# 2015-16 IFM Community Outreach Projects for CEE

If you are interested in learning more about any of these projects, please contact [Elissa.goldberg@drexelmed.edu](mailto:Elissa.goldberg@drexelmed.edu).  

Please do not contact these sites directly.

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### CHILDREN AND YOUTH

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| **AIM HI**                    | Two medical students are being sought to help with two different programs. Move It With Mommy and Me is an hour-long nutrition and fitness program for mothers and children at the Eliza Shirley House on Juniper and Arch Streets, held once per month. The Pre-K Obesity Challenge program is being held at the West Philadelphia Community Center, also once monthly. Interested students will be responsible for assisting to lead the class, along with a medical resident and a second-year student. | Eliza Shirley House Shelter  
1320 Arch Street  
Phila, PA 19107  
West Phila Comm’y Ctr  
3512 Haverford Ave.
Phila, PA 19104 | 2 sessions per month, Oct - April | | 7.3 | C, CP, Shuttl e |
| Childhood Obesity Challenge   | New to CEE!                                                                                                                                                                                                            |                                                                          |                                                                              |    |
| **Center for Grieving Children** | The Center for Grieving Children allows medical students to witness the resilience, grief, and growth of children who have lost someone close to them. There are two slots for this project, and they will go on a first-come-first-serve basis. Medical students meet with the children in groups that are held on weekday evenings. **There will be a mandatory orientation for volunteers on the weekend of August 23rd and 24th.** | 3300 Henry Ave.,  
Suite 110  
Philadelphia, PA 19129 | ½ mile | C, CP | Year-long | X |
<p>| <strong>CPR Anytime</strong>               | Using the American Heart Association’s <strong>CPR Anytime</strong> kits, medical students will work with 10th and 11th graders at two different public schools or at Pennsylvania School for the | Mastbaum Area Vocational and Technical High School (MVTS) | MVTS = 5 | CP | 7 sessions |</p>
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<tr>
<td><strong>Drexel Mentoring and Pipeline Program (DMAPP)</strong></td>
<td>Deaf with 7th and 8th graders to teach them about heart health, hands-only CPR, and give them the skills to teach others hands-only CPR life-saving skills. The high school students will visit the Queen Lane campus for a tour and to see actual hearts. Interested medical students do not need CPR certification to participate in this project.</td>
<td>Martin Luther King, Jr., High School (MLK)</td>
<td>MLK = 3.5</td>
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<td><strong>School in process of being chosen.</strong></td>
<td></td>
<td>Penn Sch for Deaf (PSD)</td>
<td>PSD = 1 mile</td>
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<td><strong>Student Testimonial</strong></td>
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<td><strong>DUCoMentors</strong></td>
<td>DMAPP is a mentoring and tutoring program designed to foster development of future leaders in health and medicine through academic excellence, professionalism, and integrity. It is implemented in a predominantly African-American, inner city Philadelphia, public high school. The ultimate goal is to expose the minority youth to careers in health and medicine with the hopes of increasing diversity in those fields.</td>
<td>School in process of being chosen.</td>
<td>C, CP</td>
<td>X</td>
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<tr>
<td><strong>New to CEE!</strong></td>
<td>After-school program at St. Martin de Porres (23rd and Lehigh), working with 6th – 8th graders, for mentorship and to increase interest in STEM (Science, Technology, Engineering, and Mathematics) careers, and to support the college-career pipeline.</td>
<td>St. Martin de Porres School 2300 W. Lehigh Avenue Philadelphia, PA 19132</td>
<td>2.1</td>
<td>X</td>
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<tr>
<td><strong>Student Testimonial</strong></td>
<td>This is part of a city-wide program designed to nurture interest in medical careers among high school students. Drexel is one of four academic health centers paired with a public school. In their first session, as a large group at Lankenau Hospital, high school students view the pilot TV program of “ER.” They then spend several sessions at their school, led by medical students and/or faculty members, researching different health and social issues that were captured in that show. One of their sessions involves a visit to the medical school campus. The final session brings together students from all four schools, again at Lankenau, where the high school students do a presentation on one or two issues, and are judged on the depth of understanding and quality of presentation.</td>
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<td><strong>ER in the Schools</strong></td>
<td>Medical students will take turns presenting on various aspects of the physiological system, as well as meeting 3 sites: 1. Mercy Vocational</td>
<td>3 sites: 1. Mercy Vocational</td>
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<td><strong>Health Start</strong></td>
<td>3 sites: 1. Mercy Vocational</td>
<td>MVHS, PSD = CP, shuttle,</td>
<td>7-session program</td>
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<tr>
<td><strong>Student Testimonial</strong></td>
<td>with the high school students in small groups. Sessions will rotate between the high-school and medical school campuses.</td>
<td>High School (MVHS) 2. Franklin Learning Center (FLC) 3. Pennsylvania School for the Deaf (PSD)</td>
<td>1 mile FLC = 1/2 m fr Hahn</td>
<td>PT</td>
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<tr>
<td><strong>Hope Garden at the Stenton Family Manor</strong></td>
<td>The Hope Garden is located in the backyard of the Stenton Family Manor, the largest public homeless shelter in Philadelphia. The garden is tended by shelter residents and volunteers under the supervision of the Weavers Way Co-op farmer. Produce from the garden provides food for people in the shelter (any extra is sold at a farmer’s market). Medical students will work with children in the garden during warm weather, and will provide tutoring for the after-school program during colder months.</td>
<td>Stenton Family Manor 1300 E. Tulpehocken St.Philadelphia, PA 19138</td>
<td>3.5</td>
<td>CP</td>
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<tr>
<td><strong>Legacy Youth Tennis and Education (LYTE)</strong></td>
<td>The mission of Legacy Youth Tennis and Education (formerly called Arthur Ashe Youth Tennis and Education) is to create opportunities for a diverse cross-section of young people, especially those from low-income families and communities, to make positive choices in their lives, remain in and succeed in school, reject violence and other risky behaviors, and grow into active, responsible and productive citizens. Medical students will choose from a number of different programs and sites, that will include “a variety of hands-on activities including: tennis, leadership exercises and workshops, and meaningful service-learning projects.”</td>
<td>Main office: 4842 Ridge Avenue Philadelphia, PA 19129  But some work may take place at city rec ctrs</td>
<td>1.8</td>
<td>C, CP, PT</td>
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<td><strong>Medical Interpretation</strong></td>
<td>For fluent Spanish speakers: At St. Christopher’s Hospital for Children, a large majority of patients are Puerto Rican or Latin American and primarily Spanish speakers. Bi-lingual medical students are encouraged to use their skills for translating brochures and informational documents, as well as interpreting for patients and their families in the Ambulatory Care Clinic. Interested students must attend an orientation and training in medical interpretation as well as pass Spanish: St. Christopher’s Hospital for Children Front St. and Erie Ave. Philadelphia, PA 19134  Mandarin/Cantonese: 1427 Vine Street (acr)</td>
<td>Spanish: 3.7</td>
<td>C, CP, PT</td>
<td>Four 4-hr sessions + journals  Also available for Honors, with 4 additional sessions plus</td>
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<td>oral and written tests in Spanish. <strong>For speakers of Mandarin and/or Cantonese:</strong> interpreters are needed for both the Chinatown Clinic and the adult ambulatory clinic at Hahnemann. Minimum number of sessions for CEE credit is 4. However, this project is available for Honors credit if a student provides interpretation for an additional 4 sessions, and writes a reflective paper.</td>
<td>street from Hahn) or 915 Vine St (Chinatown Clinic)</td>
<td>reflective paper</td>
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<tr>
<td>Music to My Ears</td>
<td>To provide art enrichment through music education to students that would not otherwise have access to such programs. Instructions would be given to students in individual and/or group lessons to accomplish the following objectives: Learn how to read music written in treble clef; Become proficient playing simple melodies on the recorder; Gain a basic background in music history and theory; Build collaboration and team-working skills by participating in a music ensemble; Introduce students to practicing good health, including an emphasis on nutrition, fitness, and hygiene.</td>
<td>Amy Northwest Middle School 6000 Ridge Avenue Philadelphia, PA 19128</td>
<td>2.5</td>
<td>C, CP, Year-long</td>
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<td>Student Testimonial</td>
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<td>West Phila PACSSSS (Parents for Autistic Children Sensory Social Supports)</td>
<td>PACSSS runs an after-school program for children with autism with a range of abilities. Some of the after-school activities include: homework assistance, social skills and self-calming training, movement and music activities, arts and crafts, and more. Students will assist as needed.</td>
<td>6050 Market St. Philadelphia, PA 19139</td>
<td>6.8</td>
<td>C, CP, Year-long</td>
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<td>New to CEE!</td>
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<td>Pediatric Play Program</td>
<td>The Pediatric Play Program takes place in the Emergency Department of St. Christopher’s Hospital for Children. Medical students work in pairs under the supervision of Child Life Specialists, playing and talking with children who are patients in the ED. Students must complete five sessions of 2.5-hours at the hospital, and complete a journal for each session.</td>
<td>St. Christopher’s Hosp for Children Front St. and Erie Ave. Philadelphia, PA</td>
<td>3.7</td>
<td>C, CP, 5 sessions between October and April</td>
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<td>Student Testimonial</td>
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<td>Philadelphia City Rowing (PCR)</td>
<td>The mission of Philadelphia City Rowing is “to empower local public school students through the sport of rowing.” Medical students will lead nutrition education sessions for</td>
<td>Sessions will be held either at PCR: 2700 W. Girard</td>
<td>4.2</td>
<td>C, CP, 8 sessions between October and</td>
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<td><strong>New to CEE!</strong></td>
<td>high school and middle-school rowers on Saturdays, following practice. No background in rowing or nutrition necessary, although familiarity with either and/or both is welcome!</td>
<td>Or at Lloyd Hall on Boathouse Row</td>
<td>April</td>
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<td><strong>Philadelphia Futures</strong></td>
<td>Philadelphia Futures’ centerpiece program, Sponsor-A-Scholar, helps students from public high schools, who will be the first in their family to go to college, to succeed in high school, and to pursue and complete higher education. Medical students will help with tutoring in math and science, and with SAT prep.</td>
<td>Philadelphia Futures 230 S. Broad, 7th Fl. Philadelphia, PA 19102</td>
<td>Year-long</td>
<td>X</td>
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<td><strong>Philly Girls in Motion</strong></td>
<td>Philly Girls in Motion is a volunteer driven organization that engages girls and their families in activities that encourage fitness and good nutrition. In turn, the organization supports healthy body image, confidence and good decision making processes. Medical students will lead a group in fitness and health education.</td>
<td>Simons Center 7200 Woolston Ave. Philadelphia, PA 19138</td>
<td>8 sessions</td>
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<td><strong>Reach Out, Educate, and Connect (REC)</strong></td>
<td>The REC Project aims to build relationships between nearby third-graders and medical students and to teach preventive healthcare through interactive, discussion-filled sessions. Topics include the musculoskeletal system, smoking, the human organ system, and medical careers. The 3rd-graders will have scheduled field trips to Queen Lane.</td>
<td>Wissahickon Charter School (public) 4700 Wissahickon Ave. Philadelphia, PA 19129</td>
<td>6 sessions</td>
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<td><strong>Science Explorers</strong></td>
<td>Medical students will work with 6th, 7th, and 8th graders in hands-on, interactive science activities in order to engage young people in asking “why questions” and to help them ignite a passion for the world around them.</td>
<td>Amy Northwest Middle School 6000 Ridge Avenue Philadelphia, PA 19128</td>
<td>7 sessions</td>
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<td><strong>Spark Philadelphia</strong></td>
<td>Spark combats the epidemic of disengagement and dropping out among low-income urban youth with a unique apprenticeship model that brings 7th and 8th grade youth into professional workplaces. As students connect their school work to tangible career opportunities, they increase motivation and performance in school. Medical students will be paired with a 7th or 8th grade student to be a one-on-one mentor.</td>
<td>Queen Lane &amp; Students’ school: William Dick School 2498 Diamond Street Philadelphia, PA 19121</td>
<td>8 sessions, plus training and final ceremony</td>
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<td>Starfinder</td>
<td>Starfinder's soccer, educational, and personal development programs inspire young people from underserved communities to achieve success both on and off the field. Medical students choose an age-range with whom to work, playing soccer, helping with homework, and teaching about health.</td>
<td>Starfinder Foundation 4015 Main St. Philadelphia, PA 19127</td>
<td>2.6 Miles from QL</td>
<td>C, CP, PT</td>
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<td>Stress Reduction / Mindfulness, Wkg with Children</td>
<td>This is an opportunity to learn stress reduction skills, and then teach them. Students enroll in the separate, elective course, Mindfulness for Personal and Professional Well Being which begins September 18th. This 9 session course meets on Wednesday afternoons and teaches mindfulness, a form of meditation that calms the mind and relaxes the body, reducing anxiety, insomnia, depression and fatigue. Then, in the winter, students bring stress reduction sessions to teen learners at a community site.</td>
<td>Locations vary.</td>
<td>Varies</td>
<td>C, CP</td>
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<td>Teach to Learn</td>
<td>Students will be matched in pairs with elementary school classrooms at the Wissahickon Charter School. Medical students will assist the elementary students in their lesson that afternoon. With a year-long commitment, medical students will be able to get to know the children well.</td>
<td>Wissahickon Charter School (public) 4700 Wissahickon Ave. Philadelphia, PA 19129</td>
<td>½ mile</td>
<td>W, CP</td>
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<td>Tutoring at Women Against Abuse Emerg Shelter</td>
<td>Women and their children who have experienced violence in their home situations are allowed to stay at the WAA emergency shelter for up to 120 days. The after-school program usually serves 5 – 10 children, ages 5 – 11. As part of this program, medical students will participate in a training on domestic violence.</td>
<td>The shelter’s location is confidential. It is located in the Northwest section of Philadelphia.</td>
<td>15 min fr QL</td>
<td>C, CP</td>
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<td><strong>Urban Blazors Student Testimonial</strong></td>
<td>Urban Blazors uses outdoor activities such as rock climbing, hiking, camping, whitewater rafting, canoeing and skiing, as subtle techniques to engage inner-city youth. The goals of Urban Blazors programs include relationship development and mentoring, leadership and healthy team dynamics, and science and conservation education. Medical students will work with Urban Blazors staff to lead groups of under-resourced youth on hikes and other outdoor activities to build leadership and team skills.</td>
<td>Urban Blazors 3217 W. Clearfield St. Philadelphia, PA 19132</td>
<td>Office: 1.8</td>
<td>C, CP, PT</td>
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<td><strong>Wellness Wednesdays</strong></td>
<td>Health education sessions for 9th graders from the Pennsylvania School for the Deaf will take place both at their school and at DUCoM. Medical students will learn to work with an interpreter. These students work well with hands-on activities. Interested students will create a curriculum based on PSD’s teachers’ and students’ interests.</td>
<td>100 W. School House Lane Philadelphia, PA 19144</td>
<td>1 mi</td>
<td>W, CP, PT</td>
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<td><strong>WIM (Women In Medicine)</strong></td>
<td>Women in Medicine (WIM) is an organization that is focused on mentoring young teenage girls who express interest in medicine, to help them stay on track and follow their dreams. North Light Community Center serves an underprivileged population and provides an afterschool program and camp for students who would most likely be the first in their family to attend college. Through fun activities, field trips, and interesting workshops we hope to connect female medical students with mentees from the community and advance women in medicine.</td>
<td>North Light Community Center 175 Green Lane Philadelphia, PA 19127</td>
<td>3.3</td>
<td>C, CP</td>
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<td><strong>Work with the Social Worker at St. Christopher’s Hospital for Children</strong></td>
<td>One or two medical students needed to help develop and lead educational support groups (possibilities: parenting, sibling support, HIV + boys, parents of children with chronic illness), and go on home visits. Ability to speak Spanish not necessary but very helpful. <strong>New to CEE!</strong></td>
<td>St. Christopher’s Hosp for Children Front St. and Erie Ave. Philadelphia, PA</td>
<td>3.7</td>
<td>C, CP, PT</td>
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<tr>
<td><strong>YouthBuild Philadelphia</strong></td>
<td>YouthBuild Philadelphia Charter School provides a one-year program for high school dropouts to earn their diplomas while learning vital job skills and providing valuable community services. Medical students will provide in-class tutoring.</td>
<td>1231 N. Broad Street, 3rd Floor, Philadelphia, PA 19122</td>
<td>4.7</td>
<td>C, CP, PT</td>
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## Adults and Mixed-Age Groups

