Are first year undergraduate student nurses prepared for self directed learning?

Self directed learning can give students autonomy and motivation. Universities need to have a clear strategy for introducing SDL into nursing curriculum.

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Background Changing demands on the nursing workforce have led to considerable changes in undergraduate nurse education. Nurse educators have sought to incorporate self directed learning (SDL) into the curriculum to encourage student nurses to be proactive in their learning needs.

Aim To identify first year students' experiences and perspectives of SDL, and to determine whether they are prepared for it.

Method The study involved one cohort of pre-registration first year student nurses at the University of Wolverhampton. A questionnaire was used to identify their expectations, understand the reasons for different rates of learner progress, and identify ways that students learn best. A literature review was also carried out to explore SDL research and understand the concept in nurse education.

Results The majority of the study participants had heard of SDL but lacked understanding of its concept, purpose and nature. Students were also unclear about what their role as a self-directed learner would involve, and a lack of clear direction for SDL in the curriculum was identified.

Conclusion SDL can be used to assist student learning in conjunction with methods that are teacher led. The progression to SDL requires a shift in emphasis from teaching to facilitation, and the views of nurse educators about their role in SDL need to be explored in depth. A clear strategy for introducing SDL into the nursing curriculum is required. It should also be adopted in a systematic manner in order to address the variations in students' educational attainment upon entry to their undergraduate courses.

INTRODUCTION

The complexities of modern healthcare have led to changing demands on the nursing workforce, and nurse education has changed considerably over the years. Contemporary nurse education requires student nurses to aspire to achieve excellence in patient centred care, and to practise with awareness, compassion and competence to high clinical standards. As qualified nurses, graduates are expected to take initiative for their own development, which demands a high level of independent learning skills.

Higher education institutions providing pre-registration nursing education have to ensure students gain the knowledge and skills to operate within a complex modern healthcare system. One of the challenges for universities is the mixed ability of students. Within the School of Health and Well Being at the University of Wolverhampton, student nurses are expected to show commitment to achieving high standards of practice, but it is often difficult to determine whether they are fully aware of the extent and implications of this commitment in terms of their performance as learners.

The Nursing and Midwifery Council (NMC) recommends that undergraduate nurse training includes evidence based healthcare, cultural competence and population based skills. Integral to and inherent in this at the undergraduate level is the use of self directed learning (SDL) (NMC, 2008).

Many researchers have explored the concept of SDL and its use in education, including Smedley (2007), Yoo et al (2009) and Huang et al (2008). They concluded that SDL skills are essential in helping nurses meet the challenges of healthcare today. The onus is therefore on nurse educators to inspire and motivate learners to become self directed, and to be proactive in their learning needs. The emergence of the information age and the advent of technology to support care delivery, means today’s nurse educators have to devise increasingly innovative education programmes. The curriculum also needs to be developed with a degree of flexibility to accommodate individual learning needs. However, nurse educators need to understand the concept of SDL themselves if they are to facilitate students to develop these skills effectively.

LITERATURE REVIEW

SDL is defined by Hiemstra (1994) as the ability to transfer learning, in terms of both knowledge and study skills, from one situation to another. According to Long (2005), an effective self directed learner is one who has attributes and skills such as goal setting, information processing, cognitive processing and decision making.

How students learn depends on their prior knowledge and skills, motivation for learning, learning styles and the institutional context in which they learn (Marton, 1997). A study by Knowles (1983), which compared teaching adults (andragogy) with teaching children (pedagogy), found adult learning is optimal when self directed. This work forms the basis of nurse education’s adoption of adult learning principles in the UK.

PRACTICE POINTS

I Self directed learning (SDL) can benefit student nurses by giving them autonomy, motivation and the skills for lifelong learning.

I Student nurses need to develop an understanding of SDL and an awareness of what is required in order to become effective self directed learners.

I Skills of self direction need to be cultivated and fostered from the start of the course. Nurse educators should assist learners in constructing a personal learning plan, including an educational needs assessment.

I A clear strategy stating the expectations and skills required from students and teachers is needed to successfully introduce SDL into the nursing curriculum.
In undergraduate education, students are encouraged to develop self-direction skills, thereby exercising some control and personal autonomy over their learning. Huang et al (2008) conducted a study looking at adaptive learning and the relationship between learning content and learning style. They found that adaptive learning needs to be fostered as an alternative to the traditional approach in order to develop teaching and learning as an optimal learning path.

In addition, Mayes (2002) stated the advent of powerful and persuasive technology, such as the Internet, means major changes in teaching and learning are needed, and students should be encouraged to be active and engage in the learning process.

