

2014

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Unger, Suzanne B.; Pribesh, Shana; Bol, Linda; and Dickerson, Daniel, "Students' Perspectives of NGO Service-Learning Experiences: A Case Study of Operation Smile" (2014). *Educational Foundations & Leadership Faculty Publications*. 41.
https://digitalcommons.odu.edu/efl_fac_pubs/41

Original Publication Citation

Unger, S. B., Pribesh, S., Bol, L., & Dickerson, D. (2014). Students' perspectives of NGO service-learning experiences: A case study of Operation Smile. *The Journal of Nonprofit Education and Leadership*, 4(2), 139-161.

Students' Perspectives of NGO Service-Learning Experiences

A Case Study of Operation Smile

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Abstract

Past research demonstrated both strong and questionable benefits to students participating in domestic service-learning. However, we know little about high school and college students' perspectives of service-learning while working with nonprofit, non-governmental (NGO) agencies that serve international populations. This qualitative, exploratory study aims to determine how students perceive their lives are impacted as a result of their service-learning experiences at Operation Smile. Data were collected from two focus groups comprised of high school and university youth. Results indicated service-learning in an international setting positively influences areas of personal growth, career choice, and future philanthropic participation. It also affects level of family, peer, and community member involvement in the NGO; and aids local target populations in developing countries. In addition to safety concerns, students mentioned difficulty in adapting after the experience as well as feelings of isolation from peers.

Keywords: *nonprofit; international service-learning; students*

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As the world becomes more interconnected and youth learn about disparaging situations outside of their homes, they seek opportunities to contribute to society through service-learning. Research indicates the importance of service-learning in many realms. For example, it incorporates active learning experiences that enable youth to improve their communities (Carver, 1997; Crabtree, 2008; Kielsmeier, 2011). For students to be at the forefront of their learning experiences, they must clearly understand educational goals, and tasks must prove challenging (Billig, Root, & Jesse, 2005). Through service-learning, students should recognize and become personally devoted to resolving a genuine problem in their communities (Billig, Root, & Jesse, 2005; Carver, 1997; Gonsalves, 2011; Roschelle, Turpin, & Elias, 2000). Goals of implementing instructional strategies of service-learning include strengthening critical thinking, developing community relationships, and providing assistance to teachers who seek to better educate students (Kielsmeier, 2011). Furthermore, both communities and students should mutually benefit from the service-learning experience (Crabtree, 2008).

Slavkin (2007) describes eight key elements to service-learning. First, students must feel empowered to express their voice. This gets them involved in the community, allows for increased occasions to learn, and affords them an opportunity to reflect before and after experiences (Billig, Root, & Jesse, 2005; Slavkin, 2007; Terry & Bohnenberger, 2004). Second, the service must prove meaningful (Lai, 2009; Slavkin, 2007), whereby students collaborate to achieve a goal that benefits the community and enhances their understanding of democracy. Third, through daily logs, journals, peer discussions, audiotapes, and time sheets, students should reflect on their service-learning experiences to enhance their comprehension (Lai, 2009; Slavkin, 2007). Fourth, prior to students starting the service-learning experience, authentic community needs must be identified (Carver, 1997; Slavkin, 2007). Fifth, teachers must find connections between the service-learning experience and academic standards for which they teach (Slavkin, 2007). Sixth, collaboration between schools, communities, and parents must arise to produce reciprocal regard, gratitude, and awareness (Slavkin, 2007). Seventh, teachers must evaluate student learning, and communities must see the impact of service-learning (Billig, Root, & Jesse, 2005; Slavkin, 2007). Eighth, students should receive public recognition for their service. This is positive for them personally, and may result in additional members of the community supporting the identified cause. Slavkin's (2007) eight elements of service-learning appear aligned with Billig, Root, and Jesse (2005) who stress students must plan, take action, reflect, then celebrate.

Similarly, Cone and Harris (1996) developed a model focused on psychological, interpersonal, and sociocultural facets of service-learning. The researchers stressed elements of service-learning that aligned with Slavkin (2007), such as authentic experiences and continued reflection. They also expressed the importance of pre-service training for preparation and proper program placement; and the need to challenge students' global perspectives by placing them in a situation that deviated from their typical lives.

Background of Service-Learning

Although the concept of service-learning arose as far back as Aristotle and Plato, who focused on developing good citizens through education (Parker et al., 2009), the National Youth Leadership Council (NYLC), comprised of adults and students, began

to develop new modes of service-learning education in 1983. The NYLC developed programs with the belief that youth can contribute to improving society (Kielsmeier, 2011). In addition, The National and Community Service Acts of 1990 and 1993 have encouraged universities in the United States to focus on volunteerism instead of traditional learning, and to enable students to solve global problems (Primavera, 2008; Terry, 2004).

Due to support of service-learning by presidents in the United States, including Presidents George H. Bush in 1990, Bill Clinton in 1993, George W. Bush in 2001, and Barack Obama in 2009, statistics regarding student involvement in service-learning have arisen (Kielsmeier, 2011; Terry, 2004). For example, funding from Serve America allows over 1.5 million U.S. students from kindergarten through university level to dedicate approximately 20 service-learning hours each school year in their local communities (Gonsalves, 2011). Additionally, over half of college students have reported involvement in volunteerism (Primavera, 2008). In 2011, the Corporation for National and Community Service states approximately 35% of high schools, 25% of middle schools, and 20% of elementary schools incorporate service-learning into their curriculum. While this is down from 46%, 38%, and 25% in 2004, researchers credit this to increased time teachers devote to prepare students for reading and mathematics standardized tests (Kielsmeier, 2011). In Billig, Root, and Jesse's (2005) review of service-learning, they cite 50% of all public schools and 80% of private schools incorporate service-learning. Moreover, 40% of schools consider service-learning a critical part of their curricula (Gonsalves, 2011).

