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Bridging Education and Service Learning Through Palliative Care

Jamie Borchardt

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ABSTRACT

Service learning can bridge the gap between traditional and transformational learning, as students are able to relate the course terminology directly to field experience. This project was set up to determine if volunteering for a semester at Hospice had any effect on emotional intelligence and positivity. A paired samples t-test compared differences in pre- and post-test scores on the Positivity Scale (PS) and the Schutte Self-Report Emotional Intelligence Test (SSEIT). The PS revealed a significant difference in pre- and post-test surveys: $t(5)=-2.4, p=.03$.

Keywords: transformational learning, volunteering, college classroom, hospice

Service learning (SL) is a way for students to apply what they are learning in the classroom to a particular academic objective. This experience, if done correctly, can enhance the learner's experience, and can contribute to community service and well-being. Service learning has been shown to increase retention, probability of success, emotional intelligence, social awareness and academic competencies (Geller et al., 2016; Manring, 2012).

According to Munter (2002) students need to develop an active community engagement in order to understand the needs of the community and the inequities of social class. With the growing diversity of the United States, universities need to integrate more opportunities for students to engage in interactive collaboration with individuals outside of their typical day-to-day interactions and communications (Munter, 2002).

Employers state that recent college graduates come into the workforce with the textbook knowledge, but not with the know-how to work with individuals in a variety of settings. In order to facilitate this process, service learning aids in bridging the gap between traditional and transformational learning. Another area of concern for employers is a graduate's emotional or social

intelligence, which is the ability to be able to understand emotions displayed by others and regulate one's own emotional responses (Mayer & Salovey, 1993). According to McKenzie et al. (2019), "emotional intelligence can be practiced and developed over time" (p. 675). Emotional management can include dealing with difficult clients, working with others, and general working conditions. However, there may be social inequities that further burden groups like social class, gender, and ethnicity (McKenzie et al., 2019). Studies on service-learning opportunities have shown that students who engage in projects that increase emotional intelligence, also show an increase in academic performance (Vandervoort, 2006; Lundy, 2007). This has been shown in both primary and secondary education. Self-awareness and interpersonal and intrapersonal skills assist in development of emotional awareness (Vandervoort, 2006). Lundy (2007) found that students had significantly higher scores on exams if they were involved in a service-learning project compared to those who did an interview or research project. In addition, these students also showed increased empathy.

Positivity is associated with a multitude of items related to volunteering.

Service learning provides opportunities for the student to develop a positive outlook on life, and foster emotional and social intelligence. Service learning or volunteering in outside organizations related to the field are often linked with increased happiness, as it often leads to a greater development of empathy and positive social awareness (Geller et al., 2016). According to Caxton-Oldfield and Jones (2013), volunteering is often attributed to an activity that makes a person feel good about themselves (p. 467). It is something that has been studied in depth at the palliative care level, due to the amount of time and money that goes into training a volunteer. Psychology is a very broad field, in which future employees may seek out jobs dealing with the public in a variety of capacities. Increasing emotional intelligence is correlated with positivity in job and life satisfaction. When a person is self-aware, they are more likely to choose appropriate career paths and relationships that meet their personal needs (Vandervoort, 2006).

For purposes of this research, students were asked to volunteer with Hospice, so each learning goal below is related to the Hospice experience. The American Psychological Association has identified a set of learning goals that provide the framework for the completion of a successful undergraduate program. The goals are: A knowledge base in psychology, scientific inquiry and critical thinking, ethical and social responsibility in a diverse world, communication and professional development (APA, 2013). Service learning and volunteering at community locations can help address each one of the above goals. The knowledge base in psychology is related to understanding that the “students should demonstrate fundamental knowledge and comprehension of major concepts, theoretical perspectives, historical trends and empirical findings...” (APA, 2013, p. 17). Students who apply what they are learning in the classroom to a service-learning experience are likely to expand on their understanding of the concepts and terminology within the textbook content. The

