

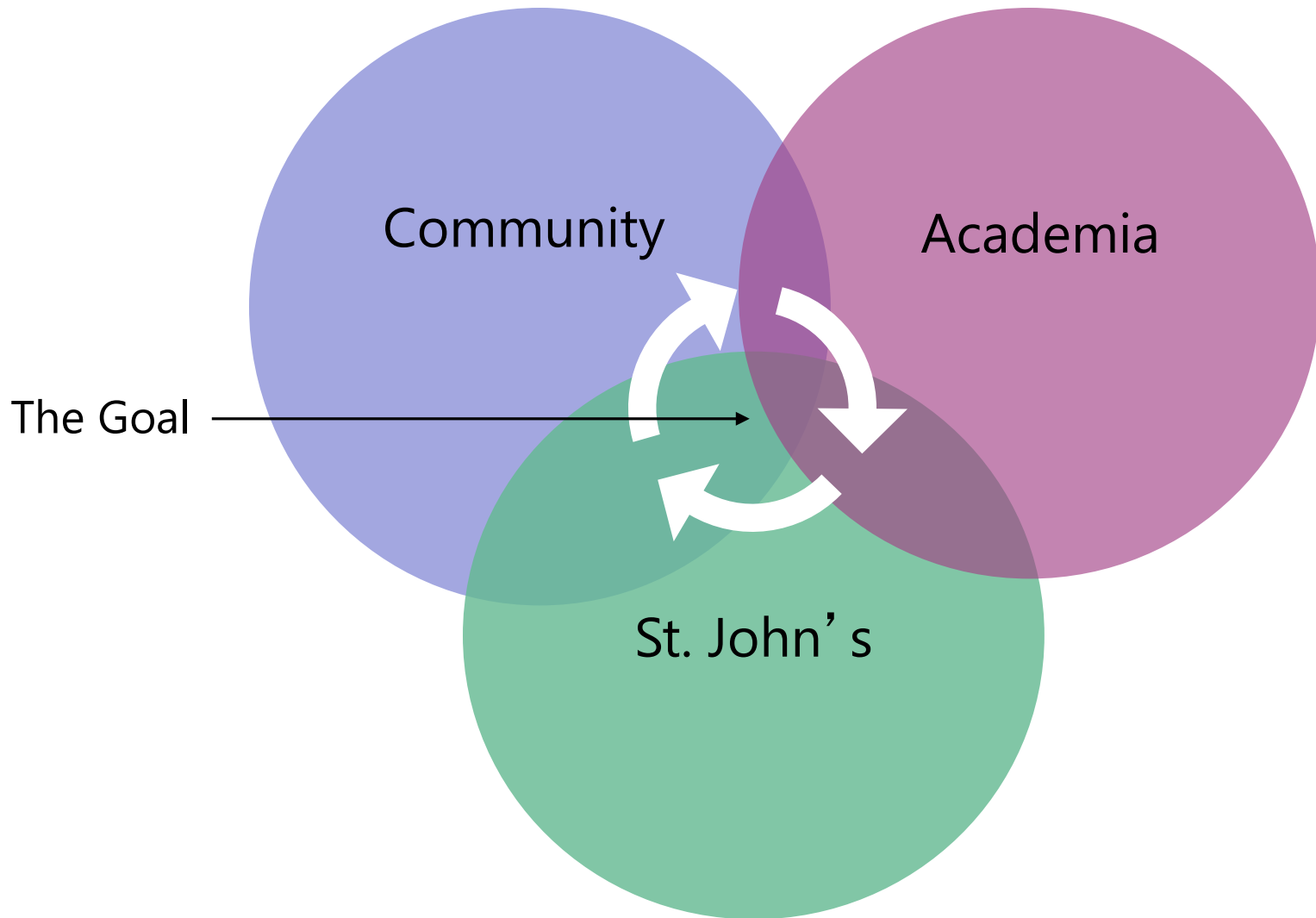
# The St. John's Collaborative for Intergenerational Learning (SCIL): An Eight Year Experiment in Multigenerational Exchange & Understanding

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Walk With Me, March 5<sup>th</sup>, 2018



# SCIL - 2009



## **PURPOSE:**

Build upon current interactions, develop new ideas, turn ideas into actionable outcomes

# Mission

To create community integration leading to meaningful relationships and exchanges between St. John's, academia, and aging-services providers to serve the physical, social, cognitive, and emotional wants and needs of older adults.

SCIL strives to understand, and build upon, the experiences and strengths of all students, elders, and community partners.

