
Developing a Worldwide Extended Campus Program

By Joyce W. Hopp

The traditional target population for higher education is dwindling in numbers, forcing colleges to consider the needs of other groups or close their doors. Older adults are returning to the classroom in record numbers. More adults are making career transitions during their working lives. As a result, colleges and universities have had to explore creative ways of addressing this shift in their student enrollment.

Some institutions were ready with new programs when the population shift hit them; others have been forced to adapt, often with foot-dragging and complaints. Fear of lowered academic standards, faculty work overload, traditional faculty reserve toward the use of marketing techniques, lack of policy development, and lack of support by administrators have tended to hamper institutional adjustment to market demand.

Taking the School to the Students

Loma Linda University's School of Health experienced all of these

problems as it began developing an extended campus program. Like most schools in the early 1970s it waited for students to come to it. Faculty and administrators reasoned that if they developed a top-notch, accredited school of public health, students would recognize the value of the educational opportunity and beat a path to its door. It took a group of health professionals in the Canadian Union to change that perspective.

Physicians, dentists, nurses, and allied health professionals cannot drop out of a busy practice and take a year off to go away for graduate study. The Canadians, pointing this out, requested that the School of Health consider offering coursework at an off-campus location. Dan Skoretz, a Canadian faculty member at the School of Health, formulated alternatives in 1973 for other faculty to consider in response to this request. Most faculty agreed that *some* classwork could be offered off campus, but certainly not the entire Master of Public Health degree program.

The first courses set the pattern for the way classes would be offered for the next decade: a concentrated 30 hours of instruction

within a three-to-four-day period, a precourse and/or postcourse assignment, and a project applying the coursework—for example, one health professional might develop a health-promotion program for a hospital in the region where he or she lived.

As a means of standardizing instruction and assuring comparability with on-campus classwork, all instruction was given by the same faculty who taught at Loma Linda. Examinations, quizzes, syllabi, textbooks, handouts, and visuals were the same. Courses were scheduled to meet once each quarter, often over a holiday or long weekend period. With a 48 quarter-unit program, the degree could be completed in a four-year period.

Graduates Who've Never Seen the Campus?

But the faculty was adamant that at some point the off-campus students needed to come to Loma Linda. How else could they gain the flavor of the purpose of the School of Health, use the library and laboratory facilities, master computers in statistics courses? In short, how could a person be a graduate of a school without ever

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having seen it?! The initial requirements called for a minimum of two quarters on campus.

The Canadian students persisted in their protestations that it was too difficult for them to come on campus for a six-month period. They found advocates among the faculty, particularly those who had traveled north to teach them. The obvious quality of the students, their high level of motivation and degree of commitment were impressive. One-third of the students were ministers who had decided to add the health component to their ministry. This meant taking several courses in the applied sciences, but they demonstrated their dedication to the program by scouring the countryside for the designated prerequisite courses.

Gradually, the School of Health shifted its position, extending the number of classes it was willing to offer off campus. In 1978, 27 students participated in the completion exercises for their M.P.H. degrees at College Heights, Alberta. All of their coursework had been taken off campus, a fact that then-President Norskov Olsen observed as he addressed the group. A milestone had been reached in the development of the extended campus program.

The School of Health continued to expand its off-campus offerings during the four-year period between 1974 and 1978, beginning programs in the North Pacific, Southern, Columbia, Central, Atlantic, and Southwestern Union Conferences. In each area, it was a cooperative effort, with a departmental leader at the union level coordinating and marketing the program. An Office of Extended Programs (OEP) was set up within the School of Health, and a self-study of the program was presented to the national accrediting body, the Council for Education in

Public Health. The primary reason given to the council for developing the program was the need of Seventh-day Adventist health personnel throughout the North American Division for a type of education they could not obtain from one of the other 19 accredited schools of public health.

Quality Control

Quality control problems face higher education, both on and off campus. Student evaluations of instruction and instructor, one of the usual on-campus methods of evaluation, can work equally well off campus. Indeed, off-campus students were often more assertive and forthright in such assessments!

Direct comparisons between on- and off-campus students can be difficult, for the student groups are not comparable and random assignment is impossible. Sherilynne Skoretz Will undertook a comparison as part of her doctoral

studies in higher education at the University of Southern California. Grenith Zimmerman, who taught Public Health Statistics at the School of Health, joined forces with Will to compare student accomplishments as measured by the examinations in that course. The results: students off campus did as well as those on campus in terms of immediate postcourse and three-months' postcourse retention of knowledge.*

Both off- and on-campus classes have stated instructional objectives, with evaluation being done in terms of those objectives. Continuing-education courses for dentists, physicians, nurses, and dietitians, which were brought under the umbrella of the OEP, must utilize similar objectives to qualify for credit under their respective professional organizations.