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<tr>
<td><strong>Back On My Feet</strong></td>
<td>Back on My Feet is a nonprofit organization that promotes the self-sufficiency of homeless populations by engaging them in running as a means to build confidence, strength and self-esteem. Interested medical students must commit to running with an early morning group of people living in a homeless shelter for a minimum of two times per month (from October through April), and writing a journal entry one time per month.</td>
<td>Locations vary.</td>
<td>Varies</td>
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<td><strong>DePaul House</strong></td>
<td>DePaul House provides transitional housing for formerly homeless men. It recently opened a medical respite center with 8 beds, for homeless men who need a place to recuperate following discharge from an acute care medical facility. Medical students will lead health education sessions open to all residents. For those interested in an honors option, students are needed to spend time with the residents in the respite program, engaging in discussions and games.</td>
<td>5725 Sprague Street Philadelphia, PA 19138</td>
<td>2.6</td>
<td>Opt</td>
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<td><strong>Elders Project</strong></td>
<td>This project combines the CEE and Geriatrics Experience course-work, and allows students to get to know an older adult living in the community. With the CEE-GE combined project, you will be paired with another student and assigned together to meet with an older adult living in a nearby neighborhood. Journal entries will be due for each visit. Optional: creating a video.</td>
<td>NW Philadelphia, visits in mentor’s home and gatherings at UUHouse office in Germantown</td>
<td>Within 5 mi.</td>
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<td><strong>Esperanza College</strong></td>
<td>Esperanza College is a 2-year college serving a mostly low-income Latino adult population. Medical students will be paired with an individual Esperanza student to provide tutoring in Anatomy and Physiology as part of the Certified Medical Assistant program. Tutoring will take place at the College in the Hunting Park neighborhood. Esperanza students will also visit Queen Lane during the year.</td>
<td>4261 N. 5th Street Philadelphia, PA 19140</td>
<td>3.5</td>
<td>X</td>
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<td><strong>Refugee Resettlement Program of LCFS</strong></td>
<td>The Lutheran Children and Family Service (LCFS) Refugee Resettlement Program, located in Northeast Philadelphia, provides housing assistance, health care access, educational</td>
<td>LCFS Refugee Resettlement Program 5401 Rising Sun Ave.</td>
<td>4.2 mi.</td>
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<td><strong>Student Testimonial</strong></td>
<td>programs, counseling and a variety of other immigration-related services for refugees and asylees. As one of three such organizations operating in Philadelphia, LCFS resettles approximately 175 individuals per year. Medical students will be matched with one newly arrived refugee family in the fall and will be responsible for helping to coordinate their medical care. This will include scheduling and escorting clients to their appointments, making sure prescriptions get filled, and treatment plans are followed. Having a car is not necessary, but will make things easier. Training will be provided.</td>
<td>Philadelphia, PA 19120</td>
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<td><strong>Smoking Cessation at Salvation Army Rehabilitation Center</strong></td>
<td>Interested students will be trained to be smoking cessation counselors for residents at the Salvation Army inpatient rehabilitation center who want to quit smoking. The curriculum is divided into four sessions which will be repeated. Each session will be led by a medical resident, a second-year student, and two first-year students. <strong>This program begins earlier than other CEE options, so you must notify us of your interest early!</strong></td>
<td>4555 Pechin Street Philadelphia, PA 19128</td>
<td>3.3</td>
<td>C, CP, Evening sessions</td>
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<td><strong>Stress Reduction/Mindfulness – Wkg with Adults</strong></td>
<td>This is an opportunity to learn stress reduction skills, and then teach them. Students enroll in the separate, elective course, Mindfulness for Personal and Professional Well Being which begins September 18th. This is a 9 session course that meets on Wednesday afternoons that teaches mindfulness, a form of meditation that calms the mind and relaxes the body, reducing anxiety, insomnia, depression and fatigue. Then, in the winter, students bring stress reduction sessions to adult learners at a community site.</td>
<td>Locations vary</td>
<td>Varies</td>
<td>C, CP, 6 sessions</td>
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<td><strong>Sunday Breakfast Rescue Mission</strong></td>
<td>The Sunday Breakfast Rescue Mission provides many services that meet the basic needs of the Philadelphia area’s homeless population, including 3 meals a day, shelter for up to 30 days for 175 men, clothing, and the “Overcomers” program, a year-long recovery program for up to 30 men. Medical students will lead health education sessions for the Overcomers.</td>
<td>Sunday Breakfast Rescue Mission 302 N. 13th St. Philadelphia, PA 19107</td>
<td>6.8</td>
<td>C, CP, PT, shuttle 6 sessions</td>
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Student Testimonials (from Class of 2017)

