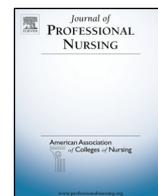


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Learning through partnership with communities: A transformational journey

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ABSTRACT

The purpose of this article, co-authored by instructors and students, is to highlight student learning and a student-developed model of Community Development that occurred through a service-based clinical placement. As part of their clinical community practicum, a group of second year nursing students were partnered with a group of seniors living in an inner city community. By deconstructing and categorizing ongoing student involvement with this community, students were able to make linkages to the many concepts that together form a community development approach to care, leading to the creation of a model of community development (the Community Health Advancement Model) to guide their evaluation. The process of evaluating nursing student progress from a community development perspective, and the subsequent creation of the model, highlighted several noted challenges of working within a service-learning model of care: the high level of self-direction and critical thinking required by students, and the lack of known outcomes. This article captures the students' struggles with and subsequent mastery through growth in understanding of these concepts. The model of community development, an outcome of their learning, showcases their depth of understanding of the importance of nurturing partnerships as foundational to providing care at a community level. This model may be useful within education of undergraduate nursing education by providing a visual road map of the process of community development. This article is an exemplar of the capacity and depth of understanding that is possible when students learn through community partnership.

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Value of service-learning through community partnership

Community health integrates community and societal needs with student learning, and is an intentional focus within the education of nurses and other health professions (Kemp, 2003). As such, nurse educators have been challenged to balance acute care and community health with the needs of the populations and students who will practice in an evolving healthcare system (Holt, 2011; Ross-Staats, 2003). This balance requires us to utilize a holistic approach that encompasses all levels of prevention with individuals and populations, across the life span, and in all contexts of nursing practice (Holt, 2011; Kemp, 2003; Ross-Staats, 2003; Swider & Kulbok, 2015).

To address the complexity of current day healthcare, our nursing education program embraced a context-relevant integrated curriculum (Rosenau, Watson, Vye-Rogers, & Dobbs, 2015). Integrated learning speaks to the demonstrated ability to synthesize knowledge from a variety of perspectives and to apply this understanding to multiple contexts (Barber, 2014). Pedagogical approaches that engage communities, often called service learning, combine community service

and learning goals in ways that embrace integration and enhance both student growth and serve the common good (Bandy, 2017). Intentionally embedding community health at the beginning of the program serves as a context in which students learn foundational ways of thinking about nursing practice that recognize the complexity of real world health care. The benefits to students of community engaged service learning include the positive impact on students' academic learning and outcomes such as enriched understanding and cognitive development with a greater capacity to engage in critical thinking, analysis, and problem solving (Bandy, 2017). Service learning through community engagement also enhances students' ability to understand complexity and ambiguity, in addition to the ability to apply their learning in the real world.

The purpose of this paper is to articulate that novice undergraduate nursing students have the capacity, through a service-learning approach, to integrate complex theoretical constructs like community development into real-world contexts of practice. The following exemplar of one student groups' journey within a larger ongoing service-based clinical initiative narrates this learning journey. By evaluating the ongoing partnership through the lens of community development, this group of novice students articulates their growth in understanding of the importance of nurturing partnerships in providing care at a community level and the impact this process had on their understanding of

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community health nursing. The outcome of the student learning represented within the development of a Community Health Advancement Model serves to demonstrate the depth of learning that is possible when students learn through community partnership.

Description of the community course

Within this foundational community health course, intended learning outcomes revolve around supporting understanding of community health nursing practice competencies including public health sciences in nursing practice, population and community health assessment and analysis, population health planning, implementation, and evaluation, partnerships, collaboration and advocacy, and communication in public health nursing (Canadian Association of Schools of Nursing [CASN], 2014). Students are introduced to the Community as Partner Model (Vollman, Anderson, & McFarlane, 2012) as a guiding framework, which mirrors the nursing process with community health language and tools to guide their learning. Connecting with a 'community' based on a geographic location, subpopulation, or other attribute of commonality, students begin a broad community assessment. Through this community development approach to assessment and the subsequent relationships that develop, partnerships evolve and areas of focus for health promotion initiatives emerge.