second goal, scientific inquiry and critical thinking, is related to students’ basic understanding of interpretation and application of behavior and understanding research. Students who volunteer are exposed to these behaviors first-hand. For example, if a student were to volunteer with Hospice, when learning about Elizabeth Kübler-Ross’s death and dying model, he or she could experience the client’s stages of grief instead of just reading about and researching these items. Goal three is related to ethical and social responsibility in a diverse world. A student who works with Hospice will learn how to deal with difficult situations related to death, not only with the patient but with the family and staff assigned to work with the patient. They must also learn to work with individuals who are often outside of their own age and social class, as they work with the individual, the family, the Chaplain, nurses, and doctors. These students get to experience a variety of behaviors and multicultural differences within this population. In addition, these students must learn how to work within the laws of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) associated with the patient Privacy Act. The fourth goal is related to communication. This is an important factor, as the students are put into difficult situations with someone they have never met prior to this experience. They must learn how to communicate with an individual who is in the final stages of life, and is going through a range of emotions. In addition, the students must have close contact with the Hospice volunteer coordinator, the nurses, and any individual related to the patient’s care team. Finally, the last goal is professional development. This is related to developing skills that will foster future success in employment or graduate school. Training, experience, and the ability to deal with difficult circumstances are extremely beneficial skills that students gain while working with Hospice.

For the purposes of this research study, graduate students in a Social Psychological Processes course were given a semester-long

assignment related to service learning and volunteering. Students were required to use two textbooks in this course. One was a social psychology textbook, to facilitate the understanding of social psychology terminology. The second textbook was a social-problems service-learning textbook. The social problems book facilitated understanding of social inequities and fostering service learning in a sociological perspective. These students were required to pair what they were learning in the course with outside experiences in a real-world setting. Students in the course were required to volunteer at a Hospice location of their choice; however, most worked for one particular Hospice company given the proximity to their relative living location. The course was online, with requirements to volunteer on a weekly basis. Students were contacted upon registering for the course to discuss the requirements of the volunteer process, as this would be a majority of their grade in the course. Discussion boards played a big part in the development of course engagement ([see Appendix](#)). Students were asked to relate the volunteer experience directly to the social psychology textbook information. The discussion board postings and number of hours completed at the volunteer site were part of the grade in the course, so ability to connect the service-learning project to course content was assessed in each assignment. In addition, this connected students to each other in an online environment. These students were asked to keep all information confidential by removing patient information and any form of identification. Students were required to respond to other students, thus creating a community of volunteers among the group. Some discussion boards required video uploads, further engaging students in the practice of discussing difficult situations and directly applying them to coursework while facilitating communication skills. Prior to offering services to Hospice, the researcher determined best practices for providing care to those who are terminally ill, and found that positions like this can often take a toll on the

volunteer. According to Van Campen, de Boer, and Iedema (2013), working 1-5 hours per week is the most beneficial for volunteers in palliative care. Engaging in this amount of activity is beneficial for the person's satisfaction ratings as well as their retention with the organization (Claxton-Oldfield & Jones, 2013). It is for this reason that the student volunteers were asked to commit to 3 hours per week, which is the same amount of time that they would have dedicated to a face-to-face course meeting.

METHODS

Participants

A total of six graduate students participated in the service-learning and volunteer experience from start to finish. The course started out with 12 students, and six individuals completed the course at the end of the semester. Some students dropped the course in the very beginning upon finding out about the mandatory volunteer requirements in the course. All students were part of an online Social Psychological Processes course within the Department of Psychological Sciences. Students were required to volunteer with Hospice for a minimum of 3 hours per week during the semester. Five females and one male participated in the final process, and gave consent to participate in the research process. Students did not have to complete the survey, but all chose to do so. In order to compare pre- and post-test surveys, students who did not finish the course were not included in this research. The age of the participants ranged from 22-29, with a mean age of 24. Since this was an online course, participants lived in a variety of locations across central Texas.

