

Original Article

## Perceptions of Pre-Registration Mental Health Nurse Educators on the Delivery of Mental Health Nurse Education: A Qualitative Study

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### Abstract

**Purpose:** The purposes of this study were to explore mental health nurse educators' perceptions of effective classroom-based learning for pre-registration mental health nurse students and to identify relevant lessons for Indonesian nursing schools.

**Methods:** Five mental health lecturers participated in this qualitative study, using semi-structured interview. Individual interviews were used to determine and develop their insights into effective classroom-based learning approaches for pre-registration mental health nurse students. Lecturers were also asked about today's curriculum content of mental health nurse education. This study was conducted in a school of nursing, which adopted specific training for mental health nursing.

**Results:** Six themes emerged from this study: 1] teaching methods in classroom-based learning; 2] effective teaching methods perceived by mental health lecturers; 3] reasons to choose different teaching methods; 4] influences in the effectiveness of teaching methods; 5] evaluation of teaching methods and how said methods prepare students; and 6] today's content of MHN education.

**Conclusions:** Indonesian mental health nurse educators need to learn how to create a more student-centred learning environment. There is a need to consider the driving forces and restraining forces in applying certain methods. However, changing the teaching methods that promote students' critical thinking and learning is worth doing that hopefully will change mental health nurse practice in Indonesia.

**Keywords:** educators, mental health nurses, teaching methods.

### Introduction

In order to remain updated with rapid changes in health and healthcare, as well as meet future challenges, health professional preparation must continually evolve (NMC, 2010). Mental health nurse education must produce qualified nurses, according to community needs, which continuously change in a mercurial political arena. Therefore, new strategies are essential to ensure newly qualified nurses who are competent and prepared for the reality of nursing (Jeffries, 2005; Taylor, Irvine, Bradbury-Jones, et al., 2010).

Nurse education programmes, in particular mental health nurse education, must produce

qualified mental health nurses who care for people, demonstrate interpersonal/communication skills, and make evidence-based decisions in practice (Tee, et.al, 2012). Consequently, nurse education needs to provide active learning experiences that will promote critical thinking and problem-solving skills (Stanley & Dougherty, 2010). An effective mental health nurse education would produce qualified nurses: qualified and competent in giving care, making decisions, using critical thinking, and demonstrating emotional intelligence (Freshwater & Stickley, 2004; Jeffries, 2005; Taylor, Irvine, Bradbury-Jones, et al., 2010; Tee, at.al, 2012).

The Association of Indonesian Nurse Education Centre (AINEC) established a curriculum standard for undergraduate nurse education, that requires every institution to implement a competency-based curriculum (AIPNI, 2011). Consequently, nurse educators need to incorporate student-centred approaches (Young & Maxwell, 2007). Regrettably, almost 80% of Indonesian nursing schools' current methods lean towards teacher-centred learning, such as lectures and a small amount of group discussions. Moreover, generic training for pre-registration nurse education has been adopted in Indonesia. Mental health nursing is only 4% of the nursing curriculum. This situation becomes a challenge for academies to effectively teach mental health nursing within a short period of time. This study aimed to explore effective teaching methods in mental health nurse education that can be learnt in Indonesia.

## Methods

This study was a descriptive qualitative study conducted in mid-2012 in one school of nursing in the UK to explore the perceptions of mental health nurse educators regarding effective teaching methods in classroom-based learning. A semi-structured interview was used; it is ideal for a flexible topic that provides a loose structure of open-ended questions and helps explore experiences and attitudes (Pope, Van Royen & Baker, 2002; Whittaker & Williamson, 2011). The interviews lasted between 30-45 minutes and were digitally recorded and transcribed and were conducted in a quiet and small room designed for two to four people, free from interruptions, so that participants would feel comfortable to speak openly.

The study targeted mental health nurse educators who work in a nursing school and teach the school's pre-registration mental health curricula. The study used purposive sampling, as qualitative research's intent is an in-depth understanding of a specially selected sample to a target (Burns, Grove and Gray, 2011). The criteria used for sample selection were those mental health nurse educators who expressed interest, demonstrated insight, and agreed to participate. Five participants were recruited from a group of UK mental health nurse educators, with 5 to 22 years of experience in the role. There was no prior acquaintance between interviewer and participants that could bias or influence the study's results.

The Institutional Board Review (IBR) of the Faculty of Medicine and Health Sciences Ethics Committee, University of Nottingham approved the proposal, consent forms, and participant information sheet before the study was initiated. Participation in this study was voluntary; no participant became distressed at any time during the study.

