Photography and Reflection: A study exploring perceptions of first year nursing students towards older persons.

Abstract

Nursing students’ exposure to clinical placements with older persons is instrumental in helping them adopt positive attitudes toward their care. This qualitative pilot study analysed perceptions and expectations of a group of first year students prior to an aged care clinical placement. A photo-elicitation technique was used, whereby the participants viewed realistic photographs of older persons being cared for to help them clarify expectations. This was followed by thematic analysis of their perceptions and expectations. Analysis revealed five main themes: students dissecting what it must mean to be a nurse; revisioning therapeutic relationships in terms of dignity; youthful reflections on the differences between young and old; feeling challenged and confronted; and experiencing sensitivity and awkwardness to older persons’ nakedness. Engagement with images of older people encouraged the students to anticipate clinical placement in an aged care setting in a more meaningful, reflective way than they may have done without prior exposure, suggesting a need for realistic pre-practice education.

INTRODUCTION

Clinical placements engage nursing students to think, behave and feel like a nurse. During clinical placements the culture and ethos of nursing with its complexities and challenges are discovered, often for the first time. Anecdotal evidence suggests that this can be both terrific and terrifying, with students reporting that it can change the way they view the world (Levett-Jones & Bourgeois, 2007). This exploration of nursing students’ perceptions and expectations of aged care nursing prior to their first clinical placement was intended to facilitate a personal exploration of what it means to be a nurse in the context of elder care.
An increase in the older population and a demand for nurses in the aged care sector has prompted an increase in research exploring why nurses are not choosing aged care as a career (Abbey, 2006). Happell and Brooker’s Australian study (2001) investigated the career preferences of Year 1 nursing students from nine undergraduate nursing education programs, finding that caring for older adults was the least popular career choices. Students explained this as boring and unpleasant work, and being frustrated from lack of ability to cope with this specialised area of practice. Adoption of positive attitudes in nursing students is a major challenge for all those involved in preparing students for their first clinical placement with older persons. One way of responding to this challenge is to use creative teaching strategies; for example, maximising personal and aesthetic ways of knowing to help students develop a more reflective approach to caring for older persons. Aesthetic knowing involves perception, empathy, insight and understanding the lived experience of people.

Ways of Knowing and Learning Strategies

Price, et al. (2007, p. 159) encourage development of aesthetic knowledge through the integration of arts in nursing curricula, suggesting that “aesthetic knowledge enhances one’s ability to achieve harmony and healing”, in that art forms can enhance aesthetic knowing by seeking what conveys meaning for each person. Using another approach, a study by Orland-Barak and Wilhelem (2005) in Israel, elicited 24 student stories of clinical practice, interpreting students’ perspectives through discourse analysis. Most described the development of scientific empirical knowing, but neglected to include reflection. Their stories focused on performance, indicating a focus “on the outcomes of caring rather than on the processes of caring, and on curing the patient rather than caring for the patient” (p. 459). The researchers concluded that education providers should be drawing attention to a more integrated, multidisciplinary approach to practice and encourage links between interactions, actions, thoughts and feelings (Orland-Barak & Wilhelem, 2005). This is a challenge in the
current context of research and education which are clearly focused on outcomes (Hickman, Newton, Halcomb, Change & Davidson, 2007). Personal knowing is an essential element of nursing practice, as it is based on self-awareness of one’s own perceptions and attitudes, and their influence on actions (Berragan, 1998). Recent research indicates that working with nursing students to personalise their expectations and experiences can create positive images and attitudes to nursing older people. Brown, Nolan and Davies’ (2008) longitudinal study sought to explore student experiences in aged care placements throughout their education in four Schools of Nursing in the United Kingdom to identify factors that can create more positive experiences and holistic views of gerontological nursing. Survey and focus group data revealed a change of focus over time, especially where students were able to relate the experiences of older people to their own lives, which was the key to them viewing older people as people (Brown et al., 2008). This has substantial potential in promoting therapeutic nurse-patient relationships. It is also relevant to their understanding of the meaning of ageing, in terms of its value and place in human existence, which according to Brooker (1998) is “a pivotal concept in determining quality of health and quality of life for older adults” (p. 46).

