

The Impact of Admissions Decisions and Curricular Content on the Profession's Ability to Meet Urgent Societal Needs

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2022 DISRUPTIVE INNOVATION IN PHYSICAL THERAPIST EDUCATION VIRTUAL SUMMIT

SATURDAY, APRIL 9, 2022

1:00P-2:30PM



LAND ACKNOWLEDGEMENT

We honor the Lenape people



Disclosure

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(pronouns: she/her/hers)

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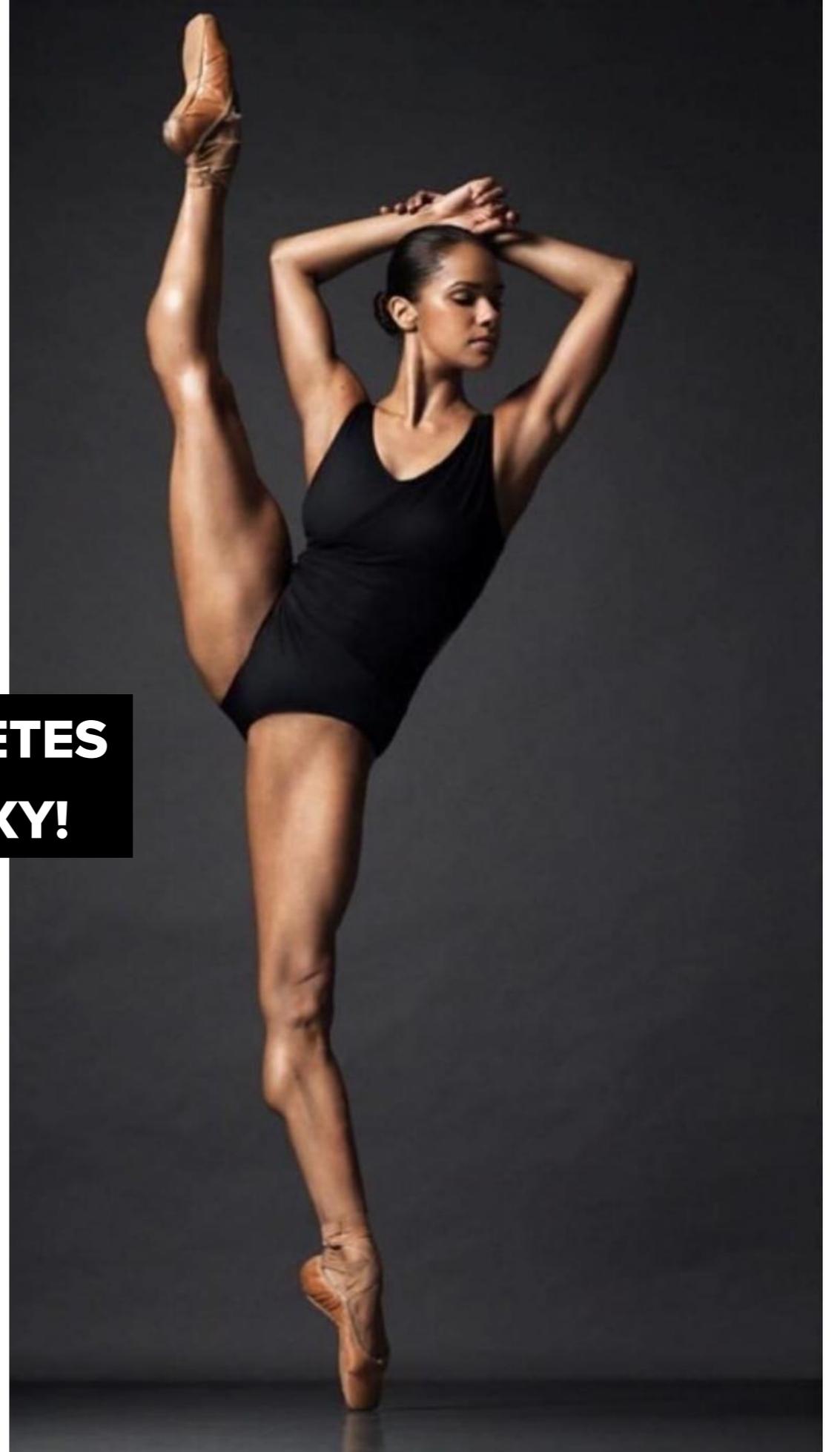
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- No relevant financial relationship exists.



**WORKING WITH ATHLETES
AND DANCERS IS SEXY!**



30%



NYC DANCE PROJECT
© Ken Beowar - Deborah Ory

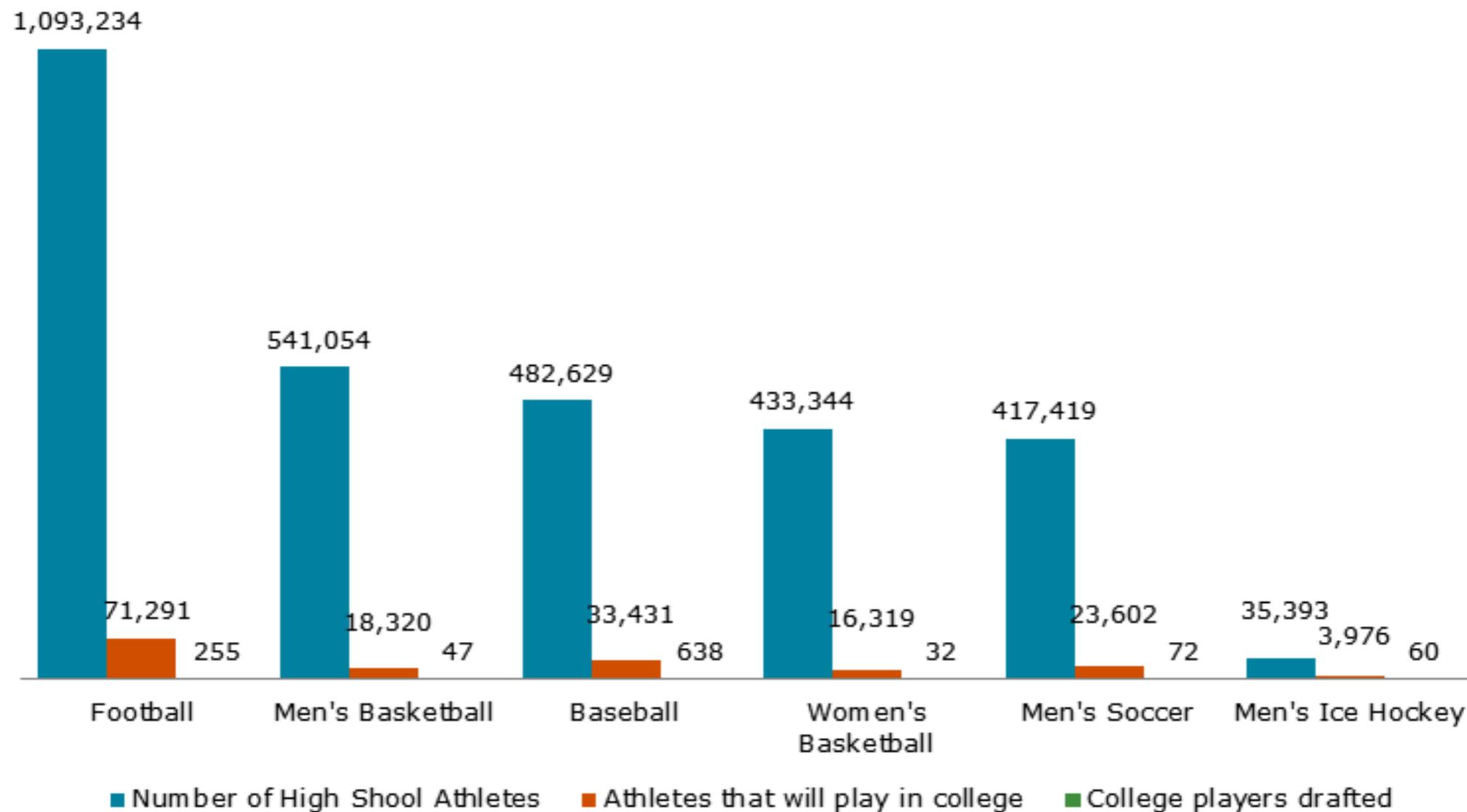
**“ABOUT 3 PERCENT OF THE PEOPLE THAT GO TO DANCING ACTUALLY BECOME
PROFESSIONAL DANCERS”**

