

An Exploration into the Potential Costs and Benefits to Service Users (Citizen Trainers) of Engaging in a Co-Ordinated Teaching and Learning Initiative

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Background, including underpinning literature and, wherever possible, the international relevance of the research

Cohen (2015) argues for the importance of holistic nursing and to better achieve students' need to be educated holistically. (Young and Paterson, 2007) and (Bruce, 2007) suggest that historically there was perhaps a tendency towards an over structured curriculum and categorisation; the current focus would not necessarily negate 'fixed information' but with more of an emphasis on integration better reflecting the need to prepare students for social political and clinical situations that are complex, moralistic and unpredictable' (p.423). (Billings and Halstead, 2012) discuss some of the barriers to student centred learning which include addressing traditional silos of knowledge and expertise in a teacher led approach. The 2010 Nursing and Midwifery Council Standards for Preregistration Nursing and Midwifery Education focus the need for an integrated model of learning reflective of both the physical but also the psychosocial reality and living environment of patients and clients. As a result, The School of Nursing in Queens University Belfast sought to incorporate service users into curriculum development, assessment and teaching in the undergraduate programme.

The legacy of The Troubles in Northern Ireland has left thousands of injured and traumatised service users accessing the health service more frequently in their advancing years (WAVE, 2014). Globally, this ongoing experience of injury and disability reflects in many areas of civil conflict and civil war. A joint educative initiative between the School of Nursing and WAVE (a cross community voluntary organisation offering care and support to anyone bereaved or suffering trauma or injury as a result of the conflict) was established to inform students of the skills, knowledge and context required to care for such individuals through tutorials and a core lecture directed by Wave members called Citizen Trainers.

A paper which evaluated the Wave teaching initiative from the students perspective found the students rated the teaching extremely highly (McMullan et al, 2016), however there was a plethora of anecdotal evidence reported by the citizen trainers themselves that they enjoyed and reaped benefit from engaging with the students during this initiative. The aim of this research was to capture these benefits and potential costs to the citizen trainers when engaging in the teaching initiative.

Aim : An exploration into the potential costs and benefits to service users (citizen trainers) disabled by civil conflict of engaging in a co-ordinated teaching and learning initiative with nursing and midwifery students.

Research methodology/research design, any ethical issues, and methods of data collection and analysis

Qualitative methodology, involved fieldwork methods of focus groups and one to one interviews as appropriate immediately after completion of teaching. All citizen trainers were invited to participate and were fully informed and consented. All ethical considerations were addressed including confidentiality, data security and anonymity and ethical consent sought and approved. Measures were put in place to provide support for both students and citizen trainers in the event of stress arising after engaging in the activities.

Data was recorded, transcribed and analysed using a coding thematic content analysis framework (Gale et al, 2013) and data was interrogated by other colleagues involved in the initiative but not with the data collection to insure interrater reliability (Barbour, 2001).

Biography:

Johanna McMullan is a lecturer in the School of Nursing and Midwifery Queens University Belfast. Johanna McMullan is currently a Ph.D. student. They jointly coordinate the life, social science and public health module Health and Well-Being delivered to undergraduate nursing and midwifery students. They both emanate from significant clinical backgrounds with many years in clinical practice as front-line clinicians, ward or unit managers or service managers, before returning to education. They both have an increasing range of joint publications significantly reflecting from their teaching and learning experience.