

Flip to Text Version

[Print this page](#)

## APPLIED THEATRE RESEARCH, GRIFFITH UNIVERSITY AND IDEA

---

APPLIED THEATRE RESEARCHER ISSN 1443-1726 Number 3, 2002

### Article No.4

### Reflection of Drama in Nursing Education in Sweden

**Margret Lepp**

#### Abstract:

Dracar (Drama Caring and Reflection) is an educational development project in the nursing education at the School of Health Sciences, University College of BorÖes, Sweden. In order to improve the learning process of caring science, a reflective supervision has been developed, with the means of drama in education. This article highlights the role of drama concerning reflective supervision in nursing education. Academic staff specially trained in drama education, guide students to manage life experiences from the caring arena effectively in a holistic perspective.

#### Biography

*Margret Lepp is an assistant professor at the University College of Health Sciences in BorÖes, Sweden. For over fifteen years she has involved drama in her work as a researcher and a consultant involving academic staff, nurses and students. She is a pioneer in the Swedish Health Care system advocating better understanding and quality services in the Health Care arena with the means of drama. She has been engaged in the international development of drama research for many years. Her research includes drama for conflict management, reflective supervision and cultural understanding. She is co-editor of: Drama for Life. Stories of Adult Learning and Empowerment.*

#### Corresponding Author:

Assistant Professor Margret Lepp  
School of Health Sciences  
SE-501 90 BorÖes  
Sweden  
Tel: + 46 33 16 43 52  
Fax + 46 33 16 40 10  
margret.lepp@hb.se

#### Article:

### Reflection of Drama in Nursing Education in Sweden

#### Introduction

Problems of education are often related to the lack of coordination between theory and practices. Nursing students do often experience difficulties in incorporating theoretical knowledge in practical situations. This is a common problem experienced internationally (Skancke Bjercknes & Torunn Björk, 1996; Pilhammar-Andersson 1991; Rooke 1994; Ekebergh, 2001). The span between theory and practices has consequences for the learning process. As a reflection this span affects to influence studentsâ ability to develop a meaningful comprehensive understanding and professional knowledge that stems both from theory and practice. Therefore it is difficult for the learner to gain knowledge in only clinical situations that is conscious and reflective. To implement the real knowledge of caring science in both theoretical and practical

dimensions an integration of theory and practices are obvious features.

Therefore the Dracar project (Drama Caring and Reflection) has developed a reflective supervision program to improve the learning process of caring sciences with the means of drama education. Dracar is an educational development project in the nursing education at the School of Health Sciences, University College of BorÖes. The aim is to discover, examine and evaluate an educational development process that helps students to integrate theory and practice in caring science.

### **Reflective supervision**

The knowledge obtained in theory must be modulated in a complex clinical situation in order to be useful. Therefore it is essential for a mutual encounter between theory and practice. The embryo must come from the concrete caring reality. In other words it is the experience of the nursing students caring reality. This is in order for the students to experience a rich interaction between theory and. This also will increase the knowledge of patient centered care and a meaningful comprehensive understanding of the wholesome care system.

Further a method is developed to support a learning situation that intends to unite theory and practice, a form of supervision that encourages a reflective attitude of the students. This practice of supervision is incorporated with drama education where patient perspectives and the caring science prescribed knowledge are clearly visible. The theoretical knowledge is therefore subject to research and development process in a caring situation in reflection to patient perspectives. These conditions are thereby genuinely acceptable by the health care system personal and care provider with life knowledge that comprise from a comprehensive health care perspective.

The most emphasized parts of supervision are reflection and distancing (Emsheimer & Gšhl, 1996). Reflection can take part in a dialogue which is a form of distancing (Bengtsson, 1993). This reflection, which predisposes a kind of distancing, is the core of supervision and the ground for development of experience based knowledge. Reflection is related to the content of "quiet knowledge", practical knowledge (Benner, 1984; Polanyi, 1966, 1978; Rolf 1991). Drama workshop provides opportunities to self-reflection. Reflection on oneself in the dialogue between fellow students and their teacher in a group is possible in drama (O'Toole & Lepp, 2000).