-NIGEL LYTHGOE, PRODUCER AND JUDGE FOR THE SUCCESSFUL TV SERIES ‘SO YOU THINK YOU CAN DANCE’

VERY FEW ATHLETES MAKE IT TO THE PROS

Sports  Chart of the Day

High School Athletes That Will Play College and Pro Sports



ESTIMATED PROBABILITY OF COMPETING IN PROFESSIONAL ATHLETICS



% NCAA TO MAJOR PRO

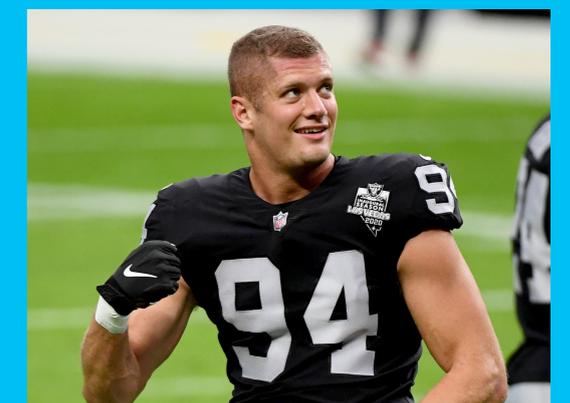
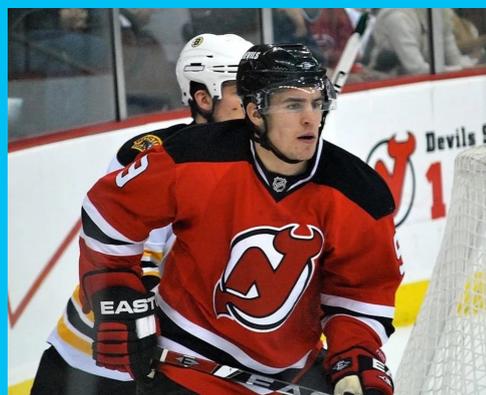
Baseball 9.9%

Mens Basketball 1.2%

Womens Basketball .8%

Football 1.6%

Mens Ice Hockey 7.4%



WHO ARE WE ATTRACTING?

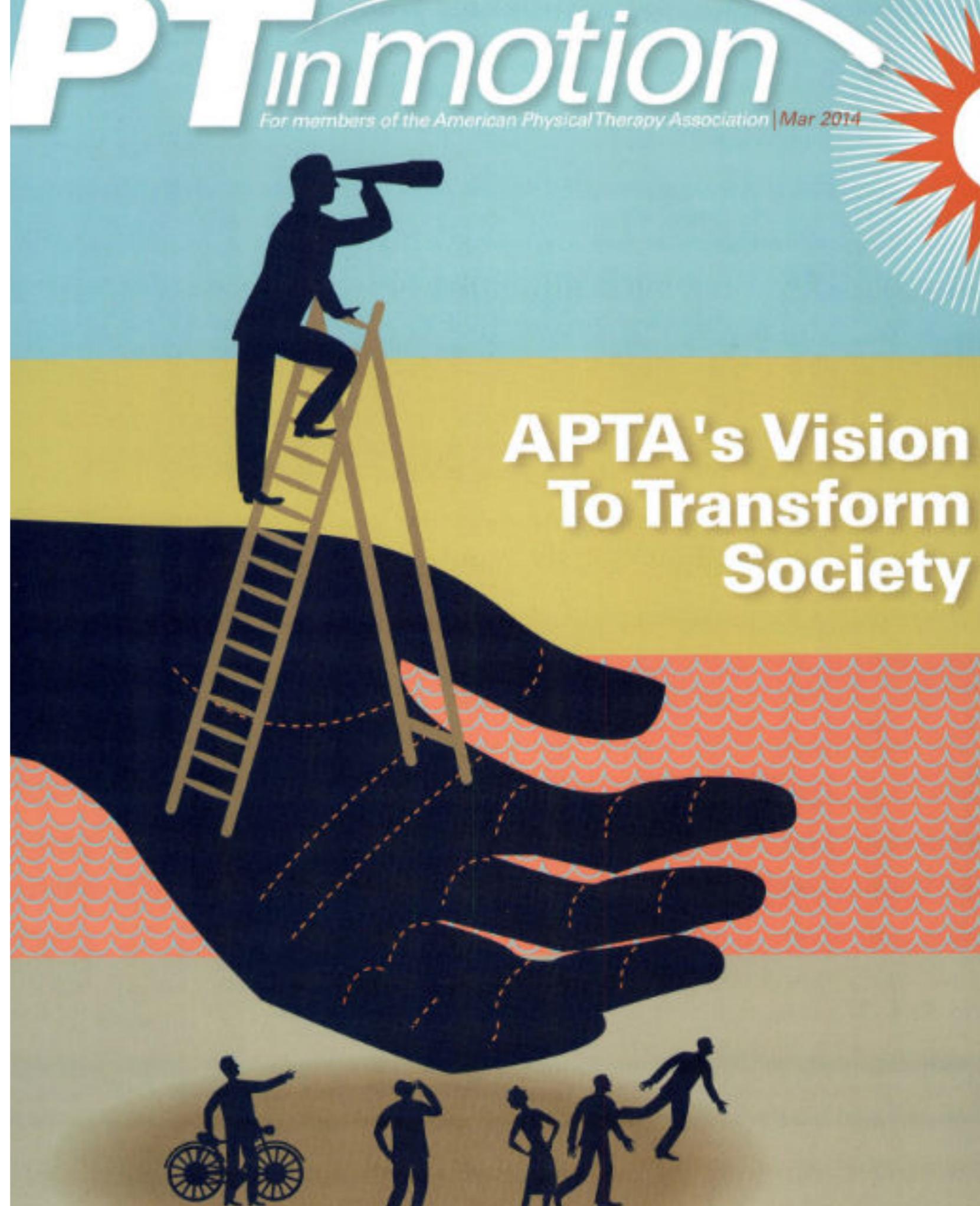
**IF MOST OF OUR PT PROGRAM APPLICANTS THINK
THAT THEY WANT TO WORK WITH THESE ELITE
PERFORMERS AND ATHLETES, THEY WILL BE
SERVING A VERY SMALL PERCENTAGE OF SOCIETY.**