Another concern is that nursing students may be underprepared educationally for the realities of ageing, particularly in performing intimate general nursing care. This is highlighted in Lawler’s (1991) Australian study where her interviews elicited students’ recall of the first time they had to “do for someone else what that person would normally do for themselves” (p. 120). Most identified sponging a patient as a highly significant act, one in which they retained vivid memories and a major milestone in confronting the reality of nursing. To date there is an inadequate body of knowledge on the extent to which students are appropriately prepared for the reality of clinical practice with older persons. In examining students’ perceptions and expectations prior to clinical placement the study reported here attempted to illuminate one aspect of practice preparation.
Methods

Ethics approval for this research was obtained from the University Human Research Ethics Committee. Participants were given an information sheet describing the purpose and process of the study, and all signed informed written consent to participate. This study was conducted within the interpretive paradigm, using a qualitative exploratory design. Non probability, purposeful sampling was used to recruit participants from one university in Western Australia as is typical, in exploratory, naturalistic research (Taylor, Kermode & Roberts, 2007). This research was a pilot study conducted to examine whether the students responses warranted a larger research study.

Sample

One of the researchers (GB) attended a first year lecture, briefly explaining the purpose and processes of the study. The sample of students invited to participate was drawn from those undertaking their first clinical placement in aged care. Inclusion criteria included English speaking male and female students from any cultural background aged between 18 and 25 years who were enrolled in first semester, first year. Seven nursing students (18-21 years) volunteered for the study. The researchers invited a younger group of participants aged 18-25 years, as previous research found that very young nurses under 25 years of age displayed less favourable attitudes and feelings towards older persons (Soderhamn, Lindencrona & Gustavsson, 2001).

Data Collection

An anonymous demographic questionnaire was used to reflect demographic data including age, gender, ethnic background, and previous work experience with older people. The questionnaire required that participants identify a person over 65 years of age with whom
they shared a close relationship. Those who answered this question in the affirmative were required to complete a 5 point Likert scale identifying the quality of this relationship with the older adult. By using this descriptive instrument, the researcher was able to gauge whether the research participants had already developed positive or negative attitudes and experiences of older people.

Following completion of the demographic questionnaire, individual semi-structured interviews were conducted with each participant by one of the researchers (GB) using a photo-elicitation technique. This technique involved using a series of photographs as an interview stimulus to promote depth of discussion and to evoke an emotive response from research participants (Collier J. & Collier M., 1986). Permission to use the photographs was granted in writing from the photographer, who had previously been granted permission from each photographic subject to use the photographs for a prior publication (Knowles, 2006). Five photographs were chosen by the researcher because of the realistic images they portrayed of performing nursing care on both male and female Caucasian aged care residents, including images of a nurse transferring an older person on a hoist, shaving, dressing and showering. Photo-elicitation has been described as a powerful research tool for reflection; it can encourage a visual language, build trust and rapport between researcher and participants and promote a more in-depth, lengthy and detailed interview (Hurworth, 2003). The interviews included the same reflective questioning prompts for all five photographs. This is a type of guided reflection that enables participants to realize their own beliefs and values, often achieving empowering and emancipatory insights (Johns, 2002).

The interview questions were piloted with a small group of health professionals prior to interviewing participants. This allowed refinement of the semi-structured photo-elicitation interview techniques, reflective questioning prompts, and it helped confirm the efficiency of the process. One minor change was made in refining the prompts, and the sequence of the
photographs was altered. Less confronting images were shown to the participants first (feeding a resident) to assist with participant comfort and sensitisation, with more challenging images (showering a naked resident) presented last. Then the following interview questions were included for each photograph:

1. When you look at this photograph what do you see?
2. What do you think the story is behind this photograph or what has been happening leading up to this event?
3. When you look at this photograph how does it make you feel?
4. How do you think the nurse feels about this situation?
5. How do you think the resident feels in this situation?
6. How do you think you will feel as a nursing student in this situation?

Each research participant attended an interview in a small private interview room. All interviews were conducted over a two week period at the university.

**Analysis**

Demographic data were analysed, and linked with participants’ previous experience with older persons. The interviews were transcribed and thematic analysis was conducted manually, reading and re-reading the data and analysing each transcript in turn to identify primary codes. Coffey and Atkinson (1996) recommend moving from coding into interpretation in various stages. The first stage is retrieval and categorization of data where both explicit and implicit themes are identified. The second stage is exploring, playing with, splicing and linking created codes and categories. The provisional codes were re-examined in an iterative process, wherein, after checking back and forth across the codes and categories the main themes of the data were identified and reviewed by both researchers. The analysis process continued with all participants’ data until saturation occurred; that is, no new themes
emerged. All research participants reacted to the photographs in a consistent, similar approach. Responses from the reflective questioning prompts provided common insights and comments from all nursing students.

1Results

Demographic Characteristics

Six of the seven participants in this research were female and one participant was 18 years, two 19 years, two 20 years and two 21 years respectively. Four of the participants were Australian with the remaining participants originating from China, Zimbabwe and Singapore. All seven participants had completed secondary education (Year 12 equivalent).