### **Life-world perspective**

A perspective that describes how various aspects of reality are experienced by people, can be understood as a life-world perspective. It deals with a social, cultural, linguistic and historical world that is dynamic and changeable. Drama work usually stems from a life-world perspective (Courtney, 1990, 1995 ). The ontological perspective within drama includes all aspects of human endeavour. According to Merleau-Ponty's (1995) life-world experience, an emphasis of the inter-subjectivity and the communication between people is included. In nursing practice the goal is the individual patients growth and health. The core concept is understood as an inter-subjective and meaningful I-Thou meeting (Buber, 1970) between patient and caregiver in which the growth of the patient is of primary importance.

In this project, drama is used within the frame of supervision where the students mostly work with role-plays. The substance in the drama work comes from the life world experience. The life world in this context means students in different caring situations, with their patients and their perspective in focus. The School of Health Sciences of BorÖes has already developed a foundation stone for caring sciences. That foundation milestone is built upon patient perspectives. These situations can be made fictive for learning, reflection and cultivation as well as to be related to caring concepts and theories in education, depending on the context of care. Drama inspires the participants to be curious to investigate and try to understand different perspectives in caring situations, especially the patient's perspective and the caregiver's. The life-world, which Husserl (1970) recognized as the foundation of all sciences implies an epistemology for holistic nursing research in which the question of meaning is primary. Holistic nursing research seeks to understand the meaning implicitly in the everyday of the real life-world experiences of the patients and the care provider.

### **Earlier research**

There has not been a similar project in healthcare education in Sweden according to a literature search. The first and only project involving drama in nursing education is the research study of Lepp (1998). This study was focused on the student's perspective of what constitutes effective and adequate training related to personal development (empathy, communication, cooperation, self-knowledge and self-esteem) and

professional growth. The aim was to describe how drama in training is experienced by student nurses and nurse tutors.

More than half of the students felt there is a connection between participating in drama, personal development and their future profession. More than half of the student nurses and the majority of the trainee nurse tutors did feel vitalized and better prepared for their future profession as a result of their experiences in drama education. The group of nursing tutors experienced drama as an educational method that suited to their future profession better than other, more conventional methods. Some student nurses and trainee nurse tutors did feel that there is no connection between participation in drama and their own personal development or their own preparations for the future profession. They gave the following reasons; too little time for the drama activities, too few specific drama exercises and personal factors that can be related to life experience.

Some implications in the field of pedagogy in nursing and education that could be drawn from the study were the following:

Drama is a mode of learning for students to identify problems through imagined roles and situations. The participants learn by exploring issues, events and relationships.

Drama projects situations within two worlds simultaneously - the real world and a fictitious world. The double perspective in drama provides the opportunity for learning, as it gives an increased insight into and understanding of different worlds.

Drama provides possibilities to supervise students on direct life experiences in relation to caring practice.

Drama can be used as a powerful tool for promoting growth of ability and professional competence of the students.

### **Project design**

This project is sponsored and financed by the Swedish National Agency for Higher Education and Council for the Renewal of Higher Education in Stockholm. The project was planned for three years starting autumn 2000, and will be evaluated by questionnaire and interviews at every level each year. During this period, every academic year the nursing students intend to take part in reflective supervision within three different caring contexts such as; a group in the school, a group in an acute care setting and a group in an educational ward. After each meeting the students answer a questionnaire regarding the supervision process and their experiences. Data is also collected by tape-recorded audio interviews with students and nursing teachers using a phenomenological approach. As a preparation for supervising the students the teachers take part in a special training program.

