working at an allied health profession? Operating with a Christian world view has world transforming potential because it addresses the individual on two planes. First, the vertical plane is the individual's relationship to God. This connectedness is operationalized in a personal theology maintained by, among other things, private devotions. Second, the Christian world view speaks to the horizontal level by pervading relationships of the individual to fellow professionals and clients.

Teachers in a Christian college setting are called to be a model and guide in both of these dimensions. Students should be nurtured in their own connectedness to Christ as personal savior as well as in working out their Christianity in relating to others. The remainder of this paper will suggest some considerations for Christian teachers in OT, PT, and speech as they nurture their students in both the vertical and horizontal dimensions of

Christianity.

IMPLICATIONS OF A CHRISTIAN WORLD VIEW ON ONE'S INDIVIDUAL RELATIONSHIP TO CHRIST

The teacher is the crux of Christian education. There can be no Christian education without Christian teachers (Gaebelein, 1968; Holmes, 1989). Often the attitude of the teacher is the most salient aspect of Christianity that the student may see (Holmes, 1989).

A personal relationship with Jesus Christ is nothing to be mandated. Yet research has shown that modeling and nurture does tend to have an impact on the faith development of others (Benson, 1989). For if a teacher is attempting to walk in the faith, then it is assumed that the faith will be reflected in the life and work of the teacher and thus a model for the student.

How does this show up in the day to day tasks of being a Christian teacher? The following is a list of typical professor activities and questions to consider regarding them. This list is neither exhaustive nor does it beg for only one correct attitude/answer (Cahn, 1986). Each question does however deserve some thought as to how it could be mainfested by a Christian teacher in a specific discipline.

As a Christian teacher in your discipline what is considered 'correct' representation of specific course content? How up-to-date with the content of your discipline is appropriate? Are there ways you can present content that make a Christian world

view salient for your students? Also consider your demeanor/attitude in the classroom? How do you handle being the authority on the subject? there ways you can generalize the concepts you are presenting to the Christian life? Reflect upon your approach to textbook selection? relate the class reading materials to a Christian As a Christian teacher how do you world view? approach the syllabus as a contract with the student? How does your Christian world view color the type of assignments and deadlines you require of the students? Can you create assignments that will integrate Christian world view with course learning? Outside of the content classroom, consider how you handle class meetings and office hours with regard to promptness, duration, flexibility? What is your attitude toward students as individuals? What is your role in the lives of your students? What about examinations? Does your Christian world view color your attitude toward mastery of a concept and ways it should be measured in your discipline? What does a Christian world view tell you about handling dishonesty and academic failure? As a Christian teacher how do you approach grading? Are there opportunities to demonstrate Christian concepts that may arise during the grading process? How does your

Christian world view inform your idea of competition leading to rivalry within and among students?

As a Christian professor, consider your own scholarship and service within your university community. How do you approach research as a contributor and/or a consumer? How does your Christian world view speak to peer review? What is the nature of your academic advising and writing of letters of recommendation? As a Christian teacher how do you participate on committees within your department and university? Finally, how are your attitudes about faculty autonomy and academic freedom driven by your Christian world view?

A Christian world view will speak to each of these issues in a variety of ways depending on the contexts and individuals involved. Perhaps there comes a time when less committee participation and/or fewer office hours is the proper manifestation of a Christian world view in order to balance demands of family. On the other hand, increased time spent out of class with students on various projects may be the working out of a Christian world view. The important thing is our continuing relationship with Jesus Christ and trusting that the manifestation of this relationship in our daily lives can be the motive behind all that we do. By understanding and living a Christian world view, a teacher can indeed have an impact on a student's own faith attitudes.

