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A preliminary study on the application of storytelling among hospice care interest group

Yu Liu*, Yu-Tong Zhou, Hong Lu, Jing Sun
School of Nursing, Peking University, Beijing, China

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ABSTRACT

Purpose: To explore the effect of storytelling on hospice care learning in the interest group.

Methods: Storytelling was used among 7 master of science in nursing (MSN) students in the hospice care interest group. The effect of storytelling was evaluated by the combination of students’ reflect diary and the evaluation form.

Results: Five themes were extracted from diary including: relieving the suffering of the patients, understanding and respecting patients’ choice, communicating, team working, and family supporting. Among 5 items of the evaluation form, there were 4 items which were scored as either agree or strongly agree.

Conclusions: Students reflected that the storytelling helped them recognize the importance of relieving the suffering, respecting and understanding, communicating, team working, and family supporting in the hospice care.

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1. Introduction

In order to prepare the students to provide high quality care for end-of-life patients and their families, teachers always want students to not only grasp the essential knowledge and skills to meet patients’ physical needs, but also truly understand the psychological and social needs of patients and their family members. Traditional lecture can exactly tell students about the concrete physical characteristics of end-of-life patients and related medical and nursing care techniques, but it hardly reveals the patients’ experience and psychological needs. Storytelling is a teaching method which is based on a carefully chosen story to illustrate and explain the things that teachers want students to know. This teaching method also helps students think further from the story about the insights, ideas, feelings, and experiences that remain in the story [1,2].
Table 1 – Evaluation results from 7 MSN on storytelling [n (%)].

<table>
<thead>
<tr>
<th>Items</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree or disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promoted new insights</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(14.3)</td>
</tr>
<tr>
<td>Helped me think more critically</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(685.7)</td>
</tr>
<tr>
<td>Fostered deep learning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(14.3)</td>
</tr>
<tr>
<td>Will help me apply this content to my practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(286.6)</td>
</tr>
<tr>
<td>Changed my perceptions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(286.6)</td>
</tr>
</tbody>
</table>

Storytelling has been considered as having some unique effects on sharing the feelings and experience [1–3]. This study preliminarily applied the storytelling in an interest group on hospice care. The purpose of this study was to explore the effect of storytelling on hospice care learning in the interest group.

2. Subjects and methods

This is a descriptive research design.

2.1. Research subjects

A convenient sampling was used in this study to recruit 7 full-time MSN students in an interest group on hospice care. They were all female; the range of age was from 24 to 30 (26.1 ± 2.0) years old; two were first year graduate students, three were second year students, and the other two were third year students. Every student had experience of seeing or caring of end-of-life patients, but they all reflected that they lacked of practical experience of taking care hospice care patients. That was why they have participated in the interest group of hospice care.

2.2. Teaching methods

Storytelling was used to share the experience of end-of-life patients and their family-members with students. The video ‘Good Death’ (30 min) was used in this study which was shared by Professor Strodtman from University of Michigan School of Nursing. This story is based on a real case, Mr. Evan Mayday, a patient at the end of life with high paraplegia by an injury. This video documents Mr. Evan and his family members physical, psychological, and social needs at the special period. This video also records how physicians, nurses, social workers work together to meet the Mr. Evan Mayday and their family needs [4].

The video was played for students in two classes (1 h for each class). In order to help students well understand the contents of the video, the teachers translated some difficult sentences for students and provided some essential information about health care system of US. Each time, after the video watching, students had a discussion for 20 min. After one week of the class, students were asked to write their reflect diaries about the video.

2.3. Evaluation methods

The effect of storytelling was evaluated by the combination of students’ reflect diaries and the evaluation form. The evaluation form was self-designed by Dr. Strodtman and her colleagues to evaluate the effect of storytelling. It was considered as with an acceptable content validity. Two faculties in the research group translated the evaluation form back-to-back and final agreement on the translation was received in the research group. The evaluation form was a Likert 5 scale, from ‘strongly disagree’ to ‘strongly agree’.

2.4. Data analysis methods

SPSS 16.0 was used to enter the data. Descriptive statistics was applied to describe the basic information. Content analysis was used to analyze the reflected diaries and extract the themes [5]. Two research group members independently analyzed the diaries, and disagreement on the extracted themes was discussed in the research group, and the agreement was finally achieved.