Back on My Feet:

At the beginning of my CEE project with Back on My Feet (BOMF), I would have neither considered myself a runner nor an early morning riser. At first, I chose BOMF because of the positive reviews that I heard from 2nd year students who did the program. In addition, I was motivated by incentive to stay active, and I had lofty goals to start running more, and to build my running endurance. Despite the incentives of the program, the thought of the first morning run was really daunting. First, I had to wake up at a ridiculously early time and catch the 5 a.m. shuttle from Queen Lane to Center City. Second, I was worried that everyone in the program was a hardcore runner. To my surprise, that morning’s run was a very pleasant experience and it set the tone for what has been one of the most positive and worthwhile volunteer experiences of my career.

...Running outside this past winter was extremely challenging. Most of our runs from December to March were cancelled due to City-wide Code Blue warnings which prohibit anyone from doing outdoor activities in sub-freezing temperatures. Even with all the cancellations, the weekly emails from the team leaders always had an inspirational message and perhaps a video clip to brighten all our spirits. On a whole, the BOMF family does more than running; for example, on MLK Jr Day of Service, all the teams met at Love Park for a trash pickup event, and there is always an occasional chili cook-off event between teams. However, we also had solemn moments when a female resident member of another shelter passed away. Again, all the BOMF teams gathered at that shelter and we dedicated the morning run in her honor. This experience highlighted the impact of BOMF on the team members’ lives and how it acts as a network of support during the good and bad times.

BOMF has been a beneficial experience for me because I joined a running group which gets to explore Philadelphia before most people are awake and on the streets. I also met a lot of awesome people: from non-resident volunteers who runs five marathon per year to retired executives who come out to run because they love the sport and the BOMF mission. The stories of the residents were especially moving because some of them worked night shifts and didn’t sleep until after morning run or the alumni members that continued with BOMF even after they left the shelter and worked busy jobs. BOMF taught me that support (whether it is medical, rehabilitative, familial or otherwise) can be very integral to people’s recovery or re-integration to “normalcy”. I hope that I will be able to apply this principal in my career as a future physician. I aspire to work with my patients and other doctors to provide the support and encouragement that they need for optimal recovery. – Ric Smith, MS II

Center for Grieving Children:

A pillar of the philosophy at the Center for Grieving Children stands as the effort to create an open space to discuss death and the emotional response to it. In a way, some societal pressures have cornered the subject as a taboo topic. Yet, I am learning that death permeates through not only those my age and older, but the young. The way grieving can be internalized acts as a potential barrier to the healthy growth of a child’s ability to communicate their feelings. In my own grieving, I see the temptation to internalize sorrow and sometimes even choose to do so still knowing that it may not be the healthiest way to grieve. As I work with the children, I have found this internalization to be a real issue, especially for one child in particular.

Unenthusiastically playing the game of hide-and-seek, at which I have revived my childhood skills thanks to J, I bent over to look under the sandbox. No surprise that J smiled under the table staring at me and even getting frustrated that I found him. He always asks, “How did you know I was here?!”. As much as I said, “I know your hiding spots,” he was actually very elusive. Once, I swear he had disappeared from the room... But this game of hide-and-seek was different in that it followed his aggressive behavior in group. He ran away after he pushed a peer. After sitting under the table with him, trying to deescalate his hyper state, I tried to help him think through his behavior. His ability to communicate seems a wavering skill, coming and going at his whim. He softly and quickly said, “My brother.” I jumped at the opportunity to discuss the reason he comes to the center, as the subject is rarely broached with him. “You are thinking about your brother?” “Yes,” he said.

J’s brother died at a very young age under tragic circumstances. In fact, J, at the impressionable age of 10, was the one to find his brother dead. J said in his curt manner, “Thinking about my brother.” “And that made you angry,” I asked. His hands moved to his face and he nodded his head. We did not have a break-through therapeutic session under the sandbox that day. But, I experienced the sobering reaffirmation and reminder
that behavior follows some mental state. With a special needs child, discovering those motivating factors behind the behaviors seems much more elusive.

The Center has allowed me the opportunity to practice removing myself from dealing with a person’s issue. With proper reflection, I could see that my prompt for J to tell me he was angry with me, despite my knowing it already, is a classic example of counter-transference for the worse. As a future physician, I am thankful to J for exposing my predisposition to bring destructive counter-transference to a situation with someone I am trying to help. I am not immune to people’s shortcomings with regards to imposing trivial demands on others for my own sake. But becoming more aware of these situations in which I am more likely to do so affords me the opportunity to grow as a listener and healer. I am thankful to the team at the Center, the children at the center, and J. They all have created a space where healing can occur and the healers can learn how to heal better. To them I owe my continuing growing awareness of how I can improve my abilities as a friend, leader, and person.

The journey into the mind remains a thrilling interest of mine. Being able to apply that curiosity to children undergoing the grieving process has further fueled my interest. Sitting under that sandbox, giving all of my attention to another person in their struggle of dealing with life’s tragedies was a special moment, amongst many others at the center. Most fascinating to me is that those moments are often unpredictable. The complex mind might very-well reveal some of its inner workings not only in labs and in therapists’ office, but under sand-boxes too. – Corey Meador, MSII

CPR Anytime:

CPR Anytime at Martin Luther King High School was a very fulfilling experience. While it was very rewarding to design lesson plans for the students to teach them about heart health and hands-only CPR, what I appreciated most was the conversations I had with the students. During our last session, one of these conversations reminded me of my own ambitions and hopes.

As we were ready to wrap up our session with the MLK group, I sat with one of the students asking her about her future plans for college. While she elaborated on her interests in healthcare and desire to be a physician, one point she repeatedly emphasized was that she wanted to get out of Philadelphia. I knew that many students might want to explore new cities for college and onwards, but for her it seemed to be more than just a desire to do something, it appeared to be a need. I asked her why she was so adamant about this, and she explained that she feels held back by her current surroundings. Often times she feels out of place and is unable to relate her goals with anyone. She seemed uncomfortable talking about the details, but hinted at coming from a disadvantaged background and not having the proper support in her current setting.

Sitting next to the student and listening to her story, I couldn't help but feel nostalgic. I remembered a distant memory of myself, wanting to explore new cities for higher education. However, the difference lies in that I did have a supporting environment, resources, and a community to relate my ambitions with. At the time I thought that my circumstances were difficult, but talking with this student helped put so many things into perspective. She might have the same ambitions I had, but she is pursuing those goals without the support system that I may have taken for granted.

My conversation with this student was very eye opening and helped me appreciate my own experiences and empathize with hers. It reminded me to always ask people for their story in the hopes of finding a new perspective. – Anika Afroz, MS II

Drexel Mentoring and Pipeline Program (DMAPP):

Throughout the past year, I have had the pleasure of participating in the Drexel Mentoring And Pipeline Program (DMAPP) as my CEE. This program is not only very enriching for the high school students, but also for the medical students. I have come to look forward to attending as I feel like the positive interaction benefits the kids, and is a wonderful way to break up the monotony that is medical school studying. The program has been a great opportunity for me to explore some of my other interests such as mentorship and tutorship, both of which I have done with high school students prior to matriculating at Drexel.

Throughout the year, I have been building relationships with the high school students at New Media Charter School. My primary role as a tutor has been very rewarding because the students truly benefit from my help. Generally, I tutor math and enjoy going through their homework
problems. In fact, I try to create more challenging questions to test their understanding. Students have thanked me for this, on occasion because it has worked to drive home large concepts and help them focus on their trouble areas. It is also important for me to be able to follow up on students’ progress in certain classes and keep them motivated. I believe the weekly attendance that is required of both the tutors and the students enables me to build relationships with the students and use that relationship to hold students accountable and encourage them.

Although the students are not always focused on their school-work, it is clear that they enjoy attending on a weekly basis. It seems that the students see Wednesday as an opportunity to be around positive people who are young enough to be relatable but old enough to be a source of guidance. They frequently ask questions about life as a medical student and life in college. As an African American girl, I am familiar with many of the obstacles and feelings of exclusion that other African American students may feel. I appreciate the opportunity to remind our students weekly, that they have potential and great opportunities to decide on any life path and actually pursue it.

I recall being disheartened by the number of students that stated they wanted to become recording producers or professional athletes at one of the DMAPP workshops in the fall. During the latter part of this year, I have encouraged students to think about what those careers will require so that they can be prepared to diligently work toward those goals. I have also encouraged thinking outside of those two realms, because the world offers an endless number of professions that might also make them equally as happy. While tackling school work has been the main focus each week, I have also made an effort to get the students to think beyond high school.