Globalization and International Service-Learning

Keith (2005) discusses three forms of globalization: 1) *neoliberalism*, where the main focus of free market economics establishes society under the assumption people choose to elevate their self-interest; 2) *time-space compression*, where the "communication revolution" impacts the time and space people experience, and leads toward a unvaried society; and 3) *globalization*, where developing values of a culture emphasize discourse, variance, and group responsibility for the world. Each of these categories has different meaning for service-learning experiences. Neoliberalism, for example, requires action-oriented service-learning in areas where the government does not show support for its citizens. Alternatively, time-space compression involves service-learning where a diverse group bands together to address local and global problems to enhance regions. Finally, with globalization, service-learning involves advocating for heterogeneous and global citizenship, and financial and civil justice.

International service-learning exists as an extension of the above description of globalization. This type of learning occurs in an international setting, and incorporates educational instruction with service in order to enhance participants' international comprehension and global citizenship (Crabtree, 2008; Prins & Webster, 2010). For instance, by implementing the service-learning framework as suggested by Cone and Harris (1996), students will enter into the experience with different values, expectations, and perspectives. Prior to traveling to the service site, educators will prepare students cognitively and pragmatically, by allowing them to discover areas of need in the culture, develop questions, and collect information. During the actual service-learning experience, students will continue to ask academic and personal questions, reflect daily, and redefine previously created cognitive categories about the culture's dynamics. Stu-

dents continue to strengthen these skills by interfacing with community members and working on projects that positively impact the community (Prins & Webster, 2010).

Putting international service-learning in the context of globalization will allow students to understand struggles of people unlike themselves, open their eyes to an intertwined world, and encourage them to feel responsibility for the world's citizens (Keith, 2005). Ideally, through international service-learning, reciprocity should exist between those serving and those receiving services. Furthermore, all stakeholders should identify components of learning to ensure contributions prove fair, values get addressed, and everyone benefits. The quality of the service-learning experience rests in part on students' understanding that everyone's life has value, even if it differs from their own; thoughts to the contrary likely mean students did not integrate into the community well and felt like outsiders. To prevent such negative outcomes, a mutual respect for perspectives and backgrounds must exist (Keith, 2005).

Impact of Domestic Service-Learning on Students

Researchers of service-learning have found variable consequences of its implementation on students. While many studies note benefits of service-learning, Billig (2005) contends if not executed well, it has no greater positive effect than traditional learning experiences in school. Furthermore, students experience increased positive effects if service-learning lasts longer; however, semester-long programs benefitted students more than year-long programs. Service-learning allows students to apply classroom knowledge to an authentic learning situation in their community. Through such community connections, students also learn concern for others (Terry & Bohnenberger, 2004). In fact, in Primavera's (2008) study of students involved in a Head Start service-learning program, participants felt more satisfied with themselves, and judged they made a difference in the children's lives when advancements in children's language became evident. In addition to their sense of self-development, students involved in service-learning gained more academic, communication, organization, and leadership competence (Ash, Clayton, & Atkinson, 2005; Billig, 2000; Carver, 1997; King, 2004; Lai, 2009; Lee, 2005). Reflection proved an important component to development of these skills, and students pondered, discussed, or used their experiences an average of 1.7 hours for every hour of service-learning (Primavera, 2008).

Internal and outward improvements to students may also result from service-learning. For example, according to Vernon and Ward (1999) students' psychosocial and moral reasoning improves. Furthermore, Billig (2000) noted less disciplinary problems, fewer pregnancies and arrests, increased trustworthiness, more dependability, more willingness to undertake responsibility, enhanced relationships with adults, more compassion for others, increased sensitivity, and improved tolerance of diversity. Primavera (2008) also discovered 65 percent of service-learning participants experienced self-improvement including increased patience and tolerance of others; and more regard for themselves in areas like compassion, creativity, and desire to help people.

Research also indicated an impact of service-learning on students' civic and social duty. Billig, Root, and Jesse (2005) found people who cooperated with civic and political causes during service-learning, like petitioning for a cause, measured highest in civic proficiency. The fact that service-learning combines academics with community engagement fosters students' sense of civic responsibility in a scholarly manner (Roschelle, Turpin, & Elias, 2000).

Becoming involved in service-learning also allows students to challenge inequalities, prejudices, and social stigma (Barney, Corser, & White, 2010; Kiely, 2004; Lai, 2009; Lee, 2005). In addition, service-learning primes students to integrate in a multi-cultural, multiethnic, and multi-faith society (Jean-Marie, Normore, & Brooks, 2009). Primavera (2008) discovered 49% of service-learning participants reported volunteering enabled them to better value different cultures and learn about diversity amongst varying socioeconomic backgrounds. In the same study, students challenged and rid themselves of stereotypes of low-income and minority children and parents. Camacho (2004) contended developing a relationship with a single member of the community throughout the service-learning experience could enable students to even more effectively rid themselves of stereotypes and understand diversity. In Primavera's (2008) study, 57% of participants revealed a better understanding of social issues like poverty, illiteracy, inequitable education, and violence as a direct result of their service-learning experience. Also, 44% indicated the need and duty to proactively resolve such social issues.

Much research has examined consequences of domestic service-learning to academics. While Ash, Clayton, and Atkinson (2005) believe participation does not have definite positive effects on academics, many researchers suggest benefits. Billig, Root, and Jesse (2005) discussed the impact of engaging in different types of service-learning. They noted students who became involved in an indirect service, like fund-raising, tended to have more academic commitment. The researchers also contended involved students indicated they favored school substantially more than their peers. Furthermore, Primavera (2008) found 81% of service-learning participants believed their actions, comprehension, and outcomes improved as a result. In particular, students received moderate to high advancements in English, mathematics, and overall GPA. They also felt more driven to learn (Billig, 2000), and understood material better (Ash, Clayton, and Atkinson, 2005; Hou, 2010). Those with more service-learning hours also reported better grades, fewer absences in school, and more overall success in school (Barney, Corser, & White, 2010; Gonsalves, 2011; Hou, 2010; Nandan, 2010; Scales, Roehlkepartain, Neal, Kielsmeir, & Benson, 2006). Engagement in service-learning has also shown to improve academic performance for low socio-economic students, compared to demographically similar peers not involved, as well as minimize the achievement gap between high and low socioeconomic groups. These academic gains may occur because students feel needed and appreciated, and can apply classroom knowledge to an authentic situation (ScaleS, Roehlkepartain, Neal, Kielsmeir, & Benson, 2006). Furthermore, reflection that occurs during service-learning experiences allows for deeper learning (Clayton & Ash, 2004).