**WHO WILL BE LEFT TO ADDRESS
URGENT SOCIETAL NEEDS?**

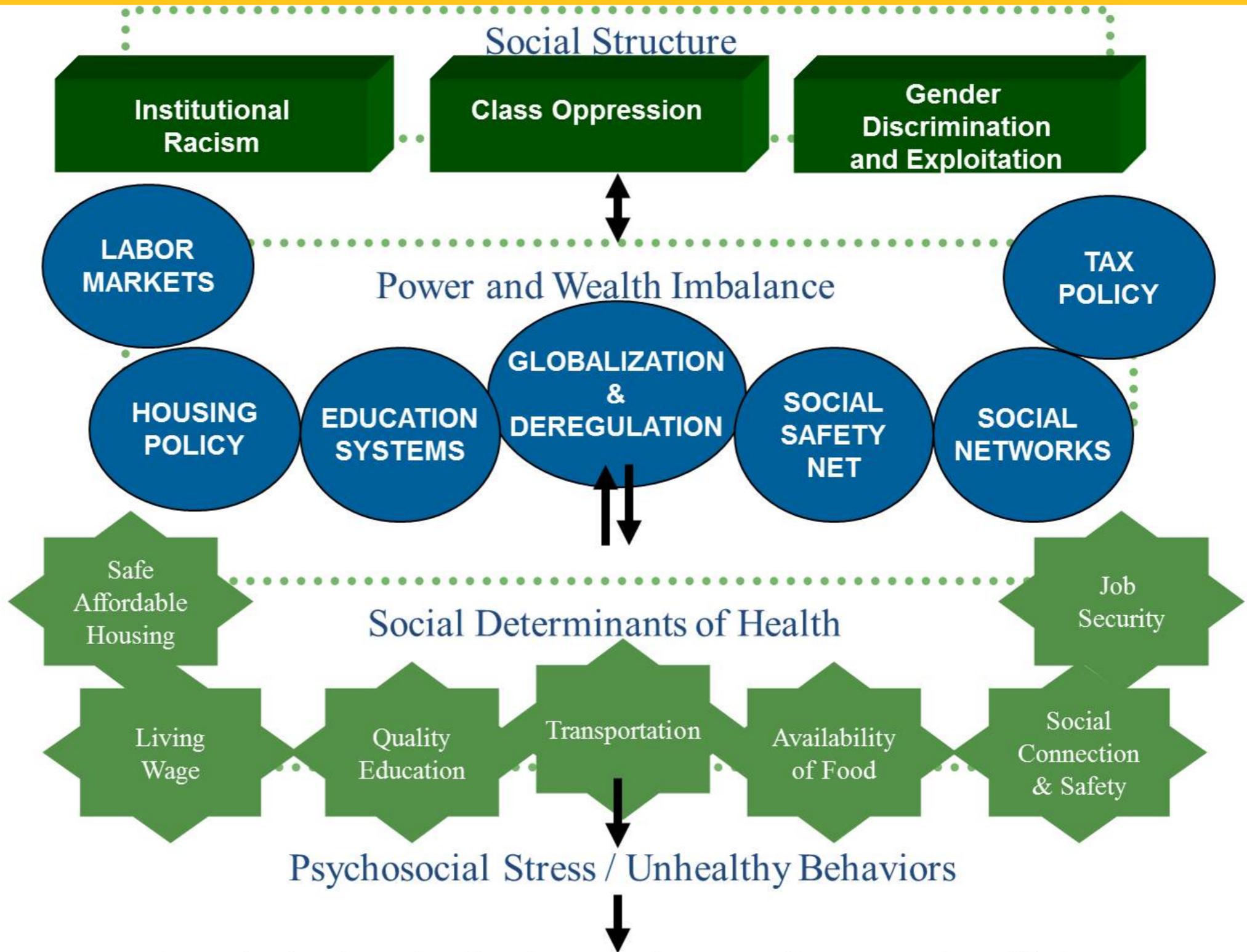
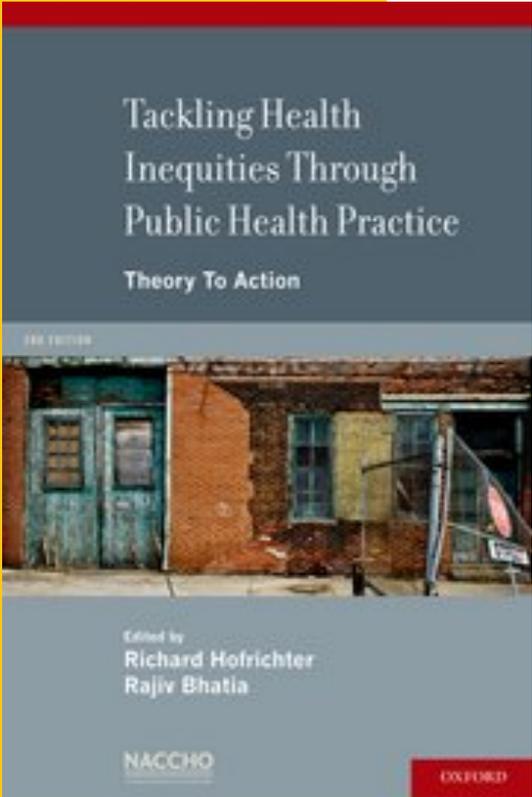
URGENT NEEDS

- Health Inequities
- Structural Racism
- Equitable Access
- Diverse Healthcare Workforce
- Aging Population
- Inactivity Pandemic

- Crushing Student Debt
- Student Stress & Mental Health challenges



HEALTH INEQUITY



Disparity in the Distribution of Disease, Illness, and Wellbeing
 Adapted from R. Hofrichter, *Tackling Health Inequities Through Public Health Practice*.