Overall, I have had a very positive experience with DMAPP. In fact, next year I hope to get involved in the leadership so that the program can continue to grow and improve. Although I was not involved with this type of program during high school, I have many friends who benefited from mentorship/tutorship programs run by those who were not much older than them. I hope to afford similar beneficial experiences to the students at New Media Tech throughout my next few years as a medical student. – Alexis Woods, MS II

Elders Project:

My community experience this year was one that was truly gratifying and allowed me the opportunity to connect with an elderly Philadelphian woman by the name of Ms. M. She is a witty, charismatic, and lovely 80-year-old African American woman who has truly worked for everything she has. My partner and I would visit her at her home on the second floor of a duplex where she has lived by herself since the early seventies. We were designated to visit Ms. M several times during the year and essentially get to know her. We asked an assortment of really personal questions from things about her childhood, to whether or not she feared dying. This was a heart-warming experience for me because all of my grandparents died before my 5th birthday and I longed to have that similar grandparent-grandchild relationship that many of my peers were fortunate enough to experience. Although, Ms. M was not my grandmother I looked at the qualities she had and could only imagine my grandmother possessed many similar traits.

Internally, I felt like a child having a regular conversation with their grandmother at times, listening to Ms. M give life lessons and telling us we should live life with no regrets and with all things we should be thankful. After every encounter no matter how my day was going, once I left Ms. M’s home, I always felt at peace. Looking back I now realize Ms. M did more for me than I could ever do for her. That was by filling the void of that inner child in me, which longed to have that connection with his grandparents that I never received.

Something significant that I took from my community experience is just how much wisdom the senior citizen generation can impart on individuals of my generation. Often times due to different obligations such as medical school, where one is busy learning copious amounts of information, we tend to forget to talk to those who came long before us. At times, I assume individuals my age see gray hair and canes, then feel as if we cannot relate to the person due to our age difference. However, what was reaffirmed for me was that life is a cycle that does not change. The same feelings that I would express to Ms. M were also feelings she dealt with at my age as well. This was reassuring and eased some anxiety that I would feel at times. – Justin Okons, MS II

ER in the Schools:

I pulled open the heavy doors to Drexel's Queen Lane Campus and even though I was thirty minutes early, the ten sophomores from the "ER in the Schools" program were already waiting in the lobby. Although my partner, Scott, and I had been visiting their Health Professions class at
Martin Luther King, JR High School for the past four months, this was their first time visiting our medical school. With the help of Elissa Goldberg, we took the students to the cafeteria to wait until 1pm to start the day’s activities. Scott arrived shortly thereafter and we really got to talk to the students about their aspirations and answer any of the questions they may have had -- about life, school, and medicine. Once we had our debriefing with the students, we took them on a short tour of campus and then through the most exciting room: the cadaver lab. While our students tended to be very talkative with very little attention spans, here they were thoroughly interested in what we had to show or say. We uncovered two bodies for them, one at a time, and gave them a crash course through some basic anatomy. We allowed them to hold a heart, along with feeling the difference between healthy lungs and ones that belonged to a smoker. Although their science background was still minute, they were very inquisitive. They asked if we all had to partake in the anatomy lab, if all of the bodies were the same on the insides, and the like. It was a very refreshing afternoon as their thirst for knowledge had shown like it never had throughout the course. After that afternoon, I had learned that you really can’t judge anyone on their first appearance and I really understood how much they reminded me of myself in high school.

After our first visit to MLK High to teach the Sophomores about the clinical aspects of the ER, I came immediately home and took ibuprofin. All of the students were loud, disruptive, and ultimately more concerned about what fights were going on and whose boyfriend was cheating. The students over-talked each other and it was very overwhelming and difficult to get them to think about our clinical scenarios. After the first few visits I was so tempted to raise my voice and get on my soapbox, to tell them that all of the extra gossip really didn't matter as long as they had their own lives together, but I didn't. They were really intelligent when they tried, but they just got lost with all of the going-ons of high school. When you contrast this scenario to the anatomy lab, I remembered, this is what it is like to be in high school. After I saw that they really were interested in medicine, I felt like I was able to connect with them.

The last few visits with the sophomores ended really strong, because even though there was still a lot of concern over gossip, they got their projects done and even earned a reward for the Public Health topic of their ER skit, which was based on STI's. I didn't feel as overwhelmed when walking in the classroom, and rather than getting on a soap box, I would talk to separate groups in order to inspire them to take the higher road. I am by no means a "traditional fit" for medical school; I grew up where drugs and pregnancy were very prevalent. My household was not privileged in any way and that was one of the reasons I strived so hard to get to where I am today. Of course, there were plenty of times that I had nearly gotten into fights; I was a loyal friend and willing to stick up for them and for myself. The meeting at our school is the one that I remembered I was just as loud, as vibrant, and yet just as inquisitive and thriving to succeed well in something as prestigious in medicine. In between helping them with their skits, the high schoolers asked for general life advice and I was willing to give it. The most important message that I had to give was that they can honestly succeed if they remember that gossip doesn't mean anything (and to never hit first). During our wrap up session, I couldn't help but hope that they all learn how to pick and choose their battles wisely, so that they may beat the odds and get into medical school, as well. – Cherish Page, MS II

HealthStart:

I went in to our CEE assignment apprehensive about what lay ahead. I didn't know anything about the teenagers we would be presenting to or the school we would be visiting, and I found myself imagining nightmarish scenarios involving unresponsive, difficult kids who had no interest in what we had to say. It turns out that I couldn’t have been more wrong. These kids were intelligent, articulate, passionate about learning, and eager to achieve great things in their lives.

Being around them made me think about how I was at that age, and how little I cared about learning or achieving success or growing as a person. I recalled how I had very little ambition or direction in my life, and how I swore that I would never - under any circumstances – undertake a career in medicine. I simply didn’t want to work that hard. Obviously, things have greatly changed for me since then. After meeting these kids at Franklin Learning Center, I started to think about why and how things changed for me, and what made me become who I am. I realized that after finishing college, I started associating with ambitious, hardworking people, and their enthusiasm and drive affected me a great deal. Their influence caused me to think about what I truly wanted from life, and thus began a journey of self-discovery that culminated in my
decision to go to medical school. And it all began because I was surrounded by others who strove for bigger, great things in their lives, and pushed me to do the same.

I may be overestimating our impact on the kids we met at Franklin Learning Center, but I feel as though we influenced them to dream big and work hard to achieve their goals. Even though our presentations were long and detailed, they never complained or seemed uninterested. They were eager to learn, eager to grow, and eager to follow in our footsteps and forge their own careers in medicine or allied health fields one day. And it all came about simply by interacting with a few medical students who told them to push themselves just a little harder than they were used to.

For me, this was a timely reminder of the importance that we have as doctors. We are a symbol of hard work, dedication and commitment to serving others. Whether we are helping our patients overcome difficult situations in their lives, or going out and serving in our communities, it is important to remember the great responsibility we shoulder by taking on this profession as our path in life. For many of our patients, we may be the only people in their lives encouraging them to overcome their problems and fulfil their potential.

Sometimes it’s easy to fall into the trap of thinking “I’m just one person, how much of a difference can I really make”? Well, based on my experience at FLC, the answer is: a lot. Despite just meeting these kids a handful of times, we were able to inspire them to be the best versions of themselves. And in turn, they inspired us to be better people as we continue on our journey to become doctors.  – Yehuda Kerbel, MS II

Hope Garden:

I enjoyed many fun and rewarding experiences during my time volunteering at Hope Garden at the Stenton Family Manor. I originally was interested in volunteering at the garden because it would allow me to work with a group of children in an outdoor setting where I could teach them about fruits and vegetables and the importance of maintaining a healthy, well-balanced diet. In my mind, I would play the role of the teacher and the children would act as students. And though in many situations this indeed proved to be the case, there were a handful of instances where our roles were reversed and the children became the teachers and educated me instead.

When I was unfamiliar with the contents and the layout of the garden during my first few weeks at Garden Club, the kids eagerly taught me about what plants they were growing, what the foods tasted like, and which ones were their personal favorites. Often times the kids would surprise me as they thoroughly enjoyed eating kale salad with turnips and carrots, which I, for one, would have never touched as a 5 or 6 year old child. Perhaps the most notable favorite among the kids was an herbal green called sorrel. Mind you, I had never even heard of this herb before... it was a lemony flavored green and the kids would eat it by the handful if allowed.

I was absolutely delight by the enthusiasm and pride the children had for their garden. These kids, who were not fortunate enough to have stable living arrangements, and were forced to live in small quarters with their mothers among many others at Stenton Family Manor, were at least able to have the consistency of meeting for Garden Club every Wednesday afternoon. Equally important was that the children were given the opportunity to participate in each step of the gardening process; starting with the planting and watering of a tiny seed to watching it blossom into edible fruits and vegetables they could enjoy as a snack. Often times we would all work as a team to make salads or smoothies. This way the kids could try vegetables that they would otherwise not likely have the opportunity to try. Not only did these activities allow the kids to open their minds to trying and experimenting with different types of nutritious foods, but it also helped them build good teamwork skills.

Perhaps the most rewarding thing that came out of volunteering at Hope Garden was building long lasting relationships with many of the kids after weeks of working with them. Though some kids came more regularly to Garden Club than others, there were always at least a few familiar faces. They recognized us each week when we came and proved to be just as excited to see us as we were to see them. The last few weeks of Garden Club, a few of the children would give me hugs when we were about to leave and would ask us when we would be back. This act tugged at my heartstrings as it showed me that the kids really did appreciate us being there for them. It made my whole experience at the garden that much more worthwhile and I was pleased I could bring a source of happiness to the children and be somebody the children could look up to. This experience was truly inspiring to me as I got the chance to witness the extraordinary potential of each individual child. Their eagerness to learn, to teach, and to grow will be a constant motivator for me in my future when I look back at my days spent at Hope Garden.  – Kayla Bates, MS II
**Legacy Youth Tennis and Education:**

During my weekly sessions at the Legacy Tennis Youth Education program at the Arthur Ashe Tennis Center, I experienced many moments of growth and development. Working with the kids allowed me a chance to gain a new perspective on life; we had so many cultural differences and home environments, but we were able to work together and learn from each other every week. It was a truly positive experience, where I was able to both teach important values, while also learning from the students.

