

Limed: Teaching with a Twist

Season 2, Episode 10 – Refresh: KAPOW! Comic Strip Conversations

Matt Wittstein (00:11):

You are listening to Limed: Teaching with a Twist, a podcast that plays with pedagogy.

(00:22):

For those in academia, it's summertime. For us at Limed, it means we're preparing for our next season of the podcast while checking in with some of our previous guests for our short summer refresh episodes. If you're interested in being a guest on the podcast and bringing your authentic challenges and opportunities to our show, please reach out to me at mwittstein@elon.edu or on the Center for Engaged Learning website, www.centerforengagedlearning.org. This month we're joined by Lynette Carlson from season two, episode six, Kapow comic book conversations where she shared how she was using short, animated panels to facilitate conversations with her athletic training students that support centering patient care in culturally responsible ways. She's joined by her colleague Carolyn Padalino, the director of Clinical Education of UT Chattanooga's Physical Therapy Program, and we talk about interprofessional education, that is shared learning experiences that help clinical professionals and students to understand the scope of practice of others' disciplines. Check out the episode page for show notes or if you need it, a link to the original episode. Enjoy the show. I'm Matt Wittstein. Hi Lynette. Welcome back to the show. I am so excited to have you back. I see you have a friend here. Would you like to introduce your friend or would they like to introduce themselves?

Lynette Carlson (01:56):

We'll do a little bit of both. Good to see you, Matt. Thanks for having me back. So today I brought a friend, I brought Carolyn Padalino. She's my counterpart in the physical therapy department here at the University of Tennessee, Chattanooga, and I'll let Carolyn further introduce herself.

Carolyn Padalino (02:11):

Hey Matt, it's nice to meet you, Lynette thanks for inviting me today. I'm an assistant professor of practice in the director of Clinical education and the physical therapy program at UT Chattanooga, and I'm excited to be here. I am a big fan of Lynette. We met in August of 2019 in orientation. She'd already been teaching way before me, but had come on full time at that time, and here we are.

Matt Wittstein (02:35):

So I understand since we talked last, some things have shifted just a little bit and we're starting to get into some interprofessional education. Please explain to our broad audience what is IPE and how are you all starting to do that stuff?

Lynette Carlson (02:51):

So interprofessional education is a very, very large and focused look for healthcare professions in general, but certainly lots of different professionals can take advantage of learning with and from other people. So in healthcare, that means the healthcare system, it tends to be very siloed and there's been a lot of change around looking at the entire patient. And when we look at the entire patient, there's a lot of people that should be involved in their care that offer specialized care. So for us, an example of athletic training that I represent, and Carolyn represents physical therapy, we share a lot of patients in the clinic. For example, an outpatient physical therapy clinic. We may have one of our athletes that we

work with in athletic training, maybe going to see a physical therapist in the clinic. And so it's helpful to get to know the others' profession and to understand their specialty and how we can work together for the betterment of our patients. So in short, interprofessional education teaching with and among different healthcare professionals.

Carolyn Padalino (04:09):

I think it's also helpful because it helps to create a shared library of language when the students can hear specifically what our students are educated in as far as the diagnoses. They can work with the settings, they can work in the lifespan, the populations, and then when we work and engage in the actual clinical setting, it's not quite as mysterious what we both do and we can be speaking from a similar language, which is super helpful for the students who feel like it's all very in the air.

Matt Wittstein (04:37):

So it seems like your topic of using comic strips to help students in clinical fields engage with topics of identity and equity and patient-centered care is how you phrased it a lot on our first episode. Seems to lend itself really well for this IPE stuff, and I think that's what brings you here, Carolyn. So do you want to share a little bit about how you got, I guess, connected with Lynette and her work?

