



The reading room: Exploring the use of literature as a strategy for integrating threshold concepts into nursing curricula



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ABSTRACT

In addition to acquiring a solid foundation of clinical knowledge and skills, nursing students making the transition from lay person to health professional must adopt new conceptual understandings and values, while at the same time reflecting on and relinquishing ill-fitting attitudes and biases. This paper presents creative teaching ideas that utilise published narratives and explores the place of these narratives in teaching threshold concepts to nursing students.

Appreciating nuance, symbolism and deeper layers of meaning in a well-drawn story can promote emotional engagement and cause learners to care deeply about an issue. Moreover, aesthetic learning, through the use of novels, memoirs and picture books, invites learners to enter into imagined worlds and can stimulate creative and critical thinking. This approach can also be a vehicle for transformative learning and for enhancing students' understanding and internalisation of threshold concepts that are integral to nursing.

Guided engagement with the story by an effective educator can help learners to examine taken-for-granted assumptions, differentiate personal from professional values, remember the link between the story and the threshold concept and re-examine their own perspectives; this can result in transformative learning. In this paper, we show how threshold concepts can be introduced and discussed with nursing students via guided engagement with specific literature, so as to prompt meaningful internalised learning.

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Introduction

Learning to nurse and to be a nurse, as it is conceived ideologically, requires students to be open to self-examination and change, because while ordinary human kindness is at nursing's core, this value alone is insufficient to guide practice. In addition to kindness and a solid foundation of knowledge and skills contemporary nurses require imagination, creativity, clinical and moral reasoning abilities and empathy (Benner et al., 2010). Development of these

attributes requires educators to use transformative and creative approaches to challenge and inspire students.

While many students enter nursing programs with a keen desire to care and to make a difference in peoples' lives, there needs to be quite a lot of 'letting go' of ill-fitting attitudes and biases in the journey from lay person to professional nurse. Also important is the 'taking up' of new conceptual understandings and values to become person-centred, empathetic, skilled and effective knowledge workers.

Transformative Learning (TL) pedagogy can assist in this endeavour. Using the definition provided by the adult education theorist Mezirow (2000), TL is the process by which learners are challenged to call into question taken-for-granted ideas, beliefs, habits of mind and feelings, and to experience fundamental shifts in perspective so that they can join colleagues in committed actions for change. A key part of TL is integration of threshold concepts which Meyer and Land (2003, p.1) define as: "akin to a portal,

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opening up a new and previously inaccessible way of thinking about something ... [they] represent a transformed way of understanding, interpreting, or viewing something without which the learner cannot progress”.

This paper aims to contribute to teaching practice as well as to the body of literature on narratives in nursing, by describing our approach for promoting emotional engagement with stories in ways that allow learners to care about problematic issues. We acknowledge that this paper is descriptive in nature rather than evaluative. However, the examples provided and the linked discussion that follows will allow other educators to further develop the ideas into teaching approaches that can be implemented and further explored.

Background

Transformative Learning (TL) differs from other educational approaches because the aim is to bring about a changed perspective in learners. Unlike conventional humanist educational approaches, for example, TL is not simply eliciting opinion (McKenna, 1995) and unlike behavioural approaches it is not just validating learning efforts. Rather, TL seeks to explore aspects of an issue that are problematic and puzzling, aspects that have been poorly resolved, and which require the input of critical and creative thinkers.

Students who enter nursing studies may hold ideas, and personal values that do not fit well with those that will be required in professional practice. Thus, they may not be able to effectively contribute to resolving these dilemmas, and new perspectives are therefore needed. To assist learners to achieve perspective transformation, educators often identify these disorienting dilemmas and paradoxes (Mezirow, 2000) and then facilitate discussion that allow students to contemplate the situation and generate potential solutions. To do this, educators must carefully design stimulus materials, activities and questions to prompt reflection, critique and debate, and that invite learners to consider new courses of action. Because students are going into unfamiliar territory, or a liminal state, where answers may not be singular or simple, they may feel anxious, uncertain, exposed, conflicted and sometimes ashamed of particular values. Thus the educator has a role in providing close support, holding their concerns, but offering optimism that the state of unknowing has value (McAllister et al., 2013).