Community health nurses use knowledge from public health, nursing, social, and environmental sciences (American Public Health Association, 2013; Community Health Nurses of Canada [CHNC], 2011). They integrate the concept of primary health care, social determinants of health and health inequities in order to promote, protect, and maintain the health of populations. Collaborating with communities reveals the complexity of health and provides foundational learning opportunities for undergraduate nursing students to explore their conception of nursing and foster an understanding of nursing practice that embodies a holistic approach to care provision (Holt, 2011; Kemp, 2003; Kruger, Roush, Olinzock, & Bloom, 2010; Nehls & Vandermouse, 2004; Speck, 2003). This learning "transcends the debate on terminology and moves them towards an understanding that all health care occurs in contexts of place and time, and that all care in all settings needs to include concepts from individual to global levels" (Ervin, Bickes, & Schim, 2006, p. 76).

Community development as a process of enacting care at the community level is subsumed in many of the roles and activities within community health (Canadian Public Health Association [CPHA], 2010; CHNC, 2011). Community development, as it relates to health, has been defined as "the process of involving a community in the identifying and strengthening those aspects of daily life, cultural life, and political life which support health" (CPHA, 2010, p. 32). The philosophy of community development, framed on the belief that people and communities are entitled to have control over factors that affect their lives is grounded in valuing the absolute worth of the individual starting where the individual is (Stamler & Yiu, 2012). The values and principles that support community development include empowerment, capacity building, building trust, and cultivating partnerships (Vollman et al., 2012). As Nehls and Vandermouse (2004) expressed, we need to embrace a "growing mindfulness to form partnerships with those we serve" and "value collaboration in education-service partnerships." (p. 82).

Enacting service learning

In the community of X students first explored a geographic area that consisted of two neighbouring yet differing communities. Over the course of the semester, students met with community members and organization leaders and began to understand the unique strengths and challenges of each. Potential areas of focus were explored and validated with community representatives. One area that emerged as a health priority was community interest for local older adults to have increased

social connection opportunities. Nursing students and their instructor formed a partnership and committed to supporting the community to achieve this goal through implementing a senior's luncheon.

Over the course of several semesters, this one-time luncheon grew into a monthly seniors' social, organized and planned by a committee comprised of community senior members, community agency representatives, nursing students and their instructor (x), encompassing a variety of entertainment, educational, and engagement activities. Adhering to principles of community development, it was important that students not "create" programming for older adults, but rather support older adults and the larger community in achieving their goal. As attendance at the luncheon grew, our focus again shifted to supporting long-term sustainability through initiating and strengthening a variety of community partnerships. A planning committee of community organizations, local seniors and nursing student representation was struck to oversee planning of future socials. Ongoing feedback, both formal and informal, continued to shape the social. Each semester, a new group of nursing students cycled through the nursing process, further assessing and evaluating the progress of the event, building relationships with community partners, and adding new elements to help in the overall growth and sustainability of this service-based, community development initiative.

Kemp (2003) notes lack of control and an increased chaotic and dynamic environment as challenges to service learning. A challenge for an instructor in an ongoing service-learning setting, such as the one described in this article, is therefore to help students see the dynamic nature of a community development approach to care while continuing to build upon the community development work that has been achieved to date. In community-based clinical learning environments, outcomes evolve collaboratively over time. Because novice students tend to view the nursing process in a linear manner and outcomes are initially unclear, they struggle to understand their role within a community development perspective (Kemp, 2003).

As the seventh group of students began working with this community, the semester began with a focus on evaluation. We explored a number of ways that they could evaluate student nurse involvement over the previous 3 years, with a plan to use this knowledge as a basis for future planning. Specifically, we were interested in evaluating our effectiveness in using a community development approach in providing care. In their article entitled *Conceptualizing Community Development in the Twenty-First Century*, Matarrita-Cascante and Brennan (2012) described community development as a typology consisting of three forms based on increasing level of community involvement. The self-help form, which involves the highest level of community participation, most closely aligns to the approach used in community health nursing practice. The authors noted that within this form of community development there are often multiple outcomes and that major emphasis is placed on the promotion of capacity-building, leading to the enhancement of the human resource of the community. Evaluation of progress therefore needs to focus on our effectiveness in applying principles of community development over time.

Initially, students were challenged to understand the significance of evaluating the community involvement that the previous groups of nursing students were engaged in. Since the students walked in on an intervention that was already established (the senior's social), it was difficult for them to see how they would utilize the nursing process. It appeared that the social was doing well and running independently; therefore, students believed it was time to terminate the nursing relationship with the community. The students' vision of the semester changed when they attended the first planning committee meeting and senior's social. It became apparent that our presence in this community was important; however, they struggled to articulate their role as community health nursing students. The students needed to find their place. Because they knew that leaving the community was not the correct next step, students decided to redefine the 'termination' aspect of the nursing process from 'exiting the community' to 'redefining the

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