Introduction

“Profiles in Professionalism,” an innovative new series featured in the Journal of Humanities in Rehabilitation, seeks to explore the elusive yet crucial concept of professionalism and its role in the field of rehabilitation medicine. Providing insight through the words of visionary leaders, we seek to reflect on what it means to be a professional in the current healthcare environment, and how the past can help to inform the future of our growing field. Through captivating video interviews, the concept of professionalism is presented in a format that aims to speak to rehabilitation professionals across the spectrum of clinical care, research, and education.

In this installment of the “Profiles in Professionalism” series, we sit down with Gail M. Jensen, PT, PhD, FAPTA. Dr. Jensen is recognized nationally and internationally for her scholarship in expert clinical practice and reasoning, professional ethics, and interprofessional education. In this interview, Dr. Jensen explores what being a professional means to her and how to use the humanities to foster a strong sense of professionalism in the field of Physical Therapy.

Biography

Gail M. Jensen, PT, PhD, FAPTA is Dean of the Graduate School and Vice Provost for Learning and Assessment at Creighton University. Dr. Jensen also holds academic appointments as Professor of Physical Therapy, and Faculty Associate, at the Center for Health Policy and Ethics. Dr. Jensen is a distinguished scholar who has co-authored numerous books including Educating for Moral Action: A Sourcebook in Health and Rehabilitation Ethics and most recently, Educating Physical Therapists, which shares results of an intensive examination of physical therapist education and offers recommendations for innovation and reform including a stronger emphasis on professional
formation. Dr. Jensen is the recipient of the 2011 Mary McMillan Lecture Award. Dr. Jensen continues to use her skills and expertise to further discover the humanistic elements of patient care and develop ways to prepare compassionate and mindful clinicians.

Interview Questions with Full Transcription

QUESTION 1:

HOW DID YOU LEARN WHAT BEING A PROFESSIONAL LOOKED LIKE AND HOW WOULD YOU DESCRIBE THAT TO STUDENTS AND CLINICIANS TODAY?

Where I first got a sense of how important it is to focus on professionalism in the development of a professional was in my entry-level physical therapist education. And that was done through role models – powerful role models – who really set the stage from the beginning. We are preparing professionals – change agents. You’re responsible for the care of your patient and you’re responsible for meeting societal needs. And that was a part of the implicit curriculum as well as the explicit curriculum. So, I had no difficulty making a transition or a change in why we needed to move to the clinical doctoral program. Because I had an entry level Master’s degree and I always thought of myself as being prepared as a professional, so moving to a clinical doctoral degree was … The argument for the clinical doctoral degree was really about preparing a professional. And central to that is the professional formation piece that is fundamental to all professions. So, these three habits that every profession has: habits of mind, which we spend a lot of time on, habits of hand, clinical skills, and habits of heart. So, it’s knowing, doing, and being. And it’s the being that is the most important. Because the being is your, is your centerpiece. That’s where you come from. And if you have that sense of who you are as a professional and your obligation to patients and to the society in which you live in, and understand the common good, then you will continue to learn and know and do in the best way possible. The other thing I’ve come, in my own knowing and doing and learning, continuing to learn, is when we did the book Educating for Moral Action the conversations we had across professions with, you know, Patricia Benner, and Ruth Purtigo, how important moral action is, educating for moral action. And that has a deeper meaning in how we prepare our learners, our students, that moral action is that ability to take an action that will make a difference in the outcome. That sense of agency. And that really helps students understand it’s not just what you value or what you espouse but what are you going to do with it? What action are you going to take? If you see something wrong are you going to say something? Or are you going to be complicit and sit back? So, the importance of the moral grounding and the ability to understand what the moral dimensions and standards are and how that is foundational to being a professional is probably the most difficult work we do and it’s so important. Why we need to do it better.

QUESTION 2:

WHAT DO THE HUMANITIES BRING TO THE FIELD OF REHABILITATION AND WHY IS IT SO IMPORTANT?

We need more. We need to broaden our approach to physical therapist education, to health professions education. That the humanities bring a sense, an
understanding of meaning and perspective of the human experience that all health professionals need to have, and in particular in rehabilitation. So you can see things from multiple frames of reference or viewpoints if you’ve had that sense of “what does the literature say” or “where’s emotion involved here?” You know, we talk about “how do you want to understand context?” and the humanities really, really help us do that. But some of the professions, health professions, are challenged more than others. Physical Therapy is challenged more than Occupational Therapy, or Nursing. Because of the, because of our focus, because of our, our focus on movement and the mechanistic biomechanical focus we take, the science background. But we know, you know, if we want, if we want human beings to move they’re not going to move if they don’t want to, right? So, we have to understand where they’re coming from to really help them engage in their own well-being and work. That’s, and you know, there’s been a lot written about those of us who are part of the human improvement fields. You know, whether you’re a therapist or a teacher, yeah those of us that are involved in caring. That’s complex work. Because we can’t control people. We can facilitate but we can’t control. So, we have to find ways to really understand the lived experience of the people we work with, whether it’s a student or a patient or a community. And the better we understand that through our view of the humanities the more successful we can all be.

