

Profiles in Professionalism: Interview With Nancy R. Kirsch PT, DPT, PhD, FAPTA

By Nancy R. Kirsch PT, DPT, PhD, FAPTA and Melissa McCune, SPT

Introduction

This 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 Dr. Nancy R. Kirsch. Dr. Kirsch is recognized for her prolific scholarship in the field of rehabilitation and her expertise in biomedical ethics, healthcare administration, and physical therapy education and clinical practice. In this interview, Dr. Kirsch explores how the field of physical therapy has evolved, and the critical role the humanities play in developing caring and compassionate professionals.

Biography



Nancy R. Kirsch, PT, DPT, PhD, FAPTA is currently the Vice Chairperson for Administration of the Rehabilitation and Movement Sciences Department and the Director of the Doctor of Physical Therapy Program at Rutgers, The State University of New Jersey. Additionally, Dr. Kirsch is a current member of the New Jersey Board of Physical Therapy Examiners and President of the Board of Directors of the Federation of State Boards of Physical Therapy. Dr. Kirsch’s commitment and service to the American Physical Therapy Association (APTA) is extensive, with her holding appointments as President and Chief Delegate of APTA’s New Jersey Chapter; as a member

of APTA's Ethics and Judicial Committee, and its Reference Committee; and serving on multiple task forces for ethics and clinical education. In 2006, Dr. Kirsch was awarded the APTA Lucy Blair Service Award; in 2014, she became a Catherine Worthingham Fellow. In 2017, Dr. Kirsch was awarded the Distinguished Professional Award from the New Jersey Chapter of APTA.

Dr. Kirsch writes a monthly column titled "Ethics in Action" for the APTA publication, *PT in Motion*, and has recently published the textbook, *Ethics in Physical Therapy: A Case Based Approach*. Her commitment to pushing the field of Physical Therapy forward and exploring the intimate connection between the humanities and clinical care serves as a beacon for all Physical Therapy professionals.

The Interview

HOW HAS THE FIELD OF PHYSICAL THERAPY EVOLVED FROM BOTH AN EDUCATIONAL AND CLINICAL CARE PERSPECTIVE?

I think one of the things that's really critical is to...look at all the different ways in which we've evolved as professionals... This profession is almost a century old and I've been in it [for] almost half a century. So, when you think about that and you think about how it's evolved and how we're developing it, I'm thrilled that we've gone the route that we've gone in terms of really looking back and getting more substance in our education so that we are preparing what could be much better-prepared clinicians. But, I'm not sure that we are doing that. So, I...look back at my beginnings—which were very much science-based, [with] very little humanities because in a PT curriculum that was four years long, you took science courses and you didn't

have many humanities. So, how did we come out and evolve into really caring professionals?

I think it's the way in which we entered the profession, and...being able to maintain that. But, I think what's...lost along the way is people not recognizing that as professionals we have a responsibility to keep evolving and growing, and...at the very minimum we have a responsibility to be entry-level... So, we have to keep growing with the profession as it's evolved. On the other hand, when we look at folks that have had the opportunity to have more of a general education and...take perhaps more humanities to really inform them in terms of their professional development—and they may have chosen not to because of the type of professional degree that they sought...then what kind of practitioner are we actually growing and evolving?

I think we're at a point—a crossroads—in our professional development... [W]e really [need to] look at who do we want...interacting [with patients] and [to] have the privilege to be a healthcare provider? (And particularly in my case, a physical therapist.) I consider it to be a privilege to carry a license [and] to be able to practice. I consider it a privilege to be able to interact so intimately with another human being and be so involved in their life. I always tell our students, make sure that when you walk into a patient's room [to] look at the patient and interact with the patient...look around the room. Look at the family dynamic. Look at the pictures on the wall. That person in the bed is that person for a very short time compared to the person that you're going to see reflected around the room and within the dynamic of the family.

