In My Day: Using lessons from history, ritual and our elders to build professional identity

Margaret McAllister *, Tracey John, Michelle Gray

School of Health and Sport Sciences, Faculty of Science, Health and Education, University of the Sunshine Coast, Maroochydore DC, Qld 4558, Australia

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Summary
Drawing on the power of ritual, storytelling and lessons from history and our professional elders, nursing academics at the University of the Sunshine Coast organised a three-hour event on International Nurses Day. The aims were to model to students the importance of producing their own nursing stories and to celebrate and stimulate conversation about the diverse, rich, local and national history of nursing. The event included: an oration from an influential guest speaker; video footage of nurses telling their stories; an historical display of nursing artefacts; opportunities for participants to record their stories; and opportunities for students, staff and the local nursing fraternity to engage with each other. The event received very positive evaluative feedback from participants, and we formulated recommendations for future events and student education: (1) ensure an adequate planning period to book a suitable venue and elicit sufficient financial and marketing support; (2) establish a local retired nurses association that could provide mentoring support for student nurses; and (3) integrate the annual event and the mentoring program into the curriculum of a course within our Nursing Program. We conclude that such professional development events can provide many benefits for all sectors of our nursing community.

Background
The importance of learning from elders and history

The benefits of sharing the wisdom, struggles, achievements and practice of elders within society are well known (McConchie, 2003; Warburton and
McLaughlin, 2007). However, this practice has rarely been adopted in the nursing profession, despite evidence that conveying leadership styles and skills to nurses via role models is inspiring and effective (Donnelly, 2003; Thyer, 2003). Besides being individually useful, such learning is likely to collectively enhance the profession. For as Margaret Mead (cited by Mooney et al., 2004, p. 265) once said: ‘The quality of a [culture] is reflected in the way it recognises that its strength lies in its ability to integrate the wisdom of its elders with the spirit and vitality of its children and youth’.

Furthermore, nurses, individually and collectively, are likely to significantly benefit from learning more about their past. However, such ‘history learning’ has been seriously neglected within undergraduate nursing education. Nelson (2002) has argued that there is a general lack of awareness about the history of nursing amongst many nurses. In Australia, for example, where nursing has a long and distinguished history, experience and evidence suggest that students are unaware of the progressive changes in the profession or of the contribution that nurses, especially Australian nurses, have made to health and society (du Toit, 1995; Sellers, 2002; Nelson and Gordon, 2004). This lack of historical perspective does not assist in engendering professional pride or creating positive expectations of the nursing role: insight into the past of one’s professional culture can help members of the profession to understand that their personal experiences are shared, perhaps deeply ingrained; that there are ways to resist being dominated or marginalized; and that, collectively, colleagues can achieve self-efficacy, positive identity and power (Sweeney, 1999; Irwin, 2006).

The act of consciousness-raising is fundamental to insight and then to change (Mezirow, 2000; McAllister et al., 2006); awareness of nursing history can also assist in developing in nurses the vital characteristics of resilience, including a strong professional identity and the abilities to think critically and question skilfully (Nelson and Gordon, 2004; D’Antonio, 2006). History learning builds critical thinking skills in students in many ways: a deeper understanding of the past can help us to make sense of the present and to see directions for the future; by exploring the past of our community, we can strengthen the bonds that hold that community together; by understanding the past of others, students can be reminded of the common humanity shared with clients and communities; and by studying how individuals and groups have helped to shape the past, we can feel empowered to make a difference in our own world (Arnold, 2000).

However, according to strong, research-based evidence, nurses, despite the esteem they enjoy in the community, often have fragile or negative self-identities and collectively have high levels of occupational unhappiness (Aiken et al., 2002; Chang et al., 2006). With a strong professional identity, nurses would likely be more resilient to the pressures and demands of their role (Werrett et al., 2001; Chang et al., 2005). Thus, given the acute global crisis in nursing recruitment and retention, using history learning and learning from elders to build pride and professional self-efficacy may be part of the solution. Nursing students with positive occupational self-concepts are more likely to make successful graduate transitions and then to remain in the workplace.

Unfortunately, however, although students may, through general inquiry, be aware of historical nursing figures and nursing history, the rich lessons of this history are not being conveyed in Australian undergraduate nursing education in any systematic or critical way to build cultural consciousness and professional capabilities (McAllister et al., 2008). In addition, students are not currently benefiting from the insights of their formal and informal professional leaders and predecessors about transforming struggles into achievements.