IMPLICATIONS OF A CHRISTIAN WORLD VIEW FOR RELATIONSHIPS WITH PROFESSIONAL COLLEAGUES AND CLIENTS

Living a Christian world view will by its very nature pervade one's interpersonal relationships. This "horizontal" dimension reflects the second charge we have as Christian teachers. We are called to model and quide relationships with others not only on a personal level but a professional level. As mentioned earlier, occupational, physical and speech therapists make up the bulk of rehabilitation staff in hospital rehabilitation departments. As rehabilitation staff they are called upon to share their expertise with fellow professionals as a part of their own service delivery. Interpersonal relationships in a rehabilitation team setting provide excellent opportunity to embody Christian professionalism. Literature in the allied health professions is beginning to document that an interdisciplinary team practice is a more effective way to deal with the rehabilitation of patients than the multidisciplinary rehabilitation approach (Ivey, Brown, Teske, & Silverman, 1988). Multidisciplinary rehbilitation teams typically meet to report on patient goals and progress from each of the rehabilitation disciplines involved. The interdisciplinary team approach on the other hand emphasizes common goals, cooperative relationships, and coordinated activities of the rehabilitation professionals relative to the patients (Ivey et al, 1988). support of an interdisciplinary team approach, Douglas (1982, p.53) states "The essence of Allied Health should be a collaboration in health care, a sharing of tasks, and support for the professional expertise of each member of the health team." An interdisciplinary rehabilitation team is becoming an increasing necessity now that the number and type of allied health care professionals is increasing and there becomes an increased need to specialize within existing allied health professions (Arlton, 1986; Reiser, 1983). It is as if we have a moral responsibility to understand the duties of colleagues and the corporate responsibility to client wellbeing. As we become more technically specialized, the very nature of our specialization implies the need for broad ethical/social knowledge and time reflecting on that as we do our jobs (Reiser, 1983).

The paradox of allied health education is that while many allied health professionals are expected to work interdependently, they are educated in isolation (Laatsch, Milson, & Zimmer, 1986). There are three chief perpetuators of this paradox. First, there is a need to teach mono-disciplinary professional competencies as standards for separate allied health accrediting bodies. the departmentalized structure in most schools of allied health professions makes any interdisciplinary education difficult to fund and schedule (Raush, Fasser, DeBell, & Nathanson, 1986). Third, Faculty in allied health education tend to perpetuate their own mono-disciplinary training and philosophy (Laatsch et al, 1986). Despite strong reasons for status quo in allied health training, some researchers argue that people who are expected to function in an interdisciplinary environment would be better able to do so if they were educated accordingly (Madsen, Gresch, Petterson, & Taugher, 1988; Infante, Speranza, & Gillespie, 1976).

Educating for interdisciplinary teamwork embodies Christian ideas for two reasons. First, a team approach is more likely to ensure that the ultimate benefactor is the patient. Second, attitude appears to be an important requisite for effective interdisciplinary activity. The specific attitudes that seem to be especially helpful are openness, value, respect, interdependence, and sharing (Edwards, & Hanley, 1989). Interviews of those in interdisciplinary education suggest that attitudes just may be the most salient factor of team life. Members of interdisciplinary teams need to 1.) demonstrate openness and receptivity to ideas other than one's own, 2.) be secure in one's role in order to value and respect other disciplines, 3.) trust others, 4.) focus on optimal patient care, 5.) be willing to share and take responsibility, 6.) be nonpossessive of patients, and 7.) help foster care of colleagues as well as patients (Bassoff, 1983). Laatsch et al (1986, p.41) sum it up well when they say "We believe that the respect and understanding developed between 2 novices in a learning situation will transfer to clinical settings in which each are professionals. This collaboration can ideally lead us to a true team approach to patient care where the ultimate benefactor is the patient."

The issue of interdisciplinary training can be a powerful way to actualize Christian principles in functional clinical instruction. In the speech pathology department of Loma Linda University this can happen in a small but significant way. One way involves the clinic meeting required of all senior and graduate students enrolled in clinical practica. A physical therapy student