*S. S. Will and G. Zimmerman, unpublished study, Loma Linda University School of Health, 1979.

A Global Perspective

By 1978, 8 of the 10 unions in the North American Division were being served by the extended campus program. Then the Inter-American Division approached faculty in the International Health Department of the School of Health: Could the same program be offered in their area?

Some potential problems that had to be considered included inability of students to pay the regular tuition rates (although the extended campus coursework has thus far been offered at a somewhat lower rate) and the need for courses in three languages—English, Spanish, and French. Sievert Gustavsson, health director for the Inter-American Division, worked closely with the School of Health to deal with the obstacles. Two sites for each language group were chosen; courses alternated between sites to reduce travel. In October, 1983, 103 IAD students graduated with a Master of Science degree in Public Health, majoring in international health. Fourteen physicians added the necessary coursework to complete the M.P.H. degree.

The effect of this program reached into every corner of the Inter-American Division. One hundred forty additional students attended one or more of the courses, although they did not complete the degree program. Evangelistic efforts, which were part of the culminating project for many of the graduates, resulted in more than 400 baptisms. Surveys of health services and education done as part of the program revealed that less than 10 percent of the membership in the division had ever visited a Seventh-day Adventist medical facility. This prompted the division to emphasize the development of primary health-care centers.

The summer of 1985 found the School of Health and the division initiating a second series of courses, again in three languages. This time the curriculum was designed to meet the needs of three specific groups: (1) health professionals currently in practice, but not oriented to community health practice; (2) managers of primary health-care centers; and (3) secondary and college health/science teachers. Coursework is scheduled over a four-week period each summer; health professionals can complete their degrees in four summers. The other two groups will require five summers of coursework. The curriculum includes basic core courses in public health, plus a 12-unit area of concentration.

A driving force that has increased the need for this kind of degree program is the outreach of the Adventist Development and Relief Agency (ADRA). This program demands local leaders trained in community health and development, skills that most ministers have lacked, but which the M.P.H. degree is uniquely adapted to provide. Members of the Inter-American Division have responded by enrolling 100 new students in this program.

Far Eastern Division

A major arm of the church in the Far Eastern Division is the health-care system, with 21 hospitals, plus a large number of clinics and dispensaries. It is organized as the Adventist Health System/Asia. In most countries leaders must be prepared in health-care administration, a preparation that the physician-leaders lacked. AHS/Asia requested that the LLU School of Health offer the Master of Health Administration degree in the Far East.

Twenty-seven students representing nine different countries in

the Orient began the degree program in September, 1984. Sixty units are required for the degree. In addition, four noncredit tutorials for the prerequisite skills in statistics, finance, accounting, and economics have been offered to those needing them. Coursework is also modified according to the financial and legal environment differences existing in the Far East.

Administrative internships, required of on-campus students, are not a part of the program, since the off-campus students are currently working in the health-care system, often with years of experience in institutions. However, each student does have to complete the projects that are normally a part of the administrative residency. For example, reviewing and revising the mission statements of the hospital as necessary, or reviewing the market niche that an Adventist hospital can uniquely fill.

By the time each of these students has completed the degree in 1988, the health-care institutions of the Far East will have documents supporting each segment of their program. Comparative cost to the division for this training: 25 students can complete the degree for what it would cost to send three students to Loma Linda.

Problems to Be Addressed

Problems are inevitable in the development of a global extended campus program. What happens if a student who is being sponsored by an institution doesn't do well? How does a student make up coursework that he or she missed, when it is offered only one time in an area 7,000 miles from the campus? How do faculty respond to executives and health professionals who are used to telling other people what to do, not to being stu-

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develop other techniques and programs to achieve their common goals.

Conclusion

Our colleges and universities need to take the initiative in bringing about a cure for the malaise that exists in Seventh-day Adventist education. Educators and administrators need to exalt the role of education as a truly evangelistic mission backed by quality academic training and spiritual commitment.

I wish those of us committed to

Worry that Christian education will grow beyond the church's ability to cope with it can be compared to the farmer's fears that his crop will be too bountiful.

