Value-based Nursing Education

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Curriculum guidelines from the American Association of Colleges of Nursing ([AACN], 1998) espouse that baccalaureate programs facilitate the development of professional values. The five core nursing values include human dignity, integrity, autonomy, altruism, and social justice. Behaviors that reflect these values characterize the caring, professional nurse (AACN, 1998). Teaching attitudes and actions that facilitate caring is a curriculum challenge. Caring is a multi-dimensional nursing concept that can be actualized through purposeful teaching and student-centered learning of core nursing values. This scholarly paper presents an innovative and integrative approach to value-based education in the baccalaureate nursing program at South Dakota State University (SDSU).

Theoretical Perspective on Value-based Nursing Education

Value-based nursing education appeals to the moral and character development of students. Within the College of Nursing, faculty members apply both a universalist and a particularist view of moral development (Fahrenwald, 2003). The universalist view specifies that moral reasoning is grounded in principles that are understood and accepted within a professional and societal context. Helping students to experience the universalities of each core nursing value within the context of the American Nurses Association’s Code of Ethics with Interpretive Statements (2001) is one way to facilitate moral development. The particularist view allows personal issues and emotions to guide moral action (Liaschenko, 1999). This approach allows the student to develop caring behavior from personal experiences that generate an emotional connection with value-based issues.

Organization of the Undergraduate Curriculum

The conceptual framework for the undergraduate program is derived from the College of Nursing mission and philosophy, and the land-grant mission of SDSU. The nursing program challenges students to be internationally competitive, globally informed, change-able, communication-able and socially responsible. In order to meet these challenges, the curriculum places great emphasis on the concept of caring. Caring encompasses the nurse’s empathy for and connection with people and issues (SDSU College of Nursing, 2004). The professional values provide the foundation for caring professional practice.
One outcome for the undergraduate program specifies that students will apply nursing values that exemplify the caring, professional nurse. Additional outcomes stipulate that students will demonstrate caring by applying professional values, with particular emphasis on one value during each of the five semesters of the nursing major. The values are emphasized within each of five professional courses and integrated throughout clinical and theory courses offered within each semester. The following section provides an overview of strategies used to teach and evaluate this integrative approach to value-based learning.

**Human Dignity: Semester I**

Unrestricted respect for the dignity, worth and uniqueness of every individual is the first statement in the Code of Ethics with Interpretive Statements (ANA, 2001). Because of its primacy in nursing practice, human dignity is the first value introduced in the curriculum. In the Semester I professional course, students define the concept of human dignity in their own words and articulate examples of how they plan to apply the value in nursing practice. In the communications course, respect for the dignity of each client is identified as the cornerstone of the therapeutic nurse-client relationship. To further apply the concept to a professional caring relationship, a sensory deficit laboratory is used to simulate clients with vision, hearing and mobility problems. Discussion of personal feelings follows the experience. Key learning includes the importance of empathy and sensitivity when working with sensory-impaired people.

Human dignity is also integrated within a health assessment course. Competent assessment skills include sensitivity to the needs of diverse cultural and age groups. Protecting each client's privacy and maintaining confidentiality are discussed in lecture, practiced in the laboratory, and applied in clinical. Provision of privacy and explanation of procedures are essential components of basic nursing care. Aspects of human dignity that are evaluated as part of clinical include: (a) recognition of communication patterns among health providers; (b) effective communication with clients, peers, faculty and staff; (c) accurate and complete data collection and documentation; (d) competent performance of interventions; (e) maintenance of safety; and (e) accountability.

**Integrity: Semester II**

The value of integrity is integrated in the second semester of the major. In the professional course, integrity is introduced as “acting in accordance with an appropriate code of ethics and accepted standards of practice” (AACN, 1998, p. 8). Students review the ANA Code of Ethics (2001) then match statements describing nurse behaviors with respective statements from the code. The course professor, who recently completed 10 years of services as a member of the SD Board of Nursing, provides descriptions of nurse
behaviors that violated the ethical code and resulted in disciplinary action. These illustrations assist students to grasp the application of the professional code, rather than to view the document as irrelevant to caring behavior in professional nursing practice.

In a clinical course, students review the Standards of Clinical Nursing Practice, 2nd ed. (ANA, 1998), then describe how they implement each standard in the care of an elderly client. During four elderly client visits, students perform a health history, physical assessment, environmental safety assessment, activities of daily living review and a medication review. Students analyze their nursing care plan in relationship to the standards of practice. The students select one professional performance standard and describe their activities in meeting that standard.