**QUESTION 3:**

**HOW CAN WE LEARN TO MANAGE THE UNCERTAINTY WE EXPERIENCE IN THE CLINIC?**

So the question is, “How do we, how do we prepare health professions students, health professionals for really managing uncertainty?” Because professionals practice in an uncertain world. One of the most important things we have to do, professionals do, is make judgements in uncertain conditions. And part of the ability to do that is, is how do we see things from different viewpoints. So, how do we have those multiple frames of reference, see it from different stakeholders or from the family, from the patient, from other health professionals. We’ve got to bring all of that, we’ve got to try to understand that, to understand the complexities and manage, manage the complexity. It, we talk now a lot about being adaptable, and being adaptable or flexible is how do we uncover the complexity and work with it versus saying “Well, I can’t do that.” Or what happens if something is complex and we don’t want to deal with it? We judge it. I mean, we know, we know that if, the more expertise you have the more you suspend your judgement. You don’t label somebody, you don’t use a word or a language to say, “Well, it’s not my problem. It’s not my fault, you know, that’s the patient’s fault.” Poor historian or whatever. So, it, that’s the uncertainty that we have to have the ability to engage in it and figure it out, that progressive problem-solving approach that’s very important. And the humanities is — it brings that kind of, of view where you, you’re comfortable with the complexity and trying to understand, “What does this mean from this viewpoint or that?” or “What does this painting mean?” “What’s the real message here?” Or reading something, very close reading of a poem, you spend time with it, you grapple with it. That’s very different than, “What’s the right answer?”

**QUESTION 4:**

**WHO HAS BEEN THE BIGGEST ROLE MODEL IN YOUR LIFE?**

I think I’ve had many models. I think I’ve had people that I admire and respect and have, they role model,
they demonstrate that deeper sense of commitment and, you know, whether that was faculty members I had in, you know, professional education, or someone, you know, my dissertation chair, that’s always pushing, to push, to make you think a little more deeply. And I would say in the area of the humanities and ethics without question it’s been Ruth Purtilo. Dr. Purtilo has been someone who has raised questions in a very thoughtful way, never – always supportive but always, you’re just puzzled. You go, “I never thought about it that way”. And such a gentle but yet analytical way of pushing your thought more deeply. And that’s a real, that’s a real skill. She understands both the healthcare and health professions, but she comes back to the moral elements and puts the questions in a way that you can grab a hold of them. They’re very eloquent. She has great intellect and wonderful grace. I mean, wow. [laughs] And she’s very generous.

**QUESTION 5:**

**HOW CAN WE BETTER PREPARE PHYSICAL THERAPY STUDENTS TO BECOME COMPASSIONATE AND MINDFUL CLINICIANS?**

How can we, in the profession, do a better job of making change agents? And my, my answer to that would be similar to how I think about the overuse of the term critical thinking – I think critical thinking is an overused term, it’s almost like the pain clinic. [laugh] It’s, every institution says that they promote critical thinking. Every institution says, “We prepare change agents.” But if we don’t understand what, in a deeper level what we are trying to do with learning and the learner, and helping the learner be adaptable, not only adaptable but very much grounded in their moral obligation as a professional – as a health professional – you’re not going to be a change agent. It’s not a change agent just to change things. The deeper meaning of “what’s your public purpose,” “what’s your social responsibility,” understanding the common good. You know I love to ask students the question: So, tell me about what’s the common good mean to you? And I would hope that students that have had a Jesuit Catholic education would know the answer to that. But that’s not always the case. You know, the common good is we all want to live in a community where we have clean air, and clean water, and access to education, and hopefully access to healthcare. I mean, so we care for one another is a common good kind of community. That’s not socialism, that’s understanding the common good. And health professionals have a very strong obligation to the common good, and to health. We spend more money on healthcare than any other country in the world. But our health is not as good. We’re 38th or something. And so, that has to do with other things going on, social determinants of health. So, what’s our responsibility? We have to be part of owning that and finding ways to work with communities to make change. That’s a change agent. And that means we, as a profession, you know back to Pellegrino – Dr. Pellegrino was very critical of medicine, saying medicine needs to be a moral community. So, what does it mean to be a moral community? So, the professions have to be moral communities and really be change agents themselves and take stands and have public voice about issues that are affecting society and well-being. And we, that then permeates down to, to institutions, and organizations, and individuals, faculty and students and practitioners. So, we’re all in this together.
About the Authors

Gail M. Jensen, PT, PhD, FAPTA is Dean of the Graduate School and Vice Provost for Learning and Assessment at Creighton University. Dr. Jensen also holds academic appointments as Professor of Physical Therapy, and Faculty Associate, at the Center for Health Policy and Ethics. Dr. Jensen is a distinguished scholar who has co-authored numerous books including Educating for Moral Action: A Sourcebook in Health and Rehabilitation Ethics and most recently, Educating Physical Therapists, which shares results of an intensive examination of physical therapist education and offers recommendations for innovation and reform including a stronger emphasis on professional formation. Dr. Jensen is the recipient of the 2011 Mary McMillan Lecture Award. Dr. Jensen continues to use her skills and expertise to further discover the humanistic elements of patient care and develop ways to prepare compassionate and mindful clinicians.

Melissa McCune is a second-year Doctor of Physical Therapy student at Emory University School of Medicine in Atlanta Georgia. As a dual degree student, Melissa is also pursuing her Master’s in Public Health at Rollins School of Public Health at Emory University to gain a broader perspective on health and the meaning of disease and disability within our communities. Originally from Ohio, Melissa earned her Bachelor of Science in Applied Physiology at Wright State University in Dayton, OH. During her undergraduate career, she cultivated a passion for rehabilitation as she realized the capabilities of the human body to rebuild and recover. She’s continued to work and seek out opportunities at the cross-roads of science, art, and the humanities. She has served as an AmeriCorps State and National member where she saw the effectiveness of teaching STEM education through an art-focused lens and the effect it had on building up her students and fostering healthy relationships within her classes. Melissa is currently working as the Senior Graduate Associate Editor for the Journal of Humanities in Rehabilitation where she hopes to shed light on unique perspectives that provide new insight and challenges the standard perspective on rehabilitation, human connections, and the experiences that we share.