

Speaking Easy for Living and Learning: school-based service-learning for speech pathology students

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The overview: Service learning is increasingly being recognised as an important part of health curricula and contributes to the community engagement of universities. As part of their final year clinical placement, speech pathology students from James Cook University and University of Sydney provided speech and language assessment and therapy where appropriate for children and families within a primary school which services disadvantaged families. Students also assisted with referrals to community and health services and contributed to teachers' professional development relating to classroom support of speech and language development and management of children with difficulties in these areas.

The model: The Broken Hill community—campus partnership service learning model was adapted to the local situation to help address the well-recognised lack of allied health services in rural and remote areas. As a result, a strong and dynamic partnership between universities, primary school and local communities developed with all members of the partnership contributing time, equipment and other resources without external funding. In 2014, funding was obtained from the Australian Government funded Northern Territory Regional Training Network to appointment a part time discipline specific supervisor on site; interprofessional and remote supervision were also provided?.

The outcomes so far: The positive outcomes of this ongoing project are already becoming evident. Teachers report that families are now engaging with the school and tackle previously unaddressed speech and language problems. Other community organisations have become aware of the value of these initiatives and are discussing possible expansion of the program within the wider community. The speech pathology students improved their understanding of program design that facilitates community engagement and the complex issues affecting learning outcomes and school success for Aboriginal families and communities. Students are now in active competition for these placements recognising the invaluable professional, teamwork and cultural learning experiences such placements provide.

The future: This service learning model can be used in a primary school setting to benefit communities and to provide valuable learning opportunities equally for students and the partners. The key elements of success are the strong commitment from the services and people involved and the ongoing engagement by families. The program enables access to allied health services, engages communities and enhances service provision across sectors, while contributing to the health promoting environment in the school. This model can be applied in other primary schools and can incorporate other health disciplines, and has potential to be applied in other rural and remote locations with limited access to allied health services. All that is needed is ongoing commitment (not a problem) and funding for locally based clinical educator support (more of a challenge).