Christian education could write with the authority found in the Biblical pleas, "Hear O Israel . . ." and "Hear, you who have ears to hear . . ."—for these suggest an imperative. They imply a command to hear.

However, perhaps the best we can do is to work for change and remain optimistic. Emily Dickinson expressed the sentiment well:

Perhaps you laugh at me. . . . Perhaps the whole United States are laughing at me too! I can't stop for that! . . . I found a bird, this morning, down—down—on a little bush at the foot of the garden, and wherefore sing, I said, since nobody hears? One sob in the throat, one flutter of the bosom—My business is to sing—and away she rose!³ □

FOOTNOTES

³ Clark Kerr, "Earl V. Pullias Lecture in Higher Education," University of Southern California, 1984.

² Ernest L. Boyer, *High School. A Report on Secondary Education in America*. The Carnegie Foundation for the Advancement of Teaching. (New York: Harper and Row Publishers, 1983), pp. 265, 266.

³ Quoted from Betsy Erkkila, "Emily Dickinson on Her Own Terms," *The Wilson Quarterly* (Spring, 1985), p. 109.

BIBLIOGRAPHY

- Adler, Mortimer J., *The Paideia Proposal, An Educational Manifesto*. New York: Macmillan Co., Inc., 1982.
- Boyer, Ernest L. *High School. A Report on Secondary Education in America*. The Carnegie Foundation for the Advancement of Teaching. New York: Harper and Row Publishers, 1985.
- Erkkila, Betsy. "Emily Dickinson on Her Own Terms," *The Wilson Quarterly* (Spring, 1985), p. 109.
- General Conference of SDA. "World Report," 1983, 1984. Department of Education.
- _____. North American Division, Education Annual Report, 1980-1984.
- Goodlad, John I. *A Place Called School*. New York: McGraw Hill Book Company, 1984, p. 348.
- Judge, Harry. *American Graduate Schools of Education: A View From Abroad. A Report to the Ford Foundation*, 1982.
- Kerr, Clark. "Earl V. Pullias Lecture in Higher Education," University of Southern California, 1984.
- National Commission on Excellence in Education, *The Nation at Risk: The Imperative for Educational Reform*. A report on the nation to the Secretary of Education, United States Department of Education, Washington, D.C.: U.S. Government Printing Office, 1983.
- Nation Responds, The, Recent Efforts to Improve Education*. United States Department of Education, May, 1984. Foreword by T. H. Bell, U.S. Secretary of Education.
- Sarason, Seymour B. *Schooling in America*. New York: The Free Press (Macmillan, Inc.), 1983.
- Sizer, Theodore R. *Horace's Compromise. The Dilemma of the American High School*. Boston: Houghton Mifflin Co., 1984.
- Study Group on the Conditions of Excellence in American Higher Education. *Involvement in Learning: Realizing the Potential of American Higher Education*. Sponsored by the National Institute of Education. Presented to the Secretary of Education and the Director of the National Institute of Education, October, 1984. "Text of New Report on Excellence in Undergraduate Education," *The Chronicle of Higher Education* (October 24, 1984).
- Topor, Robert. *Marketing Higher Education: A Practical Guide*. Washington, D.C.: Council for Advancement and Support of Education, 1983.

Extended Campus Program

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dents themselves? How do you handle an expanding program when a limited number of well-prepared faculty are available? How do you assess faculty workload: Is the off-campus teaching part of the regular load, or above and beyond it? Should faculty be paid an additional amount for off-campus teaching? Or should they receive a small amount of "combat

pay" for being gone from home on off-campus teaching assignments? Should the School of Health add additional faculty just for the purpose of off-campus teaching, and if so, what standards of faculty selection should apply? What kind of academic control should be exercised over course offerings in the off-campus program, and by whom?

Currently, the School of Health faculty is exploring these questions, seeking input both from within the university and from other universities. While other schools of public health do offer extended-campus programs, usually these are limited to communities in close proximity to the institutions. This was the major reason why the University of Washington School of Public Health deferred to Loma Linda when a request came in from Alaska for such a program. It was also why the Utah State Department of Public Health requested an M.P.H. degree off-campus program in environmental health from Loma Linda.

The School of Health found that off-campus programs furnished sufficient student enrollment to keep the institution financially viable. The faculty has been rewarded by the visible success of the graduates, both in terms of personal advancement and contribution to the church's program. Although the development phase can be viewed as complete, the expansion phase is just beginning. The School of Health must continue to address the questions posed by that expansion. □

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