There was a specific encounter that I can recall most vividly. It was early on during the CEE project, when I was still getting to know the kids. Every week we divide up the two and a half hour session into two activities: a group or team building activity and court time for tennis. During the group activities, Ben, our team leader, encourages us to think on our values and goals in life. It is an educationally and culturally enriching process that he facilitates and pushes, so that we can learn to value self-reflection and collaboration. We share our thoughts in a constructive way and work to make positive changes together.

In this specific instance, Ben had asked us to think about some of our goals and dreams in life. One of my dreams in life is to travel to England. Ever since I was a kid, I was captivated by the history and cultural richness in England. I have also been a huge fan of the English Premier League (soccer) and I especially wanted to visit Manchester, the home of my favorite soccer team.

When it came time for the others to share, I noticed that many of the kids’ goals were very similar. They all had a simple wish, which was to have enough money to provide for their families’ needs. I guess I was blown away by how much the kids thought about their families and the importance they placed on maintaining the well-being of their loved ones. Such a modest goal reflected how big their hearts were and the amount of thought and care they felt. I was touched by how much they appreciated their families and looked after them. It was a humbling experience, as I’ve been blessed with a family that has been financially and emotionally stable. I realized that I couldn’t take things for granted, and should take the time to appreciate the little things in life. Sometimes it’s easy to forget what blessings we have, but this moment reminded me to be thankful every day. It was a truly moving and inspiring experience.

This was also an affirmative experience that helped me to reinforce some of the positive qualities I display. Living in many diverse cultures in the US and overseas throughout my life, I am an understanding and sensitive individual open-minded to what other people think and how they feel. I think the whole CEE project has reinforced what I believe in. Namely, it has helped me in working with other individuals in a collaborative setting. It has also strengthened my resolve to not take anything for granted and inspires me to continue to be as caring as a physician as possible. This has been a great learning experience in serving others, especially the needy. I have developed a stronger sense of responsibility for my community and feel that I should drive myself to have a more active role, especially in contributing to the underserved populations found in Philadelphia. – David, Oh, MS II

**Medical Interpretation:**

It was another day in ambulatory care where I was awaiting for a Spanish-speaking patient to come in for their visit. Then one of the residents asks if I wanted to shadow them until someone needed me. I follow the resident into the room and I introduce myself to the mother. Then I saw the most adorable patient crawling around the floor full of joy. The process began with the usual history taking between the physician and the mother as the little one roamed around the room. He started to play with me as the mother began to talk about her concerns on not having enough to finish the month. She sad and withdrawn especially since she admitted to being pregnant with her second child who was due in a couple of months. The doctor address her problems asked if she was on any of the food assistance programs currently offered. She offered another program and wrapped the visit. Just like many of the visits that I encountered during my time as a medical interpreter.

As I played with the adorable jovial, healthy, and curious young 18th month old boy I thought to myself he knows so little of what is around him. The innocence of his eyes as he created a ruckus during his visit with his giggles and smiles made it difficult to listen to the difficulties he was already living. The food insecurity he was living through was month to month he was not in control of but would affect his health and
development during a time of major milestones. I was saddened by the experience this child was suffering and the realization this child was not alone. The first time I went to my CEE I was introduced to a community that had many life difficulties that all complicate one another. The little boy was unaware of his situation and may grow up not knowing a different world.

This is one of the experiences when I first notice the great disparities that are still in existence today and were a part of my inspiration to become a doctor. Experiencing this mother going the struggle of just trying to provide the best for her child and herself caused a problem within me. This woman was trying her hardest to provide for her child as much as possible. It made me realize there is still so much more that could be improve in our society. It may be that only one person may have asked this woman if there was enough food at home was the doctor that day. No one else may have provided more support to this woman on this day then the doctor. This just instilled in me the impact that I will have every day in my work. Although some days it may not be a huge change or impact just trying to remember the small difference I may have made in someone’s life may make worthwhile. It was a refreshing moment to see a young resident who addressed these problems and made it a hopeful future.

Having all these different experiences during my time at St. Chris made me feel more in tune with having an empathetic nature. I struggle with forming connections with people and ultimately maintaining a compassionate tone with someone. I found that the interaction with a patient is more than just the health issue at hand but a part of their greater life. Our patients give us the greatest privilege of allowing us to help them even in their most vulnerable moments. I will always remember how this woman looked when the doctor asked how was she was doing today. Since the doctor gave her the opportunity to voice her issues, it allowed her to display a smile as big as her child running around the exam room. I will always remember to make a connection with the patient even if they only to visit me once. –Leslie Ramirez, MS II

Music to My Ears:

I spent my community educational experience teaching a music class to students at AMY Northwest Middle School in Roxborough. Every Wednesday, four students from Drexel taught about fourteen students lessons on the recorder, piano, and guitar. The class was a mix of all levels of musical experience. Some students had never learned to play an instrument at all, while others had played music in band before the Philadelphia school system began cutting the music departments. Because of the decreased funding for the arts, many of the students can no longer participate in music outside of school because they do not have the money to buy their own instruments or have the means and money for transportation to private music lessons. Because my upbringing was deeply rooted in the art of music, I was thrilled to give back in some small way in order to help students stay involved in music.

One experience that is specifically memorable for me this year is a story about a boy in the music class named Jevone. He played the clarinet until the music program was cut. The next best thing was for us to teach him the recorder. After only a few classes, he lost interest in learning the recorder and I questioned him as to why he didn’t enjoy class anymore. He told me that the music became too hard for him and that he only wanted to play easy music that he could learn right away. I empathized with Jevone. Many times when I was a young musician, music became difficult, practicing became mundane, and I often wanted to give up. But for me, I had many influences in my life pushing me to be a better musician. I gave him some encouraging words but over the next two weeks, he didn’t change much. I felt like I had failed him as a teacher.

One day, our CEE group decided to break the students up into groups to introduce new instruments to them. We introduced the piano and the guitar. At first Jevone seemed really excited because he did not have to play the recorder that day. But by the end of the piano lesson with him, he told me that he just wanted to be done because the music was too hard. Because I thought that he had a terrible time, the next week I told him that he could go to the guitar group or the recorder group instead of having a piano lesson. Upon hearing the news, disappointment appeared on his face. He told me that he was really looking forward to another piano lesson. During multiple class periods when I thought that my teaching and communication skills had failed, I had unknowingly instilled a determination in this student to come back to learn more.

Looking back at my entire year with the students at AMY Northwest, I learned much from the students as well. Middle school kids are a fun age group because they are starting to mature into young adults, but they still have many characteristics of childhood. They made me laugh almost every week and were able to hold themselves together even though music class was held during the last period of the day and they were always ready to break free from school.

I found the experience challenging and affirming. When I worked with Jevone, I was especially challenged because I had to push my own boundaries in teaching and communication skills. Something that I discovered about myself is that I am not too bad at “winging it”. I have always
felt that in order to do anything to the best of my ability, I had to have weeks of preparation under my belt, whether that is in music, school, etc. But these students loved to just improvise, sing, dance, and talk off the cuff and I believe that they made some beautiful art this way. I found that when you just let yourself relax and enjoy the moment, you could do some of your best work with no preparation. – Elizabeth Canning, MS II

Pediatric Play Program:

My CEE was Pediatric Play at St. Christopher’s Hospital, and our main goal was to visit the patients along with other children in the family to provide toys, books, coloring, and board games. This would give both the children something to stay entertained with as well as give the parents a small break. Overall, I believe the program brightens up the children’s mood, and it is also clear that most parents really appreciate this small token to show we really care about their kids.

During my last visit in the Emergency Department, I met a single mother who was struggling emotionally and physically, taking care of her 2-year-old son, Noah. At first, Shannon (the Pediatric Play Coordinator) introduced me to Noah and asked if I would be comfortable just watching him to allow the mother a break to get some cafeteria food. I said yes, gladly, but it was not until later after I chatted with the mother did I realize how much of a break she needed. I had met her around 5pm, and she said she had been in the Emergency Room since noon because Noah had a seizure and an asthma attack. As I learned more about her background, I found out she was a single mother of five children who had just gone through a divorce, her father was in the hospital and not doing well health-wise, and she does not have any close friends or neighbors to depend on for emotional or physical support.

I noticed throughout this encounter that when I tried to insert a comment, the mother would continue speaking. Perhaps this chat was an emotional release of her worries or fears, and I was happy just to listen and not counsel. I understood that she probably did not have many people to talk to, and it seemed like our conversation may have been one of the deepest and longest that she has had in a while. After hearing how she only sleeps five hours a night in order to wake up and prepare lunches for her children, care for Noah and her other younger daughter who has a severe developmental delay, and also take care of her mother who is fairly dependent on her, I felt torn. I wanted to say something reassuring to her or offer help, but we were told we cannot establish any connections outside of our volunteering. I felt sad and extremely worried for her, especially in terms of her financial situation and not being able to navigate the city to attend interviews and find work. But in the end, I realized that I will probably meet so many other families and patients in less-than-ideal environments, and we do not have the time or resources to help them all. This ultimate realization about our limitations made me really sad.

For most of the ER rooms we visit, most parents expect us to just pass toys to their children and let them play on their own. However, in a few cases, I notice a single parent with a younger child (who cannot speak) seem to make conversation as if she/he wants me to stick around. These are the visits I enjoy the most, and just by asking about the caretaker’s lives, I feel like we create a powerful human connection of understanding. Most times, it is very humbling to realize that how a parent can sacrifice so much for his or her child and still be able to move on with everything else in his or her life.

