

## Commentary

# Student-run free clinics: providing more than care

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Students at the University of Minnesota College of Veterinary Medicine have developed two student-run free clinics to provide veterinary care in underserved communities. The VeTouch program serves pet owners in urban Minneapolis in collaboration with the Hennepin Avenue United Methodist Church. The SIRVS works with tribal communities of the White Earth, Leech Lake, and Mille Lacs bands of Ojibwe and with the Lower Sioux Indian Community, and has recently partnered with the Native America Humane Society. Veterinary Treatment Outreach for Urban Community Health and SIRVS are also collaborating on a pilot program to provide services to Little Earth of United Tribes in Minneapolis this spring.

Both VeTouch and SIRVS were founded in 2009 and provide no-cost wellness care supported by grants and donations. Veterinary Treatment Outreach for Urban Community Health offers monthly clinics in a single location, whereas SIRVS clinics are 2 to 7 days long and rotate among villages, with tribal communities providing housing and meals for student and clinician volunteers in local schools and community centers.

Originally, both programs started with a handful of student volunteers and one or two veterinarians and provided care for approximately 100 dogs and cats during their first year of operation. Currently, both have > 100 student volunteers who participate in the clinics, along with 6 to 8 core veterinarian mentors and another 15 intermittent clinician volunteers. Veterinary Treatment Outreach for Urban Community Health provides wellness services for > 400 animals each

year, and SIRVS performs 100 to 125 spay and neuter surgeries and 500 wellness examinations/y.

Pet owners who come to the VeTouch and SIRVS clinics face a number of obstacles to obtaining regular veterinary care from traditional for-profit clinics, including financial limitations, a lack of transportation, and language barriers. A disproportionate number of clients navigate physical disabilities, are survivors of domestic violence, face mental health and substance abuse challenges, or are homeless or precariously housed. For some clients, roadblocks to care are minor or temporary; for others, they are substantial and chronic.

Both VeTouch and SIRVS attempt to refer owners to local veterinary practices, when feasible, to offer a hybrid model of care. Services provided during free clinics typically include vaccination, heartworm testing, dispensing of heartworm and flea and tick preventives, and deworming. Because other programs offer free or low-cost spay and neuter surgeries in the Twin Cities area, VeTouch coordinates surgical care with these providers. In contrast, SIRVS provides these services for reservation communities. Physical examinations are performed with low-stress handling techniques, and a complete medical history is taken. Point-of-care laboratory testing that is available includes urinalysis, fecal flotation, cytologic and blood film evaluation, and measurement of total protein concentration and PCV. Other testing (eg, CBCs, serum biochemical analyses, and endocrine testing) may be performed at the University of Minnesota laboratory on the basis of medical need and teaching value. Pharmacy capabilities include antimicrobials, anti-inflammatory drugs, antihistamines, pain management drugs, and basic otic and ophthalmologic care products. Behavior and nutrition counseling are available, along with a limited prescription and non-prescription food bank.

### ABBREVIATIONS

SIRVS	Student Initiative for Reservation Veterinary Services
VeTouch	Veterinary Treatment Outreach for Urban Community Health

For both programs, the remarkable expansion illustrates the extensive need for these services in partner communities. The impact of these programs on animals and their owners is clear, but perhaps less apparent is their impact on the student, faculty, and volunteer veterinarians who participate. In fact, we have found that these clinics have a tangible and lasting educational impact on the students and veterinarians who volunteer their time.

Students perceive three core benefits to participating in these clinics: practical clinical experience, relationship and community building, and a mechanism to build diversity within the profession. For these clinics, the care delivery model is very different from that found in most academic health centers. Students provide care for relatively large numbers of healthy and sick animals, providing context for the normal and abnormal presentations they learn about during their academic curriculum. Also, students are provided an opportunity to develop skills in client communication, wellness care, point-of-care diagnostic testing, anesthesia planning and delivery, and surgery in an integrated care delivery environment. Clinic management requires that students develop administrative skills, including conflict resolution, logistics, leadership, and finance.

