

Original Article

## Suffering as a Means to Enhance Experiential Learning

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### Abstract

**Background:** There is a need for nursing curriculum to not only reflect content (the knowing) as an outcome but to also embrace the creation of safe places to foster dialogue (the being) as process; recognizing that both process and outcome are intertwined as pedagogical goals. Challenging students to think about how they would be (ontological), recognizing there are no right or wrong (black and white) answers, that life is often lived in the “grey” can be fostered through narratives as a learning strategy.

**Aim:** The aim of this study was to examine the efficacy of a combined teaching and learning strategy (vodcast and narratives) to replace a traditional lecture to enhance experiential learning focusing on the concepts of caring, suffering, and ethical dilemmas.

**Results:** Out of the 135 students enrolled in the course a total of 109 participated in the research study for a response rate of 80.7%. The plural teaching strategy (the vodcast, journal articles, and case studies) introduced for the research study was overwhelmingly beneficial for many students; the opportunity to review the content multiple times, peer inspired content, and convenience to balance school and life responsibilities were seen as advantages by participants.

**Conclusions:** What began as an initial discussion between nursing students (who were struggling to ensure their practice was safe, ethical, and competent) and faculty initiated a journey which provided richness of practice, both education and clinical, to all who were involved. Increased awareness by faculty to intentionally integrate caring, suffering, and ethical dilemmas concepts into a classroom setting may enhance the student’s future practice by preparing them as competent, conscientious, and compassionate nurses.

**Key words:** caring, nursing education, narrative learning, suffering, vodcast

### Suffering as a Means to Enhance Experiential Learning

Addressing the healthcare needs of our patients has become increasingly difficult as a result of a variety of contextual factors; not limited to staff shortages, an aging population with multiple co-morbidities (Bowles & Candela, 2005), changes to healthcare personnel complement, funding restraints, (Rhéaume, Clément, & LeBel, 2011), as well as cultural diversity and models of care which may not include a holistic care approach.

Nursing students, as novice practitioners, must navigate this ever changing landscape competently, relying on their formative education as a map. Adopting an interpretive pedagogical approach to inform nursing curriculum may offer perspectives from many paradigms which fosters an educational opportunity to engage authentically in dialogue to understand both epistemological and ontological underpinnings of our nursing practice (Ironside, 2006; Kagan, Smith, Cowling & Chinn, 2009;) and thus

prepare students for this journey which includes suffering as an experiential experience.

### **Background**

A nursing curriculum grounded in caring sciences could utilize an interpretive pedagogy as a relevant approach to prepare nursing students for ethical dilemmas (Diekelmann & Diekelmann, 2006) which may result in understanding of suffering from multiple perspectives. Intentional thought and design to ensure an engaging curriculum and safe milieu to explore perspectives on ethical dilemmas, such as an absence of caring and acts of suffering, is absolutely necessary to facilitate dialogue. Why is there an impetus for creating narratives to highlight the values associated with ethical-laden dilemmas? There is a need for curriculum to reflect not only content (the knowing) as an outcome but to also embrace the creation of safe places to foster dialogue (the being) as process; recognizing that both process and outcome are intertwined as pedagogical goals. Responding to what is in the best interest of current theoretical students to prepare them for clinical practicums to ensure their practice is safe, competent, and ethical is an outcome of professional nursing practice programs.

### **Narrative Pedagogy**

Challenging students to think about how they would be (ontological), recognizing there are no right or wrong (black and white) answers, that life is often lived in the "grey" can be fostered through narratives as a learning strategy (Brown, 2011; Wood, 2014). Narratives, as affective learning, may enhance knowledge acquisition and application which facilitates the development of shared meaning between learners and thus may enhance competency (Clark & Rossiter, 2008; Brown, 2011; Wood, 2014). Sharing of stories in the classroom may breathe life and humanity into subject matter (Brown, Kirkpatrick, Mangum & Avery, 2008; Clark & Rossiter, 2008) which may not always be real or relevant for the nursing student whose clinical practice is in the future.

Two fourth year nursing students shared their clinical narratives with a tenured faculty member. The student's stories highlighted situations where caring between healthcare personnel was minimal, patient and nursing student suffering transpired, and nursing ethical dilemmas had developed. The sharing of their

clinical experiences, especially around suffering, reflected their lack of theoretical preparation to manage situations where ambiguity and power differentials occurred as well as the necessity for self-care when suffering happens. This dialogue fostered learning for both the fourth year nursing students and faculty resulting in the formation of a unique collaboration as a curriculum team to create experiential learning experiences (the development of two narratives based on the student's clinical practice) for future generations of nursing students in the classroom.

