

M Rosário Pinto<sup>1</sup>; Ana Spínola<sup>1</sup>; Alcinda Reis<sup>1</sup>; Jean-Luc Patry<sup>2</sup>; Dilma Silva<sup>3</sup>; Joana Gonçalves<sup>3</sup>; Luís Rainha<sup>3</sup>; Mariana Esteves<sup>3</sup>; Paula Feijão<sup>3</sup>; Tiago Jeans<sup>3</sup>

<sup>1</sup>Professor, IPSantarém, Escola Superior de Saúde de Santarém; <sup>2</sup>Professor, University of Salzburg; <sup>3</sup>Nursing student, IPSantarém, Escola Superior de Saúde de Santarém

## INTRODUCTION

Nurses are expected to have health responses which imply interdisciplinary, multi-professional dynamics, require high responsibility and consistent general knowledge to deal with many different, very specific patient needs, which lead them to deal with situations often triggering dilemmas that involve multiple dimensions. Although it is accepted that nursing is a moral activity and that ethical reflection requires practitioners to think critically about their values and to ensure that these values are integrated into caring in every interaction<sup>(1)</sup>, the focus of teaching is more centered on knowledge (about responsibilities, Code of Ethics, ...). In fact, personal values are accepted as inherent to human life, seen as attitudes, beliefs and priorities that bind individuals together and guide behavior<sup>(2)</sup>, and some authors acknowledge that personal values can influence the nurses' professional behavior<sup>(3,4)</sup>. Academic professors of graduation nurses need to take into account all these dimensions, inasmuch as higher education must maintain dynamics of permanent relevance and adequation to society needs and to the quality control of this offer<sup>(5)</sup> and these must not be dealt with independently but in relation with each other. Awareness of the importance of a reflected and discussed process that enables rationalization of personal and professional values within the process of care, was the motivation to adhere to a proposal of piloting VaKE methodology within Nursing Academic framework.

## PROCEDURE

A pilot study<sup>(6)</sup> was conducted. The participants were seven 3<sup>rd</sup> year nursing 1<sup>st</sup> Cycle students. The context was a practical setting (internship) in Family Health, within the theoretical Calgary Model framework<sup>(7)</sup>. One tutor for all students was involved. Data were collected through participative observation and video recording.

*Michael is a nurse taking care for elderly people, going to the home of his patients; on the first visit after her hospital discharge, he is confronted with a female patient, Maria, who doesn't want to be at home, because, as she says, she is not well enough to be alone (she is dependent on other people for doing her life activities due to a hip fracture recovery) and she needs therapy with oxygen in permanent basis until she finishes recovering from a respiratory temporary infection situation, prescribed to be done at home.*

## RESULTS

The general conditions of the discussions were seen as crucial by the students, emphasizing

- the importance of incorporating personal experience into the reflexive approach;
- the opportunity to integrate personal perspective at the beginning of the discussion, without a previous theoretical background;
- the motivation to continue intervening in the argumentation;
- the importance of confronting with different lived experiences and personal accomplished opportunities;
- the informal conditions without an active and constant intervention of the teachers;
- the recognition of the need for mutual support to find more information;
- the method fostered the spontaneous willingness to search for more information.

The combination of scientific and personal perspectives and of descriptive and prescriptive issues through VaKE led the students to gain a different look at the patients' situations. They could emphasize with the patients' needs and see that the "technical" issues are not all there is in nursing. The importance of "talking with the heart" was recognized and capitalizing on personal previous experiences "makes us feel we can be people while caring".

