

Chapter 9

Exploratory Approaches to Service Learning Within a University's Student-Run Free Clinic Program

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ABSTRACT

University-administered student run free clinics provide health care and enabling services to community members experiencing limited access to care, simultaneously offering direct educational experiences to students interested in careers in medicine. Programs vary in size and scope and are dependent on university and community commitment that considers the needs of the targeted patient population. This descriptive chapter illustrates Stanford University's Cardinal Free Clinic's inclusion of critical service-learning pedagogy within student didactics and experiential learning. The chapter is shared from an administrator's perspective to benefit higher education institutions considering establishing or expanding their SRFC program. While the environment and social context are essential to understand, the inclusion of community cultural wealth awareness, social identity exploration, and active self-reflection within the program will be highlighted. This chapter may benefit administrators interested in including elements of critical service-learning pedagogy in their programs.

INTRODUCTION

Student-run free clinics (SRFC) create opportunities for student clinical and service-learning experiences and are considered a pipeline to careers in primary care and/or community medicine. While SRFC clinic locations are considered medical student service-learning sites, they are led by a social justice perspective that seeks to decrease social health inequity. Moskowitz et al. (2006) described the increase in underserved urban communities and the rise in the unhoused population that had necessitated more

DOI: 10.4018/979-8-3693-2133-1.ch009

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health professionals in underserved areas that, unfortunately, have created a disparity between the level of healthcare need and a sufficient healthcare professional workforce. The authors asserted “One such exposure to underserved populations can be accomplished through service learning in student-run health clinics; these clinics serve as an opportunity for health sciences students to use their developing clinical skills for the benefit of underserved populations” (Moskowitz et al., 2006, p.255). Since 1990, *Stanford University’s* School of Medicine’s *Cardinal Free Clinics* (CFC) program (Cardinal Free Clinics, n.d.) has operated student-run free clinics located in the San Francisco Bay Area within communities similarly described by Moskowitz.

The history of the CFC program includes steady growth while responding to the needs of the local community and targeted patient population. This chapter will describe how *critical service-learning pedagogy* is embedded in the CFCs with the intention of how student volunteers self-reflect about their social identities’ influence in their *didactic* and *experiential* clinic experiences. Mitchell’s (2008) review of the literature differentiates between traditional and critical service learning whereby, critical service learning includes the presence of a social change orientation, working to redistribute power, and developing authentic relationships. While the ability and form of service-learning approaches is dependent on the institution, community partners, and social context the CFC program’s orientation will be described as actively remaining cognizant of *heroic discourse* and savior complex leadership (Kim & Mauldin, 2022) in which service learning program participants interpret their voluntarism as heroic that will save the community they are serving. *Community cultural wealth* typology (Yosso, 2005) negates this discourse indicating that marginalized and underrepresented communities possess several forms of capital that should be included in frames of thought. Student exploration of community cultural wealth typologies (Yosso, 2005) and *social identity* (Tajfel, 1974) within an SRFC program produces opportunities for active student reflection as they participate in the CFC program.

History of the Cardinal Free Clinics

Stanford University is a private, nonprofit university located in the San Francisco Bay Area, California (Stanford University, n.d.). The university attracts international and domestic students from the United States and is one of the most competitive universities in the nation to be offered acceptance. The university is located in an affluent suburban area, but minutes away from some of the lowest socioeconomic and underserved communities in the state. The CFC program was founded at Stanford University.

Since 1990, the mission of the Cardinal Free Clinics is to provide culturally appropriate, high-quality, transitional medical care for an underserved patient population and to educate and empower a new generation of healthcare leaders to proactively address health disparities and improve access to care. The CFC was established by a medical student as part of their medical student scholar’s project. The student rallied their peers to deliver basic general medical care to underserved residents in the local area who otherwise might not have access. They envisioned student and physician faculty volunteers providing no-cost general medical care services while obtaining experiential learning to supplement their medical school didactic curriculum. The scholarly project was accepted and funded for a year-long planning process. Simultaneously, a fellow student received funding from the same scholars’ program to conduct a needs assessment of services at a potential clinic service location. The student wrote policies and procedures, developed a coordinators’ handbook, and created job descriptions for student volunteer positions. They received equipment donations from a recently retired physician who had closed their practice. This became the start of the original clinic site and what is now one of two student-run free

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