Materials

The course took place online, so participants had to have access to a Blackboard learning platform to complete the exams and discussion board postings ([see Appendix](#) for discussion board prompts). Two textbooks were used for this course: *Social Problems: A Service Learning Approach* by

Corey Dolgon and Chris Baker, and a free open access textbook called *Principles of Social Psychology*.

The Schutte Self-Report Emotional Intelligence Test (SSEIT) was used in order to measure emotional intelligence. There are four sub-scales including emotion perception, utilizing emotions, managing self-relevant emotions, and managing others' emotions. This is a 33-item, 5-point Likert scale that allows individuals to self-report from 1 (strongly agree) to 5 (strongly disagree). Each sub-scale is scored for a grand total score, which can range from 33-165. The higher the score, the higher the emotional intelligence.

The Positivity Scale (PS) was utilized to measure positivity among students in the course. The PS is a 15-item, 5-point Likert scale that allows individuals to choose between the numbers of 0 (never agree) and 4 (always agree). Questions related to the PS are associated with personal optimism and external security, and scores can range from 0-60. A higher score indicates a higher positivity rating.

Procedure

This project was associated with an Engaged Scholars program, which is supported by the university. The realm of the project encompasses a plan to support faculty in developing overlap between the academia and a community project that serves a population in need. Hospice was a location that was determined to have a high need for support, as they do not have a lot of volunteers available to support the terminally ill population. This Hospice location had reached out to the university in an attempt to gain volunteer support. Faculty applicants could apply to the Engaged Scholars program or be recommended. If numerous recommendations or applications were received, the College level Dean would recommend the final applicant. Participants attended six informational workshops during the fall semester in preparation for the project. During the spring semester, the scholars had to implement the

project and present the final results at the Engaged Scholars Academy showcase.

To prepare for a non-traditional course setup, emails were sent to the students one month prior to the start of the semester. This informational email was sent to prepare the students for the service-learning and volunteer experience expectations. The main goal of the email was to encourage completion of the paperwork and the background check process so that volunteer hours could begin during the first week of classes.

Students had to complete a background check, volunteer training, and medical testing to make sure they were a good fit for the organization. Once all background checks were completed, students were given an identification badge to check into the facilities that they would be volunteering with. Patients were selected by Hospice if they were in need of additional human interaction, as these patients were determined to have little to no visitation from family or friends. At the time, the main Hospice organization that we worked with had two volunteers for three large counties, and approximately 30 people were in need of volunteer services.

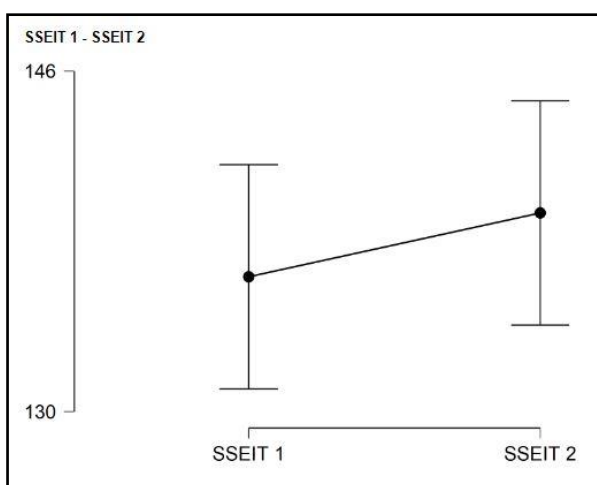
This study set out to measure positivity and emotional intelligence with volunteers at Hospice in a pre- and post-test survey. The pre-test surveys were sent out during the beginning of the spring semester to the students. The pre-test survey consisted of a few demographic questions, such as age, gender, and past volunteer experience. In addition, students were asked to take the SSEIT and the PS. The exact same post-test surveys were sent out at the end of the semester upon the completion of the students' Hospice experience. This process allowed the researcher to assess differences in the SSEIT and PS over the course of a 4.5-month period.