### **The Theoretical Class**

The theoretical class exploring the concepts previously mentioned (caring, suffering, and ethical dilemmas) is situated in the third year of a four year Bachelor of Science in Nursing program. The course, "NURS 370 – Nursing Care of the Acutely Ill Across the Lifespan" is a mandatory course (first term of year three) in preparation for a five week clinical course in an acute care setting (second term of year three). Content includes but was not limited to: nursing models and theories, provision of care with individuals/families experiencing acute alterations (endocrine, metabolic, respiratory, cardiovascular, gastrointestinal, neurological, integumentary, renal, and infectious conditions), and the role of the registered nurse within the interprofessional team.

Background information for the class was introduced through a vodcast (approximately 22 minutes in length) and two nursing articles. Specific preparatory concepts of caring utilizing three of Roach's (2002) caring attributes (conscience, competence, and compassion), spirituality, suffering and self-care were introduced in preparation for rich meaningful discussion of the narratives developed by the curriculum team. Discussion questions reflecting ontological and epistemological perspectives were also prepared for acquisition of knowledge in this newly created experiential learning experience.

### **The Study**

#### **Aim**

The aim of this study was to examine the efficacy of a vodcast and narratives as a combined teaching and learning strategy to replace a traditional lecture to enhance experiential learning.

## Research Design

Narratives, as previously discussed, were co-developed by the team and were based on the two fourth year nursing student's experiences which were then grounded in the context of Roach's caring attributes.

The vodcast, created by the nursing faculty member, expanded on Roach's caring attributes, ethical dilemmas, spirituality, suffering, and self-care. In preparation for the class, currently enrolled students were provided two nursing articles to enhance their understanding of the abovementioned concepts. The PI excused herself from the classroom where she normally instructs, and discussions were facilitated by the fourth year nursing students; this was an effort to not duly influence the PI's student's responses to the research study component of the class.

A descriptive survey design was used to collect data on a convenience sample of third year undergraduate nursing students to assist in clarification of the research purpose. The Principal Investigator (PI) developed a survey including a 4-item Likert scale (Strongly Agree, Agree, Disagree and Strongly Disagree – ensuring the participant does not choose a “neutral answer”) as well as an opportunity to provide further elaboration regarding the statement, as well as a brief demographic data tool was utilized using a pen/paper format to elicit a higher response rate. Instrument development was based on a literature review of vodcast and narratives as teaching strategies as well as caring sciences.

## Setting and Sample

MacEwan University is a teaching-intensive undergraduate educational institution located in Edmonton, Alberta, Canada which offers a four year baccalaureate degree in nursing (Bachelor of Science in Nursing). The sample consisted of two out of the three sections of third year nursing students enrolled in “*NURS 370: Nursing Care of the Acutely Ill Across the Lifespan*” for the 2013-2014 academic year.

Approximately 135 students were registered in each of the two sections of the course over the two academic terms; varying in age that were all over the age of 20. The third section of this course in each term did not participate; the faculty member who was the PI did not instruct this class of students.

## Data Collection

The survey and consent letter were posted in a folder on BlackBoard Learn (a learning management system utilized by the university) labelled “Caring Research” in the previously mentioned NURS 370 course. The students were directed to review the survey and ask any clarifying questions prior to the case studies. The consent letter, approximate time to complete the survey, and an electronic PDF copy of the survey were also posted within a folder on MacEwan University – BScN's program Blackboard platform for the course entitled, “*NURS 370 – Nursing Care of the Acutely Ill Across the Lifespan*” for both fall 2013 and winter 2014 terms. Waiving of a signature was requested due to the special population (nursing students). Completion of the survey was viewed as consent for participation in the research study.

The survey was distributed following the completion of the class discussions. A volunteer from the students to return all surveys (both completed and blank) in a sealed envelope to the main reception desk of the BScN program was requested. The PI and Co-Investigators (CI; two fourth year nursing students and a faculty member) then left the room to ensure anonymity of research participants.

## Ethical Considerations

Research Ethics Board approval was obtained from MacEwan University. Participation or refusal to partake in the research study did not affect the student's grade in the course as which students did or did not participate was not known by the investigators; nursing students may be considered a vulnerable population; therefore, a waiver for written consent was requested and granted. Confidentiality of the data was maintained in a number of ways. First the data was not individually identifiable by either the PI or CIs. Secondly, the data was stored in a locked cabinet (PI's place of employment) during analysis. Finally, the data and codes will be kept for two years and only those involved in the research study, the PI and CIs, will have access to this confidential information.