**Autonomy: Semester III**

The third semester of the major focuses on the value of autonomy, defined as "the right to self determination" (AACN, 1998, p. 8). Patient autonomy focuses on respect for the patient’s right to make decisions, even when those decisions conflict with the values of the nurse. A value-based autonomous behavior is provision of information so individual patient’s can make informed choices (AACN, 1998). In the professional course, the student is introduced to the nurse’s role of helping patients to independently gather and interpret health information. To assure that students are prepared to facilitate health care decision-making, they critique a health-related web-site to determine appropriateness of use by patients, source credibility and information accuracy. Each student leaves the course with a list of web-sites that can be used to facilitate patient autonomy by making informed, optimal, health care decisions.

A course module called “Legal Liabilities in Nursing Care” changes the focus from patient autonomy to nurse autonomy. Discussion, article reviews and quizzes relate to the nurse’s obligation to promote safe practice and to challenge unsafe practices and decisions made by other health care providers. Case studies are used in the classroom to help the student prepare to intervene in situations that require moral action in order to protect people from unsafe care situations.

**Altruism: Semester IV**

Altruism is defined as “a concern for the welfare and well being of others” (AACN 1998). In the professional course, the definition of altruism project is designed to support each student in personally identifying the value of altruism for nursing practice. The student considers how high-profile public figures, such as Mahatma Gandhi and Mother Teresa, typified altruism. Accessing on-line public sites that identify altruistic actions and qualities portrayed by these public figures is one strategy that engages the student in a personal exploration of the concept. The student then seeks out additional references that exemplify altruism. The student chooses two of these
references to identify the critical attributes of their personal definition of altruism. The outcome of this simple concept analysis guides each student in identifying personal professional behavior that is grounded in altruism. The student then projects how he or she will adopt professional altruism. Each student project is evaluated for definition clarity and identification of personal altruistic behavior to be applied in nursing practice.

In the clinical and theory courses in semester four, students become aware of the resource management necessary to effectively deliver altruistic care to increased numbers of individuals with complex health problems. Faculty and students use clinical conferencing to better understand strategies that best demonstrate altruistic care.

Social Justice: Semester V

Social justice is introduced in the final semester of the major. Social justice implies that there is a fair and equitable distribution of benefits and bearing of burdens in a society (Kneipp & Snider, 2001). The profession embraces social justice (ANA, 2001), yet we tolerate disparities in health status and care, especially as they exist for minority and vulnerable people (Fahrenwald, 2003). In the professional course, students are exposed to health-related justice issues of local, national and international concern.

In the public health nursing course one objective states, “the student will apply the value of social justice in nursing practice.” Students complete a social justice issue project applied to population-based health problems. A personal social justice issue is generated either inductively, through experience and self-analysis, or deductively, through reading the literature, examining issues and selecting one issue of interest. Students examine the type of oppression evident in their issue and discover ways to address the issue through a population-based intervention. Intervention examples include advocacy, coalition building, community organizing, and health policy development. Peer evaluation assures accountability for the assignment while empowering students to critically evaluate whether projects met the assignment guidelines. The student also anticipates future involvement in the issue.

Conclusion

Nursing faculty members are challenged to teach core nursing values. Clinical evaluation of senior nursing students reveals that the approach to values integration espoused in this paper is actualized through application of value-based caring behavior in the capstone clinical experience. The revised curriculum provides the conceptual, moral and practical learning necessary to assure that the future nursing workforce is grounded in the concept of caring.
REFERENCES


AUTHOR BIOGRAPHIES

Nancy Fahrenwald, PhD, RN, assistant professor, served as Undergraduate Curriculum chairperson for the SDSU College of Nursing from 2000-2003. Susan Bassett, MS, RN; Lani White, MS, RN; and Venita Winterboer, MS, RN are instructors; Lois Tschetter, EdD, RN, IBCLC is an assistant professor; and Paula Carson, PhD, RN is an associate professor. Each faculty member is either a member of the undergraduate curriculum committee, or, is responsible for coordinating one of the five semesters of the undergraduate nursing program. The authors would like to acknowledge all of the College of Nursing faculty members and administrators who participated in the curriculum development process described in the manuscript.