



Teaching qualitative research as a means of socialization to nursing



Daniella Arieli*, Batya Tamir, Michal Man

Department of Nursing, The Max Stern Academic College of Emek Yezreel, Emek Yezreel, 19500, Israel

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SUMMARY

The aim of the present article is to present a model for teaching qualitative research as part of nursing education. The uniqueness of the course model is that it seeks to combine two objectives: (1) initial familiarization of the students with the clinical-nursing environment and the role of the nurse; and (2) understanding the qualitative research approach and inculcation of basic qualitative research skills. The article describes how teaching two central genres in qualitative research – ethnographic and narrative research – constitutes a way of teaching the important skills, concepts, and values of the nursing profession. The article presents the model's structure, details its principal stages, and explains the rationale of each stage. It also presents the central findings of an evaluation of the model's implementation in eight groups over a two-year period. In this way the article seeks to contribute to nursing education literature in general, and to those engaged in clinical training and teaching qualitative research in nursing education in particular.

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Introduction

Recent years have seen growing acknowledgment of the importance of teaching qualitative research methods to nursing students (Cook and Gordon, 2004; McKie et al., 2012; Pennington et al., 2010; Streubert and Carpenter, 2011). However, the literature shows that teaching qualitative research to nursing students is challenging for students and lecturers alike (Sorell et al., 2014). One of the main challenges indicated by researchers is the difficulty of elucidating for nursing students the relevance of the subject for the nursing profession (Reising, 2003; Meeker et al., 2008; McCurry and Martins, 2010). Previous articles which engaged with strategies for coping with the challenge of teaching qualitative research to nursing students primarily focused on attempts to make the learning more experiential and attractive for students by employing innovative teaching strategies, such as using online interactive technologies, working in small groups instead of frontal teaching, games, quizzes, and crosswords (Meeker et al., 2008; McCurry and Martins, 2010; Spiers et al., 2012). This article presents a course model whose uniqueness is that it combines inculcation of qualitative research skills with concepts from the nursing field, and constitutes a framework for the students' initial exposure to the nursing institution environment and to the role perceptions of nursing staff.

Benner (2001) described the element of foreignness that characterizes the “novice” stage in socialization to nursing. Like every stranger entering new surroundings and having to learn its unique “language” (Schutz, 1964), a “novice nurse” or nursing student entering a

treatment situation in which he or she has no previous experience, has to undergo a process of learning the “new culture” and adapting to it. This learning/adapting has two intertwined dimensions: understanding the clinical situation in which the treatment relationship takes place, and the ability to understand the other and respond to him or her (Hughes and Hood, 2007; Raines, 2010; Isaacson, 2014). Benner, however, contends that the teaching methods used to train the novice nurse focus on memorizing instructions such as the rules for taking measurements of the patient's condition, like weight, blood pressure, temperature, and so forth. These instructions are context-free rules (Benner, 2001:21), and in her view focusing on learning context-free rules is not conducive to acquiring an understanding of either the clinical situation or the condition of the patient at its center, and it therefore does not guide the novice nurse toward relevant endeavor in a real situation.

The course model described here attempts to address the lacuna in clinical education noted by Benner by preparing students to encounter the treatment environment from an inquiry perspective, and employing qualitative research tools before they are required to learn and fill treatment roles. Rather than focusing on learning work procedures and attempting to prove themselves in clinical work, the students are required to observe, listen, and pay attention to interpersonal interactions, and examine them with a critical eye. Thus, their first exposure to a treatment environment is from a position of inquiry that guides them toward acquiring a contextual understanding of the nursing world in the first stages of socialization to nursing.

This model for teaching addresses recent calls for a new nursing education pedagogy, one that is student-rather than teacher-centered (Horsfall et al., 2012). Building on critical theorists like Freire (1970), nursing educators argue for a need of a paradigm shift in nursing pedagogy (Allan, 2010). Instead of “information transfer” from teacher

* Corresponding author.

E-mail addresses: daniellaa@yvc.ac.il (D. Arieli), batyat@yvc.ac.il (B. Tamir), michalma@yvc.ac.il (M. Man).

to student, learning should be designed and perceived as a student-centered endeavor (Mitchell et al., 2013). This shift requires teaching strategies that focus on cultivating students' perceptive and interpretive abilities through personal as well as group inquiry processes (Sorell et al., 2014). The model we present is strongly connected to these pedagogical ideas, and the course is designed to encourage self and group learning through experience in the field and by reflecting upon the experience in class.

The model addresses two main genres of qualitative research, which in our opinion are the most relevant to training nurses, namely ethnographic and narrative research. To demonstrate the linkage between teaching qualitative research methods and training for the role of nurse, we shall emphasize the main characteristics of each of these genres.