and/or occupational student can be invited to participate in the speech pathology clinic meeting staffings. These staffings occur several times a quarter always during the noon hour which may ease scheduling difficulties between the departments. The OT and PT students should have at least a senior standing in order for them to have had time to establish a professional identity (Shepard, Yeo, & McGann, 1985). These meetings will last for only one hour and be concerned with establishing appropriate rehabilitation goals and objectives and progress from simulated, and later real patients. The patient needs will be discussed relative to OT, PT, and speech, language pathology. Suggestions for collaboration and goal coordination may be brought up if appropriate. In addition. this meeting may serve as a safe place for PT, OT, and SLP students to learn about the scope of practice of their colleagues. In these short meetings, it is hoped that the students will be guided to realize the interdependency of practice and technical expertise of other team members (Ivey et al, 1988). These meetings would be ".... opportunities for increased understanding of the role and function of health colleagues, provide a forum for interaction among disciplines, and reaffirm that social or health problems can rarely be solved by a single health discipline. "(Douglas, 1982, p. 55). It is hoped the students would realize like Bassoff (1983 p. 285) that "We are no longer members of one profession educating another but rather students learning together." proponents of a Christian education provide an impetus to provide interdisciplinary education since as Holmes (1985, p. 39) said "...the gospel calls us to treat the whole person. Nothing else will do." Interdisciplinary education is a positive step in this direction.

In summary, this paper has proposed that by embracing a Christian world view we can more effectively comply with the mission of our institution in today's society. In so doing we could be better able to "...see life as a glad and worshipful response to its Maker, and to do this by serving others with the varied resources God provides" (Holmes, 1985, p. 135).

REFERENCE LIST

- Arlton, D. (1986). A paying promotion clinic: Combining client services and student learning. <u>Journal of Allied Health 15</u>. pp.3-10.
- Bassoff, B. (1983). Interdisciplinary education as a facet of health care policy: The impact of attitudinal research.

 <u>Journal of Allied Health</u>. pp.280-286.
- Benson, P., Factors That Influence the Faith Development of Youth, Paper presented at the Institute of Christian College Teaching, Lincoln, Ne., June 1989.
- Blamires, H. (1978). <u>The Christian Mind: How Should A Christian Think?</u>. Servant Books: Ann Arbor.
- Cahn, S. M. (1986). <u>Saints and Scamps: Ethics in Academia</u>. Rowman and Littlefield: Totowa, N. J.
- Douglas, P. (1982). An interdisciplinary model for graduate education in allied health. <u>Journal of Allied Health</u>, pp.53-58.
- Edwards, S., & Hanley, J., (1989). Interdisciplinary activity between occupational therapists and speech language pathologists. <u>Journal of Allied Health</u>, pp. 375-387.
- Farnsworth, K. E., (1989). Furthering the Kingdom in Psychology, pp. 81-103, in A. Holmes (Ed.), <u>The Idea of a Christian College</u>. InterVArsity Press: Downers Grove, Il.
- Holmes, A. (1983). <u>Contours of a World View</u>. InterVarsity Press: Downers Grove, Il.
- Holmes, A. (1985). The Making of a Christian Mind: A Christian World View and the Academic Enterprise. A. Holmes (Ed.), InterVarsity Press: Downers Grove, Il.
- Holmes, A. (1989). <u>The Idea of a Christian College</u>. W. B. Erdmans: Grand Rapids, Mi.
- Infante, M., & Speranza, K., & Gillespie, P., (1976). An interdisciplinary approach to the education of health professional students. <u>Journal of Allied Health</u>. pp.13-22.
- Ivey, S., & Brown, K., & Teske, Y., Slilverman, D. (1987). A model for teaching about interdisciplinary practice in health care settings. <u>Journal of Allied Health</u>. pp.189-195.
- Laatsch, L., Milson, L., & Zimmer, S., (1986). Use of interdisciplinary education to foster familiarization among health professionals. <u>Journal of Allied Health</u>. pp.33-42.