Similarly, service-learning experiences often impact future career choices of students. For instance, students feel more willing to seek additional skills for future careers, investigate a wider variety of career options, and have a positive attitude about possible career decisions (Billig, 2000). Furthermore, career choices of students who have participated in service-learning often include public service that focuses on social justice issues (Roschelle, Turpin, & Elias, 2000). In choosing their career, Primavera (2008) found 44% of those previously involved in service-learning used their experience to support or prepare them.

Impact of International Service-Learning on Students

Several researchers have considered implications of domestic versus international service-learning. For example, Bamber and Hankin (2011) discovered similar impacts on students participating in both environments. Likewise, Gaines-Hanks and Grayman (2009) found as a result of their international service-learning experience, students endorsed an overall personal change, heightened awareness of cultural assumptions, increased desire toward social and civic commitment, career growth, and increased appreciation.

Most studies have focused specifically on impacts to university students doing study abroad programs with service-learning components. Even in an attempt to discover impacts of service-learning in regards developmental differences, Aydlott, Randolph, and Wells (2010) focused on variability between students receiving college credit for the international service-learning experience as compared to adults. Researchers found no significant difference between students and adults in the realms of impetus to volunteer, increased knowledge about the country, broadened perspectives, and better cultural awareness. However, students were more likely than adults to believe life is fair and predictable. Few studies have focused on students' perspectives specific to high school service-learning experiences, nor has research indicated whether differences exist for students participating in international service-learning through a nonprofit organization as opposed to a university course.

Another factor in the value of international service-learning includes development of the country where participants serve. For instance, Jones and Popper (1972) found Peace Corps volunteers participated in the program longer if the country had low linguistic standards, and low social and economic maturation. Moreover, community members will more often view volunteers as outsiders, and express less acceptance of them, if the country has experienced little cultural exposure in their development history (Jones & Popper, 1972). Likewise, students may encounter power differentials, seeing themselves as more privileged and lucky for their personal situations. Camacho (2004) could not prove such a hypothesis on power differentials, however, suggested facilitators of service-learning caution students of the potential issue between those serving and receiving services in the community, in hopes to lesson the chance of occurrence. If taught and learned properly, students should rid themselves of stereotypes and realize those they serve deserve compassion and justice (Roschelle, Turpin, & Elias, 2000).

Service-learning has many positive implications for students and society. If done well, they can become more educated, valuable resources in local and global communities, as well as more active citizens (Pitts, 2009; Terry & Bohnenberger, 2004). Furthermore, students can make important contributions to their learning, which also benefits society and builds community connections (Kielsmeier, 2011). With all of these benefits in mind, it is important to discover additional impacts high school students participating in service-learning through an NGO's program model perceive they have on communities.

Present Study

The present study examines students' perceptions of their international service-learning experiences. All participants completed the experience while in high school, however some had matriculated to university at the time of the focus group. We define

service-learning as an active learning experience whereby student participation and reflection in solving a genuine problem existing in society mutually benefits themselves and the community in which they serve.

Participants in this study experienced international service-learning through programs at the nonprofit, Operation Smile. The researchers address the following research foci: *What are high school and university students' perceptions of their Operation Smile international service-learning experiences?; How has students' participation in Operation Smile's international service-learning experiences changed their lives?*

Methodology

Research Philosophy and Tradition

Using the social constructivist paradigm, researchers examined students' perspectives of their Operation Smile service-learning experiences, and the impact their participation has had on future plans including consequential philanthropic behaviors.

Context and Participants

Operation Smile's main focus involves mobilizing volunteers to provide free corrective surgeries to children with facial deformities. To support Operation Smile's mission, people around the world help raise funds and awareness for the organization, including youth who become part of the Student Programs department.

Students involved in Operation Smile Student Programs range in age from elementary school through graduate school. Youth have autonomy to select the type and degree of participation in Operation Smile; however, all initiatives in which they become involved focus on the department's four pillars of philanthropy: education, leadership, service, and awareness. The organization provides opportunities for students to benefit from learning, develop leadership skills, advocate for a cause, and become global citizens. Activities students may participate in include, but are not limited to fund-2w11qraisers, awareness events, classroom lessons, workshops, and conferences. Once students reach high school, they have the chance to apply for and go on an Operation Smile medical mission in a developing country with a team of Operation Smile medical volunteers. This service-learning experience allows students to play a role in providing patients with a chance at a better life.

Although students do not perform surgery, they play a critical role in the medical mission by educating patients, families, and community members about healthcare, a topic many in these countries know little about, but can prove life saving. This student service-learning initiative is part of Operation Smile's mission of sustainability in developing countries. The organization, for example, does not only bring medical volunteers to a medical mission site to perform surgeries, they also train local physicians and surgeons to treat patients year round, disseminate knowledge of healthcare to mothers and families, and provide post-operative care. Of the three forms of globalization indicated by Keith (2005), *neoliberalism*, *time-space compression*, and *globalization*, Operation Smile focuses its service-learning on the concept of *globalization*, whereby developing values of a culture emphasizes discourse, variance, and group responsibility for the world. As the researcher's definition describes, service-learning in this instance involves advocating for global citizenship, and financial and civil justice. Students involved in the NGO's service-learning program learn how everyone has a

right to receive healthcare, regardless of their culture's development and their financial situation. During Operation Smile's medical missions in developing countries, patients come to receive free surgery on their facial deformity. However, since its founding, the organization discovered patients, along with their families and community members, also suffer from lack of critical knowledge about basic healthcare. Students, therefore, disseminate this information by conducting healthcare presentations to educate local communities.

