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Exploring current research about the role of values for undergraduate nurses

2nd International Congress of Health Workforce Education and Research

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With thanks to my supervisors
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Exploring current research about the role of values for undergraduate nurses

Outcomes are relatable to a much broader audience in health care.

- Values in nursing were often not discussed
- Assumed in line with vocational ideals
- Behaviour was moderated by expectations of the role and understanding of what it was to be a nurse
- Learnt by example and developed a substantially unconscious set of rules often based on what felt right and what felt wrong

The purpose of values in providing quality care

- Professional values are the framework that the care nurses provide is built upon
- Articulate the beliefs and standards of the profession
- Identify the individual to the group
- Evident in the professional standards that guide role and registration standards and healthcare policies

Values support quality care by guiding and informing actions and behaviour of care givers (McAllister et al., 2015a)

How are values evident in nursing education?

- Australia - Values in some form are evident in nursing education to meet the requirements of the registration body
- Formative years – students begin a “values journey” (Callwood et al., 2018) where professional values are learned through
 - Educational components being specifically designed to transition the individual through the process of adopting
 - Clinical experience provides role modelling and a chance to practice

Internalisation of professional values is a crucial aspect of the development of professional role identity (Fisher, 2014)

What this looks like

First year students

- Have ideas about caring role
- Have expectations of the way they will be able to carry out their role in line with their values

Third year students

- Have experience juggling what they have learnt with what they have experienced
- Have a greater understanding of the language
- May not have been able to reconcile the gap between intention and reality

Research purpose

What do we know about undergraduate nursing students values?

What do we know about how they develop – inhibitors and facilitators?

What do we know about the impact of the educational process on value?

Research plan

What does the literature say about values in undergraduate nursing in the last 10 years?

- What research had been done?
- What did it tell us?
- What understanding do we have of the development of values in the student nurse?
- Are there facilitators and inhibitors identified in the research?

Literature review

- Key words - student nurse, values, education
- 46 papers from 2009 – 2019
- 11 countries + 3 collaborations

Exclusion

- One specific value or where values were concerned with the development of a single value, for example compassion
- Part of a larger body of research for example ethics

Research findings

Quantitative

22 used NPVS or NPVS-R Weiss & Schank (1999)

- Clarity around values
- Values orientation
- Allows demonstration of alignment with professional/industry values

Qualitative

Various approaches

- Clarity around values
- Smaller groups and more complex findings
- Programme/curricula design

What the literature says

The identified literature falls in to four themes.

The influence of CONTEXT on values

- I. Intrinsic - What the individual brings with them (exploring values in relation to culture, ethnicity, age, gender and personal values).
- II. Extrinsic - The context in which the individual is situated (type of qualification, type of educational institution).

The influence of EDUCATION on values

- I. Implicit - The values education that occurs within the fabric of the educational degree including practicum.
- II. Explicit - The way values are taught or the approach taken where a specific model or theory is either proposed or trialled.

Intrinsic – exploring one group

I. Intrinsic – culture and/or ethnicity

- Single country
 - Determine baseline information on the values held by student nurses in that country
 - The best ways to explore these – use of particular surveys and considerations of demographics of the country.

Findings – professional values consistent with those of the profession and value orientation in line with expectations of the researchers within that country

(Bang et al., 2011), (Boozaripour et al., 2018), (Donmez & Ozsoy, 2016), (Moon et al., 2014), (Ulusoy et al., 2018).

Intrinsic – culture and/or ethnicity

- ❖ Comparison of countries – Core values were similar
 - Taiwan with USA - cultural traditions that emphasise either individualism or collectivism. (Alfred et al., 2013)
 - USA and Turkey - differences in commitment to the profession USA prioritise choosing work they feel most suited too while nurses in Turkey prioritised standards of living. Alkaya et al (2018)
 - Taiwan and China – same ethnicity but 38 years of political/cultural separation. Lin et al in (2016)
- ❖ Comparisons within one country - Core values were similar
 - different ethnic groups in Israel some variations of values in line with the cultural differences (Rassin, 2010).
 - regional areas in South Korea some variations of values in line with the cultural differences (Bang et al., 2011)

Extrinsic –The context in which the individual is situated

Demographic information included in various studies was able to establish the influence on an individual's values by such things as

- religion (Boozaripour et al., 2018) (Shafakhah, Molazem, Khademi, & Sharif, 2018)
- economic status (Poorchangizi, Farokhzadian, Abbaszadeh, Mirzaee, & Borhani, 2017) (Kaya, Isik, Senyuva, & Kaya, 2017),
- past experiences and personal beliefs (Rose, 2017),
- self-esteem (Iacobucci, Daly, Lindell, & Griffin, 2013),
- the influence of nursing instructors (Shafakhah et al., 2018)
- academic achievement (Poorchangizi et al., 2017)

However

Bang et al (2011) demonstrated no correlation between values and age, gender or academic performance (Bang et al., 2011) or

Fisher (2014) no correlation between values and any demographic variables.