Previous Work Experience and/or Relationship with Older People

Only one of the seven participants had previous work experience with older people. As discussed in the literature review, Happell’s (2002) research study found that nursing students who have part-time employment in an aged care facility could further contribute to negative attitudes to caring for older persons. This information was required to determine if previous employment in an aged care setting had influenced the nursing students’ attitudes to aged care nursing. Five of the seven participants had a close relationship with a person over the age of 65 years. Two of the five participants rated this as a very fulfilling relationship and the remaining three rated it as fulfilling. The majority of participants in this current study reported a fulfilling relationship with an older adult and, therefore, they may have more positive attitudes towards aged care than those who did not relate to an older person in their personal lives.

1 For direct quotes the abbreviation P1, P2 etc is used.
Themes

Qualitative analysis generated the following five major themes:

1. Dissecting what it means to be a nurse; including recognizing dependence.
2. Re-visioning therapeutic relationships; including considering patient dignity.
3. Youthfully reflecting on the differences between young and old; including fearing for self in future.
4. Feeling challenged and confronted; including realising the responsibilities of performing nursing care and believing they lacked emotional preparedness.
5. Experiencing sensitivity and awkwardness to nakedness of older person’s bodies.

Theme One: Dissecting what it means to be a nurse

This study revealed students’ emerging visual interpretation of the photographs through novice eyes. Making sense and dissecting what it means to be a nurse was apparent in their responses to photograph one, a nurse feeding an older person in bed. “What do you think the story is behind this photo?”

Umm since the lady cannot feed herself, I think she has become wholly dependent. She may not mentally be there. She is not looking at the lady feeding her so I would think that she is probably suffering from dementia or maybe she had a stroke or something. (P1)

This lady, it’s like she can’t get out of bed anymore and she is totally dependent on someone. Someone is taking care of her and giving her like fluids and stuff so she probably can’t really swallow, her gag reflex isn’t that good. (P7)

It was evident that encouraging interpretive and assessment skills through the photo-elicitation technique prior to clinical practice helped students link theory and the reality of practice, thereby addressing the theory-practice gap. This link and the recognition of the breadth of nursing is illustrated in the following statement:

It just shows the reality of what I will be doing. We do the theory and then you see the pictures and it is like that is what I am going to be doing. It just puts you in the mind frame that you just need to get used to it and that it what I will be learning to do. (P3)
Theme Two: Re-visioning therapeutic relationships

If the essence of quality nursing care lies in the nurse-patient relationship, students need to recognise the significance of a therapeutic reciprocal relationship with the aged care residents and reflect how they are going to relate to older people in their aged care placement. On viewing the photograph of the nurse hoisting a patient, one participant described the nurse-patient relationship as follows:

I mean it is an inter-relationship between the carer and the old age woman: how they are working together, the joys of it. Even though they are using a machine to help means it is all in the interest of the old age woman but at the same time the carer has got a duty of care to support this woman. So the moral of this is working together, doing a job and trying to enjoy it. (P 5)

Candin (2008) describes empathy as being ‘with’ the patient. This understanding of feelings and spirit was encouraged in participants to be willing to ‘walk in the resident’s shoes’. This empathy was evoked in participant responses to all five photographs when asked: “How do you think the resident feels in this situation?”

Maybe he feels frustrated that someone else is doing it for him and he can’t. (P4)

She may feel kind of depressed about it. Like it is a loss of dignity, not being able to perform tasks that you would see as normal for yourself. (P1)

Theme Three: Youthfully reflecting on the difference between young and old

A youthful voice was illustrated in these study participants’ responses:

Because of how disgruntled she looks, I would say she hasn’t been there that long and she is still getting used to the idea of wearing a nappy....I think if I was wearing such a thing, I would prefer to be out of it, I mean suffering from dementia so I wouldn’t know. (P 1)

I would freak out at first (nervous laughter). I don’t know it is just that cause if you think if that was me, I wouldn’t like anyone doing it. But you have to do it. (P4)
**Theme Four: Feeling challenged and confronted**

The majority of participants showed signs of being challenged by the realistic images of the nursing care they will be providing to aged care residents. This was evident in emotive and personal reactions to the photographs. In response to photograph five (showering the naked older resident), participants’ spoke of this anxiety:

*I would be very distraught before we left the bed. I think just to move her there because she looks so ill.* (P3)

Most verbalised concern at being a novice in performing skills in a new clinical environment. An increasing awareness and knowledge of their scope of practice and making clinical judgements was illustrated in the following comment:

*I will definitely need someone with me (nervous laughter) I will have to anyway, I will need extra help because I don’t know how to work one of them (refer to hoist)* (P4).