3. Results

3.1. The results of the evaluation form (Table 1)

3.2. The themes extracted from diary

After analyzing the 7 copies of the reflected diaries, five themes were extracted: relieving the suffering of the patients, understanding and respecting patients’ choice, communicating, team working, and family supporting.

3.2.1. Relieving the suffering of the patients

Relieving the suffering of the patients has been mentioned in the diaries for 73 times. The symptom of breathlessness that Mr. Evan had in the video reminded students the experience they had in their previous practice and triggered them to think more about the end-of-life symptoms, such as pain, breathlessness, and fatigue. Students mentioned that healthcare personnel should apply modern medical techniques and skills to relieve patients’ suffering. For example, students mentioned that ‘many patients go through the tough process before death, especially the physical suffering, such as pain and breathlessness. We, as healthcare personnel, cannot comfort patients only with the sentence that the death is not avoidable. We should try our best to relieve their suffering by applying the medical techniques.’

As the students highlighted physical pain, they also recognized the psychological uncomfortableness among patients, such as the powerlessness that Mr. Evan revealed in the video. Five students had mentioned in their diaries that meeting patients’ needs was also a way to relieve psychological suffering among hospice care patients. Some students...
mentioned that ‘Mr. Evan was happy that he could stay with his family at the last few days before he died. I thought we should provide more opportunities to end-of-life patients and their family members just like Mr. Evan had.’

3.2.2. Understanding and respecting patients’ choice
In diaries, there were 62 times that students mentioned about how healthcare personnel understood and respected Mr. Evan’s choice as well as his family’s, and how important that were for meeting the end-of-life patients’ needs. Some students emphasized that ‘the most impressive thing in the video is Mr. Evan can explain his willingness freely and choose Do-Not-Resuscitate, and others respect his choice’, ‘as medical and nursing students, we are always educated to treat disease. Thus, it is always seen as failures of healthcare personnel if patients die in the hospital. After watching this video, I felt that the true fail is we can not exactly understand and meet patients’ needs.’

3.2.3. Communicating
Communication was mentioned 58 times among the diaries. Students mentioned about the importance of communicating with the end-of-life patients. Some students said “barrier-free communication is also a comfort for end-of-life patients. I had met patients who had respiratory machines since they could not breath by themselves, but they were still alert. I feel bad now because I have not tried to communicate with them well. I only asked them ‘can you hear me?’; ‘do you feel pain?’; ‘could you please move your fingers for me?’, and so on. I feel bad now because I guess the patients must have lots to say, but I have not give them more chance”.

The 7 students also reflected their own communication skills as they recognized the importance of an effective communication with the end-of-life patients. Some students said ‘I always avoided the patients when they talked about death. I wish I could give them some positive power to let them not think about the death. However, when I could not change their mind, I am usually silent. I don’t know how to talk about the death with the patients appropriately. Lacking of communication skill and appropriate attitude to death are two barriers to provide good care for end-of-life patients’, ‘I don’t know how to talk about the death, in which way, will the patients and family members be angry about talking about death and pull me out of the door?’. Some students got some new ideas from the lacking of communication with the end-of-life patients. They said ‘in China, most healthcare personnel are not willing to talk about the death with the patients. They thought doing so would make patients uncomfortable. However, does this way limit the chance for patients to talk about their needs before they die? Does it influence healthcare personnel to meet the patients’ needs well?’

3.2.4. Team working
There were 49 times that team working were mentioned in the diaries. One student described ‘I am so touched by the team work which was done by physicians, nurses, social workers, and pastors to provide good care for end-of-life patients and their family members’. Some other students also reflected the team working in the current medical settings. ‘There are many health care individuals to communicate with patients and their families, such as physicians, nurses, and some interns and attending doctors. If any of them not know the patients situation very well, they may speak out something inappropriate to the patients which could result in psychological suffering. Therefore, in order to decrease the negative influence of communication, it is very important for unit managers to think about how to coordinate these healthcare individuals to communicate with patients and their families effectively’.

