



Vicarious learning: A review of the literature

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ARTICLE INFO

Article history:

Accepted 25 January 2009

Keywords:

Vicarious learning
Peer learning
Experiential learning

SUMMARY

Experiential learning theory stresses the primacy of personal experience and the literature suggests that direct clinical experience is required in order for learning to take place. However, raw or first hand experience may not be the only mechanisms by which students engage in experiential learning. There is a growing body of literature within higher education which suggests that students are able to use another's experience to learn: vicarious learning. This literature review aims to outline vicarious learning within a nursing context. Many of the studies regarding vicarious learning are situated within Higher Education in general, however, within the United States these relate more specifically to nursing students. The literature indicates the increasing global interest in this area. This paper reveals that whilst the literature offers a number of examples illustrating how vicarious learning takes place, opinion on the role of the lecturer is divided and requires further exploration and clarification. The implications for nurse education are discussed.

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Introduction

Student nurses are often expected to share their experiences within groups in an academic context. Whilst the literature regarding experiential learning makes it clear students can and should benefit from learning through primary experience, it seems that there is an emerging body of literature which asserts that students are also able to learn from each other's experiences. Learning from a peer's experience is known as vicarious learning; although individual students will have their own personal experiences from clinical practice other students can benefit and use the shared examples in order to learn. This paper explores the literature in relation to the concept of vicarious learning and aims to explain the mechanisms suggested within the literature that contribute to vicarious learning. A critical perspective of the literature is provided, in particular the role of the lecturer in vicarious learning is examined. Implications for nurse education are highlighted.

Search strategy

An electronic data base search was conducted accessing British Nursing Index (BNI), British Education Index and CINAHL using the key words vicarious learning and peer learning. A manual search was also conducted using back-chaining techniques. There was no limit placed on the time span of material in order to ascertain as much information on the subject as possible.

Vicarious learning defined

Bruner (1986) states that “most of our encounters with the world, are not direct encounters” (p. 122), which would seem to imply that it is possible to learn through mechanisms other than primary or first hand experience. According to the literature there are a variety of definitions of vicarious learning: being able to observe or ‘listen in’ on experts or peers as they discuss a new topic (Cox et al., 1999); learning through the experiences of another (Fox, 2003). Students are said to learn vicariously (from another's experience) through discussion (or discourse), conflict, challenge, support and scaffolding from a more competent other (Topping, 2005) and story telling (Ashworth, 2004; Ellis et al., 2004; Northedge, 2003; Harden, 2000; Nehls, 1995; Diekelmann, 1990; Davidson, 2004). According to Lave and Wenger (2005) understanding and experience are inextricably linked, being what they term as “mutually constitutive” (p. 152), they go on to suggest that in this way the notion of participation blurs the boundaries between thinking and doing since our experiences are evident in all thought, speech, knowing and learning. Understanding and experience are said to be in constant interaction (Lave and Wenger, 2005). In all cases the students use their peer's second hand experiences in order to learn for themselves. Such learning may be planned as part of the curriculum whereby students are expected to feedback their clinical experiences on return to the classroom; or opportunistic.

Spouse (2003) uses the term vicarious learning experience to refer to learning through story telling for a group of nursing students. Students within her study met in informal peer groups to share their experiences of the pre-registration programme. In

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doing so, the suggestion is that the students construct and rehearse their thinking which enables them to learn from each other.

Mechanisms of vicarious learning

It is important to differentiate vicarious learning from other mechanisms which involve students in learning from each other. For example, peer teaching or peer tutoring is a far more formal and instrumental strategy whereby advanced students or those further on in progression, take on a limited instructional role (Boud et al., 2001). In other words, the more senior students are used to formally teach various aspects of the curriculum to more junior students. This may take place within clinical practice or within classroom environments. Within this literature review vicarious learning refers to peers who are other people in a similar situation to each other and share a similar status to each other, who do not have a role in that situation as a teacher or expert practitioner; each is seen as a fellow learner (Boud et al., 2001).

Vicarious learning is characterised by active listening and reflective thinking (Nehls, 1995), seeking to understand by being fully engaged in the situation; students are learning and thinking together. There is an absence of note taking (Ellis et al., 2004). However, in order for students to learn from each other's experiences they first have to acknowledge that fellow students have something which is worth learning; something which Ashworth refers to as being attuned to the other's discourse (2004). This may involve a cultural shift in the learners away from wanting to be taught by teachers to one of sharing emotionally and motivationally in the concern for learning (Ashworth, 2004).