## Results

### Participant Characteristics

Out of the 135 students enrolled in the course a total of 109 participated in the research study for a response

rate of 80.7%; gender and age demographics were not collected. There were four questions related to use of technology that were surveyed. The first question, ***“What type of wireless technology did you use to review the vodcast?”***- two used a smart phone (1.8%), 84 used a laptop (78.5%), and 10 accessed material through a desktop computer (9.3%). ***“Was this your first experience with a vodcast?”*** – 73 responded yes (68%) and 24 said they had previous familiarity (32%) with this learning strategy. When asked, ***“Did you have difficulty with the technology?”*** three students said they had while 91 did not. The final question sought to understand how frequent the vodcast was accessed, ***“How many times did you watch and listen to the vodcast?”***- 27 did not view at all prior to class (24.8%), 72 viewed once (66.1%), 10 viewed twice (9.2%), while there was not anyone who viewed the vodcast more than three times.

### Likert Statement Responses

There were eight Likert statement responses to quantify the student’s opportunity to agree or disagree with the nature of content covered as well as the effectiveness of the combined teaching strategy as way to prepare them to clinical practice. Five of the eight statements required an opinion from the students with respect to the teaching strategy utilized to best prepare them for clinical practice and three of the statements addressed content specifically. Not all participants answered every question which is reflected in the diversity of numbers of students responding to each of the statements; however, data was utilized from all surveys whether they were partially or fully completed.

### Teaching strategy

The first statement, ***“The vodcast helped me to learn the content effectively”*** had 88 responses; two students strongly disagreed (SA), 10 disagreed (D), 69 agreed (A), and seven strongly agreed (SA). An overwhelming 80.7% of students suggested that this strategy facilitated knowledge acquisition. What do the terms “helpful and effective” signify to the student requires further exploration to understand what the discerning student feels is in their best interest as a consumer of knowledge. As educators we intend for content to inform and influence their future practice, whereas students may be more interest in present and the successful completion of a class. Although it appears that engagement has occurred understanding why the

other 20% of the student body did not feel the strategy was effective needs to be pursued.

At MacEwan, nursing students who enter during the fall intake are often younger and do not have post-secondary learning experiences which is the opposite for students entering in the winter intake which may or may not influence their school/life balance. The second statement had 99 responses - ***“There was an opportunity to be able to watch and listen to the lecture at my convenience which helped with my school/life balance.”*** Five students SD, 23 D, 48 A, and 23 SA; resulting in a vast majority 71.1% favouring this strategy as a way to balance school and life.

The third statement, ***“The ability to watch and listen to the vodcast more than once improved my understanding of the content”*** had 86 respondents – two SD, 14 D, 52 A, and 18 SA. An overwhelming positive response, 81.4%, suggests that the opportunity to review content in its original delivery method is beneficial to enhance understanding of content which may be unfamiliar for the student.

One hundred students responded to statement four. ***“Participation in the case studies was beneficial for my learning”*** – two SD, 13 D, 59 A, and 26 SA. Narratives based on peer’s clinical experiences grounded in a caring science perspective, including guided questions for discussion, may allow participants (year three BScN students) to express their own anxiety and fears about upcoming clinical experiences with students (fourth year BScN) who have successfully completed both the theory and clinical courses.

Although not directly related to the strategies, the following statement reflects the student’s comfort level with the design of the class. ***“The absence of the faculty member hindered my ability to learn the content effectively”***. Ninety five students responded; five SD, 47 D, 28A, and 15 SD which reflects a 54.7% of students who felt that the absence of the instructor did not change their ability to effectively grasp the content.

### Nature of content.

The first statement specifically attempted to understand how the nature of the knowledge may best inform student’s awareness of nursing practice. There were 86

student responses to the statement, ***“The content covered in the vodcast was helpful for the case studies”***; two SD, eight D, 62 A, and 14 SA.

The next two statements addressed how the content was organized around Roach’s (2002) nursing theory. Ninety-six students responded to, ***“I have an effective understanding of Roach’s three caring attributes: compassion, competence and conscience”***; three SD, 10 D, 71 A, and 12 SA. ***“I will utilize Roach’s three caring attributes: compassion, competence and conscience to guide my future practice”*** had 99 respondents; two SD, one D, 57 A, and 39 SA. An extremely positive response, 86.5 and 97% respectively, by the students who valued the knowledge and application of a particular caring nursing theory for their future clinical practice.

### Further Responses

There were four additional questions that offered an opportunity for students to express their opinion on this experiential learning experience. The first asked, ***“Was the vodcast an effective teaching strategy?”*** – 81 responses reflected 58 affirmative and 23 negative which does not reflect the previous Likert statements responses. The second question had 101 responses, ***“Would you recommend this teaching strategy in future offerings of this nursing course? Why or why not?”*** specifically was asking about the vodcast as preparatory work for the discussions on the narratives. Those students who did not value the vodcast felt it was an additional burden of time added to their already busy academic schedule, did not allow for interaction with the faculty member to ask clarifying questions, and did not allow for class discussion on the content provided. Students who did value this vodcast felt it was a refreshing way to present knowledge, the opportunity to listen to it many times as well as pausing when other activities need to be completed, and it facilitated application of knowledge during the class discussion on the narratives.