So, how do we make people understand that they've got this incredible privilege to be involved in somebody's life? I think that that's [the] evolution of us as a profession. We have to really be looking at who do

we want to be producing in the future so that we don't lose that very intimate relationship. When people choose to become a PT or they choose to become another healthcare provider, it's because they've decided this is the kind of interaction [they] want to have with patients. And what drew me to physical therapy was that very dedicated, intimate but more long-term kind of relationship that you could have with somebody. So, I think that that's [the] kind of evolution that's occurred and I think that...really speaks to the type of professionalism...we have nurtured all the way through, but...want to be able to continue to develop.

WHEN THINKING ABOUT OUR ROLE AS PROFESSIONALS, WHAT PART DOES HUMILITY PLAY?

I think that humility is really the basis of professionalism because again...after you get an education and you pass an exam, you're granted a license to *touch*, to move into somebody else's space, and I think that takes a tremendous amount of looking at yourself and realizing that you're vulnerable. You have the opportunity to work with people that are vulnerable, and...we all have to recognize that we don't know everything by any means, and we really are going to learn as much from the people that we have the pleasure of working with as we're going to be able to bring to them. So, I think humility is really the crux of being able to really see yourself as a professional.

WHERE DID YOUR INTEREST IN THE HUMANITIES STEM FROM?

...I think everybody has whatever their particular personal background models [are]. Mine was [when] I lived all over the country...[and] got to meet lots of different people along the way, [and had] the opportunity to make new relationships on a continual basis. When you're in middle school, that's not a

bargain or a benefit by any means! But I think that that was a lot of how I evolved because I had to do that *even though I didn't want to do that*. And I think background-wise, I was brought up in a fairly religious home where there were...quite a few rules and...also...a very concrete...value of human life: that human life was the ultimate and that every single rule that we had could be broken to save a human life. So, it...puts humanity...and the sanctity of life way up here. And so, I think that's...where I evolved from...There wasn't any rule that was superseded by the sanctity of the individual person's value, and so valuing a person and valuing what they could contribute was just part of the way I was raised.

HOW HAS YOUR EXPERIENCE WITH THE HUMANITIES HELPED SHAPE HOW YOU PRACTICE CLINICAL CARE?

So, I think that's a great question because I think that we all have our own personal values and we all have our own personal things that we think—some value judgments here and there...I'm a vehement anti-smoker, so I really don't have a whole lot of respect for people that choose to [use]—as I always called them—cancer sticks... But yet, I had a lot of patients who smoked and I've actually even gone and bought cigarettes for patients when they couldn't get them themselves and...they really, really needed them. And I could respect the fact that they needed something that nothing else at that point in time could give them and that they were asking for it...because of that need. So, even though I myself was very vehemently opposed to a particular thing that somebody might do socially, I still had enough respect for them as an individual that I could respect their need.

And so, I think that that's a lot of it...[the] ability to just be able to accept people for where they are. I have

always had the opportunity—I've worked in every type of environment—and...I got to meet people in the prison system that I treated; you know, I'm trying to do gait training and they're shackled on both legs and...*we did gait training!* And I found out that they were people, really good people...Just being involved with people on every single level, there's humanity in almost everybody at some basic level, and it's a matter of being able to draw that out for the good of that person.

HOW MIGHT TECHNOLOGY BE AFFECTING THE WAY STUDENTS AND CLINICIANS ARE COMMUNICATING WITH THEIR PATIENTS, AND WHAT IS THE VALUE IS USING DIRECT COMMUNICATION?