Ethnographic research is a process based upon entering and observing the environment in which a sociocultural action takes place. Ethnographic research is essentially holistic, and emphasizes the importance of understanding the researched reality as a complex whole. This research is inductive: the researcher enters the field of research without prior assumptions, and his efforts are directed toward maximal attention to what is happening in the researched field. The researcher must be aware of the multiplicity of viewpoints of those acting in the field, and be reflective on his own point of view, and how it influences his research activity. Ethnographic research is designed to understand the “self-evident” for those active in the research field, and to expose the social processes which create and validate it. The inculcation of concepts and tools from ethnographic research in nursing students bears relevance to their training for the nursing role, mainly due to the focus on training the students for both accurate and broad observation in treatment situations, and in the way the participants experience and perceive them. These skills are vital to the role of nurse, which demands attention to the details and complexity of the treatment situation (Benner, 2001; Pellico et al., 2009).

Narrative research, which is based upon in-depth interviews with the respondents, focuses on the collection and analysis of the stories the interviewees tell about themselves. The aim of narrative research is to understand the interviewees' complex points of view vis-à-vis the research subject. The aim of the narrative researcher is to produce from the interviews stories with a wealth of detail and depth, and from them to extract the interpretation given by the interviewees to their life events and to the stories they related. The researcher must concentrate his efforts on creating a dialogical space wherein the interviewees feel safe, a space that encourages them to honestly and openly express themselves. The researcher must strive not to lead the interviewees in a specific direction, and to be aware of his own reactions during the interview, and their effect on the interviewees. Inculcation of tools for listening to others, and openness to acceptance of different interpretations of reality, while being alert to and conducting reflective examination of the personal interpretation are vital elements in training for the nursing profession. They assist in developing professionals capable of observing the processes they undergo in the course of their interaction with patients, and also to be aware of the patient's needs while addressing the patient's own interpretation of his condition (Ostlund et al., 2008; McNiesh et al., 2011; Karlsson et al., 2012). A previous study that examined the effect of creating a learning environment in which a multicultural dialogue took place, including mutual reflection of values, relationships, and actions, found that this environment contributed to inculcation of cultural competence and awareness of the different ways in which treatment can be effected (Torsvik and Hedlund, 2008).

The Course Model

The positioning of the course in the syllabus is of considerable significance. We propose positioning it in the second semester of the first year, prior to the students entering clinical fields, and after the following introductory courses: (1) Introduction to the sociology and anthropology

of health; (2) Scientific reading and writing; and (3) Concepts in nursing. The importance of the introductory courses is in the students' familiarization with central sociological paradigms, including the interpretive-constructivist paradigm which constitutes a basis for qualitative research, and also with sociological issues relevant to the clinical field, such as the distinction between illness and disease, and the subjective personal and cultural significance of illness situations. The first two lessons of the course are devoted to a theoretical discussion on the aims of qualitative research, its basic premises and ethical rules. The practical stage begins in the third lesson, and continues until the end of the course. Two methods of data collection are practiced on the course: observation and in-depth interview.

Observation

The students' first assignment is to conduct observation in a nursing institution. In preparation for this the students are given instructions, and also practice observation in the classroom. The students split into groups of three, two are told to discuss the ethical aspects of conducting observation in a nursing institution, while the third has to observe the discussion and document what he sees in writing. Thus the exercise achieves the additional aim of a discussion on ethical issues. After a set time the whole class reconvenes and each of the observers reads out his or her observations. The plenary discussion is designed to raise questions on description vs. interpretation, and to guide the students toward reflective thinking on the process they have undergone by means of a discussion on the choices made by the observer during the observation, verbal and non-verbal communication, the observer's and the subjects' experience, differences between the views of the various observers, the observer's involvement in what is happening and his influence on the observed reality, and so forth.

The students are then sent on their first assignment: to go to a nursing institution and conduct an observation of at least ninety minutes duration. Each student is asked to carry out a personal documentation of the observation. The students are instructed to be at the institution at mealtime or during an occupational activity for the residents. The main instruction is to record on one part of the sheet everything they see and hear, and on the other their thoughts and emotions at the time. The next two lessons are held after they have brought their reports to class. The classroom discussion focuses on sharing experiences from the observation, and also on an attempt to produce a research report from the various individual reports. The students are asked to relate situations that caught their attention, and following each description a discussion moderated by the lecturer is held on the question, “This is an example of what?” with reference to the situation. The attempt to answer this question leads the students to conceptualize the situation, to observe it with an inquiring eye that does not stop at a description of what happened, but attempts to produce a category that includes the description. As the discussion progresses emphasis is placed on drawing a distinction between a description and a judgmental evaluation (good or bad treatment) to which students often tend. Processing the observation by means of a discussion on the question “This is an example of what?” enables inculcation of the basic foundations of interpretive qualitative analysis, and helps the students to process the experience they have undergone, to move from the involved, experiential position they were in to a place that observes from the side and tries to conceptualize what they have seen.

The students are asked to bring to class a report that includes the observation protocol and their observations on three issues: (1) Nurse-patient interactions; (2) Nurse-nurse interactions; and (3) Patient-patient interactions. The following lesson is based on the students' reports, with the students working in groups. In the first stage the students work in groups of 5–6, share their findings, and together attempt to formulate significant insights on the abovementioned three issues. In the second stage a representative of each group presents the conclusions

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