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Student health professionals' attitudes and experience after watching "Ida's Diary", a first-person account of living with borderline personality disorder: Mixed methods study



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ABSTRACT

Background: There is increasing interest in the use of commercial movies in nursing education, or "cine-nurducation". There is a need for educational interventions which target mental health nurses' attitudes towards people with borderline personality disorder.

Objectives: To investigate and evaluate the experience and effects of attendance at a screening of the movie *Ida's Diary*, a first-person account of living with borderline personality disorder.

Design: Mixed methods design comprising a within-subjects AB longitudinal survey, and a qualitative analysis of participant-generated data and researcher field notes from a World Café discussion group.

Settings: One university in Scotland.

Participants: N = 66 undergraduate and postgraduate mental health nursing and counselling students.

Methods: Participants completed measures of cognitive and emotional attitudes towards, and knowledge about, people with borderline personality disorder before and after one of two film screenings. We conducted a World Café discussion group after the second screening. Resulting data were subject to a qualitative thematic analysis. Results: Quantitative analysis revealed a five-factor cognitive and a single-factor emotional attitude structure. Cognitive-attitudinal items related to treatment deservingness and value of mixed treatment approaches improved across iterations. Total knowledge score did not change, but one item about borderline personality disorder as a precursor to schizophrenia received considerably more incorrect endorsement post-screening. Qualitative analysis revealed five themes: Facilitation and inhibition of learning; promotion but not satiation of appetite for knowledge; challenging existing understanding; prompting creativity and anxiety; and initiating thinking about the bigger nicture.

Conclusions: Participants found the film thought provoking; it increased their appetite for knowledge. Findings suggest that screening should be delivered in conjunction with more didactic information about borderline personality disorder.

1. Background

There is a growing interest in and use of techniques and materials from the creative arts in nursing education. Diverse methods have been used for pre-registration nurses and other health students including reading and discussion of written celebrity autobiography (Mathibe, 2007), creative design (Emmanuel et al., 2010), song composition, poetry writing, and drawing (Chan, 2014). One of the more widely used educational methods is film-screening, sometimes clips but more commonly whole commercial movies; this has even attracted the portmanteau label "cinenurducation" (Oh et al., 2012). However, there is a

lack of studies demonstrating the usefulness and utility of movie screening; identified issues include too many "loosely designed" studies, the vast range of movies that could be shown, and the vast range of potential educational targets and outcomes (Diaz Membrives et al., 2015). Nevertheless, movie screening in nursing education has been promoted because it is student-centred, experiential, and facilitates reflection and problem-solving learning (Oh et al., 2012). In this context, we aimed to identify a commercial movie that could be used in the education of mental health students in relation to the experiences, care, and management of, people with a diagnosis of borderline personality disorder.

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Table 1Baseline and post-fil viewing BPD-related knowledge of participants.

Knowledge-related item ('correct'/'incorrect' response)	T1 Correct response n (%)	T2 Correct response n (%)	Statistical test
Diagnosis of borderline personality disorder is characterized by unstable mood with rapid shifts (correct)	46 (69.7)	56 (84.8)	$\chi^2 = 3.49, P = .06$
Diagnosis of BPD is characterized by a grandiose sense of self-importance (incorrect)	41 (62.1)	45 (68.2)	$\chi^2 = 0.30, P = .58$
Diagnosis of BPD is characterized by impulsive, particularly self-destructive, behaviour (correct)	56 (84.8)	61 (92.4)	$\chi^2 = 1.20, P = .27$
Patients with a BPD diagnosis should not be hospitalized (incorrect)	42 (63.6)	51 (77.2)	$\chi^2 = 2.33, P = .13$
Short term psychotherapy can be useful in managing crisis in patients with BPD (correct)	59 (89.4)	55 (83.3)	$\chi^2 = 0.58, P = .45$
Antidepressant medication is of no benefit in treating depression in people with BPD (incorrect)	54 (81.8)	52 (78.8)	$\chi^2 = 0.05, P = .83$
BPD can progress to schizophrenia (incorrect)	51 (77.3)	30 (45.5)	$\chi^2 = 12.78, P < .001$

1.1. Borderline Personality Disorder

Diagnostic criteria for borderline personality disorder include pervasive and persistent instability of affective regulation, self-image, impulse control, behaviour and interpersonal relationships (Lieb et al., 2004). The condition is associated with substantial psychiatric and physical morbidity (Grant et al., 2008); lifetime incidence in adults is 6%. Management is resource-intensive; there is a very high rate of self-harm associated with disproportionate service (Elisei et al., 2012; Hayashi et al., 2010; Comtois and Carmel, 2014), while impulsive aggression is common (Latalova and Prasko, 2010).