The sharing of experiences often takes place through reflection on practice encounters and relating these through stories to fellow students (peers). Bruner (1986) refers to this as "culture making" (p. 127), whereby the student becomes party to the formation of knowledge and the recipient of knowledge transmission. Dialogue between students is often referred to as discourse within the literature on learning in Higher Education. Many studies suggest that students are able to learn vicariously (from another's experience) through such discourse (Ashworth, 2004; Ellis et al., 2004; Northedge, 2003; Nehls, 1995). The discourse is shared through conversations, narratives, testimony or stories and these terms are sometimes used interchangeably. Through the process of articulating and externalizing experiences the student is paradoxically able to share communally in the nature of internal experience (Bruner, 1969). Similarly, Polkinghorne (1988) asserts that learners are able to expand the realm of meaning associated with new events by reflecting and recollecting and configuring and refiguring experiences.

Students learn vicariously during story telling as the narrator must "recognize and reflect upon her life positions, roles and motivations, and in so doing create an opportunity for the narrator and the audience alike to develop new perspectives" (Bowles, 1995). However, it is not clear if this change in perspective occurs by accident or whether the students need some help to turn the learning opportunities into learning.

Spouse (2003) argues that sharing experiences through story telling is important for student learning. The stories are steeped in reality which the students find interesting, the students engage with each other's stories by clarifying and enlarging various aspects or by rehearsing parts that are especially pertinent. This enables students to develop concepts of themselves in different roles, according to who they were talking to. The learning is reciprocal because the story teller develops new insights based on the suggestions and the sense making activities of other group members whilst the group benefits from the development of a shared understanding. Indeed those of the group who have not directly partici-

pated in the activity, develop what Spouse terms a vicarious learning experience which helps them formulate actions when they meet similar situations (Spouse, 2003). In Spouse's study the dialogue takes place away from clinical practice and this may have implications for nurse education, since this kind of activity may need to be embedded into nursing curricula, in order to promote such experiential learning from peers.

Furthermore, it appears that there is a psychological (perhaps unconscious) component of learning through clinical practice. According to Polkinghorne (1988) our experiences are fashioned and constructed "out of the interaction between a person's organizing cognitive schemes and the impact of the environment on sense apparatus" (p. 16). Indeed, he goes on to argue that hearing and interpreting the narratives of others produces knowledge that "enlarges the understanding of human experience" (p. 159).

The role of the educator in vicarious learning

Northedge (2003) is of the firm opinion that students are unable to make use of discourse by themselves, finding it difficult to understand. For Northedge it is the teacher who is pivotal to enabling learning through discourse because it is the teacher (who is already a speaker of the specialist discourse) who lends the students the capacity to frame meanings they cannot yet produce independently. It is the teacher who opens up the conversation and shares a flow of meaning; the students join with the teacher in sharing meaning and they also share something of the frame of reference that sustains it (Northedge, 2003). This development takes place as the teacher poses questions and introduces new elements and takes the students on an excursion into specialist discourse to experience how meaning is made there, helping the students move from the frame of every day language to the discourse of the specialist knower. The students internalize the questions asked, forms of evidence and arguments deployed, types of conclusion arrived at and history of previous debates; through participation. Bruner (1969) explains this as teaching in the hypothetical mode whereby the teacher and the student adopt a co-operative approach to learning. It is this cooperation which Bruner asserts encourages discovery in the learner. According to Northedge (2003) the stories are judiciously chosen by the teacher to include a range of issues, debates and voices to enable the students to develop a sense of the nature of the knowledge community and its discourses. As students become more experienced in thinking about the stories Northedge suggests they make links to their own actions and decisions and so learn from each other. Interestingly, he asserts that the students are invited to think about issues in ways that correspond to the thinking of experts within the care community. However, I would question this notion since he implies that the teacher is automatically an expert and precludes the students from acting in this capacity for each other. It could also be argued that Northedges' theory is flawed because as the teacher selects the excursions, the teacher is in control; therefore it is the teachers' thinking to which the students are exposed.

Similarly Nehls (1995), Diekmann (1990) and Koenig and Zorn (2002) also explore the link between students and teachers during learning. Interestingly all three writers emanate from the United States of America where it seems there is a greater acknowledgement of the use of vicarious learning and where the emphasis is one of a learning community. Nehls outlines an approach to learning which she refers to as narrative pedagogy; where teachers seek to establish partnerships with students in a lifelong quest for knowledge. Reciprocity is emphasised to form a community of learners. Together the community explores how and in what ways one becomes a nurse. The teacher uses narrative to reinforce the centrality of the lived experience and learning is said to take place

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