

Develop Student Compassion Through Service-Learning

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ABSTRACT

Compassion is the ability to be sympathetic along with the desire to remedy distress and offer help. The art and science of nursing speaks to the need of having compassion toward those nurses serve, especially when different from the nurse. This article examines the concept of service-learning as a teaching strategy and way of developing compassion in today's nursing students.

Keywords: compassion, education, nursing process, nursing students, service-learning

Nursing is considered an art and a science, built on such things as caring, compassion, and respect for the individual. Service-learning can be a strategy by which compassion is introduced to future nurses. Immersing students in service-learning projects helps give them a foundation on which to build a sense of caring. The goal of this article is to explore the ways students acquire compassion to become their brother's keeper through service learning.

COMPASSION

Compassion is a popular concept in nursing. Sadler (2004, as cited in Schantz, 2007) studied baccalaureate nursing students' admission essays and noted that the words "caring" and "empathy" were used frequently in their description of compassion. Historically, compassion has been thought of as a nursing quality that impacts care delivery. Nurse leaders, a century ago, considered compassion not just the essence of nursing but a quality that should be inherent to all nurses (Sadler). Compassion is defined as "the feeling of emotion, when a person is moved by the suffering or distress of another and by the desire to relieve it" (Schantz, 2007, p. 51). In contrast, empathy connotes only a vicarious participation in others' situations. According to Schantz, compassion is a thought process that desires to remedy a distress and help those in need.

Compassion is essential to providing good nursing care, but nursing students may lack experience in demonstrating compassion when caring for others. Furthermore, when new graduates begin practice in the real world, they come face-to-face with the "reality shock" of emotionally encountering various populations and situations. Yet, in nursing education, the emphasis seems to be moving toward technology as a pedagogy instead of personal and emotional involvement. Although technology is an essential component of learning nursing,

technological pedagogy alone may result in emotional detachment that replaces “personal engagement” (Schantz, 2007, p. 51).

Interestingly, Hem and Heggen (2004) suggested “that having compassion is a *radical concept* [emphasis added] with a potential to promote a greater respect for patient dignity” (p. 19). They conducted a qualitative study in a Norwegian psychiatric hospital to examine specific nursing practices in the context of compassion. Using the biblical story of the Good Samaritan, they attempted to address ongoing debate about whether compassion should be central in nursing care, and by becoming central does it take on a quasireligious view of the profession. Hem and Heggen proposed that the Good Samaritan in Luke 10 was not acting out of calculated action but out of a natural response to a specific need. Analyzing nurse interviews, observations, and field notes, they concluded that the nurses tended not to be guided by compassion in their work with patients. However, the nurses thought compassion had the potential for better treatment and greater respect of patients. As a result of their study, Hem and Heggen recommended compassion be included in the Norwegian Nurses Association code of ethics.

Compassion is a quality possessed in varying measure by all, but as fallible humans, we may not recognize the quality or act on it. Creating opportunities to demonstrate compassion helps students understand the plight of those who may be disenfranchised. When students are faced with and immersed in the distress of those in need, hopefully they will respond by providing care in a compassionate manner. True compassion is the God-given ability to serve without judging. It is a thought process triggering the emotion to understand what someone is going through, thereby eliciting the response to become our brother’s keeper.

Nurses have a moral obligation to take care of the sick and helpless, but how do we teach student nurses to become their brother’s keeper? In Genesis 4:1–10, we read of Cain killing his

brother Abel. God asks Cain regarding his brother's whereabouts. Cain shows no compassion sarcastically asking God, "Am I my brother's keeper?" (v. 9). In the story of the Good Samaritan, the opposite occurs. "But a Samaritan, who was on a journey, came upon [the man]; and when he saw him, he felt compassion, and came to him and bandaged up his wounds, pouring oil and wine on them; and he put him on his own beast, and brought him to an inn and took care of him" (Luke 10:33–34, NASB). There were others who passed the man in distress but crossed the street not wanting to intervene. When student nurses are engaged in service, they have opportunity to act as Good Samaritans.

SERVICE LEARNING

Since the 1960s, service-learning has intrigued educators from various settings, including state-government organizations and local communities. In 1979, one of the early service-learning leaders, Robert Sigmon, proposed three sets of principles for service-learning. First, the service activity should fulfill the needs of the recipients in the service context; they should have control over the services provided. An example could be developing and implementing a healthy eating or exercise program in a local senior center. Second, the service activity should empower the recipients where they are better able to serve their needs. For instance, there are those who are disenfranchised due to their economic situation. Assisting individuals in producing a resume can help them acquire employment. Third, students who serve are learners with control over what is expected to be learned (National Service Learning Clearinghouse [NSLC], 2013a).