RESULTS

A paired samples t-test was used to compare the mean differences in the pre- and post-test survey scores on the PS and SSEIT. With the SSEIT, participants scored slightly

higher on the post-test survey ($M=139.33$, $SD=11.94$) than on the pre-test survey ($M=136.33$, $SD=12.19$). Cohen's effect size value ($d=0.42$) suggested a small to moderate significance 95% CI $[-\infty, -0.30]$. The assumption of normality was not violated, as assessed by Shapiro-Wilk's test ($p=0.713$). Although scores slightly increased, there were no significant differences in the pre- and post-test survey results on the SSEIT, $t(5)=-1.035$, $p=.17$ (see Figure 1).

Figure 1. SSEIT Pre- and Post-test



The Positivity Scale revealed that participants scored higher on the post-test survey ($M=48.16$, $SD=3.06$) than on the pre-test survey ($M=46.66$, $SD=3.20$). Cohen's effect size value ($d=0.98$) suggested a large significance and high practical significance, 95% CI $[-\infty, -0.11]$. The assumption of normality was not violated, as assessed by Shapiro-Wilk's test ($p=0.389$). There was a significant difference in the pre- and post-test survey results on the Positivity Scale, $t(5)=2.4$, $p=.03$ (see Figure 2).

A Bayesian paired samples t-test was also used to quantify the evidence for the hypothesis that participants scored higher on the post-test SSEIT and Positivity Scale than on the pre-test. Items were placed into the program called *Just Another Statistics Program* (JASP) for computation. For the

Positivity Scale, a Bayes factor of $B_{10}=3.5$ indicates that the observed data are 3.5 times more likely under the alternative hypothesis than the null hypothesis (see Figure 3). According to the Bayesian classification scheme, this constitutes moderate evidence for the changes related to the pre- and post-test survey on the Positivity Scale (Jeffreys, 1961).

For the SSEIT, a Bayes factor of $B_{10}=0.90$ indicates that the observed data shows slight evidence for the null hypothesis.

Figure 2. Positivity Pre- and Post-test

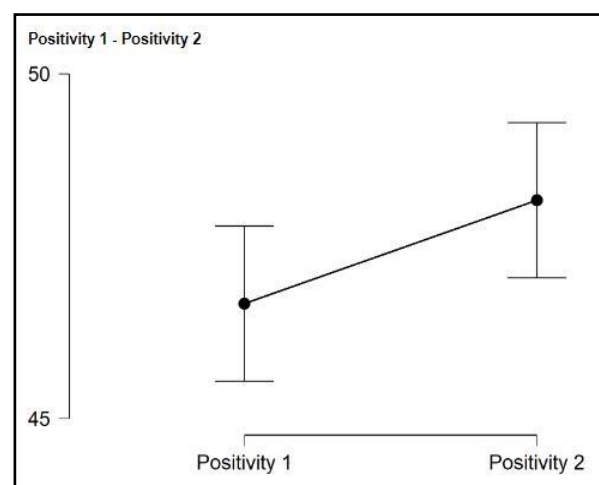
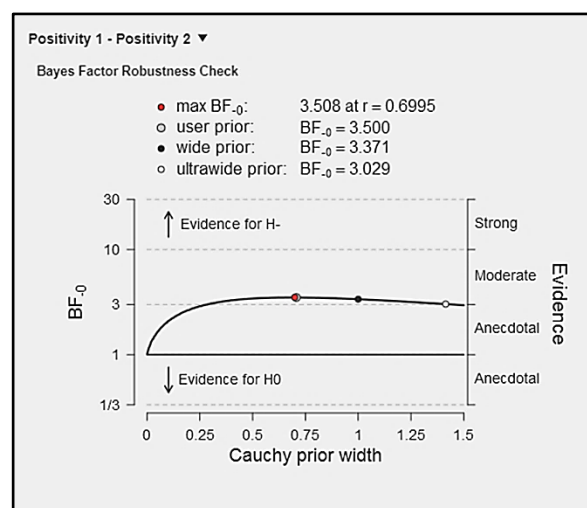


