

Use of a Psychiatric Nursing Skills Lab Simulation to Develop Empathy in Nursing Students

Magic in Teaching

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The Hearing Voices Experience

- Objectives

- 1) Identify a simulation lab teaching method that increases psychiatric nursing students' empathy.
- 2) Recognize the value of experiential learning when completed by nursing students prior to interactions with psychiatric patients.
- 3) List three ways to debrief a *Hearing Voices Experience* simulation that increase nursing students' patience and understanding of patients having auditory hallucinations.

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- Efforts by nurse educators to instill empathy
- How do we know specific teaching methods or tools achieved this goal?
- How do we know a teaching method helped students transition to empathetic, caring nurses?
- How do we know they made that paradigm shift?

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- Affective Domain
- A challenge to many nurse educators and students
- Krathwohl described several affective domains (Billings and Halstead, 2009)
- One domain: Valuing



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- Affective Domain: Valuing
- Valuing attaches worth to an object or belief
- When valuing, individual exhibits commitment as a pattern choice
- As individuals begin to make choices they internalize the value of their selection
- Valuing implies that something, a phenomenon or behavior, has worth

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- The valuing of beliefs, ideas, and attitudes becomes integrated into the personal philosophy or paradigm of the person (Krathwohl in Billings and Halstead, 2009).
- How does this relate to nursing students?
- When students experience a paradigm shift, they begin to value something that was not valued before, e.g., their own ability to show empathy

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- Qualitative Study
- IRB approval obtained
- Purpose: To determine affective impact of *The Hearing Voices Experience* simulation in Mental Health Nursing Skills Lab

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- Study Questions
- How does experiential learning (*The Hearing Voices Experience* simulation in Mental Health Nursing Skills Lab) impact the affective domain of students?
- What feelings do students experience while doing *The Hearing Voices Experience* simulation in Mental Health Nursing Skills Lab?

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- Method
- After lab, students completed self-evaluation forms
- Forms asked them to detail their thoughts and feelings at each station of *The Hearing Voices Experience* simulation
- Data collected included students' comments analyzed for content themes, and Likert scale measurements of self-reported pre/post empathy.

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- Background
- Need for simulation driven by a commonly occurring clinical experience for psychiatric nursing students: They often faced challenges to their ability to be empathetic when confronted with typical responses and behaviors of symptomatic psychiatric patients

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- Typical patient responses
 - Did not answer questions
 - Looked away or looked at the floor
 - Talked to themselves
 - Responded with statements totally unrelated to the moment's topic of conversation
 - Laughed inappropriately
 - Simply walked away mid-sentence

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- In *The Hearing Voices Experience* simulation, students attempted simple tasks while listening to a CD of recorded voices as heard by a patient with Schizophrenia
- Each student wore headphones and carried a portable CD player
- After the tasks students continued to listen to the recorded voices that eventually progressed from whispers to angry shouts.

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- As CD played students also attempted to answer their lab partners' Mental Status questions
- Challenged to stay focused and not be distracted by the voices on the CD
- Experienced same challenges as psychiatric patient who hears voices



The Hearing Voices Experience

- Experiential learning – many methods
- SimMan with instructor or actor voice
 - Script aids therapeutic communication skill development (Sleeper & Thompson, 2008).
- Video of student role plays
 - Can show verbal and non-verbal
 - Advantage: Can show non-verbal where SimMan cannot (Brown, 2008).

The Hearing Voices Experience

- Experiential learning – many methods
- Voice Simulation Experience (VSE): *The Hearing Voices Experience* developed by Dr. P. Deegan in 2004
 - Deegan diagnosed with Schizophrenia and heard voices
 - Recorded voices as she heard them throughout her life to educate providers on experience of hearing voices

The Hearing Voices Experience

- Experiential learning
- After *The Hearing Voices Experience*, nursing students were asked to write reflective account of lived experience of the voice simulation (Dearing & Steadman, 2009)
 - Increased level of emotion and major categories emerged
 - Intense feelings
 - Incoherent thinking
 - Hassled being



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- Findings ($n = 67$)
- Content theme analysis of responses from students' evaluations indicated they experienced
 - Annoyance
 - Distraction
 - Frustration
 - Sometimes anger
 - Fatigue
 - Wanted simple quiet
 - Overwhelming desire to stop the CD



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- Findings
- Data collected over four semesters supported the role of *The Hearing Voices Experience* simulation in creating a paradigm shift among students who participated in the lab



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- Paradigm shift to Self-efficacy
 - Bambini, Washburn, and Perkins, (2009) noted Bandura viewed self-efficacy as a measure of how well a person is prepared to do a task
 - Self-efficacy beliefs influence goals and aspirations
 - Self-efficacy beliefs determine how obstacles and impediments are viewed and overcome
 - Self-efficacy: A measure of clinical simulation's effectiveness (Bambini, Washburn, & Perkins, 2009)

