Postmodern nursing: a new challenge for nurse educators?

B. Dierckx de Casterlé, R.N., PhD.

Centre for Health Services & Nursing Research
Catholic University of Leuven, Belgium
Postmodern world

Description

Implications for nursing?

Implications for nursing education?
Description

• Growing complexity
  • Increasing number of unsolvable questions
  • Loss of guidelines and clear predictions
  • Absence era: absence of certainty, understanding & predictability

• Futility of decomposing complexity

"Newtonian paradigm"

Need of a new paradigm of thought

“Complexity thinking”

(e.g. Spitzer, 1998; Fraser & Greenhalgh, 2001)
New paradigm

- Relationships between parts are more important than the parts themselves
  - Considering parts in isolation will not lead to good performance
New paradigm

• Good practice results from minimum specifications
  • Not detailed but rich information about better practices, allowing to adapt practices in a meaningful and creative way
  • Specifications are the product of dialogue, are not perfect and will evolve over time
New paradigm

• Variation is natural within any complex system where there is interaction between many factors
  • vision that ‘variation is undesirable’, due to the desire to control the organisation/care
New paradigm

• Capability is more important than competence
  • Competence: what individuals know or are able to do in terms of knowledge, skills and attitude
  • Capability: extent to which individuals can adapt to change, generate new knowledge and continue to improve their performance
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Description

Implications for nursing?

Implications for nursing education?
Good nursing care?

• Calls for a critical & creative search
  – for the best caring answer within a complex caring context and
  – in the light of patient’s well-being (overall goal)

  Good care = ethical care

Need of creative nurses

• Who are not afraid to take risks and use non-standard approaches
• Who feel free to pursue new ideas and use their imagination
  (Gardner et al, 2008)
Good nursing care?

- Good care emerge from minimum specifications about better practices
  - Supporting nurses in their search
  - Allowing to adapt practices
  - Taking advantages of creativity and implicit or tacit knowledge embedded in the organisation
Good nursing care?

- Good care is characterised by variation
  - Variation in nursing care is natural and necessary in response to the difficult and complex situations
Good nursing care?

• Good care requires ‘capable’ professionals: reflective users of experience and expertise
  – Competence is no longer the most important ingredient in nursing
Actual nursing care?

- What’s the profession’s reply on the postmodern challenge?
- How do nurses cope with complexity in health care?
Actual nursing care?

- A strong conformist practice in daily care, especially in ethical dilemmas
  - Based on contextual or conventional factors rather than a critical reflection in light of patient well-being
    - Contextual factors: rules, medical prescriptions, norms, expectations, procedures, …
  - Determined by the environment instead of what is relevant and needed for the individual patient

- International phenomenon

Implications

• Conformism excludes a critical and creative search for the best caring answer
  – Characteristic of a conformist practice: compliance with the current/prevailing views, beliefs and conventions
  – Conventions are relevant instruments but may never be considered as an end
    • Provide framework for daily practice
    • Offer possibility to save time in favour of individualisation
    • Need to be critically evaluated within the context and in the light of patient well-being
Implications

- Conformism does not fit with the requirements of the paradigm shift
  - Requirements:
    - To be a creator of an active, caring community, where the promotion of patient well-being is the overall aim
    - able to adapt to change, generate new knowledge and to continue to improve performance
  - Conformist:
    - Being an instrument or passive participant in a fragmented system, implicitly complying with environmental requirements striving for a maximum of conformity
What’s happening?

• Reaction to the postmodern world?
  – Human tendency to reduce uncertainty and insecurity in order to survive chaos
  – Conformist reasoning and practice as attractive way out
    • Opportunities to simplify and control complex situations leading to a (pseudo) safety feeling
What’s happening?

• Health care environment as barrier
  – To engage in a critical and creative search for the best practice
  – By preventing nurses from fully translating their abilities, knowledge and motivation into performance
  – Leading to concern about not being able to provide the level and the kind of care they wish to provide
Nurses’ perceptions of care

Implicit wish: “Skilled companion”
Highly skilled, able to integrate competence in caring relationship

Reality: Medical-technical product of care
Cure
Detecting problems & complications
Caring out medical prescriptions

Nursing care environment as barrier

(Belimage, 2002)
Postmodern world

Description

Implications for nursing?

Implications for nursing education?
Challenge of the education

• Enabling undergraduate nurses to creatively use and manipulate the chaotic environment in favour of the patient
  – to effectively cope with complexity
  – to remain intellectually alive in an environment of ambiguity and change
  – to protect and use caring as a essential force of the profession in a work environment where caring values seem to be undervalued
  – practicing at their fullest scope of ability

‘Educating for capability’

(e.g. Fraser & Greenhalgh, 2001; Gardner et al., 2007; Walker, 2005)
Educating for capability

- Developing capability
  - Cannot be taught or passively assimilated; it is reached through transformational process in which existing competencies are adapted and tuned to new circumstances
  - Takes place when individuals engage with an uncertain & unfamiliar context in a meaningful way

Transformational learning

*(Fraser & Greenhalgh, 2001)*
**Transformational learning**

- Learning process that ‘transform’ individuals
  - Individuals/systems change because they learn
  - Process of developing new behaviours in the context of real life experiences,
    - Enabling students to adapt or co-evolve with new situations
    - Thereby supporting the transition from individual competence to personal capability

- Development of identity
  
a way of moving around the world “as a nurse” (Walker, 2005)
Transformational learning

• Focus on the process through which knowledge is produced
  – Student & teacher in a dynamic, interactive process
  – In a effort to develop, integrate and apply nursing knowledge promoting patient well-being

• Basis: feedback on performance
  – about the impact of their own actions and those of others
Transformational learning

• Relational learning
  – Learning how to access knowledge efficiently and how to form conceptual links between seemingly unrelated areas
  – Learning how things are connected in stead of learning about the pieces
Transformational learning

- Non-linear learning
  - Capability involves the ability to solve problems in a complex environment
    - “Checklist driven” approach of limited use
    - Intuition, imagination, creativity required
  - The imaginative dimension of professional capability best developed through non-linear methods
    - Methods in which learners embrace a situation in all its holistic complexity
Conclusion

• **Paradigm shift** of crucial importance for further development of our profession
• Nurse educators have the potential to participate in all these changing processes
• **Educating for capability** as one the most important challenges of nursing educators