### **Training program**

The teachers follow continuous theoretical and practical supervision. The training includes a series of programs such as seminars highlighting relevant literature, group discussions, findings and agreement, hypothesis and drama-workshops. All themes are covered in relation to caring sciences. This program consist of six major themes as illustrated:

- Theme 1. Introduction to drama
- Theme 2. Basic drama exercises
- Theme 3. Improvisation
- Theme 4. Role-play
- Theme 5. Forum-theatre and nursing-play
- Theme 6. Reflections from practicing theme 1 to 5.

### **Introduction to drama**

Parts of Theme 1.

Introduction to drama, for example, is an illustration of the training program establishing the contents of drama related to caring sciences and creating safe space.

Drama related to caring sciences The participating teachers may not be experienced in drama and may not either hold a degree in drama. Therefore the first meeting begins watching a video film; "Reflections in the

River, IDEA '95. Drama, theatre and education in a changing world. The IDEA Advocacy Video". The following questions were initiated before watching the film:

What does Drama has to do with Caring Sciences?

Is it possible to have a life-world perspective while using Drama?

Is it possible to make the students and patients perspective explicit through Drama?

Can patients suffering and wellbeing be made explicit through Drama?

What role does the subjective body play in Drama?

Conclusions are made from the group discussion. Drama is about life experiences from amongst human beings characterized by improvisation and different forms of role-play. Drama helps one to get the opportunity to tell one's own story. Using drama to integrate theory and practice in nursing education allows many possibilities to prepare the student to expertise for profession in health care arena.

### Creating safe space

The participants introduce themselves and get to know each other. The objective is to create a safe space and positive learning environment. Safe space in our educational environment is essential for learning to occur, where personal feelings, thoughts and actions are expressed, developed and accepted. The importance of safe space is described in the health care and educational literature but how to create a safe space had been missing (Lepp & Zorn, in press).

Safe space makes it possible for both students and teachers to dare to share life experiences, ideas, and opinion having neither to weigh thought nor measure words. The learning environment must be a safe space for expressing personal experiences, securing a feeling of trust and accepting each other's differences in respect, including gender and cultural background variations. Only then the learning space is perceived as safe, free from vulnerabilities and masks of shame and fear are removed. Then only the willingness for sharing, for example ethical dilemmas from the caring arena, will be established.

Safe space is essential for the learning-process and educational empowerment. The discovery of facts where the learner uncovers, goes beneath the surface, questions the status quo, and envisions new possibilities. Often, the processes of drama, storytelling and painting are forms of discovery. In all of these processes of discovery, the learner and teacher must perceive sufficient freedom from external pressure to develop one's resources in supporting needs, interests, and individuality. Introductions or greetings, whether at the beginning of the training program or each meeting, writing a contract and using the circle as a framework further contribute to the creation of safe space.

### *The name story*

An introduction thus takes place sharing the story of one's name with a partner or a small group or a class (Lepp & Zorn, in press). This promotes equality amongst the group where individuals are introduced more cordially by a personal touch of identification of one's real name and less by status identifiers, such as profession or place of residence. The name story may include a discussion of the following:

How was your name selected?

Were you named after someone (relative, elder, famous person)?

Does your name have meaning in another culture or language?

If you have a nickname, what is its origin and how might your feelings toward it changed over time?

Do you have a different name in different settings or situations (work, play, friends, School, family)?

Have you changed your name or has your family name been changed in the past?

Other introductions may involve greetings from another culture and a discussion of the meaning of greeting, touch, eye contact, and other non-verbal behaviors, all of which are very essential especially relevant to nursing practice.

### *Contract*

After introduction and greetings, safe space can be further promoted by students identifying their personal expectations for the session; either orally or by writing individually or by small groups. In addition to these frames the teacher further describes the time, resources, content, and goals for the current theme in the class session. Both of these activities serve as a contract between the students and teacher and thus create

a safe space culture founded in feelings of trust.

### Circle

Using the circle as a framework that builds a safe space for students and teachers, as commonly done in drama work is presented. The circle is described as an old tradition of equality and a democratic form of communication (Lepp, 1998). Everybody is equally placed and holds equal significance with eye contact with each other. The circle symbolizes infinity and eternity as well as a sense of unity, harmony, connection and fellowship (Lepp & Zorn, in press). Experiences and feelings may be shared in the circle as a start, an end and closure to an exercise or lesson.