Carolyn Padalino (05:02):

Absolutely. So Lynette, after being on the podcast with you previously had shared it on LinkedIn and of course I follow Lynette. And so I commented how cool I thought it was, and she was like, well, let's get together. And I said, Hey, hey, hey. So I already have a session within a course that I teach where we talk about inclusivity and patient care and touch on some of the more potentially challenging topics than get covered in the first year of the program. And to me, it lent itself to the perfect opportunity to engage Lynette and her graphic medicine case studies to come in as an athletic training faculty member and lead the students in going over the graphic medicine case studies to help them begin to investigate their underlying stereotype and bias through the lens of therapeutic alliance with our patients. Research shows that that's incredibly important.

(05:56):

We also just submitted for the Tennessee American Physical Therapy Association for a conference, we don't know if it'll get accepted for a session or not. However, it's a great thing that our students are getting right now in their coursework. However, a lot of professionals have never confronted any of this stuff in their patient care, their backgrounds or history. So being able to find the research is not hard. That therapeutic alliance is very important and can be very impactful in patient care. If you have a great therapeutic alliance, your skills can be not the best and you'll still have positive outcomes. So that's something that I want to help the students dig into as much as possible. What are ways in which they might be harming their therapeutic alliance with their patients? What are ways that they can improve building therapeutic alliance? And I see a lot of that through the lens of what are the ways in which we're raised that we might find jokes funny, we might have phrases that we're used to using that we don't realize is actually I'm working with Lynette over here, but the patient I evaluated last week, now I've offended and I didn't even think about that. So, trying to help them start to dig into those concepts in a way that helps them remain open to growth, I encourage them. I'm a big Renee Brown fan and I love the definition of curiosity that it is recognizing you have a gap in knowledge, wanting to grow in that area, fill that gap, and being willing to change your perspective or your mind in that whole process. So I always encourage the students to remain curious throughout their PT education, but also specifically when we're talking in this particular class about investigating your biases and stereotypes.

Lynette Carlson (07:32):

Something that's really fun in our collaboration working together is we're working interprofessionally also. And so you started off by saying that we get to learn a new library, and that's exactly what's happened with the terminology of therapeutic alliance. So now I'm very interested in this, and I think last time we met, I asked about, tell me more about this therapeutic alliance. Define it for me. And she, oh, there's research on it. Go dig into it. And so I have started to do that and it's just opened a lot of different lingo that can lead me in different directions. And so more justification for why do we need to talk about this? It's not just because our accrediting bodies say we're supposed to, but it actually improves patient outcomes.

Matt Wittstein (08:23):

So Lynette, what's been new in this project for you since we talked last?

Lynette Carlson (08:27):

Beyond the collaboration with Carolyn and the physical therapy students, which we had a very fun day when I got to work with them. She has a little bit larger of a class, and so that means more people, more ideas. And so we had a good time. Something that is newer that I started incorporating with the physical therapy students was when it came to our discussion after reading the graphic medicine strips, I asked them to draw and I brought my colored pencils so they could really get unique and colorful. I asked them to draw what happens next? What do you see happens next? And I have said many times, every time I do this activity with a group of students, I learn something new or they say something that has never been said before or they come out with a new concept. And that's what happened indeed with the coloring of what happens next.

(09:32):

Some students, for example, believed that there's a positive outcome and others believed this does not turn out so well. That again, opens the idea for and the conversation to dig in further how we perceive different images beyond that. I have also been introduced here in Chattanooga to Carolyn introduced me to the physical therapy assistant program director here at Chattanooga State, and we met actually just last week, and we're going to do an interprofessional activity where our students, all of the athletic training students in our new cohort will meet with all of her students in a certain cohort. There's going to be about 40 students coming together to do the activity. And so we're very excited to branch this into the physical therapy assistant program. It's going to be interesting to work with a larger group like this. It'll also be interesting to see how the students handle working and talking about these conversations with people that they don't know as well. So we talked in the initial podcast about setting the stage and creating cultural and group norms and deciding how we can make it a safe and brave space. And so that's something we're going to work very hard towards, but we will have students that are not quite as familiar with one another in the same room talking about these topics, and so we'll just do our due diligence and try to create a brave and safe space for the students.