The importance of ritual

Ritual, in the spiritual or cultural sense, simultaneously conveys, embodies and enriches meaning, and thus, if used consciously, has powerful transformative potential (Turner, 1997). Rituals, ceremonies and rites of passage are practices that can help individuals and groups feel in touch with previous generations and with tradition; these practices contribute to an awareness of the richness of history and to the maintenance and development of society and culture. Rituals can also be grounding and can promote a sense of purpose and connection that keeps one in touch with core values and one’s humanity (Helman, 1990). Furthermore, rituals such as the apology recently made to indigenous Australians (<http://www.abc.net.au/canberra/features/apology/>)) can have symbolic meaning for whole groups of people, indeed a nation, yet can also add meaning to individual lives and offer opportunities to become future-oriented, leaving difficulties behind. In Australia in the 1960s many children of Australian Aboriginal and Torres Strait Islander descent were removed from their families by Government
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The In My Day event

The birth of a new ritual for nursing students

Within our newly established Bachelor of Nursing Science Program, first-year students enrolled in a professional issues course were discussing contemporary representations of nursing in the media. Students felt that nurses were often portrayed as unprofessional and subservient. These stereotypes do not advance the image of nursing as a respectable profession and do not represent the variety of career prospects that are available to nurses today (Hean et al., 2006).

Also discussed was the often superficial and demeaning media coverage given to the nursing profession and nursing issues. An example is the coverage given to International Nurses Day. A local, more recent example concerned the coverage of a forthcoming 'bed-pan race' organised by a nursing employment agency, but to date the media had failed to feature articles advising the community about the recent establishment in the region of a university program for beginning and practising nurses (My Sunshine Coast Life, 2008; New Zealand Ministry of Health Media Release, 2006; Northern Sydney Central Coast Health Media Release, 2007; Royal College of Nursing, 2002; UOW celebrates International Nurses’ Day, 2007). Furthermore, the international contribution that nursing makes to the world is rarely given exposure.

As part of the formal assessment in the same course, students were required to complete a poster presentation of an Australian nursing icon. For this assessment, students researched historical nursing figures such as: Vivian Bullwinkel, the only survivor of a massacre of nurses that took place near Singapore in WWII, and who enjoyed a long career as a leader in nursing; Sister Elizabeth Kenny, the nurse who developed an innovative and controversial treatment for polio; and Lucy Osburn, another important Australian nursing identity, who is perhaps unknown to many. Lucy Osburn was superintendent of the Sydney Infirmary and Dispensary (later the Sydney Hospital) in the mid-to-late 1800s. She laid the foundations of modern nursing in Australia and was also the founder of Nightingale nursing here. Despite being sent to Australia largely ill-equipped, Lucy achieved amazing success in the transformation of nursing practice and in the consequent improvement in patient care, in the process pioneering the employment in public institutions of professional women of high status (Godden, 2006).

Pondering the issues discussed above, a group of faculty staff considered that International Nurses Day, celebrated around the world on May 12 in recognition of Florence Nightingale’s birthday, was a tradition within nursing that could become an important ritual for students and staff within our program. Marked on most Australian calendars, this day could provide an opportunity to extend and develop ritual, connection and meaning for our first-year students. Our new program was in its second year, and no similar events had been organised on-campus by our staff. Therefore, we decided to organise a memorable event for the Day. We envisaged that this event would become an annual ritual to promote generative, restorative and motivational qualities in each new intake of students.

The theme of In My Day for our celebrations was inspired by the reminiscences of faculty nursing academics that were comparing their experiences of nursing education and training with that of to-
day’s student nurses. Our group discussed the complexity of reminiscing ‘the good old days’: on the one hand, people commonly look back on bygone days with a romantic view that fails to consider, for example, how rituals, routines and training tended to be prioritised over critical thinking and professional judgment; on the other hand, however, certain past practices may be disregarded in favour of the present, more ‘modern’ approach (Hunt, 2002). Some of the ritualised activities in which we had been engaged, and which we considered important, such as providing a 6 am cup of tea to all patients, seem to have been lost with today’s emphasis on technology and biology in the approach to treatment. While many of the changes made to the nursing role have advanced the professional status of nurses, some of the duties that are now outsourced to domestic staff (e.g. damp dusting, serving meals and making beds) were part of a humanistic approach to patient care. These duties have now been devalued and reduced solely to chores that anyone might perform. We considered that if a small group of nurses like ourselves had such diverse stories to tell, then surely the stories of retired nurses from the local community could be shared with students for mutual benefit.

