Knowing Nursing Through Inquiry: Engaging Students in Knowledge Creation

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ABSTRACT

Two nurse educators share a nursing knowledge course, which was created as a forum for questioning and discovery, thereby revealing a process of knowing nursing through inquiry. The process of inquiry in nursing praxis is emphasized, facilitating students’ understanding that they are knowledge-users and creators. With students, we explore the construction of praxis, which includes being/becoming (ontology), knowing (epistemology), and doing (actions with consequences). Nursing knowledge is understood to arise from philosophy, world views, nursing theories, patterns of knowing, evidence-based research, and standards of practice. Students are encouraged to critically reflect on and use what is congruent with their praxis and to construct new knowledge. Exemplars from nurse educators and students are presented as evidence of our claim for furthering the science of nursing education.

This article presents an educational innovation in teaching nursing knowledge to second year students in a 4-year collaborative baccalaureate nursing program. Our program philosophy reveals commitments to people, health, and healing; nursing; and teaching–learning, which is enacted through a caring curriculum. Our aim is to confront the fact that “current statistics suggest that approximately 1% of nurses are developing knowledge for the remaining 99%” (Reed, 2008, p. 315). The questions that facilitated our curriculum development include:

- What comprises nursing knowledge?
- What is the process of inquiry (coming to know)?
- How do teachers facilitate students’ practice-based inquiry as knowledge creators?

In refining this nursing knowledge course, the first author (F.L.) shared her commitment to narrative pedagogy (Ironside, 2001) and to a world view that values pluralism, which is grounded in philosophy (Diekelmann, 2001; Heidegger, 1975). The second author’s (G.M.L.) commitment to narrative inquiry (Clandinin & Connelly, 2000) and health as expanding consciousness (Newman, 1994) shapes her understanding of students’ experience as education (Dewey, 1938). From the beginning, we wanted to encourage students to understand the nature of nursing knowledge and how to create that knowledge for use in their praxis. We developed a course that positions students within nursing knowledge literature and research, concurrent with exploring their experience for pattern recognition and theorizing from practice. In our course, students construct knowledge through critically reflective teaching–learning activities and assignments.

Course Context

This required nursing course was conceptualized and constructed by interweaving three threads of knowing through inquiry, nursing knowledge, and personal transformation. We ensured that the course structure, content, and processes were congruent, leading to accomplishment of the learning outcomes. Developing reflective and critical thinking, students explore their experience and disciplinary literature to construct a nursing praxis that is theory guided and evidence informed. The learning outcomes invite students to explore and inquire into their nursing praxis from a variety of philosophical, methodological, and theoretical perspectives. To understand, use, and critique nursing knowledge, students reconstruct experience and discern values through what will be a lifelong evolution of their nursing praxis.
The course content meets the professional standards (College of Nurses of Ontario, 2009) related to knowledge and knowledge application. In addition, the curriculum includes “nursing knowledge and ways of knowing, along with knowledge from the sciences, humanities, research, ethics, spirituality, relational practice, and critical inquiry… the actuality of providing nursing care reflects a critical inquiry process and an iterative process” (College of Nurses of Ontario, 2008, pp. 9-10). These regulatory guidelines and entry-to-practice competencies demonstrate the relevance of nursing knowledge.

**Course Content and Processes**

We wanted to move beyond the established curriculum of static knowledge and facilitate students moving to a stance of inquiry. We assumed that the students’ philosophy of nursing, based on their values, beliefs, and assumptions, guided the knowing process, which is dynamic and transforms over time. We presented primary areas of philosophical inquiry: ontology (the nature of being), epistemology (the nature of knowledge), and ethics (the nature of moral conduct and judgment) (Hills & Watson, 2011). Each of these areas of inquiry relates to the developing praxis of nursing students. Praxis includes an iterative circle of being/becoming (ontology), knowing (epistemology), and doing (actions with consequences).

During the first three classes, we introduced students to world views that are common to all disciplines and connected them to ways of knowing as described by Chinn and Kramer (2008). Margaret Newman’s (1994) *Health as Expanding Consciousness* was then presented as an exemplar of grand nursing theory (Lindsay, 2011). During the next two classes, we discussed the process of inquiry in nursing and practice-based theory. The last six classes were concentrated on midrange theories that related to concepts students encountered in the year-two Adult Health Challenges and Child and Family practicum courses. Some midrange theories we explored were comfort, self-transcendence, story/narratives, technological competency, and teaching–learning (Parker & Smith, 2010). These theories gave students the opportunity to discern what nursing knowledge is, how they can apply it, and, through the process of inquiry, how they can participate in knowledge creation.