All interview data were made anonymous and kept in a secure database, which was password restricted. Transcription was done with the help of native speakers, who then proofread the transcription. All the data were thematically analysed and coded into different themes and subthemes to obtain classroom-based teaching methods.

## Results

**1. Teaching methods in classroom-based learning:** All participants identified that a variation of teaching methods have been used in mental health nurse education. However, group discussion or group work is the common method used in classroom-based learning on undergraduate level usually facilitated by the lecturer.

*...On undergraduate, it would probably be small group work... Small group teaching... (4)*

Using media, such as films or video clips, could be effective, as students seem to engage and participate more, although it is uncertain whether the knowledge remained.

*It's the most effective as far as I can tell... especially if it triggers off or facilitates their own story that's similar... it seems to be working in the moment... but whether it sticks... I don't know... (3)*

**2. Effective teaching methods perceived by mental health lecturers:** Participants are aware that the classroom methods might help students to understand certain knowledge. However, as students have different ways of learning, it became difficult to determine whether one particular method is more effective than the other.

*I don't think any of them are more effective than the others. (5)*

*I think people have very different kinds of learning styles and it's difficult to...*

*we don't know whether they understand what they are really (being taught) ... (4)*

**3. Reasons to choose different teaching methods:** Teachers judge what teaching methods are effective, and they choose some approaches based on said judgement. The classroom size is an important influence on teaching method choice.

*Well, it's very mixed... and that's mainly because of different size groups... (1)*

Teachers choose different teaching methods to accommodate students' needs and different ways of learning.

*I think we need to be able to use different approaches to teach...to engage students... and of course people learn in different ways as well. (5)*

Teachers choose different teaching methods as a result of different objectives.

*I think it depends on what you are trying to achieve... to some extent, it depends on what you want to teach... (5)*

The teacher's philosophy of education also affects the methods chosen.

*So, we need to invest in those people, give them the best possible education we can. So, that's my philosophy. Philosophy...is far more important than method. (1)*

**4. Influences on the effectiveness of teaching methods:** Teaching environment was perceived as a factor that engages students.

*I think, what I would say is... I create an atmosphere for learning... (1)*

Lesson plans are made prior to the classroom session; however, the teachers may change the lesson as a result of their observations on how successful the lesson is.

*I make a plan of what I'm going to teach and how I'm going to teach it... but sometimes... I'll change it half the way through... (4)*

The lecturers' ability to manage students, appear confident, and demonstrate emotional intelligence strongly influences the teaching methods' effectiveness.

*Nurses do understand this concept that we need to be emotionally intelligent*

*with our clients. ...and I think we need to model that in the classroom... (1)*

However, a teacher should not see themselves as the ONLY experts because there are important resources within the students, as well.

*I think it's important that you don't see yourself as the expert necessarily. (5)*

The effectiveness of a method often decreases with student familiarity. Therefore, various approaches are needed to keep students involved.

*I think...maybe the effectiveness declines as people get used to it and desensitised to it, so maybe a variety of teaching methods is you know... (3)*

**5. Evaluation of effective teaching methods and how said methods prepare students:** There are two different methods to measure a teaching method's effectiveness: formal and informal. For formal evaluation, students submit an evaluation form at the end of every term. Students' evaluation and feedback on a teacher's classroom performance may also influence the teachers' decisions about which teaching approach is the best (Young et.al, 2007).

*One of the things I should've mentioned... was the module evaluations and teaching evaluations, which give us some feedback on effectiveness. (2)*

*It's difficult to get into people's heads and the only objective measure you have is when you're marking their assignments, or you put them through an exam process (3)*

Another method of knowing students' performance is feedback from nurses in practice.

*We have practice staff on curriculum advisory groups who meet with us on a bimonthly basis to talk about the course... so we get sort of that feedback from people there... (5)*

A number of participants believe that classroom learning experiences should prepare students for the reality of nursing; the purpose is to give students skills in how to learn and apply it in their practice, not to make them specialists.

*So, you want them to get those lifelong learning skills... (5)*

6. Contents of mental health nurse education today

Some important mental health nurse education content consists of issues surrounding philosophy of recovery, ethical values, therapeutic relationships, and students' awareness of mental health issues. The participants viewed recovery philosophy as the most significant theme in mental health nurse education today. McLean, Fulford & Carpenter (2012) assert that values (personal values, professional values, and people's general values) should underpin nurses' clinical practice and decision making.