Carolyn Padalino (11:15):

I think it's really exciting because I've perceived both Lynette and Caroline to be great role models and models for how this interaction should occur and the fact that when you approach a space with the concepts of belongingness in mind that you want to have psychological safety, you want to have a safe space, that when that's modeled by the people leading the session, then the students are more prone to be comfortable to doing that as well because they see it modeled well. And so I'm excited to hear how it

goes because I think between the two of them, it'll be fantastic. I also texted Lynette on a Friday night at 5:55 PM I don't remember exactly. It doesn't matter. From a train the trainer course for physical therapy and said, Lynette, can I please use one of your graphics? I am responsible for team teaching this content relative to DEI. Biases and stereotypes are included. Generational differences are included. We're allowed to add to it, but can't subtract. Can I please use? I think it's the disability equals adaptability. I get it wrong every time.

Lynette Carlson (12:22):

That's correct. You got it.

Carolyn Padalino (12:23):

Yay. And she responded right back. Yeah, go for it. And then I said, hi, the one you let me have, I can't editor download. Can you please send it to me? So this is Friday. And she's like, absolutely, it's in your email. So I was able to incorporate that into a presentation to a room of academicians and clinicians for physical therapy in addition to the American Physical Therapy Association staff who had up the credentialing for PTs to be clinical instructors. And they overwhelmingly reflected, they were supposed to be modeling in the crowd, occupational therapist, speech language pathologist, nurse practitioners, a variety of different healthcare backgrounds, because anybody can take the course, right? That's the whole thing. They want to make sure that it's a broad range, so we're supposed to be speaking to everyone. And so a lot of the suggested content was about how the APTA is focusing on DEI, so we need to understand this. So I was like, oh no, we're going to focus on therapeutic alliance. And we're also assuming that the practitioners in the room have a variety of levels of experience hosting students. And again, overwhelmingly they and the instructors of the course reflected very positively. They felt like it was such a great way to introduce the content and get people really thinking before they could react. So that was something that was also new being presented at that level as well.

Matt Wittstein (13:42):

So, it's come up a couple times, but can you give me a concise definition of therapeutic alliance?

Carolyn Padalino (13:48):

So it comes from psychotherapy, and there's a particular individual way in the past history, I'm not great with historical references. That's not where my brain space spends its time. But essentially it's the relationship between a patient and their therapist, and it's looking at the bond that they create, that affected bond, and then also making sure that the goals stay patient focused rather than what the provider might believe that the patient needs.

Matt Wittstein (14:14):

So it sounds like one of the things that's happened since we talked last is that you're actually taking this to more diverse audiences in terms of what their aspirational goals are, but even their position of being educators and clinicians as opposed to being trainees in the field. How does this work hit differently and how do you adapt it to those different audiences?

Lynette Carlson (14:36):

I believe the difference is just in life experience. We do have students that are not of a typical student or grad student age. So life experiences is what makes it different to be able to with and think more deep

and have more reflection. But other than that, the activity itself is the same. We also may change or go a little bit deeper into the more physiological aspects. As Carolyn mentioned, she did a deep dive, much deeper dive than I did on the LGBTQ plus physiology. I haven't presented that part of what she created just because of time with my students. That would be the next level. If we present this in an athletic training course for certified athletic trainers, that would be an excellent spot to include that for us. So that would be the difference, I believe. Do you foresee other differences, Carolyn?

Carolyn Padalino (15:41):

Yeah. So when I presented the content to the academicians and clinicians, my team teacher and I first thought about our population, so we didn't approach them as academicians who might already be invested in some of the content. We treated them as if they were a variety of, they had a variety of levels of experience as a clinical instructor in a site. So we decided to start with the one that was most rehabilitation related, and then go to the one that started to broach into the L-G-B-T-Q content. So I think Lynette shared in the first episode that she does the first two and the first year of the program of athletic training, and then the second two in the next year, so they build on them, right? Whereas we kind of cherry picked between the two, which one we wanted to present. She has some excellent prompts that are generated towards a 20 to 30 minute discussion per graphic, and I had six minutes to deliver my four slides worth of content, so I didn't have time to do it justice.