Hofrichter, R. & Bhatia, R., ed. (2010). *Tackling health inequities through public health practice: Theory to action*. 2nd ed. A project of the National Association of County and City Health Officials. Oxford University Press: New York, New York.

RACISM IS A SERIOUS THREAT TO THE PUBLIC'S HEALTH

“Racism - both interpersonal and structural - negatively affects the mental and physical health of millions of people, preventing them from attaining their highest level of health, and consequently, affecting the health of our nation.”



<https://www.cdc.gov/>

WSC

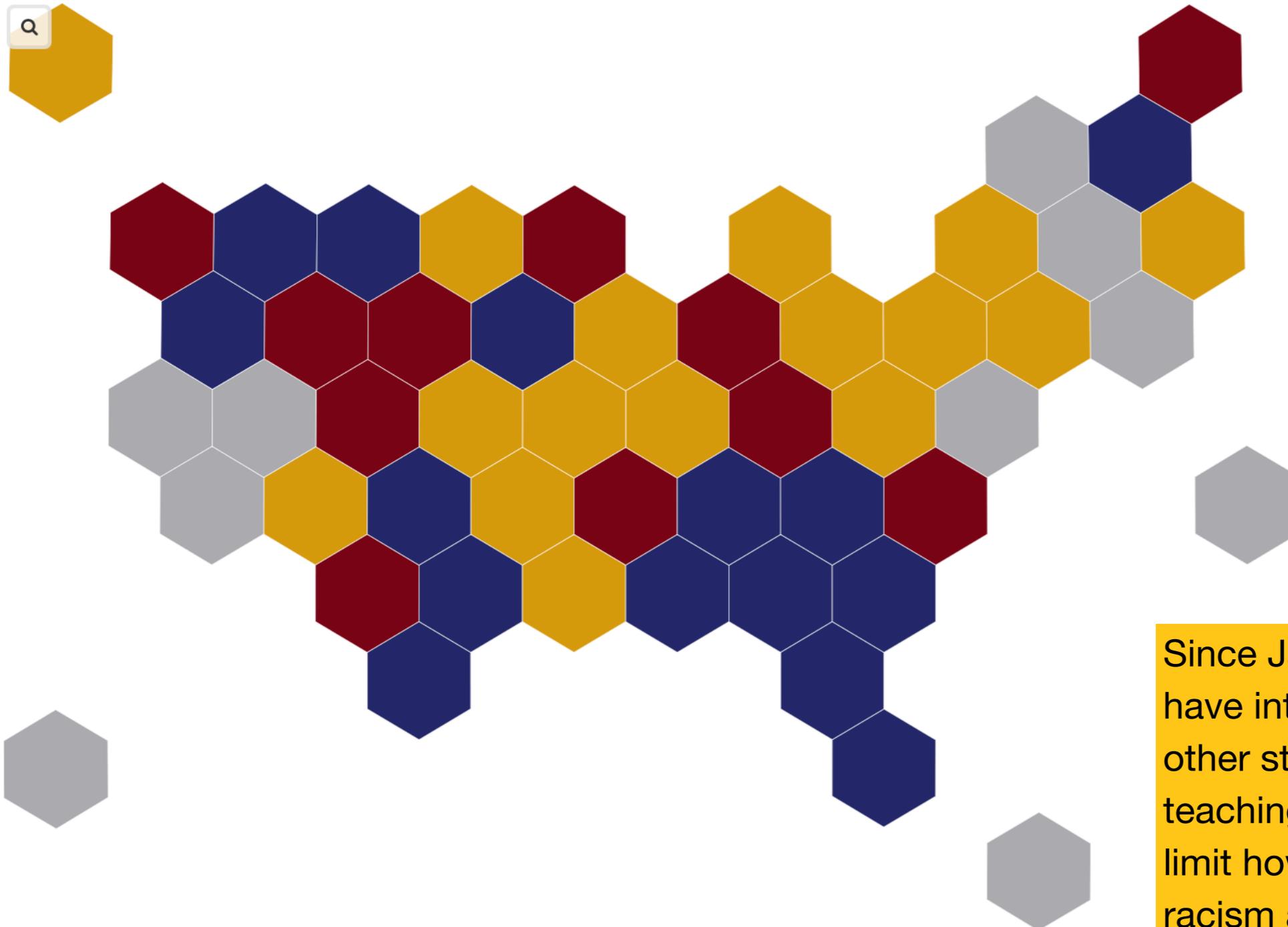
- Right to comfort



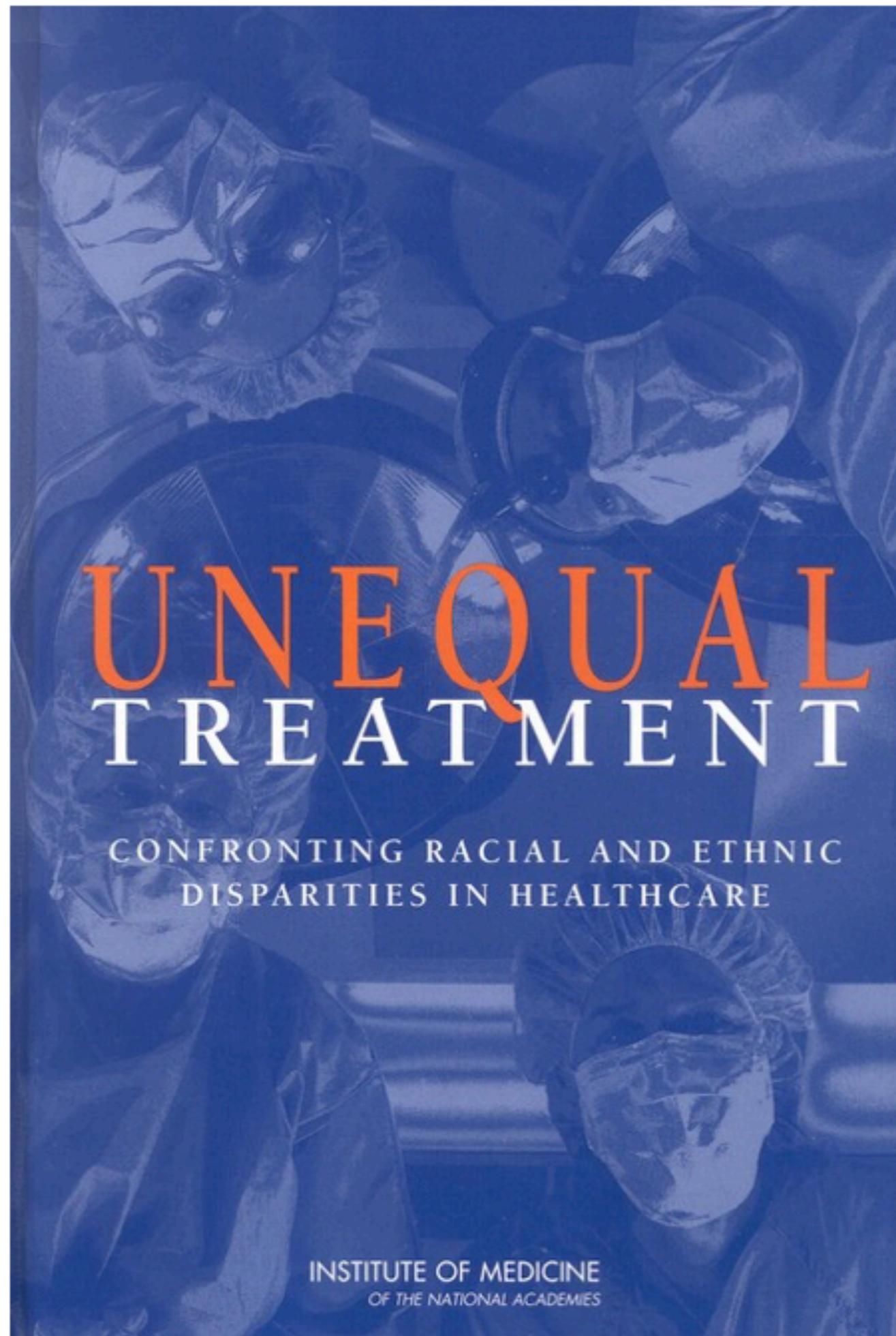
THE LONGER YOU SWIM
IN A CULTURE, THE MORE
INVISIBLE IT BECOMES

CRITICAL RACE THEORY IS UNDER ATTACK

- Bill was signed into law or a similar state level action was approved
- Bill has been proposed or is moving through state legislature
- Bill has been vetoed, overturned or stalled indefinitely
- No state-level action or bill introduced