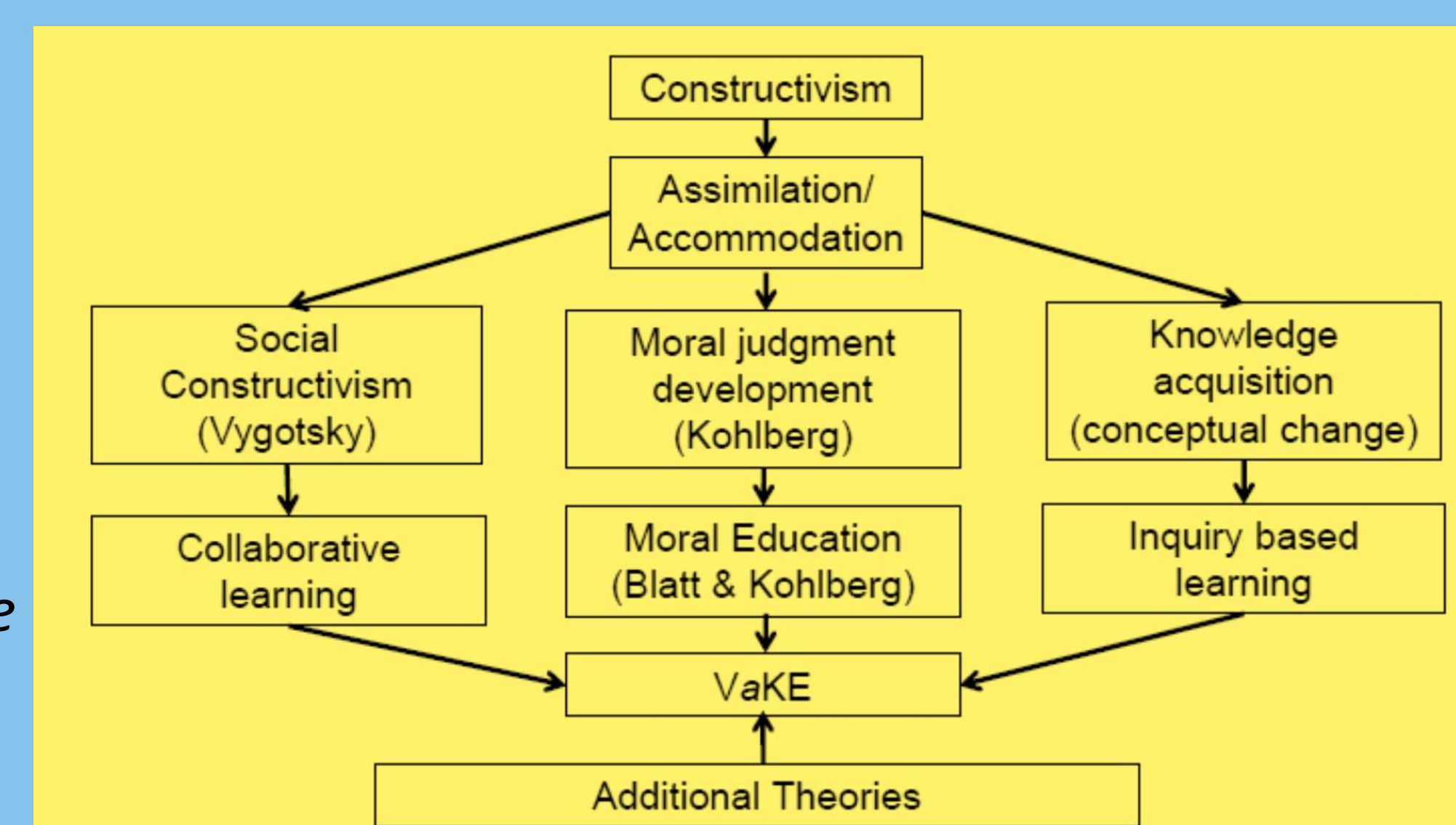
The participants' motivation in the VaKE process was particularly notable. This motivation was visible in their engaged participation in the discussion, in their interest in the issues that were addressed, even in their excitement about the story and about the discussion.

As a pilot study, the experience was encouraging. It is suggested that further attempts using VaKE in teaching prospective nurses should be undertaken, providing opportunities to continue developing a person-centered learning culture. This was highlighted by this experience, focusing on personal growth and enhanced self-awareness, both for students and professors.

## THEORETICAL BACKGROUND

In teaching on all levels, from primary school to university, there is a tendency to separate knowledge education from values education. Knowledge education addresses the content, subject matter, etc., while values education deals with the students' moral stance. In VaKE, the knowledge part and the values part of the education are combined and related to each other.

This constructivist teaching approach, based on discussing moral dilemmas, promotes values discussions trigger interest in the necessary *knowledge base*, which is then searched by the students.



Step	Action	
0	<i>Preparation and clarification</i>	Students' understanding of values; abilities in the working techniques; rules of interaction
1	Introduce dilemma	Understand dilemma and values at stake
2	<i>First decision</i>	Who is in favour, who against?
3	<i>First arguments (dilemma discussion)</i>	Why are you in favour, why against? Do we agree with each other? (moral viability check)
4	Exchange experience and missing information	Exchange of arguments; what do I need to know further to be able to argue?
5	Looking for evidence	Get the information, using any source available!
6	Exchange information	Inform the other students about your constructions; is the information sufficient? (content related viability check)
7	<i>Second arguments (dilemma discussion)</i>	Why are you in favour, why against? (moral viability check)
8	<i>Synthesis of information</i>	Present your conclusions to the whole class (moral and content related viability check)
9	<i>Repeat 4 through 8 if necessary</i>	
10	<i>General synthesis</i>	Closing the sequence capitalizing on the whole process
11	<i>Generalization</i>	Discussion about other but related issues

Table 1- Minimal steps in a VaKE process; italics: values education

Based on this newly acquired knowledge, the values at stake in this dilemma can be discussed on a higher level, following the recommended steps described in table 1.

## CONCLUSIONS

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