**Theme Five: Experiencing sensitivity and awkwardness to nakedness of older persons’ bodies.**

Many participants expressed concern over performing general nursing care, specifically intimate care, as illustrated in the following responses:

*It will be one of those things (dressing patient). You try and dress them and then look away and because you want them to feel like you are not watching. But I know I have to and I am not sure how to describe that feeling* (P3).

*I think it will be really confronting because we are so young like as a group. But I think I will be alright showering ladies but I will be really uncomfortable showering men because I think that is just a part of most societies you are allowed to see other women naked but you are not allowed to see other men naked. Seeing someone naked is like a sexual thing but then you need to go in and care for these people. I think if they are not part of your family they probably don’t want you to see them naked either so I think it will be confronting and it is the most daunting thing about going into nursing is going to be the showering and toileting. I think most people can feed a person, most people can talk to a person, most people can make a bed you know but I guess it is make or break you know.* (P2)
Discussion

The results of this exploratory pilot study provided rich data from the nursing students in the beginning stages of the ‘making sense’ of aged care clinical experience and support the findings of previous studies. It was evident from the students’ novice interpretations that they were dissecting what it means to be a nurse as they engaged with the images. This is consistent with Orland-Barak and Wilhelem’s (2005) study of nursing students’ stories of clinical practice. These authors’ analysis found the use of procedural language and a focus on ‘action’ rather than ‘interaction’ were factors shaping their perspectives towards learning. They argued that integration of thoughts, actions and feelings will produce a more self aware nurse who will be better prepared personally and professionally to deliver holistic nursing care. During the interview process the majority of participants in our study commented or showed signs of being challenged by the realistic images of the nursing care they will be providing to aged care residents. Encouraging interpretation and assessment skills through the photo-elicitation technique in nursing students prior to clinical practice, helps link theory and the reality of practice. This positive professional socialisation into nursing is paramount with young first year nursing students as it sets the groundwork for their future value, vision and transition to nursing.

One of the core competencies for registered nurses in Australia is the establishment, maintenance and appropriate conclusion of therapeutic relationships (Australian Nursing and Midwifery Council, 2005). These include the demonstration of the core nursing skills of empathy, trust, respect, as well as humanistic nursing approaches to promoting dignity, integrity, comfort and self esteem. Re-visioning the role of the nurse in developing therapeutic relationships was reflected in all of the participants’ responses as they began to ‘make sense’ of what it means to be a nurse. Participants used words such as ‘helping’, ‘caring’, ‘nurturing’ and ‘empathy’ to describe the role of the nurse in the photographs
performing general nursing care for the aged care residents. Clearly the images precipitated development of feelings of empathy. This is consonant with the longitudinal study of nursing students’ experiences of their aged care clinical placements conducted by Brown et al (2008), which found that there are many ways students’ experiences can be enhanced. Brown et al’s (2008) analysis of focus group data identified that nursing students’ focus varied depending on the placement as well as the course progression. This study supports a focus on strategies that can prepare and assist the student to move past ‘self’ as focus, overcoming the anxiety barrier to learning. This could help them focus on person-centred care and relationships, which is the essence of therapeutic relationships.

Understanding the realities of ageing can be challenging when you are young. Comments from these young participants demonstrated a search for the meaning of ageing and fearing for self in the future. These ageist views are accentuated with younger health professionals who find it tough to imagine themselves in old age and therefore block it from their consciousness (Brooker, 1998). In this current study, photo-elicitation techniques provoked critical reflection and encouraged the re-visioning of core nursing values, including kindness, respect, compassion and dignity, all of which enhance practice when caring for older persons. This type of reflective practice encouraged the students to widen their youthful lens and through expressive dialogue explore their expectations, fears, biases, assumptions and stereotypes of older persons. This process of maturing as a nurse can be a powerful transition for the nurse personally, and therapeutically, by helping facilitate a shift in society’s attitude towards older people.

All participants expressed feelings of excitement, nervousness, inexperience and isolation as well as elements and emergence of anxiety, self-doubt and apprehension. Feelings of responsibility and a new awareness of the realities of nursing evolved as they started making ‘sense’ of and took on new meanings of what it is to be a nurse. Most believed
they lacked emotional preparedness for their clinical experience in an aged care facility. This lack of preparedness was highlighted in Abbey’s (2006) descriptive qualitative study of undergraduate nurses following an aged care practicum. Her study sought to explain why aged care placements are often unsatisfactory and deter nursing students from choosing aged care as a career pathway. She queried whether students are inevitably indifferent to or actively dislike residential aged care nursing, or whether they are just poorly prepared for it. Her findings led her to conclude that one of the main sources that impact on these negative experiences is the silent beliefs and values held by the students that have not been challenged or brought to the surface of their self-awareness (Abbey, 2006).