Since January 2021, 42 states have introduced bills or taken other steps that would restrict teaching critical race theory or limit how teachers can discuss racism and sexism.



Unequal Treatment Confronting Racial and Ethnic Disparities in Health Care (2003)



CULTURALLY RESPONSIVE WORKFORCE

“In the United States today, there is a persistent lack of diversity among healthcare professionals. It’s critical that healthcare organizations improve diversity to ensure that people of all socioeconomic backgrounds, races, ethnicities, cultures, sexual orientations, religions, and genders are represented in the healthcare workforce.”

<https://www.usa.edu/blog/diversity-in-healthcare/>



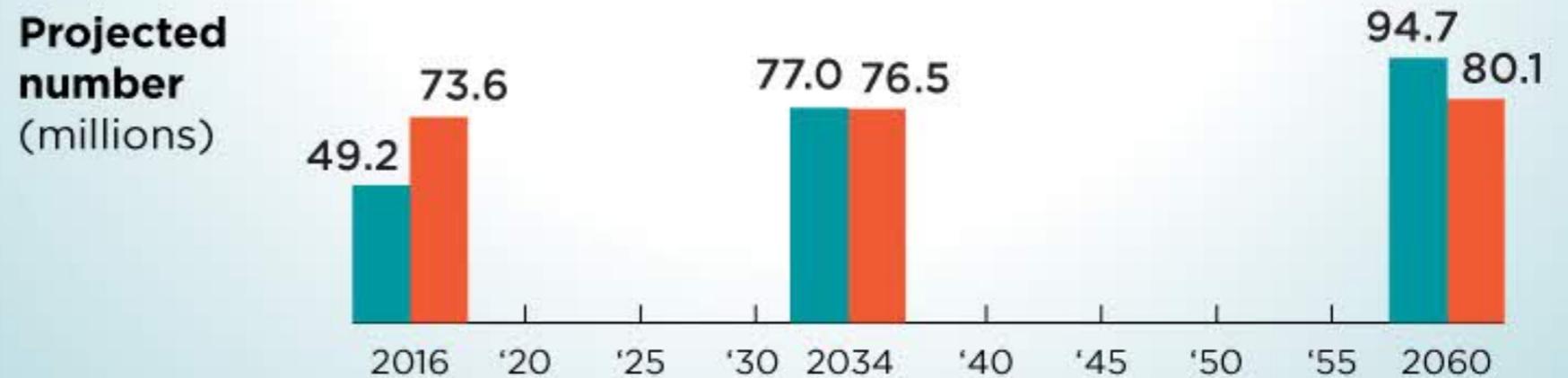
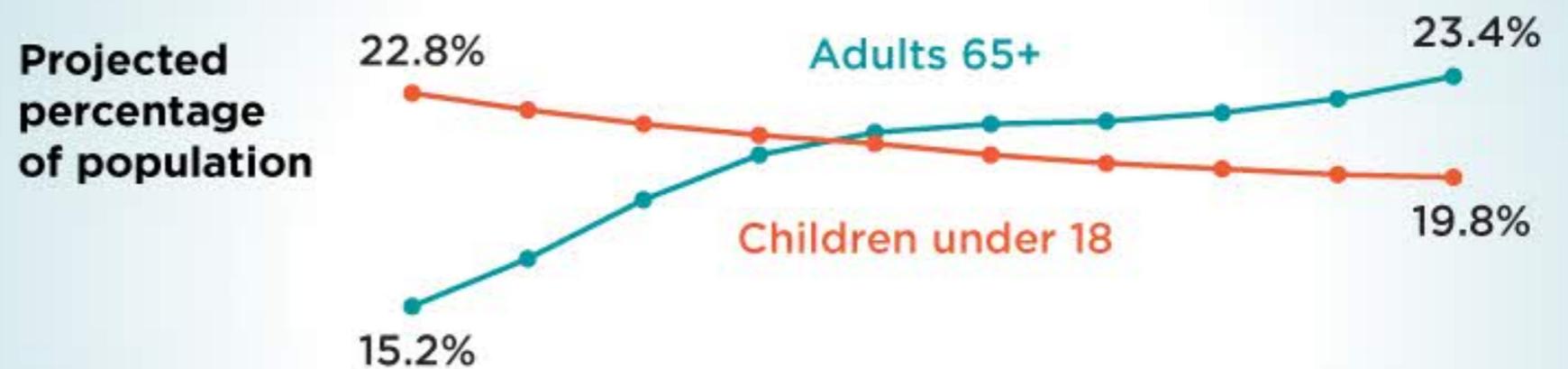
OLDER ADULTS NEED OUR CARE



An Aging Nation

Projected Number of Children and Older Adults

For the First Time in U.S. History Older Adults Are Projected to Outnumber Children by 2034



Note: 2016 data are estimates not projections.

