TRUSTING RELATIONSHIPS: CREATING A CONDUCIVE TEACHING AND LEARNING ENVIRONMENT

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INTRODUCTION AND BACKGROUND

Trust is an important concept in nursing and it is regarded as the cornerstone of a society. Nursing is a profession which is built on trusting relationships and it is an essential component of nursing practice and nursing education. Trust definitions are based on five interrelated aspects: (i) the construct, as an expectation, belief, attitude and willingness to trust one another; (ii) there are specific competencies and capacities of the trustees; (iii) actions and behaviour of trustees are consistent and to the benefit of others; (iv) these actions are predictable and result in outputs to favour one another; and, (v) with trust there is a risk with uncertainty and vulnerability (Castelfranchi & Falcone 2010).

Students and educators often verbalise a lack of trust in the teaching and learning environment. Examples are distrust in test and examination marks, and poor results in clinical assessments. The purpose of this study was to explore the needs of students and the views of educators regarding trusting relationships and trust in the teaching and learning environment. Further, the study aimed at identifying strategies to make recommendations in order to develop a model of trust for the nursing education environment. Therefore, the research question was: How do trust relationships affect the teaching and learning in the nursing programme, and how can such relationships between educators and students in the nursing education environment be developed?

METHODOLOGY

The research entailed a qualitative grounded theory approach because it followed a systematic approach to data collection and analysis to discover the value of trust in the nursing education environment, and to develop a model using the steps suggested by Walker and Avant (1995). The target population in this research consisted of two groups, namely educators and students at accredited nursing education institutions (NEI). The criteria for inclusion were educators who were registered with the South African Nursing Council as professional nurses with a nursing education qualification, and working at an NEI, and students in their third and fourth study years. These NEIs are situated in urban, semi-rural and rural areas. Three public-funded NEI campuses and one university in one of the nine provinces of South Africa were included. Convenience and purposive sampling was used until data saturation was reached. In-depth unstructured one-on-one interviews were conducted with 14 educators, and 64 students in fifteen focus groups. The three stages of Charmaz (2014), namely initial coding, focus coding and theoretical coding were used for the analysis until data saturation.

From the study findings the following inferences were made.
ROLE PLAYERS

Three role players, namely the educator, student and professional are interacting and mutually connected to each other for the teaching and learning processes.

BUILDING BLOCKS FOR TRUSTING RELATIONSHIPS

Trustworthy role players have attributes of benevolence, reliability, honesty, openness and competence.

Benevolence

Benevolence refers to caring of the role players. The expression of goodwill by the educators and professional nurses towards the students creates experiences of support and fairness in the learning environments. Caring from professional nurses and students to patients creates an image of professionalism which promotes trust among role players.

Reliability

Reliability and benevolence are linked. In the relationship between the educators and students, students rely blindly on the educators. Reliability also included the consistency of the educator regarding behaviour, emotions and continuous honesty with students. Views of reliability of role players depend on integrity and honesty when they are consistent and predictable during nursing interventions, and willingness to support each other.

Honesty

Role players need to be honest regarding their capacity, knowledge and clinical abilities. Actions of integrity and honesty increase the reputation of role players. It is expected of role players to practice faithful behaviour and mutually rely on their knowledge and promises. Honesty is displayed in professional etiquette, and the way they apply their own norms and values.

Openness

An open atmosphere creates positive, trusting experiences among role players. Openness refers to academic assistance - socially and emotionally. Sharing of thoughts, feelings and information through frequent communication promotes a trusting environment.

Competencies

Cognitive abilities refer to knowledge, expert knowledge, cognitive processes and creativity as important requirements for mutual trust in role players. Applicable scientific knowledge and cognitive abilities such as critical and reflective thinking are expected from all role players. Expert knowledge and abilities of role players ought to be creative.

All role players should have interpersonal skills, adequate clinical skills and sufficient experience, with abilities to integrate theory and practice. Students need to take the responsibility for work-integrated learning during clinical placements. Educators and
professional nurses ought to take responsibility for effective accompaniment with teaching skills to support the student academically.

CREATING A CONDUCIVE TEACHING AND LEARNING ENVIRONMENT

Theoretical environment

Trust in the theoretical environment requires high standards of qualified educators, together with available resources such as equipped libraries, information technology, sufficient technology in classrooms and simulation rooms to promote teaching and learning.

Clinical environment

Standards contribute to trust in the teaching and learning environment. In the clinical environment, standards of human resources refer to qualified educators, professional nurses and support personnel who are involved during teaching and learning. Availability of resources such as equipment and standardized procedures enhances the effectiveness of integration of theory and practice during work-integrated learning.

Learning opportunities

Creative and innovative learning opportunities in the class, simulation rooms and clinical areas with standardized technology and equipment promote trusting relations among the role players. In the learning environments the accompaniment establishes maximum learning opportunities for students. The support optimizes the integration of theory with practice and work-integrated learning.

OUTCOME OF TRUSTING RELATIONSHIPS

Trust begins within the role players. Self-trust is needed before entering the teaching and learning environment. Reciprocal relationship trust among role players boosts self-confidence, self-worth, motivation, increased performances and product trust.

CONCLUSION

In the nursing education environment interactions among the educator, student and professional nurse form professional relations. Trusting relationships originate from the building blocks of trust, namely benevolence, reliability, honesty, openness and competencies. An endeavour conducive to teaching and learning includes maintaining theoretical and clinical standards. With the availability of resources, optimum learning support and opportunities are obtainable which support trust in the environment. Finally, the outcomes result in self-trust and relationship trust among role players. The development of a model for trust in the nursing education environment ensued from findings in this study.

- Develop trustworthy attributes and extend goodwill to others
- Promote the development of cognitive abilities and skills of role players
- Maintain theoretical and clinical standards
- Provide effective academic support to students
- Create learning opportunities in the theoretical and clinical learning environments
• Make available sufficient and appropriate resources, equipment and technology to promote learning
• Provide sufficient accompaniment to students during work-integrated learning.

References