In the learning journey, students enter a liminal state, neither grounded in their past ways of knowing nor standing confidently in the new ways (Turner, 1967). They are therefore vulnerable because they are in a space where surety is lacking. They may, however, be assisted to let go of old and ill-fitting ideas, and enabled to move forward if the educator has created a place where trust is assured, where novel ideas can be tested out, shared, revised and accumulated. Imagining this space like a threshold, where the learner is on the cusp of becoming something else, is central to TL (Cousin, 2010).

Threshold concepts play a vital role in nursing education, however, they are often troublesome for learning and teaching because they may seem to be conceptually complex, tacit, foreign, and sometimes ritualised. Threshold concepts reflect the way of thinking in a particular discipline and often lead to a transformed internal view of subject matter or world view (Meyer and Land, 2003). Narrative arts are a rich medium to enable TL to occur. Stories, be they fiction, non-fiction, in films, books or cartoons, tend to foreground and emphasise an individual's lived experience (Charon, 2001). Shared stories can humanise health experiences, and help to illustrate peoples' diversity as well as universality, encouraging empathy and positive attitudes (Légaré et al., 2011). Stories can also be used as devices to prompt creative thinking and application, assisting the learner to draw inspiration and to see connection between concepts (Denborough, 2014). Narratives can

also help students to appreciate the validity of subjective knowledge – not in replace of objective knowledge – but as complementary to. This is vital for assisting healthcare students to take an empathic stance and value person-centred care (Charon, 2001).

In the TL classroom, the big ideas that are to be grappled with are not simple, there may be no single answer or direction, but examining them and debating the contentious issues can advance the nursing profession. Arguably, learning through the arts may be a far more memorable way to experience this learning than through more traditional approaches (Darbyshire, 1994). Fig. 1 provides a framework, based on Bloom's taxonomy, to prompt guided engagement with literature so that students are assisted to move out of their comfort zone and existing knowledge, through the liminal state of unknowing, to being able to articulate new values and ideas befitting the contemporary role of the nurse.

In the following section we illustrate how TL pedagogy and literature have been used as strategies for integrating threshold concepts into nursing curricula.

Exploring the complexity of care through *The English Patient*

The Booker Prize winning novel, “*The English Patient*” by Ondaatje (1993), is a romantic drama set in the mayhem of the allies' liberation of Europe during World War II, in the ruins of an Italian villa and field hospital. A man, burned beyond recognition in a plane crash, is slowly dying. He is being tended to by a young Canadian nurse, Hana, who has refused to be evacuated because she cannot abandon this patient to suffer and die alone. This sets the scene for a story in which characters (and reader) learn more about themselves, love and purpose.

Hana has her own trauma to resolve – the shocking experiences she has encountered caring for so many terribly wounded soldiers, the death of her lover, a Canadian officer, and her guilt at not being able to care for her own father before his death. Staying to care for the unknown patient provides Hana a kind of redemption. Tenderly she dresses his burns, administers morphine, calms and comforts him by reading to him from his favourite history book, even though many of its pages are now missing.

Ondaatje's lyrical, descriptive writing style captures an evocative atmosphere. The crumbling Italian villa that served as a military hospital, with its bombed walls, booby traps and rain soaked beds, becomes a dangerous shelter for the nurse and her fully dependent patient. They are both vulnerable to vagabonds and the forces of nature. At the same time, they carry on with their daily routines with simplicity and honour.

The characters' storylines are richly drawn. Each has their flaws – the patient is not who he at first seems, and neither is Hana. On the one hand, she is rationally and maturely managing her huge responsibility for caring for this man and negotiating the dangerous situation, and on the other, she is playing hopscotch in the ruins. She is a young girl thrust into adulthood – making mistakes and carrying on. Each of the characters carries secrets and sorrows and are all sympathetically portrayed. Aside from the mystery as to how this burned man came to be with Hana, this book involves a series of love stories, and not least is the love that unfolds between patient and nurse. As Metcalf, another nurse educator who has used this book, (2009) points out Ondaatje presents an interesting view of the nurse–patient relationship – seeing it as sombre, sensual and compassionate, qualities Metcalf believes are unique to nursing.

The book provides insights into understanding the place of love in nursing, what it is and what it is not, and how through caring we can ourselves find satisfaction, meaning, and purpose. Hana loves this patient, not in a sexual way, but in a way that reveals her awareness of the privilege in being with him in his vulnerability and full dependency. In her care, the patient finds comfort:

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