

# SPECIAL ISSUE:

## LEADING CHANGE FOR A MORE CIVIL SOCIETY

Charles P. Seeley, Justice College and The Leadership Center (Honduras)

Guest Editor

### LEADERSHIP AND COMMUNITY ENGAGEMENT

One perspective on leadership views the leader as someone who is willing to step out of his or her comfort zone to help, someone “who sees something that needs to change and takes the first steps to influence that situation” (M. Wheatley, 2008, pp. 2-3). Leadership is active, not passive, and is demonstrated by taking action to improve a situation. It involves influencing and engaging others in the process of change, in the process of making some aspect of society, community, or organizational life better. The intent behind this special issue was to provide faculty with a forum to discuss and share their efforts to effect change through the application of disciplinary knowledge to improve some aspect of society (Boyer, 2016), somewhere in the world. Our hope was to have faculty discuss how they applied their disciplinary knowledge to initiate change in a community, an organization, a governmental entity or program, or an educational institution or program in the broader community beyond the university campus. This special issue of the Journal of Scholarly Engagement (JSE) includes three examples of faculty doing just that, applying their domain knowledge to improve some aspect of society.

This application of leadership aligns well to the Boyer Model of Scholarship, and specifically to the call of Ernest Boyer for academics to step off the university campus and into social, civic, moral, and economic realms “to participate in building of a more just society and to make the nation more civil and secure” (Boyer, 2016, p. 18). Boyer laments his observation that the academy has become too inwardly focused and has lost sight of the mutual value that comes to both the university and the broader community when academics actively pursue the scholarship of engagement. The three examples of community engagement included in this issue exhibit that type of leadership, leadership that makes a difference in communities in both the United States and Honduras.

Leadership matters; it matters in government, in business, in non-profit organizations, and in communities. Leadership matters in higher education classrooms, whether the classroom is online or in-person. Leadership matters in the administrative offices of a doctoral program. Leadership can be manifested in many different ways and in many different settings. Leadership can bring about positive change in society. Our world is in desperate need of positive leadership in every aspect of society and culture. This special issue explores positive leadership to reduce health disparity in under-represented groups, to bring much needed medical care to communities in Honduras, and to raise the level of understanding of sport psychology on the part of high school coaches in California communities. This special issue also explores leadership in undergraduate education and in a doctoral program in leadership

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The articles included in this issue fall into two categories. The first category consists of three community engagement articles that hit the sweet spot for the topic of this special issue – applying discipline knowledge to make a difference in some aspect of society. The second category also consists of three articles; all three fit into a reflective practice approach to scholarly activity.

In the first of the community engagement articles, the authors from the Wake Forest School of Medicine discuss an innovative outreach approach they utilized to reduce health disparities by increasing engagement of under-represented groups in biomedical research. In the second community engagement article, the authors from The Leadership Center and several different non-governmental organizations serving Honduran communities explore the role of short-term medical missions in the health care delivery system of Honduran communities. This exploration is generalizable to communities in most developing nations. The third

community engagement article, written by faculty at California Baptist University, explores the engagement of faculty and master's level students with high school coaches in a local school district through focused clinics and workshops.

The second category also consists of three articles that are all reflective in nature. In the first of these articles, Duryee reflects on her experience and the lessons she learned as she moved from the K-12 classroom to teaching adult learners through an online platform. In the second reflective practice article, the authors from Framingham State University explore the use of guided notes as a tool in undergraduate instruction. In the third reflective practice article, authors from Lancaster Bible College | Capital Seminary and Graduate School explore the process they followed and the lessons they learned as they undertook the transition of leadership when the director of a doctoral program retired.

Boyer (2016) was passionate about faculty engaging in organizations outside of the campus to apply their discipline knowledge to help improve society and culture, to solve problems in communities, governments, and organizations. Boyer's perspective aligns well to the focus of this special issue -- leading change for a more civil society. In the preface to her thought-provoking book, Margaret Wheatley (2017) articulated the importance of leadership in language that is almost poetic: "This world does not need more entrepreneurs. This world does not need more technology breakthroughs. This world needs leaders" (M. J. Wheatley, 2017). This special issue provides six examples of faculty members, and their collaborators, demonstrating leadership by applying discipline knowledge in communities, an academic administrative office, and the classroom.