The third and fourth questions dealt with the narratives as a teaching strategy to enhance experiential learning. A total of 102 students responded to the statement, ***“The case studies were an effective teaching strategy”*** – 87 stated yes (85.3%) and 15 said (14.7%). The final question was composed of two questions, ***“How might this learning experience affect your future practice? What further questions arise from this experience?”***

A total of 74 students responded to this dual question with themes reflective of the importance of self-care, awareness of caring actions, challenging their own personal assumptions, and the need to adhere to the Canadian Nurses Association’s Code of Ethics (2008).

### Discussion

A total of 109/135 enrolled nursing students participated in the survey, a response rate of 80.7%. As attendance is not mandatory in theoretical courses at the university it is difficult to determine accurately how many students who attended class on the day of the research study actually completed the survey. Gender and age demographics were not collected as they were not deemed influential in this research study and the participants were considered a vulnerable population. However, demographics were collected with respect to technology; four questions related to use of technology that were surveyed which overall demonstrated the importance and value of ensuring curriculum is responsive to the needs of nursing students. The majority was familiar with a vodcast and had no difficulty navigating this technological platform. As a result most participants viewed the vodcast only once. However, this enabled 10 nursing students to watch the vodcast twice to ensure a grasp of the content prior to the classroom discussion which may reflect an appropriate teaching strategy with implications for nursing curriculum design.

### Implications for Nursing Education and Practice

Designing curriculum which is engaging and prepares nursing students for addressing the complexities of current nursing practice can be challenging. Knowledge for knowledge sake may not prepare the student to grasp the nuances in which to anticipate and effectively respond to the healthcare needs of their patients. As previously stated a variety of contextual factors in a healthcare system may hinder the ability of the nursing student to engage in a holistic care approach while developing their critical thinking competencies. Therefore, it is essential that faculty develop strategies which not only enhances the nursing student’s ability to recognize contextual limitations and adapt accordingly, but also to understand their patient from a holistic perspective. The plural teaching strategy (the vodcast, journal articles, and case studies) introduced for the research study was beneficial for many students; the opportunity to review the content

multiple times, peer inspired content, and convenience to balance school and life responsibilities.

### Narrative Themes

There were three narrative themes arising from questions highlighting the nature of the content. The first, *time and preparation*, reflected the student's "personal time" and the time outside of class used to watch the vodcast and read the journal articles. There was a dichotomy of perceptions of the use of time. Some students appreciated the ability to watch the vodcast more than while others were unable to recognize that prep was required before every class and although the teaching strategy was different for this class (vodcast and journal articles) the amount of time commitment was not onerous. A number of students identified that the vodcast added work to their preparation commenting on the significant amount of preparation for a class when viewed with the rest of their courses. Additionally, one student stated they felt they should have been given time back to be allowed to not be in class. Some students recommended this modality for self-motivated learners. Overall comments reflect that this was an effective strategy but should not be the only strategy for a classroom.

The second theme, altered learning style, reflected the absence of the nursing faculty (PI) from the classroom discussion; seen as both a positive and negative consequence. Many comments were in relation to the faculty being absent to answer questions in the moment; verify the nursing student's understanding of the material. Additionally, several students commented on the enjoyed interaction with their own faculty member who facilitated their critical thinking during the course.

The final theme, challenging assumptions and beliefs, reflected the nature of the content: suffering, caring, and ethical dilemmas. This format elicited rich dialogue from the current nursing students especially when they discovered that the case studies reflected real life situations experienced by their peers. This deeper awareness and appreciation for the epistemological and ontological underpinnings of our nursing practice is reflected in the following student's comment:

***"Just allows you to question your ethics and check in with yourself. This allowed you to think outside of the***

***box."*** (Student 82). Fostering discussions grounded in narratives may foster student engagement and thus competency in clinical practicums.

### Conclusion

What began as an initial discussion between nursing students (who were struggling to ensure their practice was safe, ethical, and competent) and faculty initiated a journey which provided richness of practice to all who were involved. Ongoing discussions between the nursing students and faculty provided a philosophical opportunity to consider the meaning of our humanity – "*What does it mean to suffer?*" The desire of the fourth year students was to give back, shape, as well as influence the destiny of others through their own learning of their experiences (Clark, 2010). Engaging peers in learning, while sharing their human "student nurse" experiences (Kear, 2012), provided a rich connection between nursing students and also with faculty.

Thus, narratives as a strategy may facilitate the development of a culture to enhance learning while providing connections between nursing students and faculty as "guides or interpreters" of the road map for clinical experiences. Increase awareness by faculty to intentionally integrate caring, suffering, and ethical dilemmas concepts into a classroom setting may enhance the student's future practice by preparing them as competent, conscientious, and compassionate nurses.

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