Operation Smile implements a more flexible service-learning model than a traditional academic curriculum. Terry and Bohnenberger (2004) found more positive effects if service-learning lasts longer. They suggest most benefits for semester-long rather than year-long programs. To qualify to go on a medical mission, students involved in Operation Smile meet various requirements. First, they must be involved in the organization for a minimum of one year, preferably through an Operation Smile Student Club or Association. While this timeframe resides on the longer end of Terry and Bohnenberger's suggestion, the NGO has a highly competitive selection process, and admits students with a sustained history of dedication to the cause. Second, students must have attended at least one of Operation Smile's International Student Leadership Conferences, where hundreds of high school and university students learn about leadership, character development, team building, and diversity through a five-day conference. Finally, students have to apply, be accepted to, and attend Operation Smile's Mission Training Workshop. At this four-day workshop, students learn about the anatomy of an Operation Smile medical mission, roles and responsibilities of the student team (typically comprised of two high school students and one adult chaperone), cultural sensitivity, public speaking, and five healthcare modules to present to patients, families, and community members while on the medical mission. Presentations include burn care and prevention, oral rehydration therapy, dental hygiene, nutrition, and basic healthcare. Facilitators of the Mission Training Workshop choose such topics so students can begin challenging inequalities (Barney, Corser, & White, 2010; Kiely, 2004; Lai, 2009; Lee, 2005). Students also begin to understand poverty and inequitable education issues as they receive encouragement to develop diverse presentations with strong visual aids and varied communication tactics appropriate for educating potentially illiterate populations. While these lessons extend throughout the service-learning experience, during the workshop, students also gain better assessment of different cultures, and learn about diversity in multiple socio-economic backgrounds (Primavera, 2008). While on the medical mission, students develop relationships with patients and families at the hospital, and community members during off-site experiences in locations including but not exclusive to orphanages, local schools, slums, shelters, and/or refugee camps. Forming these relationships helps students free themselves of cultural stereotypes (Primavera, 2008). Throughout service-learning, Operation Smile combines academics with community engagement as students learn about healthcare, convey the importance of it to community members around the world, and develop trusting relationships with individuals who need such knowledge to thrive (Roschelle, Turpin, & Elias, 2000). Furthermore, Jones and Popper (1972) assert community members tend to accept volunteers more readily if the country has been exposed to them in their history. Thus, Operation Smile's students typically get their service-learning placement in countries where the NGO has established a relationship with the government and community partners over many years.

For this study, the researchers used purposive sampling of Operation Smile's student leaders. Out of 24 high school and university student leaders identified within the organization, nine (aged 18 years or older) were asked to and agreed to participate in this study.

Participants included high school and university students who completed Operation Smile's Mission Training Workshop, and while still in high school, subsequently attended a medical mission in one of about 45 countries as part of the student team: five in Asian countries, two in African countries, and two in a Central American country. Student participants held positions as student leaders within the NGO and most previously helped staff facilitate at least one Mission Training Workshop to prepare their peers to go on a medical mission as well. Thus, students were well versed to talk about international service-learning experiences. Participants had been involved in Operation Smile between five to seven years. While the service-learning experience discussed in the focus group occurred during a period of high school, all participants became involved in additional Operation Smile service-learning opportunities as they continued onto university. Students' main objective for becoming involved in the medical mission was to make a positive difference in the lives of others. While Operation Smile hopes personal benefits to students as suggested in previous research arise due to service-learning, these are not discussed as part of student engagement in the program.

Student participants predominantly came from middle to high socio-economic status families from states in United States. All but one participant came from a home with two parents in household. All participants were female adults, between ages of 18 and 22 years. Students' ethnic heritages varied with six Caucasians, one Hispanic, one Persian, and one Vietnamese.

Researcher Bias

Since this qualitative case study depended on the lead researcher, it is necessary to disclose she is a 30-year-old Caucasian female pursuing a doctoral degree in Education, with a concentration in Curriculum and Instruction. She worked full time for three years as the director of student programs and curriculum for Operation Smile. Through this job, the researcher worked with students from elementary school through graduate school, helped modify and update the service-learning curriculum involved in this study, and facilitated six mission training workshops. Through her experiences at Operation Smile, the researcher developed positive beliefs about impacts of service-learning. She additionally had a strong working relationship with all identified student leaders. Using bracketing techniques and triangulation of interpretation from fellow research team members, we minimized the overt influence of the researcher's affiliation with the organization.

Data Sources

Researchers conducted two qualitative focus groups to collect data: first near Operation Smile's headquarters in Norfolk, Virginia, and second, on the campus of a university in the Washington D.C. area. We asked questions about students' experiences as well as their perceptions of the impact it will have on their future charity work (See Appendix A for full Interview Protocol). We secured permission to conduct research with human subjects from Old Dominion University and each participant signed an

informed consent prior to the focus group (See Appendix B for Informed Consent Form).

Data Analysis

Researchers used axial coding methods guided by existing literature about international service-learning. Data were analyzed in a multi-stage process starting from verbatim transcripts, contact sheets and field notes (See Appendix C for the contact summary sheet template). The first analysis had a broad focus with preliminary topics identified. Further examination led to topic clusters and the development of categories. Patton (2002) indicates the researcher must find value in the data through content analysis that includes “identifying, coding, categorizing, classifying, and labeling primary patterns in the data” (p. 462).

Strategies for Trustworthiness

Investigators established credibility through various means. For example, an expert panel reviewed the interview protocol before fielded, and researchers took detailed field notes and audio recordings during focus groups to capture descriptions, researcher reactions and thoughts. During focus groups, researchers did member checking, and asked for clarification of participant comments. A minimum of two people coded each focus group to establish inter-rater reliability of at least 8%. For the duration of the study, researchers maintained an audit trail.

Results

Although we know quite a bit about high school and early college participation in service-learning projects within local United States communities, we know very little about international service-learning at this age. Using a case study of a nonprofit, non-governmental organization, we examined students’ perceptions of their international service-learning experiences. Participant quotations illustrate themes which best represented the essence and rhetoric of the majority of participants.

Before the International Service Learning Experience

Safety concerns. Many components of service-learning offered by Operation Smile involve international student travel. Several participants noted this as a concern for their parents, and some explained they were met with much resistance prior to ultimately gaining parental approval. For instance, in discussing with her father how she wanted to attend the International Student Leadership Conference in China, Lauren’s father raised the concern, “if you go to China and make them mad, you’re not coming home.” Given that international travel is inherently unlike a service-learning opportunity inside a school or even in a hometown, we pushed students to elaborate on what convinced parents to allow them to travel overseas with this NGO.