Figure 3. Bayes Inferential Plot for Positivity Scale



DISCUSSION

Positivity and SSEIT scores were relatively high prior to beginning the service-learning project. This may be due to the fact that these were graduate students, or other factors outside of the realm of this survey. The Positivity Scale ranges from 0-60, and our students had a mean score of 46.66 on the pre-test survey. The SSEIT has a range from 33-165, and our students had a mean score of 136.33 on the pre-test survey. This was slightly higher than the normed data mean ($M=133.6$, $SD=12.83$) (Borchert, 2018).

Emotional intelligence can be beneficial in academia, personal life, and work-related areas. Students were exposed to relationship building opportunities with a terminally ill patient, and conversations were had with doctors, nurses, staff, the volunteer coordinator, and chaplain. The volunteer coordinator had forms for students to fill out each week to evaluate the patient's overall mood and needs. These activities directly related to emotional situations, and patient and personal goals. Students were asked what they would like to gain from this, and they were asked to determine what the patient would like to gain from the experience. At the heart of emotional intelligence lies the potential for growth within the individual. According to Vandervoort (2006), this facilitates interpersonal and intrapersonal intelligence, which ties back to the APA Psychology domains mentioned above and future decision-making.

Discussion board postings were a large part of the service-learning piece of the course. A lot of classes incorporate volunteering, but students need to see the connection between the textbook and the experience. Students in the Social Psychological Processes course had to create discussion board postings, respond to their peers, and engage in video discussions. In order to bridge the connection between the items that students were learning in the course to the volunteer and service-learning piece, regular discussion board postings were assessed during the course of the semester ([see Appendix](#)). Each of the discussion board

topics pulled in terminology from the social psychology textbook. Items such as altruism, self-concern, social influence, reciprocal altruism, general adaptation, fundamental attribution error, and behaviors and perceptions were explored in an atypical way. Normally, students will simply use course materials such as textbooks or supplement articles to pull in additional examples, but these students were able to learn about terminology and apply it directly to the Hospice situation. In addition, their textbook, *Social Problems: A Service Learning Approach*, provided a great way to incorporate a sociological perspective related to world problems. This was beneficial in addressing social inequities such as poverty, inequality, race, gender, and sexuality, among others.

Students can certainly benefit from a short-term service-learning experience in more ways than what the surveys and discussion boards have captured. According to Lundy (2007), students develop increased empathy in service-learning projects. One of the main reasons to require a service-learning project is to give students the opportunity to acquire marketable skills. Students who volunteer with Hospice are exposed to a variety of difficult situations, and therefore gain experience in an area that may help prepare them for social and behavioral employment settings. Psychology in itself is extremely broad, so engaging in activities of this nature is absolutely necessary. When faculty require service learning, it facilitates growth in both the academic and personal realm (Vandervoort, 2006). Students are not likely to seek out these opportunities, and sometimes a course requirement is what they need to make the connection between the textbook and the real-world setting. Some students will continue to volunteer at the required location, while others may have learned that they do not want to work in that particular setting. Either way, both are valuable insights for future career aspirations.