Thus, our event evolved to: (1) model to students the importance of producing their own nursing stories, rather than consuming others’ trivializing stories about us; (2) celebrate the history of our profession; and (3) invite conversation about the diverse and rich history of local nurses. In so doing, we also sought to raise the profile of nursing and midwifery as professional careers. In addition, because our new, regional university is relatively unknown to others living within and outside the state, we also aimed to publicise the nursing programs, resources and skilled staff available at the University.

**Organisation of the event**

We organised a three-hour event to include: an oration from an influential guest speaker; video footage of nurses sharing what nursing was like ‘in their day’; an historical display; video booths for participants to record their stories and experiences of nursing; and opportunities for students, staff and the local nursing fraternity to engage with each other. Dr. Judith Godden, an Australian authority on Lucy Osburn, was contacted and invited to present an oration on Osburn (Fig. 1).

For two months, we met each week to organise logistics such as volunteers, publicity and sponsorship. A donation enabled the purchase of refreshments. The historical display featured nursing artefacts such as porcelain bed pans, old textbooks and even a portable 19th century machine for electroconvulsive therapy. These artefacts were borrowed from local museums or loaned by staff and students and were juxtaposed with modern nursing equipment such as tympanic thermometers and infusion pumps. In addition, student posters on the history of Australian nursing and promotional posters featuring the biographical profiles of the academic staff were displayed.

**Evaluation after the event**

Those attending were asked to complete a brief evaluation consisting of three key questions: (1) identify the best elements of today’s event; (2) identify any areas for improvement; and (3) are there any other comments you would like to make that may help us in future planning? In addition, organisers of the day informally observed interactions to gather formative feedback.

Evaluation forms were distributed to participants upon completion of the oration by the guest speaker, Dr. Judith Godden, as this juncture effectively marked the closure of the day’s proceedings. In hindsight, a limitation of the evaluation process was neglecting to gather demographic information from participants, which may have helped to explain some differences in perceptions, needs and satisfaction. Nevertheless, the tool was simple to use and thus increased the likelihood of participant response. A total of 32 completed evaluation forms were received.

Approximately 50 students visited the display. While not all of the students attended the oration, overall about 100 participants did attend. Apart from overwhelming support for and satisfaction with the event, three major themes emerged from the findings: (1) a widespread interest in nursing history was revealed; (2) the activity successfully cultivated a sense of community and communication between groups within the profession; and (3) a number of planning pitfalls and insights for future events were identified.

The activity that evoked the most extensive comments and had the most impact was the oration by the guest speaker. Participants were particularly interested in the subject of little-known Australian nursing icon, Lucy Osburn, and appreciated Dr. Godden’s enthusiasm for, knowledge of and confidence in her topic. Of great interest for many was hearing the content of letters written by Osburn during her work in Australia.
The small display of nursing memorabilia was enjoyed by many participants and prompted several requests to establish a permanent nursing ‘museum’ or collection of nursing memorabilia at the University. Many retired nurses offered their personal memorabilia if such a collection were to be established.

The artefacts and posters on display, by stimulating conversations and interactions, clearly became a medium through which common ground between different people could be explored and cultivated. For example, older retired nurses, who had never been associated with university nursing programs, were in conversation for the first time with academic nurses. Similarly, experienced older nurses explained the meaning of old photographs and instruments to some of the younger, less-experienced student nurses.

Many participants expressed appreciation for the opportunity to ‘meet other members of the nursing fraternity, particularly retired nurses’. Throughout the day, many retired nurses gathered together sharing their nursing backgrounds and stories with each other, and with nursing academics and students. Many of these retired nurses also stated that they enjoyed meeting the University staff and learning of changes in the nursing profession.