Many exercises are further created in Theme 1 from amongst the participants such as non-verbally body-sculpturing feelings and relationships from the caring arena to explore feelings and to create together. These experiments from the caring science arena are based upon personal experiences that are originated and developed through drama education.

### Conclusion

The analysis of the data will be presented after the completion of the Dracar- project (Drama Caring and Reflection) in autumn 2003. These statistics will include a questionnaire and interviews. Meanwhile a smaller pilot analysis shows positive findings of the student experiences after participating in the project. The development of drama for reflective supervision has been the result of an interest in improving the learning process of caring sciences thereby integrating theoretical and practical knowledge.

The use of drama such as basic drama exercises, improvisation, role-play, forum- theatre, and nursing-play has been suggested as way of enhancing reflective supervision in nursing education. Furthermore drama methods open up an untapped source of data by incorporating bodily involvement in memories and feelings from the caring arena, thus increasing the possibility of obtaining important and meaningful material for reflection and learning. Holistic nursing's ontology seeks to answers basic questions. What does it mean to be a nurse? How would you feel to experience as a patient?

Drama in educational settings for a reflective perspective, integration of theory and practice in caring science, and methods for reflection in a holistic perspective can make explicitly a difference in the quality of service and dignity in the health care system. Drama is the keynote to a better life and vital to a deeper reflective understanding of a wholesome care system.

### References

- Bengtsson, J. (1993). *Interlace*. Gothenburg: Daidalos.
- Benner, P. (1984). *From novice to expert. Excellence and power in clinical nursing practice*. Menlo Park: Addison-Wesley.
- Buber, M. (1970). *I and thou*. New York: Scribners.
- Courtney, R. (1990). *Drama and intelligence: A cognitive theory*. London: McGill-Queen's University Press.
- Courtney, R. (1995). *Drama and feeling: An aesthetic theory*. London: McGill- Queen's University Press.
- Ekebergh, M. (2001). *Acquiring knowledge in caring science. The importance of reflection for learning*. bo: bo Akademis förlag.
- Emsheimer, P. & Göhl, I. (1996). *Supervision in teacher education*. Lund: Studentlitteratur.
- Husserls, E. (1970). *The crisis of European sciences and transcendental phenomenology*. Evanstone: North Western University Press.
- Lepp, M. (1998). *Drama with focus on personal developent and professional growth. A study carried out in nurse training and nurse tutor education*. (Studia psychologica et paedagogica, 133). Stockholm: Almqvist & Wiksell International.

Lepp, M. & Zorn, C, R. (in press). *Life Circle: Creating Safe Space for Educational Empowerment*. Journal of Nursing Education.

Merleau-Ponty, M. (1995). *Phenomenology of perception*. London: Routledge & Kegan Paul.

O'Toole, J. & Lepp, M. (2000). *Drama for life. Stories of adult learning and empowerment*. Brisbane: PlayLab Press.

Pilhammar-Andersson, E. (1991). *Nursing students' experience during nursing education*. Gothenburg: Gothenburg Studies in Educational Science 83. Acta Universitatis Gothenburgiensis.

Polanyi, M. (1966). *The tactic dimension*. London: Routledge & Kegan Paul.

Polanyi, M. (1978). *Personal knowledge*. London: Routledge & Kegan Paul.

Rolf, B. (1991). *Profession, tradition and quite knowledge*. Lund: Nya Doxa.

Rooke, L. (1994). *Caring. Experience - Reflection - Theory*. Lund: Studentlitteratur.

Skanche Bjercknes, M. & Torunn Bjørk, I. (1996). *Diary writing for reflection and learning in clinical caring*. Lund: Studentlitteratur.

[Back to Top](#)

**[webhumans](#) | [text version](#) | [privacy](#) | [copyright matters](#) | [disclaimer](#)**