**SDL versus teacher directed learning**

Many researchers have made comparisons between SDL and teacher directed learning (White, 2006; Bradley et al, 2005). The introduction of SDL into undergraduate curricula has not always been successful (Levett-Jones, 2005). Iwasiw (1987) said preparing students to operate as self-directed learners should initially involve a teacher directed model. This could establish facts such as a student's readiness for SDL and prior experience of it. Although such preparation might be essential, it is of little value if nurse educators do not recognise that student nurses have to be supported in taking responsibility for identifying their learning needs.

**Role of the nurse educator**

According to Newman (2002), appropriate models of adult education are those that emphasise a facilitative approach, guided reflection, learning from experience and an adult to adult relationship between learner and trainer. O'Shea (2003) highlighted the importance of the nurse educator's role in facilitating students to acquire the skills of SDL, and Brown and Libberton (2007) said preparing students to operate as self-directed learners should initially involve a teacher directed model. This could establish facts such as a student's readiness for SDL and prior experience of it. Although such preparation might be essential, it is of little value if nurse educators do not recognise that student nurses have to be supported in taking responsibility for identifying their learning needs.

**Motivation**

Motivation is one of the most significant psychological concepts in education (Regan, 2003). According to Kenny and Kendall (2001), a wide range of motivators need to be used to inspire students to direct their learning outside the taught session. They highlighted how student centred approaches to teaching and learning are increasingly being adopted in nurse education. There is pressure to deliver programmes with less classroom contact, and motivating nursing students is part of the nurse educator's role if student centred approaches are to be adapted to teaching and learning.

A study by Regan (2003) also found that a wide range of factors motivate students towards SDL, such as a good lecture and group work. As the concept of SDL continues to evolve, research should acknowledge both individual and collective goals for learning as well as the effects of new technologies.

**Student perspectives**

Lunyk-Child et al (2005) and Hewitt-Taylor (2001) examined student perspectives of SDL. Both studies found that a lack of specific guidance and feedback was frustrating for students, causing anxiety and distress. The student nurses studied were also frustrated by the inconsistency among nurse educators with regard to the level of input they were willing to give in relation to SDL.

**THE STUDY**

The University of Wolverhampton has three schools of health and all three sites were invited to take part in the study.

The guiding research questions for the study were:

- Do undergraduate student nurses understand the concept of SDL?
- What are undergraduate student nurses' expectations of their role as self-directed learners?
- Is the concept of SDL explicit within the nurse education curriculum?

**METHOD**

Students were given questionnaires to complete before their first clinical placement. These were designed to elicit both quantitative and qualitative data by asking set questions relating to SDL. To better understand the experiences of student nurses, there was space on the questionnaire for them to make free response comments about the learning process and their own experience of learning. This was in relation to a set of objectives, as laid down through the curriculum, that do not necessarily consider differences in academic abilities.

Before data collection, ethical approval was gained from the school of education ethics committee and written consent was gained from the students taking part in the study. Each participant with given an information sheet explaining the purpose of the study. The questionnaires were anonymised to maintain confidentiality and the data collected was only accessible to the researcher.

The questionnaires were coded before analysis. Statistical Package for Social Scientists was used for the analysis of the quantitative data, and qualitative data was analysed using thematic analysis.

**RESULTS**

One cohort of 450 pre-registration student nurses was invited to participate, of which 328 returned the questionnaires.

Student nurses were asked about three main areas:

- The number of hours of independent study undertaken;
● Their preferred style of learning;
● Their level of awareness regarding SDL.

Free response sections in the questionnaire allowed students to outline the positive and negative aspects of SDL (Box 1).

Independent study
The study found the majority of participants spent between two and six hours a week on independent study (Table 1). The majority saw SDL and independent learning as separate entities. This indicated that the concept of SDL was not fully understood. The majority of students thought SDL was a teaching method that was used alongside other methods, rather than a representation of beliefs about the adult self concept of learning.

A variety of teaching and learning strategies, such as learning contracts, between the student and teacher have been suggested to facilitate SDL. Rather than focusing solely on observable teaching and learning methods, control and autonomy in the learning environment need to be explored if SDL is to be understood and implemented (Hewitt-Taylor, 2001).

The difficulty in articulating exactly what SDL is may be the reason for it being reduced to more easily defined techniques and methods. However, the time taken to understand the principles and adjust accordingly could be beneficial for student nurses. The study found that the concept of SDL is not clearly understood by student nurses; this means that preparing them to use SDL should begin at the onset of their nurse education.