Teaching–learning activities in the course invited exploration of the students’ experience based in narrative inquiry (Lindsay, 2006). One example of such an activity is the reading response journal. At the beginning of each of the first 5 weeks of the course, the instructor read an excerpt from nonfiction or fiction (Carel, 2008; Gruen, 2006), related to the ways of knowing and world views that were situated in the human experience of illness and suffering. Students listened and then wrote a response, which discerned their emotions and embodied sensations, thoughts, and connections to their own experience. During the sixth week, we asked students to do a meta-analysis of their journals. According to Reed and Lawrence (2008, p. 426), “The nature of nursing… requires that nurses think theoretically and speak of their knowledge.” This continues the process of students realizing they construct knowledge and how it relates to their praxis.

**Course Outcomes**

Each week, we formatively assessed students’ progress toward achievement of the course learning outcomes. Students participated in journaling for 20 minutes at the end of each class to reflect on their evolving nursing knowledge and application to their praxis. With guided discussion from the professor, students were encouraged to explore how any aspect of a nursing knowledge is applicable to their practice and to consider what changes or innovations they can contribute to nursing science with the goal of optimum patient care. For example, one student wrote:

> This session has inspired me to pay closer attention to the knowledge that I develop each day whether it be at clinical or while I am completing reading assignments for maternal/child. Perhaps, if we could document this practice-based theory, or make it more available to both nurses and nursing students we would be able to give a stronger voice to nurses in exposing others to our everyday practice. (Lawson, 2010, p. 1)

Some students addressed the issue of comfort with new mothers in the postpartum period and utilized Kolcaba’s Comfort Theory (2010). Kolcaba created comfort questionnaires that target clients who experience health challenges in a variety of situations, such as hospice, end of life, and radiation therapy. Students were encouraged to think about creating a comfort questionnaire for women in the postpartum period and to contact the theorist through her Web site regarding this. Another example is student reflection—using a critical social perspective and emancipatory knowing—to explore his or her experience with new mothers who were involved with the Children’s Aid Society. Students questioned what nursing knowledge is present to guide them in their praxis and what they can contribute or create to better achieve optimum health with this patient population.

The following is an excerpt from a summative student paper, which demonstrates thinking through the connections between experience, what she is learning from the nursing knowledge literature, and her current praxis:

> This paper will integrate nursing concepts and guidelines to develop nursing knowledge that will be used in my future praxis and will address the following question: “How could I have turned the care I was providing to the patient into more than just a physical experience in order to care for the whole person?” This paper will include a discussion on the application of inquiry in my praxis, the application of nursing philosophy, and lastly the use of worldviews and concepts in forming the knowledge I have used and can use in my praxis. (Johnston, 2010, p. 2)

Another student, having introduced what nursing knowledge she would draw upon, reflected on her practice in the following way:

> In every encounter of a nurse with a patient, humanness needs to be recognized otherwise both parties are reduced to robotic stimulus and responses. In understanding the self through recognition and acceptance of one’s own feelings and prejudices, sensitivity toward others is permitted. Who I am must have influenced the way in which I responded to the patient. I involved myself in a caring relationship by exhibiting concern for my patient and connecting with him. Everyone aspires to live free of stress, anger, and anxiety regardless of the precipitating factors. I have the capacity to think openly and love unconditionally. To every interaction I can bring empathy, talent, depth and humanity. (Lepage, 2010, p. 3)
It is a pleasure for us as nurse educators to read student papers that demonstrate how they are using the course in their praxis.

Significance

One of the critiques we hear each year while teaching the nursing knowledge course is that nurses in practice do not use nursing theories. The literature reflects this reality by questioning whether a reforming health care system is the right context for nurses in which to use conceptual models (Newman, 2008; Simpson & Taylor, 2002), or if the evidence-based movement is “eliminating some ways of knowing” (Holmes, Murray, Perron, & Rail, 2006, p. 181). However, our response is that nurses are not just good employees completing bureaucratically defined documentation and lists of tasks with people in their care. Nurses are professionals in intimate contact with vulnerable people who have a life context, are our partners while we work toward mutually agreeable goals, and make a substantial contribution to the well being of society. Nurses, as individuals, must have awareness of personal values, assumptions, and beliefs and consistently reflect on the consequences of our actions. Accessing nursing research, nursing theories, and other nursing knowledge sources ensures that the praxis is theory guided, as well as evidence informed.

We want nursing students to critically reflect on questions, such as “what do you need to know in this situation? What kind of nurse do you want to be in this situation?” (Doane & Varcoe, 2008, p. 293). We encourage students to talk to nurses in practice about their thinking, about why they do what they do, and to convey their expertise for novice nurses so they can experience the web of information that informs their practice. Nursing is an intellectual and emotionally and physically demanding profession. It is important that students construct themselves as knowledge creators, as well as knowledge users in the developing praxis.

References


Lawson, N. (2010). Discussion posting, NURS 2420: Knowing through inquiry. Unpublished manuscript, Durham College/University of Ontario Institute of Technology Collaborative Bachelor of Science in Nursing Program, Oshawa, Ontario, Canada.