The number of Americans ages 65 and older will more than double over the next 40 years, reaching 80 million in 2040.



One in four American adults has a **disability**.*

*2016 Behavioral Risk Factor Surveillance System (BRFSS)

INACTIVITY PANDEMIC

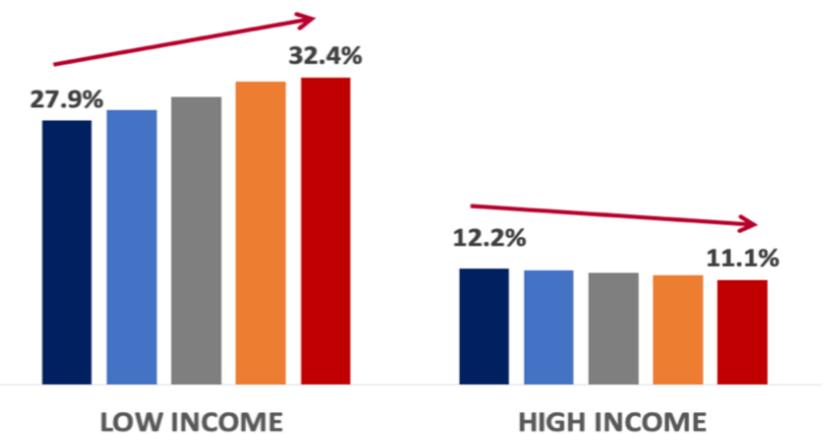
IN 2012, THE LANCET, THE WORLD'S LEADING MEDICAL JOURNAL, PROCLAIMED WE HAVE A PANDEMIC OF INACTIVITY. SINCE THEN THIS PANDEMIC HAS BECOME EVEN WORSE.

Overall Trends - This Pandemic Must Be Reversed

- Sitting is the Smoking - More people in the USA today are dying of physical inactivity than smoking¹
- More people are dying of physical inactivity than being overweight or obese...combined¹
- **Physical inactivity was the strongest risk factor for severe COVID-19 outcomes** after advanced age & a history of organ transplant⁶
- 82 million Americans (adults and kids) are totally sedentary - They are not active in more than 100 different activities or sports...**not even once in the past year!**
- Physical inactivity is a direct influence on increased healthcare costs¹

KIDS IN LOW INCOME FAMILIES ARE INCREASINGLY INACTIVE – DANGEROUS TREND

% OF KIDS TOTALLY INACTIVE BY FAMILY INCOME



* 2012-2017; Not active once in 105 different activities;
Source: Sports Marketing Surveys, Inc., 24,000 Americans

CRUSHING STUDENT DEBT

“The rising cost of education disproportionately affects students from minority, low socioeconomic status, and first-generation families. This contributes to a lack of diversity in the PT profession that, as with other health care disciplines, fails to reflect the population being served.” p.5



Impact of Student Debt on the Physical Therapy Profession

A Report From the American Physical Therapy Association

June 2020

“INVESTIGATE OPTIONS TO RE-ENVISION THE DPT CURRICULUM. DPT PROGRAMS SHOULD EXPLORE ALTERNATIVE APPROACHES THAT COULD DECREASE THE FINANCIAL BURDEN ON STUDENTS, KEEPING IN MIND THAT ONE SIZE DOES NOT FIT ALL.”

MENTAL HEALTH & WELLBEING



Stress
Coping Strategies
Resilience
Wellness



ADMISSIONS DECISIONS

The Atlantic

Read *The Atlantic's* continuing coverage of Russia's war on Ukraine here.

EDUCATION

The Problem With the GRE

The exam “is a proxy for asking ‘Are you rich?’ ‘Are you white?’ ‘Are you male?’”

By Victoria Clayton

“GRE scores say little about whether a student has the perseverance, creativity, and intellect required to finish a graduate program or, more importantly, to add something to their professional world afterward.”

LIMITATIONS OF GRE SCORES

- The practice of using cut scores disproportionately affects doctoral applicants from underrepresented groups.

What should GRE scores not be used for?

To try to predict anything beyond what they were intended to predict. Other measures of graduate student success, such as degree completion or research productivity, are influenced more by program satisfaction and changes in work and life status — circumstances that tests of academic skills or undergraduate achievement cannot predict. See [Why Do So Many Graduate Students Quit?](#)

As a cut score, even when combined with undergraduate GPA. Using GRE scores by setting a required “minimum” to triage a large applicant pool is a misuse of the scores that may prevent candidates with other desirable qualities from being considered. Also, undergraduate GPA isn’t a reliable measure as it is heavily influenced by the rigor of the undergraduate program, [grade inflation](#) and socioeconomic status, with private schools awarding higher GPAs than public schools. See the “Guidelines for Using GRE® Scores” in the [GRE® Guide to the Use of Scores](#).

WHOLISTIC REVIEW



- 1. Applicant selection criteria are broad, clearly linked to school mission and goals, and promote numerous aspects of diversity as essential to excellence.**
- 2. Selection criteria include experiences and attributes as well as academic performance. These criteria are:**
 - a. Used to assess applicants in light of their unique backgrounds and with the intent of creating a richly diverse interview and selection pool and student body,**
 - b. Applied equitably across the entire candidate pool, and**
 - c. Supported by student performance data that show that certain experiences or characteristics are linked to that individual's likelihood of success as a student and/or physician.**
- 3. Schools consider each applicant's potential contribution to both the school and the field of medicine, allowing them the flexibility to weigh and balance the range of criteria needed in a class to achieve their institutional mission and goals.**
- 4. Race and ethnicity may be considered as factors when making admission-related decisions only when aligned with mission-related educational interests and goals associated with student diversity; and when considered as a broader mix of factors, which may include personal attributes, experiential factors, demographics, or other considerations.***

***Under federal law (and permitted by state law)**

CURRICULAR CONTENT

CURRICULUM CONTENT

- Does it reflect the full diversity of society and the communities served by the school?
- Do students encounter faculty, lab instructors, clinical instructors and patients from diverse groups?
- How is the history of unethical research involving marginalized communities addressed?
- How are health disparities addressed? Is power and privilege discussed?
- Is racism explicitly discussed?
- Is a diversity of perspectives welcomed and respected?
- Is reflexivity integrated into the curriculum?
- Is the older adult /vulnerable patient the exception or the norm?

CRITICAL RACE THEORY

- Race is a social construct.
- Racism is not a relic of the past nor an act by individual perpetrators.
- Racism is embedded within systems and institutions.