Faculty staff noted the value in retired nurses speaking conversationally with students about nursing cultural practices and rituals. Students listened to insightful comments made by some of the retired nurses about the pros and cons of their apprenticeship-style training, especially in relation to productive values such as work ethos, dignity and respect, values that were cultivated through role modelling and constant reminders. These same retired nurses openly acknowledged the limitations of their training experiences: that they were often exploited, underpaid, overworked, marginalised and ill-treated. In all, the exchange seemed productive and we considered that a similar ongoing dialogue would be valuable for students.

Some participants suggested that a formalisation of the mentoring function could occur through the establishment of a retired nurses association for the region; this association could support the Program at the University by providing historical and social enrichment through a formal mentoring program.

The video activity stimulated keen interest and was much appreciated. Unfortunately, however, the area provided for viewing the videos was in a noisy, heavily-trafficked space, which, according to some respondents, detracted somewhat from the viewing experience. Despite this handicap, however, several respondents requested that more videos be made to historically record and disseminate local stories from both retired and currently practising nurses.

The evaluation process assisted the organising team to reflect upon aspects to retain and to improve for future events. Several issues were identi-
fied. First, while collecting and displaying local nursing artefacts is challenging, participants really valued the display. Assurance of the safe-keeping of precious loaned items needs to be provided, as well as insurance against damage or loss. A permanent, suitable storage and display space for historical exhibits should be explored.

Second, within our organisational timeframe, we were not able to locate a suitable on-campus space to hold the event. Feedback revealed the need to find more appropriate spaces for displays and conversations. Thus, increased planning time is needed to book spaces such as the on-campus art gallery or exposition floor. Despite carefully planning the placement of the poster and artefact displays, some participants, particularly aged participants, experienced difficulty in moving around freely. We found it difficult to anticipate how many people would visit the display area and how long they would stay. Because the displays generate valuable conversations, in future the display area needs to provide adequate seating and good acoustics, while ensuring that teaching and movement of other university traffic are not interrupted.

A third issue identified was the challenge of funding, promoting and marketing the event. Because this event was the first run by the Program at the University, support from administration was limited to a small financial donation, brief planning advice from the marketing department and an article, also produced by the marketing department, which was published in several local newspapers. Unfortunately, no promotions occurred on either television or radio. Sponsorship donations also proved difficult to obtain; letters were written to technical supply companies and to our local health services requesting support, but, perhaps because of the novelty of the event and the limited lead time, we had few responses. We were given a generous donation of approximately $500 from a local community service organisation that serendipitously heard about the project from one of the authors.

Student participation in future events could be increased by incorporating aspects of event participation into one or more of the professional development courses, in order that students contribute materials for the display and are involved in processes on the day. For example, students could organise small discussion groups, in which they take responsibility for facilitating conversations and reflections, or students could facilitate the video-recording of participants’ stories and experiences.

Links between community and faculty could be strengthened through establishing a formal mentoring program, as mentioned above. Retired nurse mentors could work in pairs and be linked with a group of 10 new students. The role of the mentors would be to emphasise the key aspects of nurses’ work that should not change, regardless of technology or academic learning, especially the nature of caring. The mentors and students would be introduced early in the first semester of the Program and would be provided with opportunities to develop relationships. Activities could include interviews with students, story telling and sharing ideas on the future of nursing. Students could then be asked to produce a poster, oral presentation or even a video about their mentoring experience.

Conclusions and recommendations for the future

Overall, the event was viewed very positively by participants and, considering its inaugural nature, was well-supported by the local community’s nursing fraternity. The event also helped to raise the profile of the University’s nursing programs, and, according to some participants, contributed to raising the professional profile of nursing. Importantly for the nursing academics, the Day generated many ideas for staging future events and for incorporating these generative events into the student curriculum.

For future professional development events, and for the Nursing Program at the University, we will consider: (1) ensuring an adequate planning period to book a suitable venue and elicit sufficient financial and meaningful marketing support; (2) establishing a local retired nurses association that could provide formal mentoring support for student nurses; and (3) integrating the annual event and the mentoring program into the curriculum of a course, or courses, within the Nursing Program.

We were very encouraged by the enthusiastic support for this inaugural event, and, as we improve and expand our program in future years, foresee many benefits for all sectors of our nursing community.

Conflict of interest statement

The authors declare they have no conflicts of interest.

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References


Thyler, G., 2003. Dare to be different: transformational leadership may hold the key to reducing the nursing shortage. Journal of Nursing Management 11 (2), 73–79.


