



Mental health lived experience academics in tertiary education: The views of nurse academics

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SUMMARY

Background: Australian national mental health strategy emphasises inclusion of people diagnosed with mental illness in all areas of mental health care, policy development and education of health professionals. However, the way this inclusion has translated to Australian universities is relatively unexplored.

Objectives: Explore views of nurse academics regarding service user involvement in nursing education programmes.

Design: Qualitative exploratory.

Settings: Australian universities offering educational programmes in nursing at postgraduate and undergraduate levels.

Participants: Thirty four participants from 27 Australian universities participated.

Methods: Data were collected using semi-structured telephone interviews with academics involved in teaching and/or coordinating undergraduate and/or postgraduate mental health nursing contents. Data were analysed using content analysis based on four cognitive processes: comprehending, synthesising, theorising and re-contextualising data.

Results: Four major themes emerged: good idea? long way to go; conceptualising the service user academic role; strengths of lived experience led student learning; and barriers to implementation.

Conclusions: Findings indicated strong support for including mental health service users in teaching nursing students. However, at most universities service user engagement was often an informal arrangement, lacking clear guidelines and limited by financial barriers and the positioning of mental health nursing within curricula.

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Introduction

Thirty four Australian universities are nurse education providers, offering undergraduate comprehensive nursing programmes of

three or three and a half years duration. Mental health nursing content, both clinical and theoretical, of these programmes differs substantially in breadth and depth of content delivered and not all universities offer a specific mental health clinical placement (McCann et al., 2010; Mental Health Nurse Education Taskforce, 2008). In addition, 23 universities offer specialist post-registration programmes in mental health nursing (Australian College of Mental Health Nurses Inc., 2011).

In line with national mental health policy, involvement of users of mental health services is encouraged in all areas of health care including the education of health professionals (DoHA, 2012a).

It is critical that students interact with and learn skills to work collaboratively with mental health service users as early as possible in

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their formative education (Happell & Roper, 2009; Meehan & Glover, 2007). Service user involvement is central to reducing stigma towards people with mental illnesses and promoting the concept of recovery in the delivery of mental health services.

Service user led education is central to contemporary nursing practice and inspires more graduates into mental health nursing (Bennett & Baikie, 2003; Happell et al., *in press*). Including service users in nurse education programmes has been reported to have positive outcomes for students, service users and nurse academics (Khoo et al., 2004; Rush, 2008; Telford & Faulkner, 2004). Nevertheless, the involvement of service users in educative roles remains limited and ad hoc (Mental Health Nurse Education Taskforce, 2008; Moxham et al., 2011).

Service users have long been involved in the education of medical students but the focus has traditionally been on assessment and skill development rather than understanding lived experience of people who access mental health services (Repper & Breeze, 2007). It remains difficult to determine the extent of service user involvement in the education of other health professional groups (Lathlean et al., 2006; Happell et al., 2014). Most commonly, service users are involved informally as casual or guest lecturers (Happell & Roper, 2003) and few universities offer substantive academic roles (Byrne et al., 2013b).

If policy aspirations of increased service user participation in mental health services are to be realised, increased participation in the education of mental health professionals is a necessity (DoHA, 2012a; Happell et al., 2014). The aim of the current study was to determine the extent of service user involvement in mental health nursing education and perceived benefits and barriers from the perspectives of mental health nurse academics.

Methods

Design

Qualitative exploratory research methodology was utilised for this based on the work of Stebbens (2001). This design is advocated in addressing topics where relatively little is known. It is an inductive process that facilitates an open-minded view allowing issues to unfold through expressed views and opinions of participants (Stebbens, 2001).

Participants

Participants were nurse academics at 27 universities in 2013, responsible for the management and/or delivery of mental health nursing content in undergraduate and/or postgraduate nursing programmes. All mental health nurse academics coordinating pre-registration or post-registration mental health courses or programmes were invited to participate (via Heads of School). One or more nurse academics from 27 (of a potential 34) consented to be involved and made themselves available for the interview.

Procedure

A letter was sent to all Heads of Schools of Nursing at universities in Australia inviting them to participate. An accompanying information sheet outlined the study objectives. Heads of School that agreed to participate provided contact details of staff member(s) who would represent the school. This person was then contacted and given the opportunity to ask any questions and provided with a copy of the plain language statement. An interview time was arranged and a consent form was emailed to participants to sign and return prior to the interview date.

Data were gathered via semi-structured telephone interviews. Face to face interviews were not possible due to the distribution of universities over eight jurisdictions with vast distances between. A broad interview guide was developed by the research team. Questions were sourced primarily from the literature and influenced by

our various experiences as nurse or service user academics or educators. Questions were broad and non-prescriptive to encourage conversation, participants were asked to describe the extent or otherwise that service users have been used in mental health nursing education, and perceived advantages and disadvantages of this approach (for further information about interview questions please contact the corresponding author). Interviews were digitally taped and conducted during November and December 2013.

Ethical Issues

University ethics approval was obtained to and no ethical issues or concerns were identified. Participants were assigned a code to protect their confidentiality in any reports resulting from the research.

Data Analysis

Data were transcribed verbatim. Data were analysed using thematic analysis (Field & Morse, 1996) which allowed identification of themes and sub-themes then transformed into conceptual maps with accompanying illustrative quotations. Four cognitive processes were integral to this qualitative analysis: comprehending, synthesising, theorising and re-contextualising (Field & Morse, 1996). The final themes were significant concepts that linked substantial portions of interviews together. Research team members reviewed the identified themes and any discrepancies were discussed until consensus was reached.

Results

Thirty- four participants from 27 universities participated. Demographic details on participants are outlined in Table 1.

Four major themes were identified: good idea? long way to go; conceptualising the service user academic role; strengths of service user led student learning; and barriers to implementation.

Good Idea? Long Way to Go

Participants were mostly, although not universally supportive and enthusiastic about a service user academic role, which appeared to be influenced by their degree of exposure to roles of this type. For those who were supportive, the lived experience of being diagnosed with a mental illness and use of mental health services was viewed as an invaluable resource in educating nurses in mental health, and a very useful combination of skills: logically, it makes a hell of a lot of sense. If you've got somebody who's got both the expertise of an academic and a consumer, that would be fantastic (P3).

The degree of service user involvement was described as highly varied, ranging from guest lecturing to involvement in curriculum development: We involve consumers from the writing of the PBLs [problem based learning] right through to the teaching of the PBL (P1).

And: We are very supportive of consumer representation in teaching, curriculum writing and in a higher level representation on committees (P1).

Those participants, who were not as supportive, did not see employing service user academics as a priority, particularly given

Table 1
Demographic details of participants.

Academic position	Number	Percent
Lecturer	10	29.4
Senior lecturer	7	20.6
Course co-ordinator	6	17.6
Associate professor	5	14.7
Professor	4	11.8
Discipline head	2	5.9
Total	34	100

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