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Featured Article

Acting With a Purpose: The Lived Experience of Actors in the Role of Standardized Patients Portraying Mental Illness

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KEYWORDS

standardized patients; acting; simulation; Colaizzi; nursing education; phenomenology; qualitative; research

Abstract

Background: Standardized patients (SPs) allow students to apply nursing skills in a safe/supportive environment. This study examined the experience of SPs in psychiatric/mental health simulations. **Method:** The day-to-day experiences of SPs portraying mental illness was explored in this qualitative

Method: The day-to-day experiences of SPs portraying mental illness was explored in this qualitative study. Using interviews as the primary data source, a qualitative, phenomenological perspective) guided inquiry and analysis.

Results: Four themes: *Sparks something in me, Building on confidence, Stepping into the shoes of the educator,* and *Letting it get to me,* investigated SPs' initiation into and their growing confidence in the acting/teaching role. Letting it get to me, SPs discussed the difficulty SPs later had "shaking off" their roles.

Conclusions: Research underscores the value of SPs in creating an accurate representation of a client with mental illness; however, this reality often stayed with them even after the portrayal was over. To provide the best experiences, nurse educators must train, follow up, and debrief to ensure that actors not only provide an accurate portrayal, but must also address any psychological harm.

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Creating relevant and interactive teaching strategies has become the primary goal for today's educator. Crookes, Crookes, and Walsh (2013) described educators as "pressed to contextualize and make meaningful and engaging, the theoretical material that they cover so that students are able to explicitly map the connection between course content and its practical application" (p. 240).

Becker et al. (2006) suggests that "educators hope that knowledge and skills learned in the classroom and practiced in the clinical settings are transferred into clinical reasoning skills required for direct clinical care of patients" (p. 103). This transference of knowledge and skills has made the incorporation of simulation in nursing education increasingly popular. Students can practice and make mistakes in a safe and supportive environment, and apply this learning to their own clinical practice through the use of simulation. "Thus, realism,

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accompanying the use of standardized patients (SPs) in simulation learning, bridges the gap between theory and practice" (Dearmon et al., 2013, p. 30). In addition, the use of simulation as a teaching tool appreciably reduces anxiety in students.

Key Points

- Standardized patients play a key role in the education of nursing students.
- Standardized patients take their roles seriously and attempt to portray clients with mental illness honestly.
- Some standardized patients find shedding the role difficult.

Competencies for psychiatric/mental health nursing include complex relationship skills and responses. Communication skills. assessment proficiency, and adeptness in the use of exploration require an authentic representation of the patient and scenario. Dunnington (2013) examined the nature of reality in simulation and cautioned that misrepresentation can become the reality, that "...misrepresentation of the phenomenon real

become the actual phenomena understood and retained (p. 17)." Consequently, educators who incorporate simulation, especially high-fidelity simulation, require an authentic presentation that most closely represents the phenomenon; otherwise, the misrepresentation becomes the reality for the student. Therefore, authenticity requires SPs or actors to immerse themselves in their role to present an authentic picture of the patient at that moment. While the instructor provides guidance and feedback, the actor represents the patient experience. Thus, SPs can be used to teach therapeutic communication and management of care in mental health nursing (Jack, Gerolamo, Frederick, Szanjz, & Muccitelli, 2014). Nurse educators have also used SPs to address issues related to bias, stigma, and fear (Brown, 2015).

Background

In our nursing program, actors have been trained as SPs and used to teach communication and assessment skills during the psychiatric/mental health nursing clinical experience. These actors have also participated in special activities in which they have interacted with the public while remaining in their roles. Backgrounds of SPs include retired nurses, actors, students who are theater and psychology majors, a former police officer, and stay-at home moms. Yearly, actors attend a 3-day training workshop that encompasses the mental illness symptomatology, client presentation, and clinical settings. These actors also view movies, video clips, and learn detailed scripts on schizophrenia, depression, suicidality, bipolar mania, anxiety, substance abuse, post-traumatic stress disorder, and dementia. In the training workshop, actors rehearse scripts with faculty,

often repeating the role-play and reworking the dialogue. After the workshop, actors "graduate" to become SPs. They return annually for a refresher workshop.

In their psychiatric/mental health clinical course, students in their senior year of nursing completed two interactions with an SP. These interactions were videotaped, and, as part of the assignment, the student was required to view the videotape assessing their interaction with the patient. Small groups of other students viewed the interaction live and provided feedback. The student then received feedback from their instructor; all students were debriefed by faculty and a licensed professional counselor. The SPs were also invited to provide feedback to students related to how they felt as a patient and their reaction to students' questions, strategies, and verbal/nonverbal demeanor. In this study, SPs conveyed personal experiences of their role as a patient portraying mental illness.

A preliminary literature review reveals the absence of studies aimed at exploring the lived experience of SPs portraying mental illness in nursing education. While not studied, it was noted that SPs who had not previously engaged in roles involving the depiction of mental illness were able to quickly adjust to the role and create an accurate portrayal of the client (Jack et al., 2014). These same authors also reported that the SPs found the mental health role to be demanding (p. 518). Likewise, others have written to describe the necessity of addressing psychological harm to students resulting from simulation (Janzen et al., 2016). While this does not address the issue of psychological harm to the SP, there remains a question as to any psychological harm that may occur for individuals realistically portraying mental illness scenarios in simulation. Spencer and Dales (2006) identified the importance of addressing issues related to de-rolling those involved in simulation. Likewise, Bokken, Van Dalen, and Rethans (2006) reported that simulation had a negative impact on actors. Using focus group interviews, the authors found that the role types, number of consecutive performances, feedback, and amount of experience played a part in this impact that was minimal and of short duration. However, it was our intent to discover the experience for actors to immerse themselves into the role of a mentally ill individual while interacting with students. To this end, the purpose of this study examined the lived experience of the SP through interviews, both in their role as an actor and in their interactions with students.

Method

A qualitative research design explored the day-to-day experience of SPs portraying clients with mental illness in the psychiatric/mental health clinical course of senior nursing students enrolled in a baccalaureate program. The

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