(16:47):

So the team teacher and I looking at the graphic, decided to ask some more basic questions directed at what do you perceive is happening in the first graphic? How does the person feel in the moment? What do you perceive in the last graphic? How do they feel now? And got the variety of responses based on people's different backgrounds. So kind of like to her draw the next panel to that thought process, it was, well, what do you think she feels now? And then the person in the graphic that was assisting, why do you think they offered help? So we didn't go through all of the questions. We already assume that the participants are going to be kind in the way they interact with each other. So we didn't do a lot of the, Lynette talked about the norms, the group norms that she puts out there. So we didn't do that. There's a lot of stuff that we didn't do full justice, I felt like, but it was because of a time thing, and that's why I thought it was so amazing is because while we didn't get to do the full display from what Lynette intends, it still went over really well and people received it really well.

Matt Wittstein (17:56):

So considering your position being at a public university in the southeast, but in a clinical field that both have very clear educational accreditation requirements, what sorts of challenges have you experienced with doing this type of stuff and how have you addressed some of those things?

Carolyn Padalino (18:17):

So I've always approached it from a very medical perspective, a very physiologically based perspective, and from a medical perspective, we have the research that therapeutic alliance matters. So I keep it there. I don't talk at all about anything else other than that, and not to shut the students down, but I say, so this is not the class where we're going to debate what people might bring to this classroom based on your past backgrounds' perspectives. This is just me delivering the medically focused, content centered around therapeutic alliance, and then I roll with it. It's literally how do we put our patients first? Recognizing there are a lot of barriers to that that students don't perceive that they have barriers towards until they start to investigate some deeper content and then they start to realize, oh, I did not even realize that could be a barrier to my patient care, but now that I see it, I'll just treat them like a

human. My number one aim is to educate physical therapy students to practice at the top of their license and recognizing the value and benefit of therapeutic alliance. Then I see it as my role to help them investigate, dig out, be curious about and grow in any aspect that can create a better therapeutic alliance between them and their patient.

Matt Wittstein (19:33):

So before I let you go, I want to know what you hope to happen in the next year or so with this type of work for you individually, but also for your fields.

Carolyn Padalino (19:43):

I am super excited. I am a big fan of obviously Lynette, but also of connecting individuals to continue to elevate all of our collective professions. And so I perceive I asked Lynette's permission to email all of the individuals who participated in that train the trainer course with me and say, by the way, a lot of you express loving the graphic. If you would like to use it in your own courses or in your own universities, you're welcome to email Lynette Carlson. Here's her contact information and keep spreading the word. I see a lot of benefit to that,

Lynette Carlson (20:19):

And I am looking forward to continuing to expand on the interprofessional education side. We are always looking for ways for our students to learn together, and this is a really great way along the lines of interprofessional education. I'm also co-authoring a chapter. It's a graphic medicine textbook, and our chapter is Interprofessional education. So right up my lane and where that is in the works. So keep an eye out for that next time, and thank you for having me back,

Matt Wittstein (20:53):

Lynette. Caroline, it was great having you on the show, and thanks for sharing with us what you've been doing.

Lynette Carlson (20:58):

Thanks for having me. Thank you.

Matt Wittstein (21:13):

Limed Teaching with a Twist was created and developed by Matt Wittstein, associate professor of exercise science at Elon University. Dhvani Toprani is Elon University's assistant director of learning design and support, and serves as a producer for the show. Jeremiah Timberlake is a class of 2024, computer science and music in the liberal arts double major at Elon University and Summer 2023 intern for Limed. Music for the show was composed and recorded by Kai Mitchell, a class of 2024 music production and recording arts student at Elon University. Limed Teaching with a Twist is published by and produced in collaboration with the Center for Engaged Learning at Elon University. For more information including show notes and additional engaged learning resources, visit www.centerforengagedlearning.org. Thank you for listening, and please subscribe, rate, review, and share our show to help us keep it zesty.