There were quite a few limitations in this study that future research needs to address. First, the number of students completing this

project was very small. The project started out with a larger number of students, and dropped to half of the initial enrollment for the course. This number is not something that could have been modified; however, it is still beneficial to the current literature in service learning. The diversity of the population needs to be expanded, as this included only graduate students and had one male participant. It would be extremely valuable to work with an Introduction to Psychology course with a wide variety of majors, and do a comparison study between majors outside of Psychology. One anticipated problem might arise with commitment to the profession if the student was a freshman. This study focused on graduate students, because in a profession like Hospice, consistency and commitment are a key factor for an individual who is terminally ill. In addition, even in the graduate level course, half of the original students dropped the course, and this could be associated with the volunteer location at Hospice. The next project will include areas outside of Hospice, although students will continue to volunteer in locations that offer difficult situations to work with, as this was the purpose of the project. The overall goal with this particular Engaged Scholars project was to prepare students for workforce programs that deal with difficult situations on a daily basis, make students aware of community needs, and allow them to connect the terminology of the textbook with a service-learning piece. Overall, this project was able to provide students the opportunity to deal with many areas related to a variety of these goals, which was indeed a success.

CONCLUSION

This study found that both the volunteer and the Hospice patient can teach and learn from each other. These students were able to develop an awareness of social responsibility in the field, and an awareness of organizations in which they could potentially work with one day. In addition, the students were able to provide a much-needed service to

individuals who were transitioning into the final stage of life.

Overall, positivity and emotional intelligence increased from pre- and post-test surveys. The biggest takeaway from this is the experience that students gain from volunteering at a location where difficult situations may arise. Exposure to nurses, doctors, chaplains, families and Hospice staff teach students communication techniques, and give them new perspectives working with a vast group of professionals. In addition, student learning soars to a new level when they are exposed to a service-learning project that incorporates their textbook with real world experiences. Universities should consider offering more coursework like this to increase marketable skills related to service-oriented majors. In the future, it would be very helpful to increase the volunteer numbers and conduct a larger scale project.

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DECLARATIONS

Funding and Competing Interests

There are no financial or competing interests associated with this research, nor was this research funded. There was a small stipend paid upon completion of the Engaged Scholars project.

Ethics Declarations

This project was approved under the Institutional Review Board, and all participants gave consent to participate in the research. There were no conflicts of interest associated with the research.

Author information

This research project was completed solely by JB.

AUTHOR NOTE

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APPENDIX

[\(Click here to return to original text.\)](#)**Discussion Board (DB) Postings****DB 1****Part 1: About Me**

This is an online class, and because I will not be able to see everyone face-to-face, I want to know a little more about you. Please tell me a little about yourself. What made you come to graduate school? What do you see yourself doing in the future? What are some interesting things about you?

Part 2: Volunteering

Did you know that employers have stated that although students have an education, they often lack the emotional know-how to handle a serious situation? I was proof of that experience. I was 21 years old with a Psychology degree, and had taken a job as a case manager with MHMR (that is what it was called at the time). I worked with individuals with schizophrenia, dementia, anxiety, depression, bipolar disorder, intellectual disabilities and borderline personality disorder (among others). I had read all about these disorders, and I was ready to tackle the world of mental health issues. My first crisis case was at the emergency room about a week after I started. A person had attempted suicide, and it was far more than I had ever anticipated seeing at 21. This encompassed my “on call” life for the next year, as I was the “suicide” qualified mental health professional (QMHP). I was not prepared for the cases that I worked with, including: serious mental health issues that led to the removal of personal rights due to safety risks, numerous emergency room and home visits. Learning how to work with police, doctors, nurses, judges, and being in an out of courtrooms. As I look back on that time, I now know that it is imperative to be exposed to these difficult situations early on, to prepare for these cases. If anyone would like more information on the above items, I am happy to make an appointment with you to discuss this in further detail. My situation above, is the reason that I am requiring you to volunteer at Hospice. I have no doubt that you will experience some tough things, but you may also walk away knowing that you did a lot of good. Think of it this way, a future employer will see this as a level of determination and a strength, and know that very few people will have this experience on their future resume or curriculum vitae. As you complete this course, think of it as a learning experience, and as you complete these questions, think of the areas that you might need more support with.