- Madsen, M., Gresch, A., Petterson, B., & Taugher, M., (1988). An interdisciplinary clinic for neurologically impaired adults: A pilot project for educating students. <u>Journal of Allied Health</u>. pp. 135-141.
- Reiser, S., (1983). Technology, specialization, and the allied health professions. <u>Journal of Allied Health</u>. pp. 177-182.
- Roush, R., Fasser, C. E., DeBell, R., & Nathanson, J., (1986). The training of multicompetent allied health professionals using a combined fields method. <u>Journal of Allied Health</u>. pp.23-31.
- Seamands, D. (1988). Healing Grace. Victor Books: Wheaton, Il.
- Shepard, K., Yeo, G., & Mc Gann, L., (1985). Successful components of interdisciplinary education. <u>Journal of Allied Health</u>. pp. 297-303.
- Sire, J. W., From the Top Down: A Christian Basis for Human Knowledge. Paper presented at the Institute for Christian College Teaching, Lincoln, Ne., June 1988.
- Sire, J. W., (1988). <u>The Universe Next Door</u>. InterVarsity Press: Downers Grove, Il.
- Walsh, B., and Middleton, J. (1984). <u>The Transforming Vision:</u>
 <u>Shaping a Christian World View</u>. InterVarsity Press: Downers Grove, Il.
- Webster's Third International Dictionary (Unabridged), G. and C. Merriam Co.: Springfield, Ma., 1965.

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Book Reviews

Seamands, David, (1988). Healing Grace. Victor Books, Wheaton, Il.

Healing Grace addresses Christians who live in a performance based world and who have allowed that "performance" mentality to permeate their Christian understanding. Seamands advises that operating with a performance based Christianity typically fosters feelings of never being able to do enough for God, for ourselves, for others, and for society. So despite an alive, active Christian faith, some individuals may have a sense of worthlessness, guilt, phoniness, and problems in intimacy with The most obvious behavioral manifestation of this pattern is low self esteem. Seamands suggests that this predicament is related to the law and grace dichotomy. Christians today we find that grace, the undeserved, unearnable, and unrepayable gift of God is difficult to accept. Seamands, a long time Methodist minister uses many examples from his counseling practice to help remind us of the grace of God and how we can live in the world as grace filled Christians. (Ann Ratcliff)

Cahn, S. M. (1986). <u>Saints and Scamps: Ethics in Academia</u>. Rowman & Littlefield: Totowa, N. J.

This book is a readable discussion of the ethical responsibilities of university faculty members. Included are issues regarding grading, committee membership, faculty dismissals, lecturing, research, and graduate education. Cahn outlines the duties and standards of professorial conduct from teaching to tenure review. He illustrates his points with anecdotes drawn from many years of teaching. The issues in this book, while not presented with any specific Christian point of reference, may provide a number of ideas to be used as a springboard for faculty discussions and workshops. The issues discussed would be appropriate to stimulate how Christian faculty could integrate their faith in their regular professional duties. (Ann Ratcliff)

Johnson, D. W., & Johnson, R. T., (1987). <u>Learning Together and Alone</u>. Englewood Cliffs, N. J.: Simon and Schuster.

This book was written by two brothers-one a social psychologist and the other a teacher educator. These men advocate cooperation as the appropriate goal structure in most instructional situations. Their book, while geared to teaching younger children, outlines three goal structures-individualistic, competitive, and cooperative. In advocating

cooperative/collaborative skills, the authors discuss communication skills, conflict resolution skills, trust, and leadership skills. There is not a distinct Christian viewpoint however the authors present a good case for trust, communication and positive interdependence which is compatible with Christian principles. (Ann Ratcliff)

Wurman, R. S., (1989). <u>Information Anxiety</u>. New York: Doubleday.

The premise of this book is that information anxiety is what happens to us when we find information doesn't tell us what we want or need to know. Whole industries are created that transmit and store information but do not help us understand it. The author addresses ways to prioritize information, deal with error, and tells us that it is ok not to know everything. He advocates the integration of knowledge among disciplines and suggests that our increased specialization in our universities is causing us to confuse the means with the ends of our educational system and thus cause splintering in attempts to educate. This book is not distinctly Christian but it does give us lots to think about as we move into the new decade. Wurman's ideas about coping with failure and dealing with information anxiety can serve as a springboard for discussion groups dealing with study skills. Many of his ideas are compatible with Christian principles. Ratcliff)