Parent involvement. A few students noted their parents had either already gone on an Operation Smile medical mission or planned to go in the future. Some already went as medical volunteers, while others hoped to chaperone a student team. Ashley maintained, “I’m really excited ‘cause my Mom’s starting to get involved in it. So I think that in the next few years, she’ll probably go on a mission, and that will be really exciting.” This parental involvement and familiarity with the organization may have helped overcome fear of letting youth travel abroad. Similarly, while parents who had already

participated in a medical mission did so as a medical volunteer, rather than as part of a service-learning program, they still were exposed to *globalization*, and therefore had a first-hand understanding of financial and civil justice issues. Supporting their children to have similar exposure may have played a role in their decision to allow participation.

During the International Service Learning Experience

Interactions with patients. Students talked extensively about their involvement with patients on their medical mission. For example, Sarah described, “The one thing that I still remember is one particular baby...she’s the one who always stands out, like encompasses the entire experience.” These interactions allowed students to find comparisons between their own country and the one in which the service-learning experience occurred. Ashley remembers a photograph she took of one woman, and described how “it’s the coolest thing to see the dignity and the look in her eyes, and the way that the people respect themselves there, and how even though we couldn’t communicate with them, there’s so much...you can communicate without language.”

Some students focused specifically on how patients and community members lacked knowledge about cleft lips and palates. Becca compared knowledge people have about clefts in the United States to the developing country in which she attended a medical mission by explaining, “People, the parents, and relatives of patients that came to the hospital that my mission was at, they had very little knowledge about clefts, and the impact it made.” She went on to further describe emotional impacts to people with clefts due to lack of knowledge about healthcare by revealing, “they were ostracized in their community and many of them were helpless, and like that was their only chance to have a new life. Like, they went to doctors, and they had never been before, and they don’t know anything about the doctors...”

Many participants expressed surprise regarding the physical state of children they encountered during their service-learning experience. For example, Jessica described, “this one kid was 6 years old, but he probably looked like he was two. His thighs were the size of my wrists.” Other students expressed amazement with the lack of knowledge patients, families, and community members had for information they believed was basic. To quote Amy, “You should have seen this poor kid, he didn’t even know how to brush his teeth. I mean things we don’t even think about.” Instances like the one described by Amy, seemed to solidify the purpose of students going on medical missions for Operation Smile: teaching healthcare to patients, families, and community members who had not previously received such knowledge. The sad nature in which students conveyed these memories spoke to their understanding about globalization, and the importance of having a right to healthcare. Regardless of the context for the stories participants revealed about their experiences, all seemed to feel as Ashley described, “you are almost dropped into this whole new experience when you’re on a mission.”

During their service-learning experiences, most participants felt they had a sense of purpose beyond what they considered at home. Many described similar sentiments as Robyn, who expressed, “What I thought about most was, every morning when I’d wake up. It felt like I woke up with a purpose...more so than at home.” Others mentioned positively evaluating their own lives and impacts they could tell they had on patients, families, and community members they met during their medical mission. Audrey described, “I left with this renewed gratitude about what opportunities I had had, as well as this sense of confidence that I could help [patients] reach a greater level

of self-esteem.” Others described surprise at the degree of positive impact they had on people during their service-learning experience. Ashley, for instance, noted how she was “able to give someone comfort and not say a word,” and Robyn expressed surprise that from her healthcare presentations, patients, families, and community members were “actually learning something from what I’m saying!”

Interactions with Operation Smile team members. Students also expressed positive feelings about interacting with Operation Smile team members during the medical mission. Students like Jessica divulged how “being part of the whole medical team” affected her most. Amy revealed how she learned firsthand about the medical profession by “being able to observe in the [Operating Room]...and shadow nurses.”

In addition, other students formed personal relationships with team members, and described how the most powerful impacts came from medical volunteers. Robyn detailed, “When I was talking to the surgeon, I’d be like...how many missions have you gone on? And they’d say, oh, I’ve lost count. You’re like, oh my God! And then they tell you they spend their vacation time going on missions, and you’re like, this is incredible. You could be going to Hawaii, lying on the beach, but yet you’re here, working 12 hours a day. Very self-sacrificing.” Several other students detailed how impressed they felt with volunteers who gave up personal time to make a difference in the lives of others.

Some participants felt so absorbed in the undertaking of their service-learning, they did not consider much about their home life. Becca noted, “I totally immersed myself in my mission and where I was, and the people that were there.” Although some expressed a bit of difficulty disconnecting from their families at the start of the experience, these students, like Ashley, still insisted they found the “ability to live in the moment,” and get past missing home.

Students learned flexibility while on the medical mission. Based on the Mission Training Workshop students received prior to going abroad, as well as stories their peers told based on their experiences, participants had certain expectations about what they would encounter upon arrival in their assigned developing country. Some assumed they would have translators always helping give medical presentations in the country’s native language, others believed no community members would speak English or have any sort of education, and still others thought conditions of the country would be impoverished beyond what they had previously witnessed. While these conditions were true in some student service-learning experiences, they were not valid for others; and therefore, students needed to adjust expectations, and remain flexible in order to reach their set goals during the medical mission. For instance, Ashley said she had “a translator...for about 3 to 5 hours for the entire mission,” making it challenging to disseminate critical knowledge about healthcare to patients. Jenny noted what she “was expecting in Mexico was...to go into the middle of desert nowhere, not have anything, and...where [she] was, it was definitely a city.” This impacted which healthcare presentations Jenny taught to community members, because some were not necessary for the population. She, however, adjusted her assignment to reflect the needs of Mexican families.

After the International Service-Learning Experience

Cultural awareness. As a general consensus, students expressed differences between the culture of their international service-learning experience and their home. For example, in reflecting on her feelings during the medical mission, Lauren noted, "Nothing occurred to me about how life was so different at home. I was just so taken back by how different everything was, that it wasn't even that I was comparing at the time, that it was so non comparable." While Lauren realized her life was different from the lives of Kenyans, she did not truly understand how much so until she completed the service-learning experience and consciously reflected from home.

Participants noted they had a more profound understanding of what existed or occurred outside of the United States as a result of their service-learning experience. For example, Ashley contended, she had "a more global awareness of what else is going on in the world... It made me more aware of public health." She continued that the service-learning allowed her to become "more aware that there is a sociological aspect of medicine that we don't always recognize."