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- Debriefing methods
- 1) Verbal discussion
 - Debriefing became a key element in the students' transition to caring, empathetic individuals, e.g., "How did you feel when you tried to..."
- 2) Reflective writing by students
- 3) Video with play back and use **Pause** button
 - Discussion while student views own performance

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- Outcome
- Students' empathy emerged initially in the lab's post-experience debriefing discussion led by instructor.
- Empathy expressed as:
 - Concerns for patients who cannot turn off voices
 - Patients who are distracted by the voices
 - Patients who are unable to respond in a normal conversational way to students' interaction efforts in clinical setting

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- Data analysis supported an increase in students' ability to feel empathy for patients that hear voices (auditory hallucinations)
- Next clinical day after lab found students transformed

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- Next clinical day, students were:
 - More patient in 1:1 interactions
 - More understanding
 - Willing to wait for patient to answer
 - Desired a therapeutic relationship with patient
 - More mature
 - More focused
 - More caring

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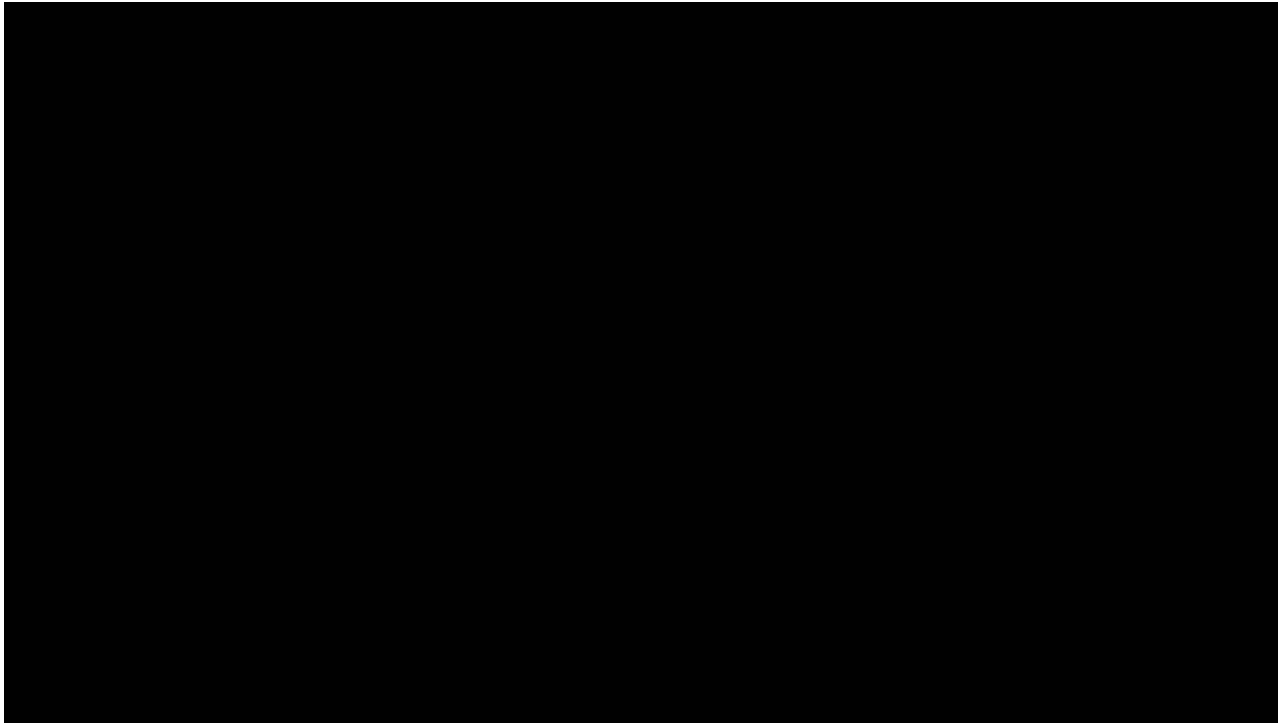
- Implications
- *The Hearing Voices Experience* amazed faculty who observed a dependable change in students each semester, not only immediately after the lab experience but also next time they did a 1:1 with psychiatric patient

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- Most impressive: Students were more kind
- This outcome warrants use of *The Hearing Voices Experience* simulation in any nursing school where empathetic graduates is the goal.



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The Hearing Voices Experience

- For information and purchase of *The Hearing Voices Experience*, go to:
- http://www.power2u.org/mm5/merchant.mvc?Screen=PROD&Store_Code=NEC&Product_Code=Curricula-HearingVoicesDistressing&Category_Code=hearingvoices
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- Thank you for your kind attention.

- Questions