SCIL provides a reciprocal learning environment that encourages participants to become better citizens through service to, and within, the community.





To Our Potential Academic and Community Partners:

We are very excited by your interest in working with us to realize our mission of community integration, leading to meaningful relationships and exchanges between academia, St. John's, and aging-services providers to serve the physical, social, cognitive, and emotional wants, and needs, of older adults. We expect that all collaborators within The Consortium will strive to understand, and build upon, the experiences and strengths of all students, elders, and community partners. With this in mind, we do have guidelines that we ask you to keep in mind as you move forward with your programming. Specifically, we ask that you remember that your experience involves multiple constituencies as outlined below.

*Elders*

Elders should not be seen merely as the recipient of a program, but as assets to what we are trying to accomplish. The residents at St. John's should be included in the design, completion, and assessment of a program. The work of the elders should be celebrated in some *meaningful* way, perhaps through a conference presentation, open house for other St. John's residents to learn about what their friends and neighbors have accomplished, or simply through an in-class celebration.

*Students*

It should be remembered that younger adults often view aging and older adults with *apprehension* and uncertainty. *Reducing this anxiety will enhance the learning process and promote positive outcomes.* Collaborators should think about designing opportunities for students and elders to interact and learn from one another prior to the actual intended program. This will serve to make the experience as meaningful as possible.

*Faculty*

Faculty should make every effort to include the students and elders in the design of their program with St. John's. You should also seek advice from current and past faculty who have worked with St. John's. These faculty would be pleased to share with you syllabi, assessment tools, and other learning outcomes accomplished since the inception of The Consortium. Also, it is expected that all faculty, community partners, and aging services-providers complete an assessment process of their experience, including feedback from students, elders, and community partners. This information is to be shared in a timely fashion with The Consortium advisory board upon the completion of the program.

*The Community*

As previously written, a goal of The Consortium is to bring together academia, St. John's, and the larger community. Collaborators should think about how their programming can benefit others in the Rochester community. How can the results of your experience be shared with the community? What can be learned, and used, by others in the community? Think about your programming beyond the classroom and those directly involved in it. This will make for a more impactful and dynamic experience for all.

If you have any questions, please feel free to contact any one of us, and good luck! We look forward to learning more about the outcomes of your endeavors.

Sincerely,

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## “Issues in Aging”

### Introduction

#### Elders’ Wishes & Hopes

- Interaction between students and elders greatly desired
- Continuation of studying/learning
- Fun engagement; learning, expanding, sharing experiences, giving of self
- Involvement; helping students better understand the aging process
- Providing perspectives to textbooks/articles regarding life lessons
- ✓ • Becoming teachers/mentors to students and professors
- Experiential learning: getting out to different environments & settings
- Learning from students and learning about their thought processes

Outside the box of the grade - what are the students’ hopes & wishes?



# The Courses

- PSY 226 - Adulthood & Late Life
- PSY 354 - Issues in Aging
- PSY 355 - Aging & Community Service
- Course Composition
  - 1) Over 400 students
    - 77% from HHS
    - 21% from Psychology
  - 2) 15-20 elders each semester
    - some repeat, some new



# The Design

- Adulthood & Late Life
  - 1) Reflective Writing, Panel, TEVP\*
- Issues in Aging
  - 1) Panel, Issues in Aging Paper, Mini-Conference\*
- Aging & Community Service
  - 1) Panel, Community Project\*



# Mini-Conferences

## The Controversies Behind Euthanasia and Physician-Assisted Death



Nazareth College  
Kelsi Barnholt  
Austin Coppola  
Benjamin Lewis  
Steven Lounsbury

St. John's Meadows  
David Penney Janice Proctor  
Jane Levin Dorothy Rosen  
Alice Mahan



### Family/Friends Perspective

#### Family Conflict

- Continue treatment or withdraw treatment → tension, frustration, bitterness, and/or any other type of emotion dealing with conflict
- Different opinions and beliefs → divide the family for weeks, years, and even decades

#### Financial Pressures

- Medical bills pile → patients opt for assisted suicide to save money as a duty to their loved-ones → Don't want to be a burden
- Financial pressures → increased stress during time of suffering for patient and family members

#### Personal Regrets

- Family members → feel responsible, have personal reservations / guilt about decisions
- Family members → feel at peace knowing loved one is free of suffering, valued desires

#### Inevitable Suffering

- Wide range of emotions → family members, friends, and medical professionals

### Religious Perspective

#### The Catechism of the Catholic Church:

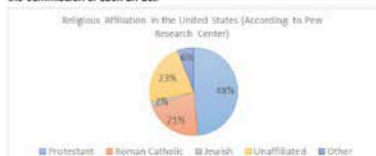
- "Suicide contradicts the natural inclination of the human being to preserve and perpetuate his life."
- "Whatever its motives and means, direct euthanasia consists in putting an end to the lives of handicapped, sick, or dying persons. It is morally unacceptable."