Almost every participant mentioned how partaking in international service-learning allowed them to gain perspective on not only their life, but on what others should, but do not always find most important. Robyn mentioned, for instance, "I wanted this nice house, and maybe a chandelier...but after [the medical mission] I was like, I have a TV, and it works, it runs, like food, I can eat, that's all that matters now." She continued, "...you go shopping, oh I got this new shirt, you're happy and then it's gone. But when you help someone it stays with you forever, I think." Several participants also noted how complaints from their peers seemed trivial, Amy describes, "I went back to school, and people would be complaining, 'cause it was the week before homecoming, and they were like, oh yeah, like I bought the wrong brand of shoes for my dress...and I was like, oh my God, I can't be here anymore."

Internal struggles. When contemplating how the service-learning experience fit into their lives, several participants noted feeling unsettled with the thought of going back to high school rather than doing something to give back to society. For a few, this meant considering reneging on attending college, although all ultimately decided to pursue a degree at a university. For example, Amy discussed, "I actually really wanted to completely just finish high school, not go to college, and just start helping people." Several participants noted how becoming involved in this international service-learning not only gave them an allegiance to Operation Smile, but a future serving others. Lauren described, "...there is something so great to be gained, to be involved in service-learning. If you spend a week, or 3 months in a country, you will sense that change...that sort of satisfaction again. 'Cause it's not like something, *oh, I'm so proud of myself, like I made a poster and like talked about dental hygiene there*, it's a proudness of knowing that I might actually have helped somebody's life...then you realize you were a part of this, and it's something that just changes you for the rest of your life... by the end of college I may have found something else as a job, but there won't be any point for the rest of my life where I'm not trying to do something to help some sort of charity organization..."

A lot of emotions struck participants once they completed their service-learning experience, some negative. For instance, on multiple occasions during the focus group, Becca mentioned feeling "depressed...and mad at the world around me, and how people take things for granted." Even two years after the medical mission, Becca

says, “when I see people being greedy and taking things for granted, it comes back. It resurfaces, these feelings of frustration.” Amy felt like she had “withdrawal” from the experience. When seeing some of her peers who had gone on a medical mission come home with a different reaction from her, Jenny said, “I’m struggling to understand why you’re not hyped up and not into saving the whole world right now.”

This disconnection was universally described as personally hurtful to the participants. Becca noted, “I tried to communicate how I felt on the mission to people, and they weren’t able to grasp, understand, or appreciate it.” Further, when Ashley returned home after the medical mission, her peers were inundated in applying to college. She, too, was part of this process; however, it did not have the same meaning to her as it did prior to the service-learning. Ashley said, “...everyone had their mind on the future, and so...I don’t think [they grasped] what it means to really connect with somebody, and to be able to really live that, because we spend so much of our time focusing on something that hasn’t happened or may not happen.” Even Lauren, whose parents fully supported her going on a medical mission, felt alone in that support. She described how her Mom and Dad focused on feeling “glad [she] had a great time” rather than the true meaning she gained from participating. Amy could not wrap her head around the fact that others did not understand what she experienced. She described, “And I was trying to explain to everyone, and sometimes it’s really frustrating, when you’re like, if you could understand an inkling of how amazing this organization is...it could completely change you.”

Due to feelings of disconnection with peers and parents, participants often sought out others who had gone on a medical mission in order to sort through their thoughts and emotions. Lauren discussed her communications with a peer who lived on the opposite side of the country. She described, “I got a letter in the mail from Sally, it was explaining everything that happened to her after her mission. And suddenly, I was like, that’s it, that’s when it hit me. It was when everything went back to normal that I was like, oh, this is bad. I need to go back now [to my medical mission site]. And you need people around who understand that.” Other participants, like Amy, described their need to be surrounded by like-minded people, both immediately after the service-learning experience, and today. She explained by attending the Mission Training Workshop and International Student Leadership Conference offered by Operation Smile, “you’re surrounded by people that are like you, like morals and values wise. People who want to see you succeed, they don’t want to put other people down; they are genuinely happy for others. I definitely think that’s the biggest part of Op Smile, and what I love the most, are the people that I’ve been able to meet. Some of them are my closest friends.”

Future directions. Most participants felt charity work would play an important role in their future. Although students acknowledged they had a passion for service even before their international experience, the medical mission cemented that dedication. Sarah explained, “Before my mission, I kind of dabbled in other things. And I love volunteering with anything that I can, but this is my passion, and I love it...I feel like this organization is going to be in my life for my entire life. And before that...it was just a club in high school. It was just something to do, you know. And now it’s something that’s going to be forever in my heart.” Other participants now want to work for Operation Smile in the long term. Lauren noted, “I feel like there are a lot of short term,

year long goals that are building hopefully into being a Program, Mission Coordinator.” Most participants returned from their medical mission and applied to one or two of the volunteer leadership councils offered to students involved in Operation Smile. High school students can become part of the Executive Leadership Council, ELC; and university students can become part of the College Council, CC. Lauren discussed how going on a medical mission was not her final involvement with the organization but “it was the deciding factor to apply for ELC.”

Additionally, participants felt proud their experiences did not go unnoticed and may influence others in the United States. Participants noticed youth in their communities wanting to become more involved in Operation Smile. Sarah offered, “I can’t say [my peers have] gotten everything just by listening to me...but I think that it’s definitely made them perhaps have more of a desire to help even at a bake sale...they’re helping, at least they want to be there.” Similarly, Audrey mentioned not only the impact her service-learning experiences have had on her peers, but also younger students. She described an article which a friend referred to her about a girl at her high school, who “was about three years younger, and in Girl Scouts, doing her Gold Award. And she said she heard a presentation about Operation Smile three years ago, and just realized that [she] needed to be doing something bigger for the world. And I was glad I made that presentation! But I’ve really seen how much of a ripple effect it can be.”

Discussion

This exploratory case study about international service-learning through an NGO supports previous research surrounding domestic service-learning in many ways, and differs in others. The following discussion brings to light how service-learning has changed lives in reference to globalization, personal outcomes, and academics.