1. Have you ever volunteered before? If so, what was it like, what did you take away from the experience? How long did you volunteer?
2. What do you know about Hospice? I want you to go to the Hospice webpage and read their information, and comment using their website as a reference. If you have not done so already, you will need to go to the “Join the Team” tab and begin the process of

volunteering. On the application page, please state that you are a student of mine, and that you are volunteering for my class, this will allow the Hospice coordinator to fill me in on the information regarding your placement.

3. What kind of things do you think will relate to the area of Social Psychology and Hospice? (I want you to use at least 2 references to relate the volunteer experience with Hospice). Do you have any concerns about volunteering, if so what are they?

DB 2

Part 1-Social Psychology textbook

From the online Social Psychology textbook, consider the following terms: Social influence, self-concern and reciprocal altruism. Read the following articles (which should be free for you to access, let me know if you have trouble pulling up the free version):

<http://journals.sagepub.com/doi/pdf/10.1080/00986280709336644> and

http://journals.sagepub.com/doi/pdf/10.1207/S15328023TOP2801_02 and discuss how each one of the terms above could potentially relate to or influence the information presented in these articles.

You should use the online textbook and these two articles as references for part one.

Part 2-Dolgon textbook

In the Dolgon textbook, you should have read about poverty, inequality and homelessness in chapter 2. I want you to find outside resources that discuss the following issues: poverty and homelessness among children and the elderly. How are we addressing this issue in the U.S.? What percentage of children and the elderly face these problems? After reading about these areas in your textbook, and in your outside sources, what is something that surprised you? You will need to use your textbook and at least two outside references for part two.

Part 3-Volunteering

Please tell me about your volunteer experience this week (use discretion when you are reporting about this experience, and keep in mind that we need to follow the regulations of HIPAA). What is a preconceived idea that you originally had about Hospice that has changed after volunteering during week one? Use your textbook to explain how reciprocal altruism plays into this experience this week. What kinds of things can you see that you are accomplishing through volunteering for this organization, specifically, what need are you fulfilling for the company of Hospice, and for the individual you are serving?

DB 3**Part 1- Video documentary**

This week you will need to complete a video documentary and post the link to the discussion board. This will be a short reflection related to the following items: Describe a goal and outcome that you want to achieve with the volunteer process. What skills are you bringing to the table after volunteering a few times? What has your experience been over the last few weeks in volunteering with Hospice? This should be no more than five minutes in length. You can upload a video link to YouTube, and post the link to our site. Please make this private, and do not include any identifying information in the video. You need to plan ahead, and do not wait until the last minute to upload this video, as they often take a lot of time to upload.

Part 2-Social Psychology textbook

According to your Social Psychology text, describe the stages associated with general adaptation syndrome. In describing these stages, how would those working with the patient (nurses, doctors, staff, volunteers and family members) be able to self-regulate and deal with emotional situations that put stress on the body? What types of physiological and emotional impacts can long-term stress do to the body? You do not have to describe the effect associated with each person, rather generalize these and explain the overall impact.

Part 3-Social Problems textbook and two outside articles

You will need to address one concept in chapter 4 of the Dolgon text and incorporate how volunteering and community service play into changing stereotypes and overcoming the unknown. How does incorporating service create social ties within the community? You will need to use the articles below, as well as the Dolgon text to complete this section.

Read the following articles to complete part 3:

Gilster, M. E. (2012). Comparing neighborhood-focused activism and volunteerism: Psychological well-being and social connectedness. *Journal of Community Psychology* 40(7), 769-784. doi:10.1002/jcop.20528 URL: <http://eds.a.ebscohost.com/ehost/detail/detail?vid=2&sid=756e2f56-1a70-4693-8194299abde9acd8%40sessionmgr4009&bdata=JnNpdGU9ZW9ZWhvc3Qt bGl2ZQ%3d%3d#AN=2012-21603-001&db=psyh>

Bromnick, R., Horowitz, A., & Shepherd, D. (2012). The benefits of volunteering for psychology students. *Psychology Teaching Review* 18(2), 47-51. URL: <http://eds.b.ebscohost.com/ehost/detail/detail?vid=3&sid=190cfe1a-430c-44aa-a405-8c1d86ed2033%40sessionmgr101&bdata=JnNpdGU9ZW9ZWhvc3Qt bGl2ZQ%3d%3d#AN=2012-28654-008&db=psyh>

DB 4

Part 1-Social Psychology

These questions came straight from the Social Psychology textbook, so all of the terms in questions 1-3 can be found there. Please use your textbook as a reference in this first section.