*The hot topic at the moment is recovery ... and social inclusion... because principles of recovery are very humanistic, very client-centred and fits with my worldview and my philosophy of education. (1)*

Mental health nurse education is aimed to prepare students to become better nurses that constantly and consistently improve their practice. However, students struggle with applying lessons because the lessons are too ideal for real practice, and students, in the end, do not always do as they are taught. On the contrary, the ideal conditions that are being taught as aspirational teaching could help students to think critically and hopefully improve their practice. Nonetheless, the mental health nurse education content is too complex, with all aspects being of equal importance; therefore, one cannot simplify or reduce the content.

*Well, I don't think there is a more important... They are all important... It's too complex to put it down to what is the most important. (5)*

## Discussion

**Mental health nurse education in the UK compared with Indonesia:** UK nursing education has adopted specific field of nursing practice (mental health being one of them) for pre-registration programme (NMC, 2010). This follows many years of having a generic "Common Foundation Programme" followed by a shorter branch experience. Many other countries educate all nurses generically. UK student nurses, therefore, may expect a set of competency requirements based on their chosen field of practice. This system of a specific field of practice from the outset may positively affect their motivation to learn (Robinson & Griffiths, 2007). As mental health nurse education in the

UK delivers specific education for mental health nursing, it is more likely that the programme could cover students' needs in practice.

In contrast, generic training for pre-registration nurse education has been adopted in Indonesia. Mental health nursing is only 4% of the nursing curriculum. This situation becomes a challenge for academics to effectively teach mental health nursing within a short period of time. Students often cannot provide quality care for patients with mental health problems because they lack a high standard of knowledge and skills (Moxham et., al., 2011); consequently, patients often question the students' professionalism (Clarke, Byrne, Cross & Walsh, 2009). Although undergraduate courses would not necessarily make students specialists in any area of nursing, educators, however, must anticipate potential problems when graduated nurse students must meet any professional organization's standards (PPNI, 2011).

AINEC established a curriculum standard for undergraduate nurse education that required institution to implement a competency-based curriculum (AIPNI, 2011). Consequently, nurse educators need to incorporate student-centred approaches (Young & Maxwell, 2007). Regrettably, almost 80% of Indonesian nursing schools' current methods lean towards teacher-centred learning, such as lectures and a small amount of group discussions. Although lectures and discussions are not necessarily ineffective (Herrman, 2011), educators, however, still need to explore methods that require students to facilitate the learning process and take responsibility for their own learning (Thorne, 2006; Johnson et.al, 2009).

**Teaching methods:** In order for effective teaching methods to happen, nurse educators should consider the learner, instructor, and system that influence the teaching/learning process (Stanley & Dougherty, 2010). Teaching strategies must improve learning and students' satisfaction (Farmer, 2010; Herrman, 2011). The most common methods used in undergraduate mental health nurse education, based on the study, are small-group work and small group discussion, where students exchange ideas and teach each other (Robb, 2012). The use of group work is considered effective for student learning and interaction (Leufer, 2007; Yazedijan & Kolkhorst, 2007). However, the educator should consider the group size and lesson objectives

when choosing a class activity (Mulryan-Kyne, 2010), as Leufer (2007) claims that there is a correlation between class sizes and the interaction level.

Regardless of teaching methods incorporated in a classroom setting, all lecturers interviewed also believed that engaging students and supporting course content with activities is important for classroom learning (Robb, 2012); they all strongly believe education is an active process, not passive (Ernst & Colthorpe, 2007). Students are more likely to attain knowledge and skills when they are invited to participate in the learning process (Young & Maxwell, 2007; Wells & Dellinger, 2011). Although all participants have used various teaching methods, this study supports the literature that states that there is no one method that would address the needs of every student (Candela, Dalley & Banzel-Lindley, 2006; Johnson, et.al, 2010). Similarly, Herrman (2011) indicates that students' active participation could lead to student satisfaction, which might help improve knowledge retention.

Some participants felt that creating a learning environment and engaging students in the learning process is more important than the teaching methods themselves. Therefore, a lesson plan is created prior to teaching sessions, although there is still a need for flexibility (and adaptability) in teaching (Hughes, 2005). Even though it is unclear how much flexibility is necessary, Davidovitch & Soen (2006) asserted that effective teachers should recognise situations as they happen during the learning process and they should also facilitate meaningful learning within those situations. Farmer (2010) claimed that a conducive learning environment is vital, but this need is sometimes a challenge for novice lecturers. However, novice lecturers' can reflect, evaluate their approaches, and change as needed (Young & Diekelmann, 2002; Clynes, 2009).