Globalization

Service-learning initiatives like this appear to promote globalization in many capacities. For example, participants saw first-hand the needs of people living in developing countries. Students indicated through service-learning they made a positive impact on community members in several ways. For instance, some participants said they developed relationships with community members by bringing them life saving knowledge about healthcare through presentations they facilitated. Others expressed impact they made by demonstrating genuine compassion and interest toward families in need. Further, results align with Crabtree (2008) who described how service-learning occurs on a continuum from social change to charity. One goal of service-learning includes bringing students from participating in charity, to becoming involved in global issues and service, and imparting change in communities.

Moreover, comparable to results found by Vernon and Ward (1999), students in this study described how they felt more willing to undertake responsibility and more compassionate for others. This came in the form of supporting peers with their charitable endeavors, taking opportunities to train in leadership and subsequently taking on leadership positions to help serve communities, and empathizing with peers also trying to make a positive impact in the world through different initiatives. Similarly, students felt more connected to the NGO, and intended to amplify their commitment to the organization. As a result of their advocacy, participants noted increased involve-

ment of their peers, family, and local communities. Students expressed their desire to continue bettering themselves as community members and world citizens. For example, they increasingly communicate and interact with local community members, support peers in their advocacy of different causes, facilitate presentations for Operation Smile, become leaders and role models for other students to get involved in the organization, and maintain relationships with international community members from their medical mission whenever possible. Based on results of this study, nonprofits should consider benefits of including students into their programs, even if serving youth does not encompass the main mission of the organization, as was the case with participants involved in this NGO.

Benefits and Concerns to Students

Participants voiced they felt more confident after the international service-learning experience, a parallel conclusion to Primavera's (2008) finding about domestic service-learning. Many participants specifically described situations where they demonstrated strong leadership and problem solving capabilities, as well as increased self-confidence. Students also appeared to prioritize the importance of decisions better than peers who did not participate in service-learning.

In accordance with past researcher, overall students felt more satisfied with themselves (Primavera, 2008). However, future implementers of service-learning should consider resulting feelings of disconnection and depression upon return home. These negative emotions may have surfaced for several reasons. For example, with domestic service-learning, students can easily find others to share stories. If an entire class participates in a project, classmates can ponder and reflect together. Yet finding others to share about international service-learning proves more taxing, especially in this context when students shared their experience with only one partner. Thus, we found participants felt disconnected from their stateside peers and sought out other international charity workers with whom to connect. Another reason for these difficulties may have arisen because participants were not required to journal or formally participate in personal or group reflections during their service-learning experience. Primavera (2008) argues benefits of service-learning come from pondering, discussing, or applying experiences. Post service-learning, students had to write a medical mission story and do presentations about their experience for their local community, both of which involved elements of reflection, but certain components built into the program to allow for additional processing seemed to be lacking. Researchers suggest requiring reflections during the experience, such as journaling or blogging, and training adult chaperones to formally reflect with students each evening.

Academics

Concurrent with findings from Billig, Root, and Jesse (2005), most participants indicated how their international service-learning experiences drove them to improve personal academics so in the future they could more effectively help others. Moreover, Crabtree (2008) said engaging in charity enables students to better understand their academic discipline and gain a sense of civic duty. The current study found corresponding results whereby students felt more driven and confident to succeed in their own lives after going on the international service-learning experience. One exception was noted, however, and proved more aligned with research by Ash, Clayton, and At-

kinson (2005), who contended service-learning does not benefit students academically. This incidence arose with Sarah, who found difficulty focusing on academics due to extensive hours she put into volunteering with the NGO. Ultimately, the service-learning allowed Sarah to discover a passion for children and the nursing profession, however, it took encouragement from her parents to help focus this university student on an academic track rather than service remaining her priority.

Similarly, findings indicated development of personal relationships during the international service-learning experience played a key factor in career choices. For example, most participants articulated wanting to choose a career path with potential to make this kind of difference in the future. Participants also developed relationships with medical volunteers on the Operation Smile medical mission team. By learning about physicians' career choices, and observing them in their current profession, participants assessed whether they wanted to pursue something similar.

As aligned with past research on benefits to service-learning, all students in the study pursued leadership opportunities (King, 2004; Lai, 2009; Lee, 2005). At the time of data collection, each student held a student leadership position specifically in Operation Smile Student Programs, but many also held such positions in student clubs, or other university related activities. While students did not indicate whether this experience positively impacted grade point average, they concluded it motivated them to study harder in order to become qualified leaders in their communities, and ultimately support global causes for life.

Broader Applications

Operation Smile's service-learning program can serve as a framework for other NGOs seeking innovative ways to engage local community members and extend their mission. For instance, while Operation Smile's predominant charge entails correcting facial deformities, involving students enables them to educate many more community members about critical healthcare that can decrease the number of people born with cleft lips or palates. The model's shared reciprocity allows communities and students to mutually benefit from such participation. If, conversely, NGOs do not want to formally develop a service-learning program for youth, they may want to consider partnering with a previously established global service-learning organization. This will allow diverse service-learning groups to set up programs that send students abroad, volunteer with partners who have identified true needs in communities, and work with a model for positively supporting these needs. Additionally, if NGOs involve youth in their cause, they may gain lifelong supporters, as these participants indicated they were for Operation Smile. Such supporters effectively gain additional advocates in their communities, families, and peer groups.

Limitations

Although the researcher implemented methods to ensure trustworthiness of the study, limitations still arose. Researcher bias may have influenced the flow of information in the focus groups and interpretation of themes, although bracketing and multiple coders were used. Participants had a relationship with the lead researcher through their work with Operation Smile, and thus responses may have reflected what students believed the researcher wanted to learn. To minimize this threat of social desirability, the researchers introduced focus groups by stressing all responses would remain confidential and not impact participants' future experiences with the organization.

Certainly, the responses from just nine participants is too small and non-representative a sample to attempt to generalize about the effects of international service-learning for high school and early college students. We couch this as an exploratory case study to warn readers not to broadly apply conclusions.