This issue of the Journal of Scholarly Engagement is of relevance to multiple audiences. College and university faculty will find these manuscripts useful as exemplars for documenting their own practice. This issue will be of interest to those planning for or executing a leadership transition. Practitioners, such as college and university instructors, will find these manuscripts invaluable for providing insights when transitioning to an online modality and in the use of guided notes in undergraduate education. Additionally, anyone interested in community engagement will find three excellent examples

of engagement in communities in Honduras, California, and North Carolina.

## References

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# COMMUNITY ENGAGEMENT THROUGH MEDICAL MISSIONS

Charles Seeley, Justice College and The Leadership Center (Honduras)

Yudy Canelas, Carolina Honduras Health Foundation (Honduras)

Peggy Hook, Carolina Honduras Health Foundation (Honduras)

Valerie Schubert, Foundation Casa de Luz (Honduras)

*“Maybe the greatest tragedy is that millions needlessly suffer and even die from illnesses that can be so easily avoided.” Hand of Hope*

## MEDICAL MISSIONS INTERRUPTED: A GLOBAL HEALTH CRISIS

The idea for this article was planted in a conversation between the lead author and one of the co-authors in mid-2019, well before the outbreak of the coronavirus pandemic around the world. We began work on this article late in 2019; in hindsight, life then was much simpler given that COVID-19 has already changed the world in many ways. As a result, this article examines community engagement through medical missions in the world as it existed prior to the onslaught of COVID-19. The setting for this look into community engagement through medical missions is the country of Honduras.

Honduras is one of the poorest countries in Latin America, with more than 48% of the population living in poverty (WorldBank, 2020). The coronavirus pandemic and the resulting societal and economic disruption is a complicating factor wrapped around the many other problems that Hondurans have to deal with on a daily basis, including widespread violence, crime, poverty, rampant corruption, high un- and under-employment, age and gender discrimination, lack of clean water, food insecurity, land title issues, brain drain, poor health care, lack of education, drug trafficking, and climate change (Seeley et al., 2019; Thorpe, 2019).

The government of Honduras imposed significant restrictions to combat the spread of COVID-19. With the first two confirmed cases of COVID-19 announced on March 11, 2020, the government of Honduras implemented enhanced screening and quarantine measures to reduce the spread of COVID-19. All schools in the country have been closed since March 13. All borders (air,

land, and sea) were closed as of March 15. Only evacuation flights have been allowed to leave the country, with empty planes allowed to land to evacuate U.S. citizens. Citizens have only been allowed to leave their homes to buy groceries, medicine, or gasoline, or to bank, one day every two weeks, depending on the last digit of their national ID number. Areas of the country with more cases of COVID-19 face even greater restrictions. The underlying reason for these severe measures is that the public health system has limited capacity for handling severe/critical cases of COVID-19. As of the publication time for this article, the national curfew has been extended until October 18, 2020; much of the country of Honduras is still in Phase 1 of a multi-phase reopening plan.

These restrictions have further complicated the ability of many Hondurans to receive medical care and needed medications. Medical teams have not been able to travel into Honduras since the middle of March when all borders were closed. Medical teams on the ground in Honduras at the time of the closures have been evacuated. The last medical team working with Clínica Carolina in Limón, a clinic operated by Carolina Honduras Health Foundation, departed Honduras on March 7, and the clinic is closed. All teams since then have been cancelled. The date for resuming medical mission team visits had not yet been determined at the time of writing this article. In April, the Honduran Health Department sent a doctor to the government clinic in Limón to provide medical care to the extent possible. As a result of these actions, the residents in Limón and the surrounding rural communities currently have limited access to health care. Those residents rely on public transportation to travel to