As teaching is a skill, it is therefore learned over time (Young & Diekelmann, 2002). Nevertheless, teacher training and experience are both considered essential for teachers. For any nurse who desires qualification, in the UK, NMC (2012) recommends 360 hours of assessed teaching activity within a year of any teacher preparation programme. In contrast, although Indonesia has laws related to teachers and lecturers, there is no specific requirement for specific teacher training, as long as they graduate

from an accredited post-graduate programme (UU Guru dan Dosen, 2005). Inexplicit regulation on teacher or lecturer training could lead to a poorer quality of teaching, which subsequently would affect the quality of graduates.

NMC (2008) has developed a standard that UK nurses must facilitate learning for a range of students. However, students' orientation of learning or their previous experience in learning will influence their approach in learning (Leufer, 2007). Participants perceive that sometimes students appear to enjoy more teacher-led approaches because it is familiar. Other literature supports this idea that traditional lecture is a teaching strategy most students have adapted (Laufer, 2009). Teachers are more likely to impede methodological changes when they themselves do not know alternative teaching approaches (Arthurs, 2007; Mulryan-Kyne, 2010).

Many factors determine an educator's teaching method choice. This study confirmed what is recorded in the literature: teaching strategies must be appropriate to and supportive of the course's objectives (Bonner, 1999; Jeffries, 2005). As adult learners, students have their own learning needs, yet they still need teachers to help them become aware of those needs (Knowless, Holton & Swanson, 2005). Evaluation on the effectiveness of the teaching methods might be attained from students' feedback. However, Gray & Bergmann (2003) observed that over-confidence in students' rating might prevent teachers from changing their methods. Furthermore, teachers might also use their personal feelings, intuition, attendance records, student interactions, and assignment or exam scores. Using attendance records and charting exam score patterns is incredibly useful, although difficult, especially in large classes (Robb, 2012). Teaching method evaluation improves the method's effectiveness; evaluation also informs the educator if the students met the learning objectives (Young, et.al, 2007).

This study also indicates teacher's confidence and emotional intelligence (EI) are important influences on a teaching method's effectiveness. Freshwater & Stickley (2004) claimed that teachers need emotional awareness in order to make their teaching emotionally intelligent. Furthermore, teachers fail to communicate with students when teachers give little or no attention to emotional development. It is not clear though

whether teachers can learn EI. Unfortunately, even though EI is necessary for effective teachers, there is no evidence found suggesting that EI tests are a requirement for teacher candidates.

**Implications of the study in an Indonesia context:** The results of this study provide information that is useful for lecturers, especially for novice lecturers. Although all participants came from mental health nurse education, one can apply the findings in any course. In terms of applying the findings into Indonesian context, one needs to consider some driving forces as well as restraining forces. Active learning requires preparation and it is time consuming (Herrman, 2011). Learning environments are sometimes a barrier: limited student supports, such as access to books and journals, are another barrier in applying this study. Nonetheless, despite the challenges, student-centred approaches are worthwhile. Student-centred approaches improve students' critical thinking, problem-solving and decision-making skills, which in turn, improves their practice.

Munir, Ramos, & Hudtohan (2013) reported that Indonesian nursing schools are headed by people who are likely less exposed to new trends in nursing education. They also stated that nursing education should provide the answer to international level nursing education program that will produce competent nurses for social development and global competitiveness. Moreover, Indonesia nursing schools need to maintain conducive learning environment and still need to improve learning activities that reflect the use of student-centred learning (Rochmawati, Rahayu, & Kumara, 2014).

**Implications for further research and practice:** There is a need for nurse educators to know which teaching methods are effective, especially for particular nursing schools which adopted generic training for pre-registration nurses. A replication of this study with more mental health lecturers across the UK would also increase the result's generalisation. Another recommendation is to directly observe how teachers conduct classroom sessions, which might enrich the possible applied results. Another possibility for future research would compare learning outcomes achieved with multiple teaching methods.

**Conclusion:** Nurse educators remain the cornerstone in the world of nursing. Various

teaching methods are available for classroom-based learning. The literature shows that alternative teaching methods, which facilitate student-centred learning, might increase knowledge retention, students' satisfaction, skills performance, and also improve critical thinking (Rowles, 2005; Jeffries, 2005; Stanley & Dougherty, 2010).

Interviewing mental health nurse educators in a large university in the UK provided insight for mental health lecturers, especially novices, into a world of teaching. Six main themes emerged from this study, including effective teaching methods in classroom-based learning and the reasons teachers choose certain methods, as well as influences on teaching methods effectiveness and how to evaluate the effectiveness of teaching methods. The other theme that was emerged was the content of mental health nurse education today. This exploration highlighted the importance of active learning in mental health nurse education. The literature identifies barriers to a more student-centred learning approach, and this is largely because nurse educators have limited knowledge about student-centred approaches.

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