Through the clinics, students develop meaningful and sometimes long-term relationships with clients and community members and form networking and mentoring relationships with volunteer clinicians. Clinics are team-building exercises for students, clinicians, and community partners, facilitating the development of emotional connections to the profession and fostering a culture of service. Students are motivated to learn for the purpose of improving the services they provide, rather than for a grade.

Exposure to a greater diversity of clients has prompted many students to broaden their perception of veterinary practice models. This exposure has also prompted students to encourage individuals from underserved communities to consider careers in veterinary medicine. Through the clinics, students develop an appreciation for different perspectives on the human-animal bond, the importance of client communication, and the need to employ novel strategies for care planning and delivery. In contrast to the technologically and financially intensive model of practice common in most academic centers, the clinics force students to focus on learning to work with clients "where they are." As one student participant expressed it, "no matter the situation, you can always do something to help."

Beyond standard medical treatments, options sometimes include behavioral or environmental modification, home remedies, or simple affirmation of an owner's good intentions and recognition of the bond between owner and animal. The clinics are a powerful illustration of the fact that veterinary medicine exists as a continuum of care that is adaptable to the client, animal, and clinician, rather than an

all-or-nothing model built on inflexible standards of care. Providing care in familiar and open community spaces can minimize transportation and some language barriers, and students perceive that the transparency of the teaching environment builds trust in communities that may historically have suffered trauma around medical care delivery. This care delivery model integrates community members as important collaborators, providing space, meals, and volunteer assistance, and affirms the value of clients and their pets in the training of the next generation of veterinary professionals. Clients are often eager to learn alongside students and provide encouragement, assuring students that they are in the process of becoming competent clinicians who have skills that benefit the community. Recently, both programs have worked with local partners to develop youth volunteer programs that expose underrepresented students to future career opportunities working with animals, such as veterinary technician and veterinary degree programs.

Veterinarians who volunteer as mentors for VeTouch and SIRVS report benefits similar to those experienced by students. Participating veterinarians are invested in helping students develop the skills needed to provide high-quality care in a low-tech environment and want to foster more flexible, skilled, and creative graduates. The clinics offer veterinarian volunteers the opportunity to fuse professional skills with personal causes, such as supporting immigrant or other underserved communities and assisting animal owners coping with homelessness, addiction, domestic abuse, or mental and physical health challenges. The clinics can be a strategy to improve the mental health of veterinary professionals by providing care to individuals who might otherwise be turned away, engaging in team building with colleagues and students, and encouraging participation in community events that build social support networks.

Beyond their benefits to students and clinicians, the VeTouch and SIRVS clinics help address some of the current challenges in veterinary education, including cost-containment, pressure to improve practice readiness, supporting student mental health and wellness, and enhancing diversity within the profession. These student-veterinarian-community collaborations confront what has often been a hierarchical approach to educational design and bring additional stakeholders into the process. Together, participants are working toward the common goals of increasing access to care while supporting student and veterinarian development.

Student-run free clinics are an emerging instructional model in human medicine, and students and veterinarians participating in VeTouch and SIRVS are members of the Society of Student-Run Free Clinics, an initiative that began with the Society of Teachers of Family Medicine and its associated faculty advisors group, allowing them to learn from colleagues in human medicine. In the future, they hope to partner

with various veterinary organizations, including the AVMA, and other student-run free clinics to more fully develop this concept in veterinary medicine.

In an era of hyperspecialization and technology-driven solutions, service learning has the potential to be an integrative force that combines fundamental clinical skills, public health promotion, creative problem solving, and community partnerships. We believe that these types of programs have benefits not only for the community but also for the students and faculty members who participate, and we hope that other colleges of veterinary medicine will initiate similar student-run clinics or consider how existing clinics best complement existing formal curricula. We advocate for reserving time in student and faculty schedules for interested individuals to engage in student-run free clinics, and we encourage the development of supportive community partnerships to foster a learning environment that strengthens the bonds between veterinary students, faculty, and the people and animals they serve.

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