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Appendix A

Interview Protocol for Student Focus Group

Today's Date:

List of Medical Mission Site Locations:

Interviewer:

Focus Group Materials

1. Audio recorder

Focus Group Procedure

1. Arrive at the meeting space 15 minutes prior to students to set up.
2. Follow the Introductory Script.

Introductory Script

Hello, everyone. Thank you in advance, not only for your participation in today's focus group, but for all of the dedication you have already shown to Operation Smile. As you probably already know, I am currently working on obtaining my doctorate degree in Education, specifically, Curriculum and Instruction. As part of this program, I am doing a research study on students' perceptions of their Operation Smile service-learning experiences. You are here today to support this research by participating in a focus group. Please remember, your participation is voluntary and will not impact your leadership role within the organization.

Again, your participation is voluntary, and the information you provide is confidential. Your responses will be audio taped; however, you will not be distinguished by name or identifying characteristics when I write results for the study, so please be open and honest with your answers.

Please let me know if you have any questions or concerns before, during, or after the interview.

3. Have community member sign a consent form or turn in an assent form if under 18.
4. Facilitate the focus group.
5. Allow students to ask any questions or voice any concerns about the session.

Focus Group Questions

1. While you were on your medical mission, what personally impacted you the most?
2. While you were on your medical mission, what thoughts did you have regarding your life at home?
3. How do you feel your presence on the medical mission impacted others you encountered in the country? For example, patients, families, volunteers, and community members.
4. Describe the value of the healthcare presentations you facilitated. What leads you to believe this?

5. Once your medical mission ended, did you feel you wanted to make any life changes? If so, describe those changes.
 6. As a result of your medical mission, what personal goals did you develop? How have you started working toward these goals?
 7. How has your medical mission experience effected your involvement in charity work?
 8. How has your medical mission experience impacted your family?
 9. As a result of your medical mission experience, in what ways has your community's involvement in philanthropy changed?
 10. What insights have your peers gained as a result of your experiences on a medical mission?
-

Appendix B

Informed Consent Document Old Dominion University

**Project Title: Students' Perspectives of Their Service-Learning Experiences:
A Case Study of Operation Smile**

Introduction

The purposes of this form are to give you information that may affect your decision whether to say YES or NO to participation in this research, and to record the consent of those who say YES. The research study is called Students' Perspectives of Their Service-Learning Experiences: A Case Study of Operation Smile. It will be conducted with you and a few of your peers who have also gone on Operation Smile medical missions.

Researchers

Linda Bol is the responsible project investigator. She is a professor in Old Dominion University's Darden College of Education, in the Department of Teaching and Learning. Suzanne Unger is the investigator for the study. She has a master's degree in elementary education, and is working on her doctorate degree in education, curriculum and instruction, from Old Dominion University's Darden College of Education.

Description of Research Study

Several studies have been conducted looking into the subject of service-learning. None of them have explained the perspectives Operation Smile students have about their experiences, and how it has impacted their lives.

If you decide to participate, then you will join a study involving research of service-learning. You will participate in a focus group with approximately seven peers who have also participated in an Operation Smile medical mission, and join a discussion to provide your perspectives about the experience. The focus group session will be audio recorded, but all identifying information will remain confidential. If you say YES, then your participation will last for about 1 hour, and will take place in a meeting room of a local hotel.

Risks and Benefits

Risks. You do not face risks by participating in this study. Your responses will not impact your involvement in Operation Smile. And, as with any research, there is some possibility that you may be subject to risks that have not yet been identified.

Benefits. The main benefit to you for participating in this study is being able to express your opinions about the service-learning experience during a medical mission, and in turn making the program stronger for other students who participate in the future. In addition, your perspectives will strengthen the program for community members who receive services.

Costs and Payments

The researchers are unable to give you any payment for participating in this study.

New Information

If the researchers find new information during this study that would reasonably change your decision about participating, then they will give it to you.

Confidentiality

The researchers will take reasonable steps to keep private information, such as focus group responses and identifying information confidential. The results of this study may be used in reports, presentations, and publications; but the researcher will not identify you. Of course, your records may be subpoenaed by court order or inspected by government bodies with oversight authority.

Withdrawal Privilege

It is OK for you to say NO. Even if you say YES now, you are free to say NO later, and walk away or withdraw from the study at any time. Your decision will not affect your relationship with Old Dominion University or Operation Smile, or otherwise cause a loss of benefits to which you might otherwise be entitled.

Compensation for Illness and Injury

If you say YES, then your consent in this document does not waive any of your legal rights. However, in the event of harm arising from this study, neither Old Dominion University nor the researchers are able to give you any money, insurance coverage, free medical care, or any other compensation for such injury. In the event that you suffer injury as a result of participation in any research project, you may contact Linda Bol, Dr. Nina Brown, Suzanne Unger, or Dr. George Maihafer, the current IRB chair at Old Dominion University, who will be glad to review the matter with you.

Voluntary Consent

By signing this form, you are saying several things. You are saying that you have read this form or have had it read to you, that you are satisfied that you understand this form, the research study, and its risks and benefits. The researchers should have answered any questions you may have had about the research. If you have any questions later on, then the researchers should be able to answer them.

If at any time you feel pressured to participate, or if you have any questions about your rights or this form, then you should call Dr. Nina Brown, Dr. George Maihafer, the current IRB chair, or the Old Dominion University Office of Research.

And importantly, by signing below, you are telling the researcher YES, that you agree to participate in this study. The researcher should give you a copy of this form for your records.

Subject's Printed Name

Signature

Date

Investigator's Statement

I certify that I have explained to this subject the nature and purpose of this research, including benefits, risks, costs, and any experimental procedures. I have described the rights and protections afforded to human subjects and have done nothing to pressure, coerce, or falsely entice this subject into participating. I am aware of my obligations under state and federal laws, and promise compliance. I have answered the subject's questions and have encouraged him/her to ask additional questions at any time during the course of this study. I have witnessed the above signature(s) on this consent form.

Investigator's Printed Name

Signature

Date

Appendix C

Contact Summary Sheet

Researcher: Suzanne Unger

Interviewees: Operation Smile Student Leaders

Contact Date:

Today's Date:

1. What were the main issues or themes that emerged for you in this contact?
2. What discrepancies did you note in the interviewees' responses?
3. Did anything strike you as salient, interesting, or important in this contact?
4. General comments about how this interviewee's responses compared with other interviewees:

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