1. What is casual attribution? Describe a time when you used causal attribution to make an inference about another person's personality. What was the outcome of the attributional process? Do you think the attribution was accurate?
2. Consider a time when you made an attribution about your own success or failure. How did your analysis of the situation relate to Weiner's ideas about these processes?
3. What is the fundamental attribution error? Describe a time when you engaged in the fundamental attribution error, the actor-observer difference, or a self-serving attribution. What was the outcome of the error?

Part 2-Social Psychology paired with Hospice

In the past two chapters of the Social Psychology textbook, you have read about attitudes, behaviors and perceptions. Now that you have been working with Hospice and have read up on all of these above items, what are your own perspectives and society's perspective regarding the following items: 1. The right to die, physician-assisted suicide; 2. The perception of suicide among the terminally ill.

You will need to use at least two outside articles to support your statements. There are a few states that allow physician-assisted suicide, please read up on this information.

DB 5

This week, you were asked to watch the "When Kids Get Life" video on the PBS website. I would like to have your opinion on the documentary first, followed by facts related to your text and outside sources.

Part 1

Discuss your opinion of the life in prison rule for those under the age of 18 in the state of Colorado. I would like specific details regarding the five cases; so that I know you watched the entire documentary. Did you know that this type of punishment took place? When did this take effect? Has this law ended, if so when? You will need to use at least one outside source for this section.

Part 2

Pick something in your Dolgon text related to deviance, crime and building communities to discuss in relation to the video you just watched. You will need to cite your textbook and explain in depth the area that you are describing within the text.

Part 3

How could community involvement, engagement and positive adult support change the community as a whole? What kinds of things do communities do in order to lower the crime rate? You will need at least two sources and two examples. I want these to be things that are outside of the norm....think outside of the box.

How does your volunteer experience at Hospice play into this? Specifically, how could volunteering reduce crime and deviance?

DB 6

Part 1

Wrap-up your volunteer experience with a final YouTube video. What are your thoughts about this process beginning to end? What kinds of things have changed, regarding your perception? What have you learned throughout this process? Has anything about Kübler-Ross' death and dying stages changed for you after going through this process? How did you see this volunteer process work with the Social Problems and Social Psychology content? What kind of changes have you seen in your patient and the staff since your arrival? Did you feel like your service was appreciated? If so, by whom and how...if not, what could have facilitated this process? Did you feel connected to the organization or the location in which you volunteered, how and why? Will you continue to volunteer with Hospice? Will you seek out other volunteer opportunities? What can you take away from this experience?

You will need to pick two terms from the Social Psychology text, and two terms from the Social Problems text to discuss within the content of the video in relation to Hospice or volunteering (these must be terms that we have not discussed in a prior discussion board posting). In addition to discussing terminology in the video, you will need to post this information in the discussion board, and use references and page numbers utilized from both texts in this section.

Part 2

The last portion of your discussion board should include your weekly volunteer log. I will receive your final report from C.L. as well, to make sure the service logs were maintained. You can add the log as an attachment, or copy and paste the hours logged. Volunteering was a big part of your requirements for this course, so half of this discussion board grade will be related to your volunteer hours, and the completion of the reports provided to C.L. You should have approximately three hours per week of volunteer hours. Of course, I will give some flexibility in these hours to account for spring break, and illness if you discussed it with me prior to the end of the semester.