Style of learning
Students were asked to identify which style of learning would enhance their role as self directed learners. The majority preferred to be taught directly (Table 2). However, we noticed that the teaching preferences of some mature students differed from those of their younger counterparts. Mature students advocated a variety of teaching methods as a way of facilitating learning. These findings are consistent with the views of Slotnick et al (2003) who stated that teaching preferences are not attributable to age but to life experiences.

Eighty per cent of first year students at the university’s school of health are 18 year olds, most of whom have entered nurse education directly from school. The assumption made by teaching staff is that, as they are 18 years old and classed as adults, they have experiences that are a resource for learning and that they should have a readiness to engage with learning. However, the majority of students nurses enter the course having been in full time further education colleges where teaching is mainly teacher centred.

Knowledge of SDL
The majority of the students had heard the term SDL, but 72 of them had difficulty understanding its nature and purpose (Table 3). This echoed the findings of Hewitt-Taylor (2001) who found that teachers’ and students’ understanding and perceptions of SDL differed greatly. The present study revealed that students were expected to engage in self directed study from the onset of the course; however, the students thought they should be taught the concept of SDL and how to develop SDL skills before actively engaging in the learning process.

The study revealed three main problematic areas regarding SDL:
- Understanding the role of a self directed learner;
- Understanding the concept, purpose and nature of SDL;
- The lack of clear direction within the curriculum.

Through the free response section of the questionnaire, students identified that independent study will enable learning. Some said they had no prior experience of SDL. One theme consistently identified by participants was anxiety at not knowing what was expected of them in their role as self directed learners, and the lack of formal structure within the curriculum. As suggested by Nolan and Nolan (1997), students need support and direction, particularly in the early stages of nurse education. This support can be put in place from the onset and built within the curriculum, instructing students on the SDL process. If they understand the process, students are more likely to engage in SDL. Encouraging them to reflect on the learning process can further support and facilitate SDL.

DISCUSSION
The study results suggest that SDL can be an effective method of helping students learn, but they need to be aware of the expectations and skills required to become effective self directed learners. According to Clarke (1991), the benefits of SDL in nurse education include preparation for lifelong learning, increased interpersonal skills and increased lateral thinking ability.

Within the university’s School of Health and Wellbeing, self directed activities appear limited. It is not evident how students can be motivated, developed and facilitated to develop the skills to be effective self directed learners. From the start of the course, nurse educators need to introduce and assist learners in constructing a personal learning plan, including self assessment and assessment of their educational needs.

Although it may be difficult to adopt total self direction within nurse education programmes that contain statutory competencies, nursing requires specific skills and knowledge; the skills of self direction need to be cultivated and fostered from the beginning. SDL is vital if the challenges of today’s healthcare environment are to be met and high quality patient care delivered.

Whether SDL is individual or collective, the biggest misconception is trying to capture it in a single definition; it is a
multifaceted concept that should not be approached through one perspective. Although there may be no single correct way to look at SDL, the issues involved warrant research and debate because they shape educational practices. Nurse educators should embrace SDL which could benefit student nurses by giving them autonomy, motivation and help them develop skills for lifelong learning. However, further research is required to identify the conditions in which this could be achieved.

Current nursing practice requires nurses to deal with the rapid changes taking place in healthcare. Part of the remit of the NMC is to ensure student nurses demonstrate fitness to practice before they can register as qualified nurses. The NMC also requires nurses to re-register annually and to demonstrate that they have undertaken continuous professional development. This requires some degree of SDL by the individual.

Hewitt-Taylor (2001) argued that, as the whole concept of educating the next generation of nurses is undergoing a radical review, this is the ideal time to evaluate the success of SDL in nurse education.

CONCLUSION AND RECOMMENDATIONS

The study was conducted in one university so the findings cannot be generalised. However, SDL appears to be essential in helping student nurses to adapt and respond to the challenges that are presented in today’s healthcare environment, where knowledge is not only continuously changing but also advancing.

Teaching the progression to SDL requires a shift in emphasis from teaching to facilitation, and SDL will continue to be an important issue in the study and practice of nurse education.

Further research is needed to find suitable ways for nurse educators to facilitate SDL. Nurse educators’ views about their facilitating role in SDL need to be explored in depth. They will have to embrace and facilitate student-centred learning to engage students and help them develop the skills that are necessary for successful SDL. There has to be agreement among teachers as to what SDL actually means, and a clear strategy for teachers and students explicitly stating the expectations and skills required to successfully introduce it into the nursing curriculum.

As a result of the study, seminar based learning activities were embedded within the curriculum at the university to facilitate SDL among undergraduate student nurses.

REFERENCES