After going through this experience, I realize that human compassion and the human spirit is so strong and crucial. First of all, just within an hour, I had learned so much of this woman’s life, her dreams, her fears, and her strengths. In the future, it is very important to me to be able to connect with my patients on a personal level, such as asking them about their family, the vacations, etc. I really enjoy listening to other’s stories, and I love how we can feel so much of how patients and other people feel by simply just listening. Second of all, I realize I underestimate the emotional strength of parents to care for their children. When I look into my future, the scene that makes me the most happy and excited is having breakfast together with my children and family. I imagine caring for them to the best of my ability, but that is easy to say when I imagine my future without any harsh socioeconomic struggles. As I listened to this single mother speak, I am in awe by all the hardships she had and is currently dealing with now, and I admire her passion and love for her family incredibly. In the end, family is what matters the most to me, and her story really spoke to me at this visit. –Tina Hu, MS II
Philadelphia Futures:

I was fortunate enough to have participated in the Philadelphia Futures tutoring program over the course of this year. It is a non-profit program that works towards getting first-generation college students through the process of applying to college and follows them through to their graduation. I worked with a student by the name of J. She was a very bright high school senior who wanted help with her AP Government class. Personally, I have never taken a government class so at first I felt fairly under qualified for the job, but the director of the program insisted that I could handle it. A specific experience that most impressed me occurred about a month after J and I had been studying together. She regularly brought in her notes from that week of class and any handouts that the teacher had handed out. One day she brought in a sheet filled out with twenty-one Supreme Court cases that had impacted the lawful restrictions and understanding of the first, second and fourth amendments. Needless to say, I had only heard of a handful of the court cases and even those I didn’t really have a good enough understanding of to teach on the topic. As a result, I suggested that we make our way to a computer in the computer lab and do some research together. For two hours we did research on all of the most important court cases that have collectively shaped some of the most basic amendments of our US Constitution. It was eye opening for me to realize that I can still teach something as I was simultaneously learning about the topic. It was clear that J didn’t quite understand things the way they were written in the books and articles, but she was very adept at grasping the concepts once I put them into layman’s terms for her.

This became a sort of outline for the rest of our meetings as it became clear to me then that she responded much better to analogies of present times and stories that she could try to recall on test days rather than just bland facts. I realized that I can also learn from the experience that one does not need to know everything in order to be a good teacher. There are instances, I’m sure even in the role as a practicing physician, where I won’t actively know everything about a disease or a patient’s symptoms. Remembering this event might help remind me that it is possible to teach patients while simultaneously learning myself. I can also take those opportunities to learn more about my patients, how best they learn or what works best when discussing things with them. This experience has been incredibly rewarding on so many levels, but I was also happily surprised to learn that I could take something away from it that could be used in clinical practice. – Meaghan Dendy, MS II

Philly Girls in Motion:

Thinking back to favorite childhood activities most people would remember playing outside, recess at school, and other activities that included movement. For girls growing up in north Philadelphia this is hardly the case. Many of their neighborhoods are unsafe and the emphasis on physical activity during the school day is a thing of the past. Philly Girls in Motion is a program at Recreation Centers in different parts of Philadelphia whose goal is to motivate and deliver messages about the importance of healthy choices through group fitness classes. During the fall semester approximately eight girls participated in the class two nights during the week. This experience was not only beneficial for the girls involved, but also for myself because I was able to reaffirm my commitment to health advocacy.

Some of the girl’s attitudes towards participating preoccupied my initial reaction. At the first Zumba class many walked through the dance moves and tried to hide in the back of the room. I would ask myself, did they not have enough energy or did they just not want to be here? But after getting some of them to open up and tell us about their daily activities it became clear that they lacked the knowledge about how physical activity impacted their health and there were other issues that many of them were dealing with that caused their health to take the back seat. What became most inspiring though was the support from their families. The girls showed up for every class and a few parents even participated.

The experience with Philly Girls in motion was both education and affirming. By having this resource the girls no longer had a barrier to participate in physical activity. Providing information and resources can help individuals, specifically future patients, to become their own health advocates. Also, my passion for physical activity and health goes beyond my own personal needs and extends to the welfare of others. This program, and other similar experiences, is a way in which I am able to help promote health. These are the values I hope to convey to my patients as well. – Mary Sims, MS II
Reach Out, Educate, and Connect (REC):

Through my CEE, Reach Out, Educate and Connect, I had the opportunity to teach a class of third graders at nearby Wissahickon Charter School about many science related subjects. Some of these activities included showing them cadaver organs, giving them a tour of Queen Lane and the Sim Center, and teaching them about the skeletal system. It was eye-opening to be in charge of a classroom full of 26 third graders, and was often a struggle, but overall it was a very rewarding experience to teach students who were so full of curiosity and interest in science and medicine.

During our last session at the school, we gave the students a presentation about the dangers of smoking. As usual, the students were surprisingly knowledgable and really understood how harmful it is for people to smoke. However one little girl, M, was very concerned about her father, who is a heavy smoker. She told us how she’s been asking him to stop for many years, and tearfully asked me if he was going to die. My mind was racing trying to come up with the most appropriate response. I felt terrible that M was so concerned about her father’s health when he so clearly disregarded hers by poisoning the air she breathes. I also felt proud of her that at only 8 years old, she understood how dangerous smoking can be, even when it was a normal daily occurrence in her life.

This experience was significant to me because it affirmed the importance of health education in young students. Prior to this year, I have not had any teaching experience and it has never been a great interest of mine. But knowing that the students took so much away from our presentations to them was incredibly motivating. It taught me the importance of teaching young children about health and how to take care of themselves, because they really do listen and take something away from that.

On the whole, my experience with Reach Out, Educate and Connect taught me to be more patient. Third graders have a lot of energy and can be exhausting, but they also are so eager to learn and it was very rewarding to teach them. I also learned how much of an impression we can have on children and how important it is to teach them about taking care of their health when they are young. They are like little sponges, ready to soak up as much information as they can. It is the perfect time to begin teaching about healthy lifestyles. This was a very positive experience for me to learn the importance of sharing my knowledge about health, especially with such a young and impressionable population. - Kelly Guttman, MS II

Refugee Resettlement of Lutheran Children and Family Services:

For my CEE experience I was assigned to work with the Lutheran Refugee Resettlement Program. This program assists individuals and families who come to the United States seeking refuge from political and civil unrest. These families come from all over the world including Africa, Southeast Asia, and the Middle East. Many of these families have never been outside of a third world living environment with little to no experience with things like electricity, running water, and western medicine.

During my time with the resettlement program I was privileged to work with people from Ethiopia, Rwanda, Congo, Burma, and Iraq. I had many memorable experiences, many of which will have a lasting impact on my future interaction with patients. One particular experience stands out. A fellow student and I were paired together to work in this program. We were assigned to visit a large family that had just recently arrived in the United States, coming from Rwanda. The family was quite large made up of a mother and seven children. One of the children was married and had a child of her own, and her husband was also with them. They spoke a language called Kinyarwanda and had absolutely no experience with English.

Before arriving at the family’s home, Vicki, our refugee resettlement contact informed us that when Refugees arrive in the United States they receive $900 per person and seven months of healthcare coverage, and that is it. The resettlement program must use money from what they receive to help them find housing and obtain all the necessities of life. I remember thinking about this and wondering how this family would succeed in simply subsisting here in the United States. We were assigned to visit them and simply introduce ourselves and try to make them feel more comfortable. Accomplishing this was no easy task. One of the greatest challenges that newly arrived refugees have is trying to assimilate to the culture and environment. Speaking no English made communication very difficult, and we did not have a translator. Fortunately before we arrived a translator did call them and informed them that we were coming, so at the very least they knew we would be there.

When we arrived we were welcomed with warm smiles and kind gestures. We were offered two of the only chairs in the house while the rest
of the family crowded onto a couch or sat on the floor. Although we were not able to speak with them somehow we managed to communicate that we were there to help them in any way that we could. We had no real plan but soon we began to teach them English, starting with things like simple greetings, colors, numbers, and names of objects. I recall thinking how important it was that this family learns English as soon as possible. With so many family members they received enough money to pay their rent and buy food, but only for a few months. After that time they were expected to find employment and be able to take care of themselves. It seemed almost cruel to me that our government had provided a way for them to get here but then almost abandons them after giving them such few resources. However, it was at this point that I saw the light in this family’s eyes. I could see how happy they were to have made it to the United States. When we returned for a second visit they eagerly awaited us, ready to practice what we had taught them on our previous visit and with pencil and paper to write down new things they would learn. We continued to teach them any English that we could and celebrated with them as this family began to learn some of the very simple words and phrases that could start the foundation of learning English.

As I reflect on this experience and others that I had with refugees over this past year, I know that these experiences were both affirming and learning opportunities. It was amazing to me to be able to see this family and what they valued. Coming to the United States with little in terms of material possessions, this family found great happiness in being together. Their obvious gratitude shined through in our interactions with them and had a deep impact on my outlook on life. This experience also taught me and gave me a greater understanding of how there is a great deal that can be communicated even if you do not speak the same language. Acts of service and gestures of kindness are some of the most powerful exchanges that you can have with another human being. This and other experiences will certainly influence my future interactions with patients. I know that I can be a great help to people suffering, and even if I cannot communicate with them through words, I can communicate with them through acts of service by helping them to get well. Having had this experience, my eyes are opened to how I can interact with people who are in my community but who may not be from my community.

Additionally, this experience has brought out the best in me. I have always strived to be an individual who helps others when the opportunity presents itself. Service is consistent with my personal values and something that I hope to continue to apply in my life and throughout my career. – Jeff Kimball, MS II

**Science Explorers:**

This community experience took place at the Academy for the Middle Years Northwest Middle School. AMY Northwest is located only about ten minutes north of the Queen Lane campus and is designed for students with a higher level of learning comprehension and skills. Myself and three other students had the fortunate opportunity to meet with two classes of seventh graders twice a month and perform a number of fun, hands-on science experiments. The purpose of performing these experiments with students was to spark their interest in science beyond text book learning with the goal of inspiring them to pursue a greater interest in scientific studies. Of the many experiments we’ve conducted, the Mentos and Diet coke experiment, egg drop experiment, and the color changing milk experiment were all included. These experiments, while simple in their setup and execution, provided the students with a hands-on experience that allowed them to be engaged in the learning process.