3.2.5. Family supporting
There were 45 times that students mentioned about that family members should be supported as well as the patients. ‘When I saw Evan’s wife cried for his husband’s leaving, I felt that I could understand her. She didn’t want him to go, but she knew leaving was the best way for his husband which can keep him away from the suffering. I saw nurses in the video comfort and encourage family members. I will learn from them and do the similar things for family members of patients at the end of life’

4. Discussion

4.1. Storytelling could help students pay close attention to some important contents of teaching on hospice care

During the teaching and learning process, teachers always expect that students can understand the special experience and needs of end-of-life patients and their family members. Based on the understanding, students learn how to provide good care of patients by applying knowledge and skills. However, traditional classroom teaching cannot achieve this expectation well. As a teaching method, storytelling has been utilized in medical education among other countries for many years and received better learning outcomes especially in the area of chronic illness management, AIDS care, and hospice care [6,7]. Storytelling emphasizes the sharing of feeling and experiences in abundant situation, and it also highly influences students’ attitude and values [8]. In this study, results from the evaluation forms and the themes extracted from reflected diaries all reveal that storytelling has received satisfied teaching outcomes. This finding is consistent with other similar studies and verifies that storytelling can be accepted by students and it can help teachers attain some learning objectives [9,10].

In this study, the researchers utilized storytelling for 2 h and did not combined with much theory lecturing. However, the extracted themes from students’ diaries truly reflected that the information they received and the attitude and feelings they got are those expected by teachers. Based on their previous knowledge of hospice care learned in their BSN program, storytelling not only helped students recognize the importance of relieving patients’ physical suffering in further, but also made students to reflect the significance of communicating, understanding and respecting patients’ choice, the importance of team working, and support to family members. All the themes reveal that students have tried to consider the hospice care from a multiple aspects. They recognized that
many aspects in the hospice care were interacted, such as patients themselves, patients’ family, and healthcare team. By applying the storytelling in the learning process, students not only improve their knowledge on hospice care, but also feel and reflect some aspects of hospice care from an emotional level. Some studies from foreign countries revealed that digital storytelling can help students feel what the characters are experiencing in the story and what they are thinking. Many memorable pictures and touching music simulate students to have a feeling of empathy [11,12]. For example, in this study, the students had a feeling of empathy for family members, ‘When I saw Evan’s wife cried for his husband’s leaving, I felt that I could understand her. She didn’t want him to go, but she knew leaving was the best way for his husband which can keep him away from the suffering’. Thus, storytelling can combined with traditional classroom lectures to deliver knowledge, skill and share feeling and experience.

4.2 Storytelling can improve students’ critical thinking and promote their further learning

The purpose of storytelling is not to tell students the concrete ways to solve problems, but it helps students recognize the challenges people have faced to when they are in some special situations, and helps students understand how people cope with [1]. During the recognizing and experiencing process, students reflect, question and critique the inputs that result in the improvement of students’ critical thinking [1,9]. From the evaluation results of this study, 7 MSN students either ‘agree’ or ‘strongly agree’ that storytelling promoted new insights’, ‘helped me think more critically’, ‘fostered deep learning’, and ‘will help me apply this content to my practice’. At the meanwhile, 2 students had unsure feeling about ‘storytelling changed my perceptions’ compared with the other 5 students who answered as either ‘agree’ or ‘strongly agree’. These results reflect that storytelling can help students understand different perspectives and promote new insights. Upon these understanding, students compare, question, and critique the new insights they just learned with the old ones they have. During the process, some new problems are found which promote students to think more and learn in further, and apply all they have learned into the practice. Regarding the students who reflected that they were not sure if storytelling has changed their perceptions, future studies will be needed to explore.

The result of this study suggests that nursing educators in China can try to apply storytelling, a teaching method, in their teaching activities according to learning contents and objectives. Storytelling can help students experience other’s feeling and opinions, and compare with their own concepts and perspectives. Students can critique the old and new insights which may promote them to reflect and actively find the answer. The storytelling can also promote students’ self-learning and critical thinking ability. However, stories that are chosen for teaching should match with the learning objectives and students’ experience. Stories can not be too simple due to its little new information for students, but they can not be too complex as well which might confuse students to understand the inside experience and feelings. More studies are still needed to improve the utilization of storytelling in nursing education of China.

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REFERENCES