So what is service-learning and why use it to assist in the development of compassion? According to the NSLC (2013b), service-learning is an integrated "teaching and learning strategy that integrates meaningful community service with instruction and reflection to enrich the

learning experience, teach civic responsibility, and strengthen communities.” Through service-learning, students learn to solve real-life problems. They not only learn the practical applications of their studies, they become actively contributing citizens and community members through the services they perform. Service-learning can be applied in a wide variety of settings, including schools, universities, and community-based and faith-based organizations. It can involve a group of students, a classroom, or an entire school. Students build character and become active participants as they work with others in their school and community to create service projects in areas such as education, public safety, and the environment. Nursing students are introduced to the real world through service-learning—and some reformulate their views after they engage in the experience.

Service-learning is a great way to introduce and teach compassion to students. Service-learning is an avenue by which the vulnerability of others can be seen (Leffers & Martins, 2004). According to Jonas-Dwyer and Pospisil (n.d.), millennial students are social, optimistic, and talented (2012). They prefer teamwork and active experiential activities and technology. Service-learning is a creative way of exposing students through full immersion. Complete involvement or immersion allows students to participate in the lives of clients, and by engaging in client situations, empathy and compassion can develop. In addition, as healthcare moves from inside hospitals to the community, nurses must reexamine how care is provided. Due to shortened hospital stays, the hospital setting may have barriers in terms of the nurse’s ability to become engaged in patients’ lives (Davison & Williams, 2009). Service-learning goes beyond hospital walls.

The goal of developing compassion through service-learning is twofold. First, it is to provide hands-on experiences for nursing students by immersing them in the lives of others.

Second, it helps students understand the difficulties of hunger, homelessness, and other social justice issues.

COMPASSION THROUGH SERVICE-LEARNING

Learning compassion helps students learn to care for others who may not be like them. For some, this is a difficult concept. In an effort to enhance the learning experiences and develop compassion, students in an introduction to nursing course at Widener School of Nursing in Chester, Pennsylvania, conceptualize and participate in a service-learning project. The process is similar to the study abroad mission projects noted by Wright (2011) where students from a Christian background provided education in Kenya and Mexico. Wright asked how the desire to serve could be cultivated in students, focusing on foreign missions and service. My service-learning projects are geared to local missions and compassion, which are similar in terms of client need as well as learning goals for students.

Agencies used for the course include homeless shelters, food pantries, and soup kitchens. By working in groups and meeting with nursing faculty weekly during the assessment phase, the students develop a concept or course of action for the clients they encounter. Action points have ranged from helping homeless women have a better sense of well-being and value to preparing a meal in a men's homeless shelter and providing healthcare information.

One group of students was assigned to a daytime shelter for homeless women. After talking to the administrator and clients, the students discovered that many clients were learning how to use the Internet to find employment. They also discovered that many had not had face-to-face contact with loved ones for years. The students discussed how they would feel being away from family and not being able to visit with loved ones. So, the students created a book on how

to use Skype[®] and set up accounts and passwords to assist clients in connecting with family. The clients used borrowed cell phones to contact relatives asking them to locate computers if they did not own one. Students created packets with instructions on how to set up the program and clients were instructed to mail the information to their families. This project had a very positive outcome in that families were reunited via Skype[®]. One student said, “We take technology for granted, never thinking that this could mean so much to someone else.

DYNAMIC NURSING PROCESS

In our course, the nursing process is utilized as the framework and service-learning as the pedagogy. Each semester, students are placed in groups of three or four and assigned a local agency to visit. Using the nursing process as a framework, student groups assess, analyze, plan, implement, and evaluate a project. The agencies are informed that the nursing process is a problem-solving tool, which is the foundation of practice (Chitty & Black, 2011).

In the students’ first task of assessment where they collect subjective data, they learn agency clients are real people with a history and memories that transcend hunger, homelessness, and hopelessness. Assessment information is then analyzed and students examine various ways they can help enhance the quality of life for the clients.

Compassion seems to emerge in the assessment and analysis phase of the students’ projects. An example of this came from a student who stated, “I never knew or even thought about the fact that in the United States having food on the table does not happen every day, and that children may not get fresh fruits and vegetables.” She also noted, “Service-learning is not something you can just teach in class. I had bias about people who stayed in shelters but after spending time with them and doing our project I understand myself better and I know that this

could happen to any one of us. I wish I could do more to help.” Through service-learning opportunities, students begin to develop compassion, meeting clients where they are at, just as the Good Samaritan saw the stranger lying beside the road.

Planning is the next step in the nursing process, so in collaboration with the agency, the project that the students have chosen is analyzed for relevance to clients’ situations.