My most significant experience is not one that happened in a single instance, nor one that repeated once or twice, but rather one that happened every time we visited with the students. The typical structure for each of our visits started with a brief introduction to the experiment, followed by an explanation of how the experiment will be conducted. Then the students were instructed to make some predictions, or hypotheses, about the results. Following the experiment we would have a discussion about the results and how we could create new experiments to examine other variables. What always came as the biggest surprise was how the attitude of the students would change throughout the course of our visit. At the beginning many of the students showed little interest in the experiment or were simply too excited to focus on the scientific principles surrounding the experiment. Towards, the end, however, the students were fully engaged in the discussion and were making connections to come up with new scientific questions to challenge what they had just learned. It was amazing to see these students take a concept they had just learned, such as amphipathic molecules, ions, and different phases of matter, and create new experiments they could perform to further explore this concepts.
While throughout the course of this project the students were able to learn just as much from me as I did from them, I would actually characterize this experience as a challenge. Going into those classes I knew ahead of time that it was going to be difficult to get the students to cooperate and learn throughout this experience. Especially since the material we were covering was so new and foreign to them. As this was the case, it forced me to constantly re-evaluate my approach to the material and how best to teach it.

As challenging and occasionally frustrating this experience was I feel more confident in myself and my ability to communicate with individuals to help them understand and integrate new concepts. This I now know requires a great deal of time and patience, but I believe these are all qualities that will make me a better physician. – Brandon Blakey, MS II

Spark! Philadelphia:

My Community Educational Experience was with Spark Philadelphia. Spark is a program that aims to impact the city's high school graduation rate by providing apprenticeship and mentorship to students. My role in the program was to serve as one of two mentors to a 7th grader. Many of the students in the program came from disadvantaged backgrounds and the Spark Philadelphia program was one of the few exposures they had interacting with adults in a professional setting.

One of the components of the program was creating a project for Discovery Night. Discovery Night is Spark’s graduation celebration where each student hosts a booth and presents a project that the mentors and mentees have collaboratively designed. For his project, my mentee chose to build a 3D model of his neighborhood using pasta shells, art pastels, cardboard, etc. When we asked him to elaborate on why he chose this particular project, I was moved by his explanation. He explained that he wanted to build a neighborhood that didn’t have the crimes and violence he currently experiences in his neighborhood. He’d mention wanting to gain respect and wanting to be known for “being tough” so that people would know not to mess with him. It was clear that his surroundings made him grow up quickly, and gave him a reason for constantly wanting to protect himself.

Throughout the course of the program, we got to learn more about his family, his environment, and his school life. We’d often have conversations about doing well in school, going to college, getting an education, and ultimately having a career in architecture. From those conversations, it seemed as though there was a struggle between doing what he desired to do, and being forced into a lifestyle determined by his environment. This was a learning experience for me because I realized that this is a conflict that many children and young adults battle with, and that it takes a lot of support and determination to set a path different from that which has almost been pre-determined by one’s environment.

Overall, my CEE was a great experience. I got to interact with a great mentee who looked to me as a role model, both personally and professionally. We were able to show him how we interact professionally in a classroom and small group setting. More importantly, we were able to show that through hard work, it is possible to achieve one’s goals. The experience has made me more aware of the struggles that people face and the hindrances that may prevent individuals from disadvantaged backgrounds from pursuing a higher education. It made me realize that I need to be less judgmental and make more of an effort taking into account how influential an individual’s environment is to their growth and future success.

- Yetunde Akinde

Starfinder:

BAM! The small, pudgy body crumpled to the floor. A few seconds later, as I expected, he started crying. Hell, I probably would’ve cried if it’d happened to me. It was a vicious hit. Unintentional, but vicious nonetheless. Stunned, I couldn’t believe a 7 year old could kick a soccer ball so hard.

“Jose!” I shouted as I ran up to the seemingly lifeless body, “Jose! Are you alright?” He was still in too much pain, or perhaps too much shock, to respond. I began to sweat as I thought about what I should do. About 30 yards away, the watchful eyes of all the parents fixated on the soccer game now stalled.

“Take a deep breath, Jose,” I said as I rubbed his back, “you’ll be fine.” Finally, after what seemed like an eternity, Jose propped himself up on
his knees. Sniffling, and with scads of rubber bits from the turf stuck to his knees and elbows, he wiped away the tears.

Then he smiled.

“I’m ok, coach,” he said, before adding, “but my head still hurts a little.”

“Well, I’m glad you’re ok. Why don’t you sit out for the next ten minutes and then see if you feel better enough to play again? I’ll grab you some ice.”

Just as I was about to leave, Jason approached us.

“I’m really sorry Jose, I didn’t mean to!” He then hugged Jose. When they separated, Jose looked at Jason for a moment, then smiled and hugged him back. It was sweet.

As I look back on the experience, I view it as an especially affirming one for a few reasons. Firstly, I am inspired and warmed by the fact that even children as young as Jose and Jason can display such deep acts of empathy. Empathy, although somewhat of an inborn trait, is also considered a skill by many mental health experts. Therefore, the fact that these two children shared so much empathy with each other speaks to the fact they have been brought up well. This pleases me, because these children are from underprivileged backgrounds. These children have probably seen more misery (even if they happen to have supportive families) than other, more privileged children. Yet these children proved to me, on that day and on many others at Starfinder, that empathy can span age as well as socioeconomic status. – Daniel Safavi, MS II

Mindfulness/Stress Reduction – Working with Children:

After taking the Mindfulness course with Dr. Rosenzweig the previous Fall semester, I felt that it really made a huge difference in my life. I was enjoying things I normally wouldn’t have thought about, and I was beginning to take my time from moment to moment to experience and appreciate the little things in life. I brushed my teeth mindfully. I walked mindfully. I drank water mindfully. This shift in perspective really allowed me to feel more in tune with my everyday life and made everything more meaningful and fulfilling. “Meditation may be the practice, but mindfulness is a way of life.” – Steven Rosenzweig

I noticed that I was carrying myself with a lot more confidence as well. Before I would let a lot of little, nagging things build up and affect me throughout the day. A snide remark I overheard, a bad grade, more lectures that I needed to catch up on. It’s easy for all of this to pile up on you and feel overwhelmed. But now, after learning techniques such as the body scan, and even something as simple as following my breath, I can slow down, take things one at a time, and even approach these stressful endeavors in a more efficient and productive manner, than if I had just tried to tackle everything forcefully, head on.

I chose to do teaching mindfulness to children because I wanted to see this practicality utilized by young students. I worked in Mariana Bracetti Academy Charter School that held students from 6th grade to 12th. And I found that students during this time are very receptive to learning new ways of thinking as they try to establish an identity for themselves. I believe that teaching mindfulness to children during this age range is very well received and beneficial in all aspects of their lives. Friends, environment, and teachers easily influence children in primary school, and with all these competing stress factors it is easy to feel overwhelmed. This can result in lack of self-esteem, a poor self-image, and a lack of self-confidence as they try to sort out all their feelings and reactions to the various stressors as they learn, mature and grow up.

Most importantly though I think I was inspired by the resilience that children have in facing difficult challenges that can arise out of nowhere. Even though they may not fully understand the implications or consequences involved in a serious, negative situation, they are much more able to compartmentalize their thinking and keep their focus on simplicity. This isn’t to say that they don’t react irrationally or have no emotions. They are more able to focus solely on what is in front of them, and what’s going on in the present moment, instead of having their mind wondering on unchangeable circumstances. This is a core essence, I believe, in teaching mindfulness and why I think children without a fixed frame of mindset are more accepting of these ideals.

For instance, after one session working with the students, my partner and I stayed after a bit to speak to the instructor (who was helping us teach the course) about our lesson plan. As we discussed different activities and worksheets, one of the students who had stayed to help clean up also was willing to give us her input. We were glad that she was not only getting involved in taking this class, but also had the generosity to speak her mind and try to improve the course any way she could. She shared with us insightful details about the stresses that she and lot of her peers were experiencing, not only through school and grades, but also at home and financially. This was a very valuable and inspiring experience for me because
I got to see not only how mindfulness has been helping this student in particular, but also how she was implementing her personal experiences to help her friends and family.

Another activity that has stuck with me was making loving kindness cards. This session was held around Valentine’s Day and we decided to practice loving kindness meditation to tie the theme of love together. After performing the initial formal practice for about 15 minutes, we came up with construction paper (cut into heart shapes) and markers for everyone and had the children write an anonymous positive affirmation to others. After this was done, we put all the cards into a box and mixed them. Then we went around the room and had everyone pick one out and read it aloud. Everyone enjoyed this, even though it was similar to most of the Valentine’s Day activities they normally had in their classes, sans candy. However, next we passed out the same materials and we had them write a positive affirmation to themselves. We asked them questions such as “What do you like about yourself?” and “What do you wish for yourself?” Surprisingly some of them seemed to have more difficulty with this. We had a short discussion after this activity and some of them said that this was the first time that they had really thought about praising themselves, and had trouble getting into that mindset. But in the end everyone seemed to gain more self-confidence out of this and developed a more positive self-image. This was an enriching session where I felt like the children really had some epiphany moments as they learned how their thoughts affected their self-concept, and how to practice more self-compassion.

Overall, working with children has been affirming to me, where I would leave each session feeling motivated and inspired by them. I would even go so far as to say that I have learned more from the students than what I have taught to them. I feel very appreciative that I got the opportunity to work at such a cooperative school with a wonderful instructor that helped us completely along the way. I learned that it doesn’t matter what age, what your circumstances you’re in, or what your aspirations you have, practicing mindfulness and carrying that mindset throughout your day and life can change your attitude for the better. Seeing how the children learn and grow from this in a timeframe as short as 3 months has definitely been highly rewarding. – Henry Liu, MS II

Stress Reduction – Working with Adults:

My community education experience began with a semester-long course in the practice of mindfulness meditation. Although this part of the course was technically separate from the community service I would later do, it was actually very important to my overall experience. I chose the mindfulness elective for utilitarian purposes: I, personally, wanted to learn stress reduction, and I wanted to impart something practical, and hopefully lasting onto the people I would be working with.