These findings have highlighted the lack of emotional preparedness of this group of first year nursing students for new clinical placements. The majority of nursing students voiced experiences of reality shock and anxiety including an expression of awkwardness and sensitivity to nakedness of older bodies in the photographs. Lawler (1991) encourages nurse researchers to make bodily care more explicit to better understand the context of the body and social life. She calls this “the problem of the body”, in that “nurses’ work presents them with some very real social difficulties both in practice and in social life, as well as presenting theoretical difficulties for the discipline and its relationship to other disciplines” (p. 3). Despite the common knowledge that nurses deal with intimate body care, the explicit details of this nursing role is not well documented.

**Limitations of the Study**

One of the limitations of this study was the lack of randomly selected participants, which is typical of interpretive research. The possibility of bias could also have affected the results, as with a convenience sample those nursing students who participated may have pre-existing strong positive or negative views of aged care nursing. The study was also confined to
participants from one tertiary institution in Western Australia, precluding any claims for generalisability.

**Implications for Nursing Practice**

These findings have important implications and provide credible information for educational providers to consider ways to better prepare nursing students prior to clinical placement. Sensitising them to the experience of confronting nakedness and the reality of what older persons look like suggests that educators explore a range of issues that may interfere with students’ interactions with older people. This type of anticipatory reflection, accompanied by the opportunity to safely discuss any issues they may have encountered may provide a better learning experience than simply dispatching the students to the placement and debriefing them on their responses later. This resonates with what Clarke (2006, p. 24) suggests is a re-visioned nursing pedagogy, one which encourages educators to “transform from being the conveyors of information and knowledge to the facilitators of individual students’ evolutionary growth experience”.

In this research the photo-elicitation technique prompted the kind of expressive dialogue that helped prepare them for their initial exposure to aged care nursing therefore; we recommend the inclusion of realistic pre-practice exposure prior to nursing students’ first clinical placement in an aged care setting. Re-visioning nursing pedagogy in this way, along with cultivating a learning climate that values aesthetic and personal knowing in nursing may help overcome any disinterest in choosing a nursing career in the aged care sector. Averill and Clements (2008) support this recommendation by advocating “the need to reenergize and reorganise the learning experience” (p. 387). A maturing emotional competence within first year nursing students acquired in a safe, non-judgemental environment may improve the student’s readiness and preparedness for clinical practice and overcome any potential barriers
to learning. Nurse educators are ideally placed to demonstrate a responsibility and commitment in assisting nursing students’ self development and encourage thoughtful reflective practice that results in the delivery of high quality nursing care for older persons.

**Implications for Nursing Research**

Additional research in the links between developing emotional competence and preparedness of nursing students for clinical practice could add valuable knowledge to nursing education and curriculum planning in the future. We also recommend further use of photo-elicitation, which proved a valuable research data collection technique, evoking an emotional response in participants and encouraging them to reflect on their perceptions of older persons at a deeper level. It is recommended in future research that the photographs selected represent the full continuum ranging from images of independence to dependence of older persons in the aged care setting. This more inclusive approach may also assist students to overcome their personal stereotypes or ageist perceptions of working with older persons.

Photo-elicitation and anticipatory reflection would also be valuable tools to use in different clinical settings, and this would be a desirable area for future research. Further research could also include collecting both pre-placement and follow-up data after students’ first aged care clinical placement, as this would provide a more substantial foundation to evaluate photo-elicitation as an educational intervention. This preliminary pilot research study showed that by encouraging nursing students to ‘look forward’ and envision what it means to be a nurse the participants developed the unique ability to address the realities of nursing by dissecting the role of the nurse, recognising levels of dependency and identifying personal perceptions that may impact on their therapeutic nurse patient relationships.
Conclusion

It is essential in this time of demographic change and the growing ageing population that nursing education is responsive to the challenge of meeting the workforce need for qualified, experienced aged care nurses. Re-visioning nursing pedagogy in terms of aesthetic and personal knowledge development has the potential to assist in this process. By illuminating the reality of nursing practice an exploration of the sense of becoming a nurse becomes more tangible. Strengthening novice nursing students’ personal and professional capacities with an enriched holistic participative learning environment can help integration of the ‘knowing’ with the ‘doing’ and provide older persons with a nurse who can ultimately facilitate healing and health.
References