Implementing the project enhances students’ appreciation for others and fosters a new sense of self and service in the community (Berman, Snyder, & McKinney, 2011).

Evaluation is the last phase of the nursing process. Students are taught that evaluation takes place throughout the process as they are instructed to constantly reassess what they have observed and planned. The face-to-face interaction and the students’ implementation of their project is the point at which compassion is realized and embraced.

Faculty involvement is an important component because service-learning, along with the nursing process, is done in an intentional way. Students provide feedback to faculty members on a regular basis through self-reflective journaling. Student feedback is incorporated into the service-learning experience and tied back to the course curriculum (Bentley & Ellison, 2005).

Students measure the effectiveness of their project through various means. Some students ask clients to verbally express their feelings or experience with their project; others develop a two- to three-item paper and pencil questionnaire. Some of the students have mentioned in their journals that they believe their interaction with clients brought a sense of hope and dignity.

Service-learning projects are a way to demonstrate incorporation of the nursing process into care. Service-learning provides a different view from traditional nursing and community clinicals in that one gains a clearer picture of the discipline and art of nursing. This is done

through self-reflection, self-discovery, and critical thinking—assisting students in recognizing the value of learning the process of nursing (Bentley & Ellison, 2005).

BENEFICIAL WAY OF EDUCATING

Traditional teaching strategies with today's millennial nursing students can be challenging in terms of moving students from the need for instant information and gratification, to exposing them to experiences that develop character, compassion, and empathy (Jonas-Dwyer & Pospisil, n.d.). Use of service-learning as a teaching strategy assists students in the immersion process. Incorporating service-learning in the community is a beneficial way of educating. The nursing process provides a framework for care. As students experience service-learning, they become more self-aware and understanding of the care of various groups, such as the elderly and those who are disenfranchised. Students write reflections and express what they felt about the experience. One student said, "This experience has changed my life. I stopped using the term 'them or those people.'" Another wrote, "They are people like me who have had a hard time; I never thought I could help by just talking to them and helping serve lunch." Yet another stated, "I was really scared to go to a homeless shelter at first, but now I know they are just people who are having a hard time and deserve help."

Compassion comes from within. For compassion to surface, nursing students need to be exposed to situations that help them understand the issues and challenges faced by people. The Good Samaritan showed compassion toward someone who was not like him. The art and science of nursing is a deliberative process that takes time and is always evolving. The practice of nursing is emotionally demanding but also very rewarding when examined through the lens of compassion.

“Compassion empowers nurses to assume a major role in solving and preventing problems that will afflict the global community” (Schantz, 2007, p. 48). Becoming a compassionate nurse benefits the client, the nurse, and the practice of nursing. When we respond in a compassionate way while rendering care, it improves the overall welfare of those entrusted to us. When a student is immersed in service-learning, he or she becomes the recipient as well. Through service-learning, students provide care with compassion, learning the meaning of becoming their brother’s keeper.

BIBLIOGRAPHY

- Bentley, R., & Ellison, K. J. (2005). Impact of service learning project on nursing students. *Nursing Education Perspectives*, 26(5), 287–290.
- Berman, A., Snyder, S. J., & McKinney, D.S. (2011). *Nursing basics for clinical practice*. Boston, MA: Pearson.
- Chitty, K. K., & Black, B. P. (2011). *Professional nursing: Concepts & challenges* (6th ed.). Maryland Heights, MO: Elsevier.
- Davison, N., & Williams, K. (2009, September 14). *Compassion in nursing: Defining, identifying and measuring this essential quality*. Retrieved from <http://www.nursingtimes.net/nursing-practice/clinical-zones/management/compassion-in-nursing-1-defining-identifying-and-measuring-this-essential-quality-/5006242.article>
- Hem, M. H., & Heggen, K. (2004). Is compassion essential to nursing practice? *Contemporary Nurse*, 17(1–2), 19–31.
- Jonas-Dwyer, D., & Pospisil, R. (n.d.). *The Millennial effect: Implications for academic development*. Retrieved from <http://www.citeseerx.ist.psu.edu>
- Leffers, J., & Martins, D. C. (2004). Journey to compassion: Meeting vulnerable populations in community health nursing through literature. *International Journal for human caring*, 8(1), pp?.
- National Service Learning Clearinghouse. (2013a). *Service-learning: Three principles*. Retrieved from <http://www.servicelearning.org/what-is-service-learning>
- Schantz, M. L. (2007). Compassion: A concept analysis. *Nursing Forum*, 42(2), 48–55.
- Wright, D. J. (2011). Service learning: Education with a missions focus. *Journal of Christian Nursing*, 28(4), 212–217.