We need to expose the fact that racism has informed medicine and medicine has perpetuated racism.

**Prepare physical therapists to be “structurally competent”
rather than just “culturally competent”**

A Framework for Educating Health Professionals to Address the Social Determinants of Health

6

A FRAMEWORK FOR EDUCATING HEALTH PROFESSIONALS

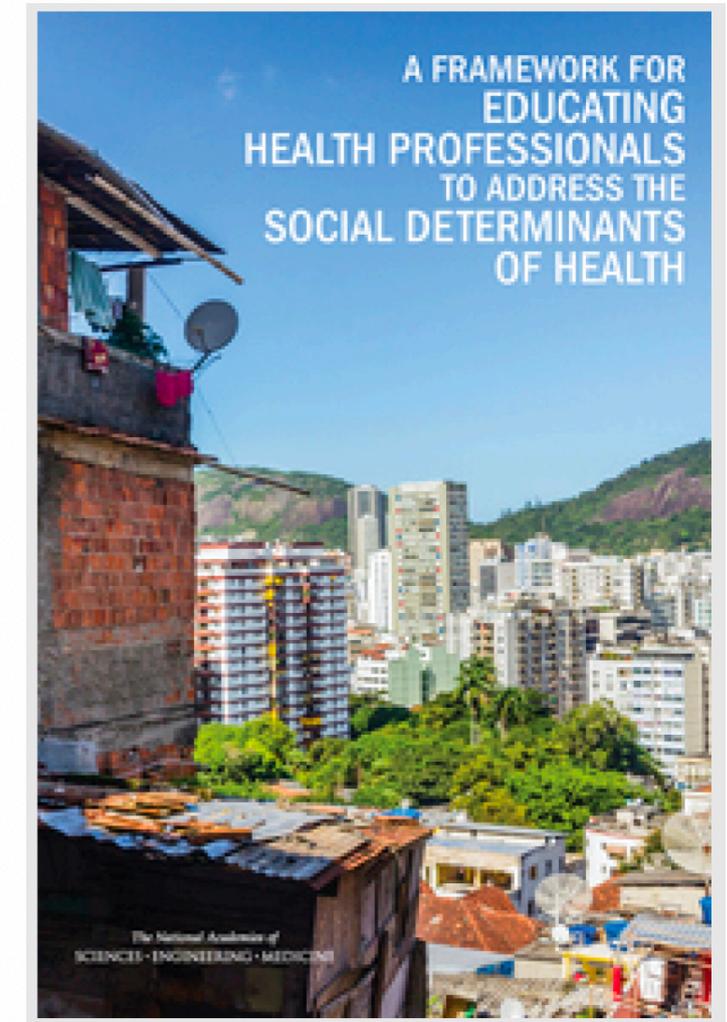
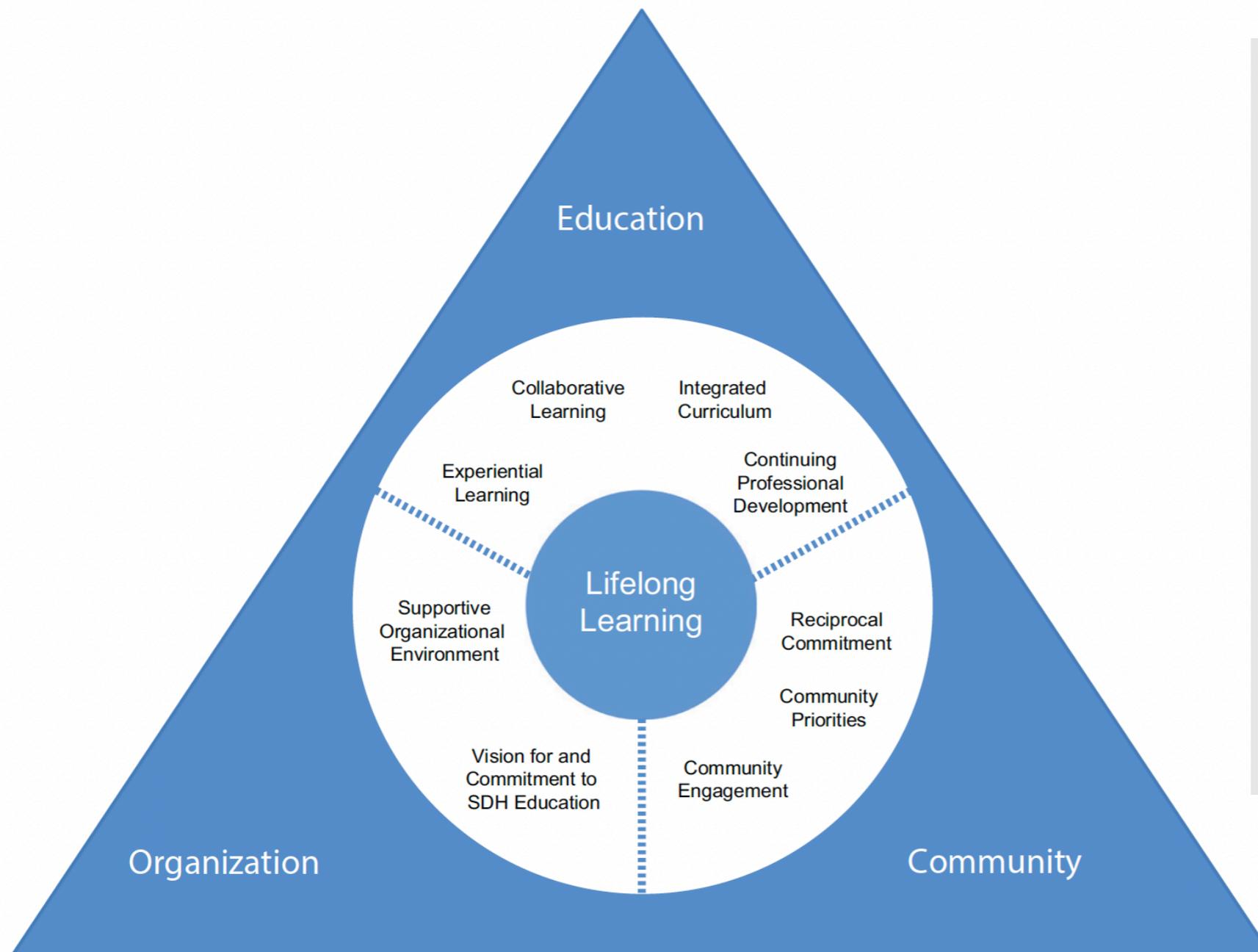


FIGURE S-1 Framework for lifelong learning for health professionals in understanding and addressing the social determinants of health.

NOTE: SDH = social determinants of health.