It was surprisingly difficult for me to accept mindfulness as a method of stress reduction. Nearly the entire first semester I struggled to successfully participate in class. This had a significant effect on my ability to relate to my community service group. I worked at Inglis House, which is a long-term assistive housing facility for individuals with life-long or degenerative diseases that result in progressive handicap, such as multiple sclerosis and cerebral palsy. All the residents at Inglis are wheelchair-bound. The pace of living there is somewhat slower than that of DUCoM. However, this pace is entirely unrelated to levels of stress. My job at Inglis was to teach stress reduction through mindfulness meditation to a group of residents. The Inglis residents that I interacted with had an enormous burden of stress, anxiety, and depression.

When I first began my series of hour-long stress reduction classes, I felt as though I was wasting the group’s time. I had a lot of reservations about teaching a class on something that I could not master, and honestly didn't fully understand. Much to my surprise, the residents in my group loved it. I was upfront about my inexperience, which I think was a factor that made the class so effective. The notion that we were all learning and practicing together created cohesion. Over time my group grew in number and many were interested in continuing the classes beyond the scope of my series. As I became familiar with my group, and wheeled some back and forth from their rooms, it became apparent that my idea of stress did not match theirs. While mine was a healthy driving force for academic achievement, theirs was a mentally and physically consuming millstone that plagued their lives. They related to me their troubles, their coping skills, and their fears, which was therapeutic for them and educational for me. Regret, anger, hopelessness and helplessness permeated our sessions. Yet, I saw that mindfulness was more effective for these individuals because they desperately wanted to discharge their troubles and anxiety. Although their stress trumped mine, it was easier for them to alleviate it. Group
members reported feeling calmer and transiently relaxed. The self-reflection and self-acceptance associated with practice of mindfulness were variably well-received, but will hopefully play a role in long-term therapeutic outcomes.

My community education experience was indeed an experience for me. I believe that the people I worked with truly learned a useful skill and obtained some relief from their burdensome stress, fitting with the axiom of medicine. I was able to spend time with some interesting people as a layperson, and as a medical student, which was a new role for me in the community. I am glad to report that the Inglis residents intend to continue an autonomous mindfulness meditation class, which I interpret as an indicator of their dedication and success.

While I was not nearly as successful as my group in mindfulness specifically, I felt successful in the end. The personal challenge of the course certainly contributed to my experience as a burgeoning medical professional. Although I was initially uncertain, I grew to appreciate my Inglis group, which reaffirmed my CEE elective choice. It had the further added bonus of giving me great insight into the lives of those living with long-term debilitating disease. While CEE was not an exclusively positive experience, it had overall great value to me and to those that I worked with. – Kelly Donovan, MS II

**Sunday Breakfast Rescue Mission:**

The Sunday Breakfast Mission in center city Philadelphia is a men’s homeless shelter that provides hot meals, short-term shelter, and a long-term intensive “Overcomers” program. My CEE entailed health education sessions for members of the latter. The experience was personally and professionally fulfilling – but what sticks out for me the most was my orientation tour to the facility. Specifically, the room in which non-Overcomers stay.

On the second floor was a room the size of DUCOM’s Aud A & B. The windows were covered with chain-link metal, the paint was peeling off the concrete walls, and it smelled faintly sour. This room would be cold in winter and hot in summer. The room was packed – packed – with twin bunk beds. Flimsy metal beds with emergency-room mattresses, yellow pillows, and thin, worn bedding. A tall man might reach the next bed while lying in his own. On the concrete pillars dotting the room were signs such as “Lights-out at 10:00 PM” and “Must shower every day.” According to the staff member who gave the tour, most nights there are no vacancies.

Homeless shelters are more depressing and overwhelming than I could have imagined. I felt pity – an emotion that is uncomfortable because it brings to mind my own privilege. What a humiliating, depressing experience it must be to have no place but this room to lay one’s head. On a warm night, I can’t honestly say that I would prefer this setting to, say, sleeping underneath a bridge. To stay there requires humility, bravery, and personal strength above and beyond what I personally possess.

It was a learning experience. For some reason, I had expected a homeless shelter to resemble a hybrid of prison and monastery, in that each person would have his own room. The utter lack of privacy and inescapable proximity was soul-crushing. Seeing this room, I could see the homeless population of Philadelphia more accurately. That is, as more numerous, more human, more disadvantaged, and more resilient.

The entirety of CEE changed the way I see the homeless. I know a little bit more about what it takes to transition from living on the street. It’s really hard. I am not sure that I could stay in a shelter long enough to take advantage of the meager social services available there. So, I don’t judge homeless people who aren’t ready or able to make the transition. And those who can, earn my deepest respect. – Elizabeth Teixeira, MS II

**Teach-to-Learn:**

Overall I really enjoyed my time at Wissahickon. I especially liked being creative with the kids and helping them come up with ideas for their writing projects. The one thing that surprised me was how exposed these fifth graders are to adult stressors. Many of the kids use phrases like “My
dad needs to work late hours, otherwise we won’t have enough money” or “I don’t know if I’m going to go to college, because I’m going to need to make money.” The idea that these kids are so aware of their parents’ financial concerns and are already letting that shape their future goals (like not going to college) is a bit disconcerting. As I kid I had no idea how much money my parents made, but I have a feeling if you ask some of these kids they could probably tell you the precise amounts of their parents’ incomes.

I am really grateful to Drexel for giving us an opportunity to interact with these kids, because I think having young adults around who are pursuing their career dreams might encourage these fifth graders to dream also. One of the kids asked me how I paid for medical school and I told them I was on loan money and that I would pay back the money when I started working. When the boy heard that he smiled and said that maybe he would consider becoming a doctor if his parents’ did have to pay for all of it. Just the fact that this kid now thought he had more options was very rewarding.

The other thing I was surprised by was exposed many of the kids are to violence. When they found out I was a medical student a few kids came up to me and talked about the last time a loved one was in a hospital. At least three of them went to the hospital to visit a cousin or a brother who had been shot. These kids are dealing with many stressors and traumatic events and I continue to be amazed by their resilience and ability to be active and creative in school, despite their hardships. – Nadja Mencin, MS II

Urban Blazers:

My CEE involves working with students of Kipp Charter School, a school for underprivileged children, through Urban Blazers. Contrary to popular belief, Urban Blazers is not a non-profit that encourages outdoor activity. Rather, Urban Blazers is an after school programs that emphasizes character development. The overall experience was “affirming”, the children and their commitment to adhere the Urban Blazer’s and Kipp ideals were always refreshing. My CEE was a weekly thing and with the stress of school, I always welcomed this opportunity to get out and be with these kids. As a volunteer, I either participated in these team building exercises or oversaw the process. These activities include building marshmallow towers and rock climbing. Urban Blazers encourages these children to work together, value each other’s ideas and encourage acknowledging each other’s accomplishments regardless of who comes on top. It was so inspiring to see that children so young were able to understand the value of respecting each other and being genuinely happy for one another, which gave me a lot of hope for the future as cliché as that sounds. I think with the stress of school and the demand to not only succeed but exceed, this CEE was a reminder that we are all capable of much more when we come to appreciate what we have and surround ourselves with encouraging people.

One particular team building activity resonated strongly with me. It was a pasta picking race. What does that even mean? The kids were given a stick of spaghetti. They were told to pick up penne pasta, scattered across a table, and place them into their team’s cup. Simple enough. But there was a catch; they were asked to pick up the penne with the spaghetti in their mouth and not to use their hands at all. The team with the most number of penne pasta at the end of each race was rewarded with points. If they were caught using their hands, both the player and his or her team would receive negative points. However, if you admit that you used your hands before score count, then you neither gain nor lose any points for the team. This exercise emphasized on mainly integrity and responsibility (to think about the best interests of other people in your team). I did not have expectations necessarily for the kids about “confessing” if they were cheating, but thinking back to when I was in 5th grade, people definitely cheated in games and on spelling tests or anything really, with no shame or repercussions. I definitely felt a sense of respect for the ones who did admit to cheating during the game and especially for those who did not cheat, but also did not feel compelled to point out members on the other teams who were cheating, giving them the time and space to acknowledge their own mistakes. I can understand if someone chooses not to tell on members of his or her team but it is incredibly difficult to not tell on or create problems for someone who has a conflict of interest. This is a very complex concept for a 5th grader to understand. I think this experience was “affirming” and was meaningful to both the volunteers and the students who participated.

I am grateful for this opportunity. I feel like I have learned so much from these kids and gave me a more positive perspective on today’s youth. It was nice to get out of school and walk into such an inviting environment on a weekly basis. I think this experience helped me further appreciate the education that I have and encouraged me to create more time for the wonderful people that I have come across in these past few years. – Angela Chang, MS II
Women Against Abuse Shelter:
I worked in the Women Against Abuse’s after school program for my CEE project. Women Against Abuse is a nonprofit organization that runs Philadelphia’s only domestic violence shelter. Throughout the year, I helped the kids in the program with homework and school projects. Most of the kids were in kindergarten or grade school it was rare to see any older. In preparation for my time at the shelter I attended an educational conference at Women Against Abuse’s corporate office. The information was sad and it altered a lot of the preconceptions I had about domestic violence.

In contrast, my time at the shelter was always enjoyable. I loved working with the kids. I spent most of my evenings at the shelter helping them with reading or math. After their homework was done we would play games until their mother came to get them. My most memorable experience while working at the shelter was in the beginning of the year on my 3rd or 4th visit. It was an exam week and I had so many other things to do. Per usual when I met Alex, the other girl in the program, the classroom at the shelter was empty. Shelter life is chaotic sometimes there are a handful of kids other times none. The women and their children are only allowed to stay for a few weeks because space is so limited. Usually I only see a kid two maybe three times before they move out of the shelter. It is shocking to me that a city the size of Philadelphia has so few resources for these women and their children.

Luckily Alex and I found three kids playing in the art room across the hall. They were so excited to see Alex and me that they ran up and hugged us both. It was gratifying to know that they appreciated us being there and looked forward to our visits. This experience helped remind me that my weekly trips to the shelter were meaningful to the kids. – Stefanie Williams, MS II