You know, I find our students are basically just wonderful, wonderful people. But, I find that they have not had the opportunity to really communicate with other people and that we're getting further and further away from that...Communication can be done a lot of different ways and there's great value in that. But, it also allows people to remove themselves from the personal element of interacting with another human being, so that you can...say some things that maybe you wouldn't say directly to another person...You don't see the hurt in somebody's eyes when you're texting or when you're sending an email. And so, I think it's just [something] to be cautious of...[T]here's a lot of really good things about the technology that we have available to us but there's something that's even better... remembering that there's another human being on the other end of that communication. And so that ability to hear needs to be translated to the ability to actually...listen. It's not enough to just hear what somebody says. We're going to find out more about our patients from what they say to us... than any other type of way in which we can...disseminate

information. So, I think that's...critical that we help our students who really have grown up with not having to have a lot of direct communication. I will often find students sitting in a circle—which would be a wonderful opportunity to talk to one another—and they're texting. And I'll ask them “who are you texting?” and if they're texting people that are sitting next to them in the same circle, I'll remove their devices so they have to talk... It's become convenient and it's become the norm, and it's really not the best communication because it's only one small, flat, dynamic part of communication. Not all that's involved in the body language, and the facial expressions, and all the other things that we need to be able to look at our patients and...read, and I'm afraid we may lose some of that.

WHO IS SOMEONE IN YOUR LIFE WHO HAS HELPED SHAPE THE WAY YOU THINK ABOUT PROFESSIONALISM?

Well, there's—there's just a lot of people, obviously, but I would...go back to my parents and my grandparents... I only actually knew one of my grandmothers...in particular. And she came to this country as an immigrant when she was about fourteen on her own. My parents wouldn't even let me take a bus by myself, but she came across steerage...not speaking the language at all, and she...taught herself English, and...raised a family. And throughout her entire life she took in people that needed a place to live...and needed, you know, [care] and love and never asked for anything from anybody, *ever*. And my parents were very similar.

I looked back and I go, how...did they do this? How did they raise us and provide what they provided? Which mostly was just a very secure, loving environment in which they brought us up to just

respect all people...that all people had the right to respect regardless of what background they had or where they came from. And they were able to instill that. So, I think that they were really my model for

professionalism. And then I was fortunate to just be surrounded by tremendous professional models my whole life. I've been very lucky.

About the Authors



Nancy R. Kirsch, PT, DPT, PhD, FAPTA is currently the Vice Chairperson for Administration of the Rehabilitation and Movement Sciences Department and the Director of the Doctor of Physical Therapy Program at Rutgers, The State University of New Jersey. Additionally, Dr. Kirsch is a current member of the New Jersey Board of Physical Therapy Examiners and President of the Board of Directors of the Federation of State Boards of Physical Therapy. Dr. Kirsch's commitment and service to the American Physical Therapy Association (APTA) is extensive, with her holding appointments as President and Chief Delegate of APTA's New Jersey Chapter; as a member of APTA's Ethics and Judicial Committee, and its Reference Committee; and serving on multiple task forces for ethics and clinical education. In 2006, Dr. Kirsch was awarded the APTA Lucy Blair Service Award; in 2014, she became a Catherine Worthingham Fellow. In 2017, Dr. Kirsch was awarded the Distinguished Professional Award from the New Jersey Chapter of APTA. Dr. Kirsch writes a monthly column titled "Ethics in Action" for the APTA publication, *PT in Motion*, and has recently published the textbook, *Ethics in Physical Therapy: A Case Based Approach*. Her interest in the *Journal of Humanities in Rehabilitation* developed from her work with students and clinicians in ethical decision making and the exploration of the factors that help to develop mature ethical reasoning in health care providers. She is particularly interested in how practicing clinicians can remediate unethical behaviors and develop skills for ethical decision making that provides practical guidance using reflection and introspection.



Melissa McCune, SPT is a third-year Doctor of Physical Therapy student at Emory University School of Medicine in Atlanta, Georgia. She also pursued her Master of Public Health degree at Rollins School of Public Health at Emory University during the 2018-2019 academic year. As a dual-degree student, Melissa wanted 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 the recipient of the 2019 Frank S. Blanton Humanities in Rehabilitation Scholar award and is currently working as the Senior Graduate Editorial Associate for the *Journal of Humanities in Rehabilitation*. By focusing on the power of human connection and our shared experiences, she hopes to provide a unique perspective and contribute in meaningful ways to the field of rehabilitation.