Extrinsic –The context in which the individual is situated

- ❖ The type of qualification or institution

No predictable influence on values when measuring the overall scores between the three different types of UG Registered Nurse training in the USA (Fisher, 2014) or Diploma conversion and accelerated BN degrees in the USA (Grobbel et al., 2016) and (Koomey et al., 2015)

- ❖ Level of qualification

Conformity of values between student nurses and registered nurses groups. Clark (2009) LeDuc and Kotzer (2009) and Riklikliene (2018)

Implicit - The values that occurs within the fabric of the educational experience

- Student nurses values are consistent over the length of the degree. Donmez and Ozsoy (2016) Kaya et al. (2012) Rassin (2010) Rose, (2017)
- Some differences seen in specific areas such as professionalism Lin et al. (2010) Çöplü et al. (2018) and activism Posluszny (2017).
- Only one study found a statistically significant development in student nurses perception of professional values in a cross-sectional analysis of first and fourth year students Kantek et al., (2017)
- The way in which students described enacting these values changed as Callwood et al. (2017) Callwood et al. (2018) Lyneham and Levett-Jones (2016)



Explicit - The way values are taught

- ❖ The approach taken where a specific model or theory is either proposed or trialled.
- ❖ Trials provide good evidence for support of specifically designed programmes or curricula that enhance values development.
- ❖ Increased interest in non-traditional ways of engaging student nurses in values learning
 - Literature (novels, poems)
 - Case studies or stories from patients or nurses
 - Media (TV, movies)

Research findings - summary

The influence of CONTEXT on values

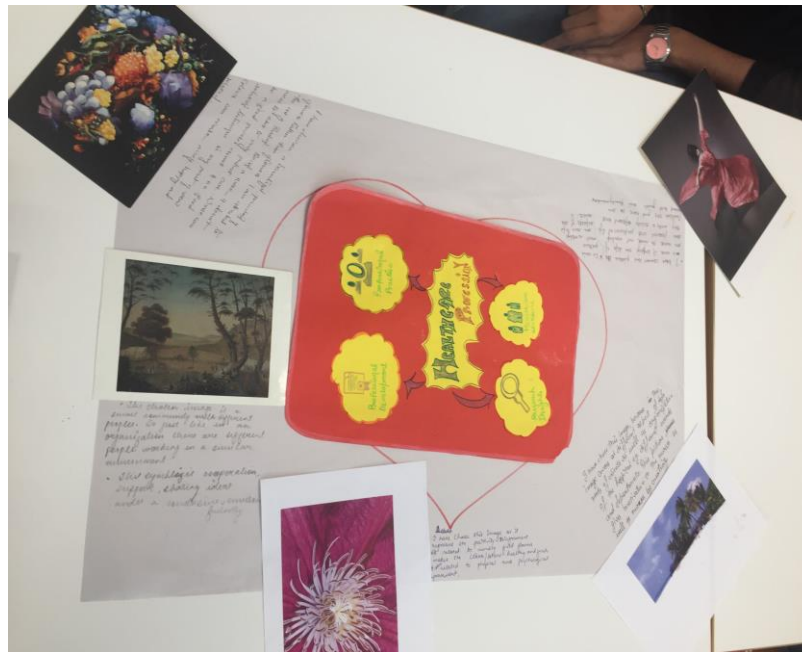
- The only influencing contextual factor that consistently demonstrates differences in student values is that related to culture. It seems that culture does make a difference. More than educational level, age, gender or seniority.

The influence of EDUCATION on values

- The influencing educational factor that consistently demonstrates differences in student values is participation in the educational degree regardless of the qualification – this points to the strong socialisation powers of simply being in the role.
- The outcomes of interventions designed specifically to enhance value development enhance this evolution

Summary

At the heart of this research lies the individual - How do we use all of the knowledge we now have to become person centred in our care?



Conclusion

It is imperative to our sense of belonging and our ability to flourish, to have a deep understanding of our own values, to be able to predict difficulties and to have the skills and confidence to be able to work in person centred ways in the complex health environment.



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