COMPONENTS OF THE EDUCATION DOMAIN

- Experiential learning
 - • Applied learning
 - • Community engagement
 - • Performance assessment
- Collaborative learning
 - • Problem/project-based learning
 - • Student engagement
 - • Critical thinking
- Integrated curriculum
 - • Interprofessional
 - • Cross-sectoral
 - • Longitudinally organized
- Continuing professional development
 - • Faculty development
 - • Interprofessional workplace learning

Recommendation 1:

Health professional educators should use the framework presented in this report as a guide for creating **lifelong learners** who appreciate the **value of relationships** and **collaborations** for understanding and addressing **community-identified needs** and for **strengthening community assets**.

National Academies of Sciences, Engineering, and Medicine 2016. A Framework for Educating Health Professionals to Address the Social Determinants of Health.

Washington, DC: The National Academies Press. <https://doi.org/10.17226/21923>.

BUILDING PIPELINES

- “Building pipelines to higher education in the health professions in underserved communities is a tested means of expanding the pool of viable candidates who have themselves been negatively affected by the social determinants of health.
- And while applications and admissions of such candidates may increase, equal emphasis on retaining them once they have been accepted into a program is essential,
- as is recruiting and retaining faculty from similarly underserved communities.” p.9

National Academy of Sciences.

Recommendation 2:
To prepare health professionals to take action on the social determinants of health in, with, and across communities, health professional and educational associations and organizations at the global, regional, and national levels should apply the concepts embodied in the framework in **partnering with communities to increase the inclusivity and diversity of the health professional student body and faculty.**

National Academies of Sciences, Engineering, and Medicine 2016. A Framework for Educating Health Professionals to Address the Social Determinants of Health. Washington, DC: The National Academies Press. <https://doi.org/10.17226/21923>.

ANOTHER OPTION...

**PREPARE STUDENTS
FOR WHAT THEY WANT**

MAYBE CHANGE OUR VISION STATEMENT INSTEAD

PREPARE FOR SPECIALTY PRACTICE

For example....

- Sports Electives
- Sports Residencies
- Performing Arts Electives
- Performing Arts Fellowship

- No minimum service requirements
- No required community-based partnership experiences
- No required clinical experiences working with older adults
- No exposure to Community Based Participatory Research

Promote one of the latest trends in physical therapy practice models:

CONCIERGE-BASED CLINICS

You're not restricted to 30-minute appointment slots.

You develop unparalleled rapport with patients.

You can offer a highly customized experience.

Revenue is more stable—even in times of economic downturn.

You can meet patients' demands for high-quality, convenient care

There's less burnout.

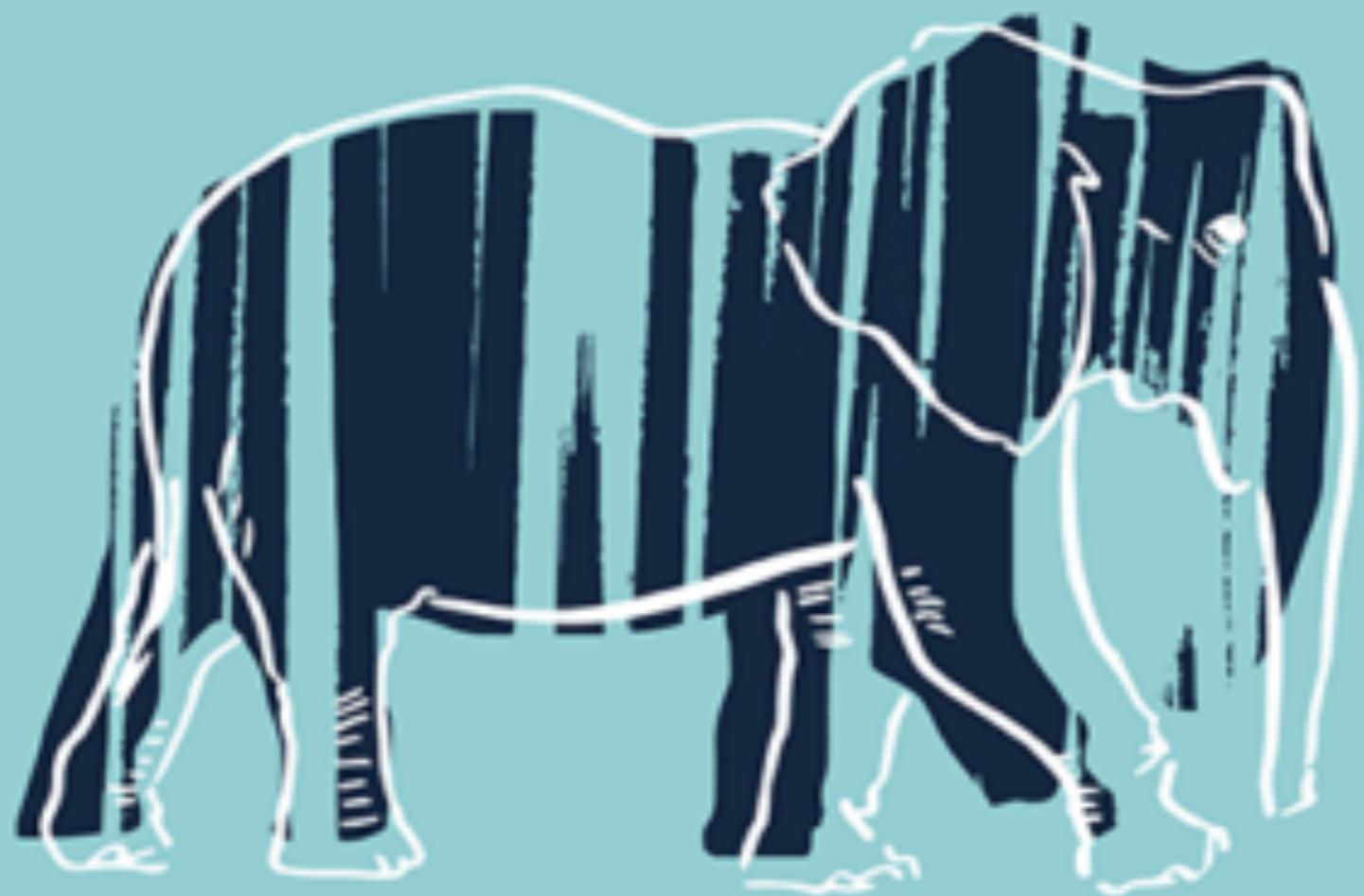


ARE WE TRYING TO GIVE STUDENTS WHAT THEY WANT?

INSTEAD OF CULTIVATING A STUDENT BODY THAT WANTS TO MEET THE NEEDS OF SOCIETY?



LET'S TALK ABOUT THE



ELEPHANT IN THE ROOM