People with borderline personality disorder are unpopular among mental health practitioners (Cleary et al., 2002), and some respond to them in disconfirming (Fraser and Gallop, 1993), stigmatising (Aviram et al., 2006), and other negative ways (Markham, 2003). Nurses hold the poorest attitudes relative to other disciplines and to patients with other diagnoses (Dickens et al., 2016) bringing them into potential conflict with their professional requirements (Nursing and Midwifery Council, 2015). It is important that mental health professionals receive effective related education during their pre-registration preparation and beyond. While various approaches been trialled, there is limited evidence about which interventions are effective and none thus far has offered a service user/expert-by-experience perspective on living with the diagnosis (Dickens et al., 2015).

1.2. Aim of the Present Study

We aimed to investigate the experiences and responses of student mental health nurses and counsellors to an educational intervention comprising a screening of the Norwegian language feature film Ida's Diary (Hanssen and Aanonsen, 2014) which presents a first-person account of one young woman's experience of living with borderline personality disorder.

2. Methods

2.1. Design

We used mixed methods comprising an AB repeated measures design, and thematic analysis of qualitative data from a World Café-style discussion group (Steier et al., 2015).

2.2. Setting and Participants

We conducted the study between April and August 2016 at a single university in Scotland. Eligible participants were students on pre- and post-registration nursing and counselling courses. Two film screenings were conducted; those attending the second (n=22) were invited to participate in a World Cafe-style event following.

2.3. Materials and Measures

2.3.1. Ida's Diary

Ida's Diary (Hanssen and Aanonsen, 2014; English language subtitles, 63 min) is a 2015 Norwegian language film, written and directed by August B. Hanssen and starring Ida Storm. The Internet Movie Database (n.d.) synopsis states: "Ida is a young Norwegian woman, struggling with a very turbulent emotional life caused by emotionally unstable personality disorder (borderline). For the last eight years, Ida has kept a video diary in order to ease her mind and structure her thoughts... we get a unique insight into a world of fear and anxiety, but also precious moments of everyday victories and self-discovery. Most importantly, we get to witness her powerful struggle towards self-acceptance and a genuine appreciation of life". Evidence suggests that nursing students prefer to watch a whole movie rather than selected clips (Oh and Steefel, 2015).

2.3.2. Borderline Personality Disorder Questionnaire (Cleary et al., 2002)

This questionnaire was designed to evaluate knowledge related to clinical features and treatment of borderline personality disorder. Respondents are invited to agree or disagree with seven fact-based knowledge statements (see Table 1). Further items address current practice, perceived self-confidence, staff resources, and development needs related to working with individuals with the diagnosis.

2.3.3. Borderline Personality Disorder-Cognitive and Emotional Attitudes Inventories (Bodner et al., 2011, 2015)

Primary outcome measure selection reflected that our intervention targeted cognitive and emotional attitudinal attitudes. They were previously used in Israel (Bodner et al., 2011, 2015) and, on examination, we agreed that some items did not make sense in a UK-service context and amended the language accordingly. In order to test construct validity of the amended tool we combined completed questionnaires from this sample (n = 66) with those of mental health clinicians and students who completed the tool in a related study (n = 55) (see Table 2).

2.3.4. World Café

The World Café method provides a flexible format for hosting discussions in large groups. Guidelines (Brown and Isaacs, 2005) suggest that tables be set up and sub-groups rotate between them every twenty minutes. Each table is hosted by an educator and focuses on one or more relevant, pre-determined questions. Two questions per table (see Box 1) were written on an A1 flipchart and participants were provided with pens and post-it notes to record their group discussions and any non-verbalised thoughts they wished to share in a process called graphic recording (Sibbet, 2010). Data collection is iterative in that each group sees and builds upon the responses of previous groups as they rotate around the tables. As a result, the data corpus comprises a collection of ideas from multiple voices. We also made field notes during the event.

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