#### Southern Baptist Convention "Resolution on Assisted Suicide":

- "BE IT FURTHER RESOLVED, That we vigorously denounce assisted suicide as an appropriate means of treating suffering"

#### Jewish Rabbi Yitzchok Breitowitz:

- "Taking one's life is regarded as halachically and morally improper. While we cannot personally condemn those who in the midst of unbearable pain and suffering take their own lives, we cannot encourage, condone, or participate in the commission of such an act."



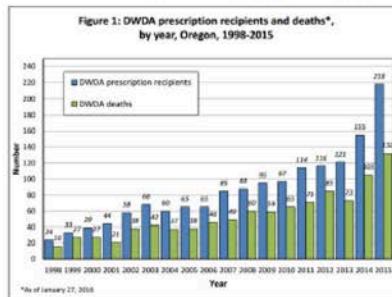
### Overview and Historical Perspective

#### Physician-Assisted Death

"Terminally ill state residents to receive prescriptions for self-administered lethal medications from their physicians."

#### Euthanasia

"The intentional termination of a patient's life by a physician at the patient's request"

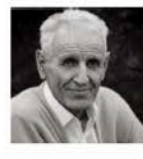


#### Landmark Supreme Court Cases

- Vacco v. Quill
- Washington v. Glucksburg



Dr. Timothy Quill



Dr. Jack Kevorkian

### Ethical Perspective



- Potential for "disposal" of those with debilitating or incurable illnesses
- May lead to a eugenic mentality
- Misuse/abuse by "caretakers" to serve their interests
- Violates ethical code set forth by Hippocratic Oath

### Legal Perspective



- As of November 8th, 2016, Colorado became the sixth state to legalize Physician-Assisted Death.





# Community Projects

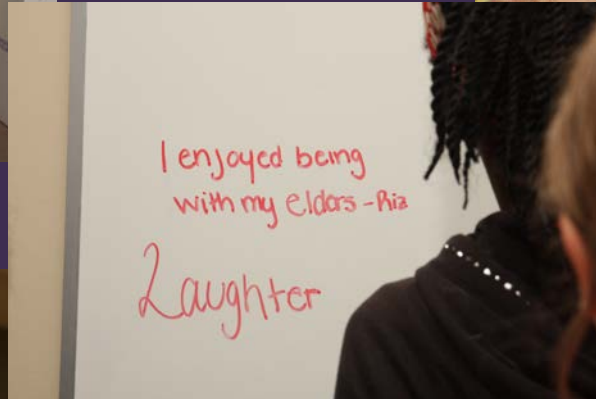
- Students and residents will:
  - 1) Identify an area of segregation and develop a project to integrate various components of the community.
  - 2) Identify the needs of the various community organizations that could serve as potential partners for this project.
  - 3) Organize presentations to both other elder residents as well as community leaders to create buy-in for this project.
  - 4) Identify methods and assessment tools to be used as this work progresses.



# Pharmaceutical Brown Bags



# Hillside





# Dr. Douglas Smith Learning Center



# Thank you for making our Holistic Therapy Fair possible



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- Elaine Markowski
- Donna Haywood
- Donna Bott

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- Eleanor Volpe
- Marvin Rus
- Heather Hutton
- Joette Hartman

- Alice Pishbeck
- Dr. Yen T. Tan
- Maureen Fitzpatrick
- Barbara Messina
- Bess Pernot

- Nancy Szembrot
- Colleen Seeley
- Pam Criscuolo
- Christie Hall
- Dr. David W. Steitz

# Student & Elder Comments

"If you want to make an impression, the best way to do that is to get the professor out of the front of the class and allow the students and elders to learn from each other through interactions. This is the best way to change attitude and behavior. 99% of classes are not like this one."

"I have felt free to share what has motivated me and how the decisions I made at their age have cast the journey for me. It is a situation that is fulfilling for me, particularly since I no longer have my wife with whom to talk. The three [students] have taken the place of having intelligent people with whom to talk."



# Thank you!

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